



EVALUATION OF THE EUROPEAN UNION EXTERNAL ACTION

ANNEXES TO THE FINAL REPORT

***COMBINED EVALUATION OF DG ECHO'S
RESPONSE TO THE VENEZUELAN
REGIONAL CRISIS AND OF DG ECHO'S
PARTNERSHIP WITH UNHCR, 2017-2021***

August 2023

**EVIDENCE
MATTERS**



Euro
Civil P
Civil Protection &
Humanitarian Aid



Prepared by:



ICF S.A.
Avenue Marnix 17
B-1000 Brussels (Belgium)

Framework Contract ECHO/E2/FWC/RC/2021/SI2

Contract No ECHO/ADM/BUD/2022/01202

Contract title: Combined evaluation of the European Union's response to the Venezuelan regional crisis, and of DG ECHO's partnership with the United Nations High Commissioner for Refugees, 2017-2021

Authors

Petra van Nierop	Vittorio Furci
Cristina González Monsalve	Rocío Naranjo Sandalio
Mélanie Dubuis	Sofía Esteves
Janne Fillet	Wanda A. Ferraguto
Inés Echevarría	

Contact information:

European Commission
Directorate-General for European Civil Protection and Humanitarian Aid Operations – DG ECHO
Unit ECHO.E.2 Programming, Control and Reporting
Email: ECHO-EVAL@ec.europa.eu
B-1049 Brussels, Belgium

European Civil Protection and Humanitarian Aid Operations:
[Evaluations | European Civil Protection and Humanitarian Aid Operations \(europa.eu\)](#)

LEGAL NOTICE

This document has been prepared for the European Commission as part of the evaluations of the Directorate-General for European Civil Protection and Humanitarian Aid Operations. However, it reflects the views only of the authors, and the European Commission does not guarantee the accuracy of the data included in this document, and is not liable for any consequence stemming from the reuse of this publication. More information on the European Union is available on the Internet (<http://www.europa.eu>).

The reuse policy of European Commission documents is implemented by the Commission Decision 2011/833/EU of 12 December 2011 on the reuse of Commission documents (OJ L 330, 14.12.2011, p. 39). Except otherwise noted, the reuse of this document is authorised under a Creative Commons Attribution 4.0 International (CC-BY 4.0) licence (<https://creativecommons.org/licenses/by/4.0/>). This means that reuse is allowed provided appropriate credit is given and any changes are indicated.

For any use or reproduction of elements that are not owned by the European Union, permission may need to be sought directly from the respective rightholders.

© European Union, 2023

Combined Evaluation of DG ECHO's Response to the Venezuelan regional crisis and of DG ECHO's Partnership with UNHCR (Annexes to the Final Report)

TABLE OF CONTENTS

Annex 1	List of documents reviewed.....	6
Annex 2	Portfolio analysis.....	18
Annex 3	Social media analysis.....	28
Annex 4	List of stakeholders consulted.....	30
Annex 5	Online survey results.....	42
Annex 6	Mini-Mobile survey results.....	157
Annex 7	Supporting evidence.....	192
Annex 8	Case studies.....	205
Annex 9	Terms of Reference.....	310

ANNEXES

ANNEX 1 LIST OF DOCUMENTS REVIEWED

Table 1. List of documents reviewed

Author	Year	Title
EU documents		
Council of Europe	1996	Council Regulation (EC) No 1257/96 of 20 June 1996 concerning humanitarian aid.
Council of Europe	2021	Council conclusions on Venezuela (25 January 2021). Outcome of Proceedings
D1 – Strategic Partnerships with Humanitarian Organisations	2018-2021	Trends regarding DG ECHO's funding to UNHCR
D1 – Strategic Partnerships with Humanitarian Organisations	2021	DG ECHO 2021 Dashboard analysis
D1 – Strategic Partnerships with Humanitarian Organisations	2022	DG ECHO 2022 Dashboard analysis
DG ECHO	n.d.	Humanitarian Aid
DG ECHO	n.d.	Forced Displacement
DG ECHO	2014	Ad hoc / Mission Report (March 2014)
DG ECHO	2016	Ad hoc / Mission Report (June 2016)
DG ECHO	2016	Strategic Plan 2016-2020
DG ECHO	2017	ECHO Crisis Flash No 4 - HUMANITARIAN CRISIS IN VENEZUELA
DG ECHO	2017	Ad hoc / Mission Report (February 2017)
DG ECHO	2017	ECHO SURVEY - SOCIOS VENEZUELA
DG ECHO	2017	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean
DG ECHO	2017	Technical Annex. Latin America and the Caribbean. Financial, Administrative and Operational Information
DG ECHO	2017	Project proposals
DG ECHO	2018	Field mission report (Venezuela, June 2018)
DG ECHO	2018	Humanitarian response to the Venezuelan crisis
DG ECHO	2018	Venezuelan Crisis – Regional Impact
DG ECHO	2018	Ad hoc / Mission Report (August 2014)
DG ECHO	2018	Ad hoc / Mission Report (July 2018)
DG ECHO	2018	Ad hoc / Mission Report (June 2018)
DG ECHO	2018	Note interne sur le processus de sélection des propositions financées sur le HIP 2018 LAC
DG ECHO	2018	Venezuela Humanitarian Response ECHO – 3/5/2018 (Version 2)
DG ECHO	2018	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean

Author	Year	Title
DG ECHO	2018	Technical Annex. Latin America and the Caribbean. Financial, Administrative and Operational Information
DG ECHO	2018	Project proposals (several documents)
DG ECHO	2018	Validation de la sélection des propositions financées sur le HIP Amérique Latine et Caraïbes (LAC) de 2018. A travers ses modifications successives
DG ECHO	2018	Technical Annex. Latin America and the Caribbean. Financial, Administrative and Operational Information
DG ECHO	2018-2021	UNHCR 2018-2021 breakdown analysis
DG ECHO	2019	Guidance on best practices and minimum requirements for implementing EU funded humanitarian aid actions in Venezuela
DG ECHO	2019	Resumen Consultas Socios HIP 2019
DG ECHO	2019	Project dashboard
DG ECHO	2019	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean
DG ECHO	2019	Technical Annex. Latin America and the Caribbean. Financial, Administrative and Operational Information
DG ECHO	2019	Validation de la sélection des propositions financées sur le HIP Amérique Latine et Caraïbes (LAC) de 2018. A travers ses modifications successives
DG ECHO	2019	Humanitarian Response to the Venezuelan Situation. Ongoing and programmed (EUR 46.4 M)
DG ECHO	2019	Humanitarian Response to the Venezuelan. Situation 2019
DG ECHO	2019	Ongoing funded project dashboard
DG ECHO	2019	Funding South America HIP 2019. Rationale for Preselection
DG ECHO	2019	Venezuelan crisis: ECHO Strategy and funding priorities 2019
DG ECHO	2020	Factsheet 'Venezuela facts and figures'
DG ECHO	2020	Venezuela Migration crisis
DG ECHO	2020	LAC PARTNERS SURVEY 2020
DG ECHO	2020	Report – ICG Venezuela ministerial meeting – 17 September 2020
DG ECHO	2020	Strategic Plan 2020-2024
DG ECHO	2020	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean
DG ECHO	2020	Technical Annex. Latin America and the Caribbean. Financial, Administrative and Operational Information
DG ECHO	2020	Project dashboard (several documents)

Author	Year	Title
DG ECHO	2020	Humanitarian Response to the Venezuelan Situation 2020
DG ECHO	2020	Validation de la sélection des propositions financées sur le HIP Amérique Latine et Caraïbes (LAC) de 2018. A travers ses modifications successives
DG ECHO	2020	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean (Note to the file)
DG ECHO	2020	Rational ECHO Response to Venezuelan Crisis 2020
DG ECHO	2020	Thematic Policies Annex. General Principles, Policies and Guidelines
DG ECHO	2020	Dashboards 2020: Analysis of proposals by UNHCR
DG ECHO	2020	Seminar on the strategy of the EU to support Venezuela through Civil Society
DG ECHO	2020	Strategy workshop with Venezuelan civil society – Flash report
DG ECHO	2021	Key Recommendations - Regional consultation LAC, 17 November 2021. Humanitarian Access in Latin America and the Caribbean
DG ECHO	2021	Key Recommendations - Regional consultation LAC, 17 November 2021. Humanitarian Access in Latin America and the Caribbean
DG ECHO	2021	Key Recommendations stemming from the European Humanitarian Forum Regional consultation Latin America and the Caribbean, 17 November 2021
DG ECHO	2021	The European Humanitarian Forum (EHF) Latin America and the Caribbean Regional consultation on Localization. Flash Report
DG ECHO	2021	EHF Debrief. Latin America and the Caribbean
DG ECHO	2021	DG ECHO Country Fiche Venezuela (June 2021)
DG ECHO	2021	DG ECHO Country Fiche Venezuela (October 2021)
DG ECHO	2021	DG ECHO Country Fiche Venezuela (December 2021)
DG ECHO	2021	Mission Report. Visit to Panama: 8 – 12 December
DG ECHO	2021	DG ECHO Update to the International Contact Group on The Humanitarian Situation in Venezuela, 11 June 2021
DG ECHO	2021	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean
DG ECHO	2021	Technical Annex. Latin America and the Caribbean. Financial, Administrative and Operational Information
DG ECHO	2021	Project dashboard (several documents)
DG ECHO	2021	THEMATIC POLICIES ANNEX GENERAL PRINCIPLES, POLICIES AND GUIDELINES
DG ECHO	2021	Rational ECHO Response to Venezuelan Crisis 2021
DG ECHO	2021	Venezuelan crisis in South America and Caribbean current portfolio (June 2021)

Author	Year	Title
DG ECHO	2021	High-level Meeting with Civil Society in Solidarity with Venezuelan Refugees and Migrants
DG ECHO	2021	High-level Meeting with Civil Society in Solidarity with Venezuelan Refugees and Migrants. Opening and Closing Remarks.
DG ECHO	2021	WFP in Venezuela (update 21/04/2021)
DG ECHO	2022	RATIONAL ECHO DASHBOARD VENEZUELAN CRISIS 2022
DG ECHO	2022	ECHO LAC - Partner's Consultation HIP 2022 KoboToolbox
DG ECHO	2022	Humanitarian Implementation Plan (HIP). Latin America and the Caribbean (Note to the file)
DG ECHO, UNHCR	2017	Operational dialogue II. UNHCR – ECHO. Agenda
DG ECHO, UNHCR	2017	Protection Dialogue and Operational Dialogue I. UNHCR – ECHO. Agenda
DG ECHO, UNHCR	2018	Strategic Dialogue. UNHCR, the European Commission (ECHO, DEVCO, NEAR) and the European External Action Service (EEAS)
DG ECHO, UNHCR	2019	OPERATIONAL DIALOGUE DG ECHO-UNHCR -Agenda for Africa, Asia and Latin America regions
DG ECHO, UNHCR	2021	High Level Dialogue DG ECHO – UNHCR. UNHCR – ECHO. Agenda
DG ECHO, UNHCR	2021	UNHCR and EU's support in education sector helps increase enrolment of Pakistani, refugee children
EEAS	2021	Current Situation – Venezuela
EEAS	2021	Current Situation – Venezuela
EU Humanitarian Air Brigade	2020	EU HAB. Venezuela. State of play
EU, IOM, UNHCR	2019	International Solidarity Conference on the Venezuelan Refugee and Migrant crisis. Guidance notes for panelists
EU, IOM, UNHCR	2019	International Solidarity Conference on the Venezuelan Refugee and Migrant crisis. Agenda of the conference.
EU, IOM, UNHCR	2020	International Donor Conference in solidarity with Venezuelan refugees and migrants in the face of COVID-19. Madrid/Brussels, 26th May 2020
EU, IOM, UNHCR	2020	EU, IOM, UNHCR to support peaceful integration of refugees and migrants across Latin American, Caribbean Communities affected by COVID-19
EU, UNHCR	N.D.	Strategic Dialogue EU – UNHCR. Agenda
European Commission	2012	Evaluation of DG ECHO's Legal Framework for Funding of Humanitarian Actions
European Commission	2017	Latin America and the Caribbean HIP and Technical Annex

Author	Year	Title
European Commission	2017-2021	HIPs and Technical Annexes covering the five countries where UNHCR has received most funding from DG ECHO (Greece, Lebanon, Türkiye, Uganda, Jordan)
European Commission	2018	Latin America and the Caribbean HIP and Technical Annex
European Commission	2019	Latin America and the Caribbean HIP and Technical Annex
European Commission	2020	Migration and Home Affairs. Collaboration with international organisations
European Commission	2020	Latin America and the Caribbean HIP and Technical Annex
European Commission	2021	Venezuela Pledging conference – Head of Cabinets meeting with Ambassadors from Colombia, Ecuador, Peru and Chile
European Commission	2021	Latin America and the Caribbean HIP and Technical Annex
European Commission	2023	Inform Risk
European Commission	2023	Results and data
European Commission, United Nations	2018	Financial and Administrative Framework Agreement between the European Union represented by the European Commission and the United Nations
European Commission, United Nations	2018	Financial and Administrative Agreement (FAFA) between the European Union and the United Nations
European Union	2021	Factsheet 'EU Supports Venezuelan Refugees, Migrants and Host Communities'
UNHCR Documents		
UNHCR	n.d.	Mandate of UNHCR, Executive Summary
UNHCR	2017-2020	UNHCR Global Reports
UNHCR	2004	UNHCR and the EU
UNHCR	2005	Memorandum concerning the establishment of a strategic partnership between the Office of the UNHCR and the Commission of the European Communities in the field of protection and assistance to refugees and other people of concern to the UNHCR in third countries
UNHCR	2016	UNHCR Global Strategic priorities for 2016 and 2017
UNHCR	2017	UNHCR's Strategic Directions 2017-2021
UNHCR	2018	UNHCR Global Strategic priorities for 2018 and 2019
UNHCR	2018	Final agenda of the Strategic Dialogue
UNHCR	2018	Operational Dialogue UNHCR-ECHO. Annotated Agenda.
UNHCR	2020	Evaluation of UNHCR regional refugee response to the Venezuela situation
UNHCR	2020	UNHCR Global Strategic Priorities for 2020 and 2021
UNHCR	2020	Overview of funding provided to UNHCR
UNHCR	2020	High-Level Consultations DG ECHO-UNHCR. 3 July 2020 - Video Conference. Final Agenda
UNHCR	2020	Strategic Dialogue EU – UNHCR. Annotated Agenda

Author	Year	Title
UNHCR	2021	Human Trafficking in Economic Crisis Context: Venezuela and the Search for Protection Responses
UNHCR	2021	Venezuela situation - 2021
UNHCR	2022	Figures at a Glance
UNHCR	2022	Global Forced Displacement
UNHCR	2022	PA supervisory measures
UNHCR	2022	Refugee Statistics
UNHCR	2022	United Nations High Commissioner for Refugees – UNHCR. Key Facts and Figures
UNHCR	2022	UNHCR and the European Union launch 360-degree interactive film on Venezuelan displacement in Ecuador
UNHCR	2022	UNHCR Regional Consultations with NGOs in Europe
UNHCR Evaluation Service	2020	Evaluation of the UNHCR Regional Refugee Response to the Venezuela Situation
UNHCR, IOM, R4V	2021	International Donors' Conference in Solidarity with Venezuelan Refugees and Migrants. Draft programme
UNHCR, IOM, R4V	2021	International Donors' Conference in Solidarity with Venezuelan Refugees and Migrants. Concept note
Other authors		
ACAPS	2021	The Caminantes: Needs and Vulnerabilities of Venezuelan refugees and migrants travelling on foot
ACF	2021	Operational Humanitarian Context in Venezuela (April – June 2021) (Report No. 3)
Acosta and Madrid	2020	Migrants or refugees? Let's do both. Brazil's response to Venezuelan displacement challenges legal definitions
Action against hunger	2020	IMPACT OF SANCTIONS AND BUREAUCRATIC HURDLES IN VENEZUELA'S RESPONSE
Action against hunger	2021	Humanitarian Response. Sitrep n. 2 – Venezuela
Action against hunger	2021	Humanitarian Response. Sitrep n. 3 – Venezuela
Action against hunger	2021	Humanitarian Response. Sitrep n. 3 – Venezuela (Español)
Action against hunger	2021	Humanitarian Response. Sitrep n. 4 – Venezuela
Action against hunger	2021	Humanitarian Response. Sitrep n. 4 – Venezuela (Español)
Action against hunger	2021	Humanitarian Response. Sitrep n. 5 – Venezuela
Action against hunger	2021	Humanitarian Response. Sitrep n. 5 – Venezuela (Español)
Action against hunger	2021	Humanitarian Response. Sitrep n. 6 – Venezuela (Español)
Action against hunger	2021	Operational Humanitarian Context in Venezuela (Humanitarian Monitoring Tool 2)
Action against hunger	2021	Entorno Operativo Humanitario en Venezuela (Humanitarian Monitoring Tool 2)
Action against hunger	2021	Operational Humanitarian Context in Venezuela (Humanitarian Monitoring Tool 3)

Author	Year	Title
Action against hunger	2021	Entorno Operativo Humanitario en Venezuela (Humanitarian Monitoring Tool 3)
Action against hunger	2021	Entorno Operativo Humanitario en Venezuela
Action against hunger	2021	Resumen. Informe Semestral de Nutrición y Salud
Aide à la Décision Economique (ADE)	2008	Evaluation of Commission's external cooperation with partner countries through the organisations of the UN family
Aide à la Décision Economique (ADE)	2016	Evaluation of DG ECHO Response to the Syrian Crisis (2012-2014):
Aide à la Décision Economique (ADE)	2021	Evaluation of the European Union's humanitarian response to the Rohingya refugee crisis in Myanmar and Bangladesh, 2017-2019
BBC	2018	Left behind: How Venezuela crisis is tearing families apart
Brumat, L	2022	Migrants or refugees? 'Let's do both'. Brazil's response to Venezuelan displacement challenges legal definitions'
CEPAZ	2021	Follow-up Report on "Assessing Venezuela's Complex Humanitarian Emergency"
CEPAZ	2021	Sistematización de "Evaluación de la emergencia humanitaria compleja de Venezuela"
Coalicion LAC RMD	2021	The LAC RMD Coalition issues a CALL TO ACTION in the framework of the International Donors' Conference in Solidarity with Venezuelan Refugees and Migrants
Coscojuela	2022	El trabajo infantil en Venezuela "invisibilizado" por falta de datos
Cronica Uno	2021	El fenómeno económico del 'bodegón' puede ser uno de los sucesos sociales más importantes de Venezuela
Curtis	2001	Politics and Humanitarian Aid: Debates, Dilemmas and Dissension
Deutsche Welle	2022	La crisis del Sistema educativo en Venezuela
EL PAIS	2019	Maduro acepta ayuda humanitaria de la Unión Europea y anuncia un lote de medicinas de Rusia
El Periódico	2019	Maduro: rechaza ayuda humanitaria: no somos mendigos de nadie
ENCOVI	2021	Condiciones de vida de los venezolanos: entre emergencia humanitaria y pandemia. ENCOVI 2021
Equilibrium CenDE	2021	Inmigración Venezolana en el Perú: Regularización Migratoria y el Sistema de Refugio
EXCO	2021	EXCO NOTE "L" – INFORMATION NOTE TO THE MEMBERS OF THE EXCO. Subject: EU role at the International Donors' Conference in Solidarity with Venezuelan Refugees and Migrants organised by Canada on 17 June 2021
Foro ONGI	2021	MONTHLY BRIEFING – VENEZUELA
Foro ONGI	2021	BRIEFING MENSUAL DE INCIDENCIA – VENEZUELA

Author	Year	Title
Global affairs Canada	2021	Canada mobilizes international donors to support Venezuelan refugees, migrants and countries in the region
Global Public Institute	2019	UNHCR's Engagement in Humanitarian Development Cooperation – Think Piece on Research Phase 1 ES/2019/09
Global Public Institute	2020	Discussion Papers 1- 4 UNHCR's Engagement in Humanitarian-Development Cooperation ES/2020/09
Global Public Institute; International Security and Development Centre	2021	Evaluation of UNHCR's Engagement in Humanitarian-Development Cooperation – Main Report ES/2021/05
Human Rights Watch	2020	Venezuela: Humanitarian Group Under Attack
HumVenezuela	2020	Impactos de la emergencia en Alimentación y nutrición
HumVenezuela	2020	National Follow-up Report on the Complex Humanitarian Emergency in Venezuela; HUMVenezuela (2022). Follow-up Report on the Impacts of the Complex Humanitarian Emergency in Venezuela Following the Confinement due to the COVID Pandemic.
HumVenezuela	2021	Impactos de la Emergencia Humanitaria Compleja de Venezuela en el contexto de la pandemia por COVID-19
HumVenezuela	2021	Informe de Seguimiento sobre los Impactos de la Emergencia Humanitaria Compleja en Venezuela con la pandemia de COVID. Actualización
HumVenezuela	2021	Informe de Seguimiento sobre los Impactos de la Emergencia Humanitaria Compleja en Venezuela con la pandemia de COVID. Actualización. Junio 2021
HumVenezuela	2022	Condiciones de vida – Hoja infográfica
IASC	2016	Policy Protection on Humanitarian Action
IFRC	2021	Community Resilience in Venezuela
INGO	2021	INGO intervention, High level donor roundtable, 12 th of May
International contact group	2018	ICG WG on humanitarian issues: Report of the Follow Up mission to Venezuela
International contact group	2021	International Contact Group on Venezuela (Terms of Reference)
International contact group	2021	International Contact Group on Venezuela Working group on Humanitarian Assistance. Background information
International contact group	2021	ICG WG on humanitarian issues: Report of the Follow Up mission to Venezuela
International contact group	2021	International Contact Group on Venezuela. Sixth Ministerial Meeting
International contact group	2021	International Contact Group on Venezuela. 6 th Ministerial Meeting. Update on the Humanitarian situation
International contact group	2021	ICG Humanitarian Assistance Working Group Mission To Venezuela
International contact group	2021	International Contact Group for Venezuela Humanitarian assistance. Working group (Briefing)

Author	Year	Title
International contact group	2021	ICG Humanitarian Assistance Working Group – 15/07/2021 Meeting Minutes
International contact group	2021	International Contact Group for Venezuela Humanitarian assistance Working group EU member States meeting
International contact group	2021	International Contact Group on Venezuela – SOM 11.06.2021 – VC
International contact group	2021	Press release of the Permanent Secretariat of the International Contact Group on Venezuela: Senior Officials' Meeting
International contact group	2021	Senior Officials' Meeting of the International Contact Group (VTC format, 11 June 2021)
International contact group	2021	International Contact Group for Venezuela. Humanitarian assistance Working Group Meeting. 22 March 2021
International contact group	2021	International Contact Group for Venezuela Humanitarian assistance Working group (Briefing)
International contact group	2021	International Contact Group for Venezuela Humanitarian Assistance WG (Humanitarian Update)
International contact group	2021	International Contract Group for Venezuela – Humanitarian Assistance Working Group (ICG Working Plan)
International contact group	2021	ICG Humanitarian assistance Working Group meeting 07 September 2021
International contact group	2021	ICG Letter 'To the attention of the UN Resident Coordinator / Humanitarian Coordinator in Venezuela'
International contact group	2021	ICG Humanitarian Assistance Working Group Mission to Venezuela
IMF	2023	Venezuela's Migrants Bring Economic Opportunity to Latin America
IOM and MPI	2020	Venezuelan Migrants and Refugees in Latin America and the Caribbean: A Regional Profile
Landell Mills – Jouri	2020	Evaluation of European Union's humanitarian assistance in Syria, 2016-2018
Macrotrends	2023	Venezuela Hunger Statistics 2023
Medina-Ramirez	2016	In Venezuela, data is power
Mercy Corps	2018	Humanitarian Crisis on the Border: Rapid Needs Assessment for Vulnerable Venezuelans in Colombia: La Guajira and César
Norwegian Refugee Council	2017	Evaluation of NRC's Protection and Humanitarian Assistance for People Affected by the Humanitarian Crisis on the Colombia-Venezuela Border
OCHA	2019	Venezuela HRP July-December 2019
OCHA	2020	OCHA: Global Humanitarian Overview 2022 – Venezuela
OCHA	2020	VENEZUELA. PLAN DE RESPUESTA HUMANITARIA con Panorama de Necesidades Humanitarias
OCHA	2021	Humanitarian Response Plan, Update 2021

Author	Year	Title
OCHA	2021	VENEZUELA – OCTUBRE-NOVIEMBRE 2021 Informe de situación
OCHA	2022	Venezuela 5W – Humanitarian Operational Presence 2022 – Who does What Where When & for Whom? As of 31 December 2021
OCHA	2022	Venezuela 5W - Humanitarian Operational Presence 2022 - Who does What Where When & for Whom? as of 30 September 2022
OHCHR	2020	Venezuela: : la emergencia sanitaria no es excusa para seguir restringiendo los derechos humanos, dicen expertos de la ONU
OHCHR, UNHCR and IASC	2013	A Joint Background Paper on the Protection of Human Rights in Humanitarian Crisis
OXFAM	2021	Follow-up Report on “Assessing Venezuela’s Complex Humanitarian Emergency”
Plan internacional	2021	Adolescent Girls in Crisis: the Venezuelan migration
R4V	2021	Thematic events. Side Events of the Pledging Conference
R4V	2021	2021 RMRP Summary. Situation and background.
R4V	2021	Funding overview. Funding update 2021
R4V	2021	Infographic ‘Map of Venezuelan refugees’
R4V	2021	RMRP for refugees and migrants from Venezuela, Jan-Dec 2021
R4V	2022	R4V América Latina y el Caribe, Refugiados y Migrantes Venezolanos en la Región – Agosto 2022
R4V	2022	Living conditions of the Venezuelan population residing in Peru. Results of the II ENPOVE 2022.
R4V	2023	R4V América Latina y el Caribe, Refugiados y Migrantes Venezolanos en la Región – Mar 2023
Regional Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela	2021	Rapid Joint Needs Assessment on the Venezuela-Colombia border, 21 March
Runrun	2022	Comité de In Venezuela, data is power
SHER Ingénieurs-Conseils S.A.	2005	Evaluation of the partnership between ECHO and UNHCR and of UNHCR activities funded by ECHO
Statista	2022	Venezuela: tasa de homicidios 2014-2021
Statista	2022	Homicide rates in selected Latin American and Caribbean countries in 2021
Swedish Ministry for Foreign Affairs	2020	Invitation to High-Level Humanitarian Donor Roundtable on Venezuela (2 nd July)
Swedish Ministry for Foreign Affairs	2021	High-Level Humanitarian Donor Roundtable on the Humanitarian Situation in Venezuela. Letter of invitation
Swedish Ministry for Foreign Affairs	2021	High-Level Humanitarian Donor Roundtable on the Humanitarian Situation in Venezuela. Programme
Swedish Ministry for Foreign Affairs	2021	High-Level Humanitarian Donor Roundtable on the Humanitarian Situation in Venezuela. Speakers

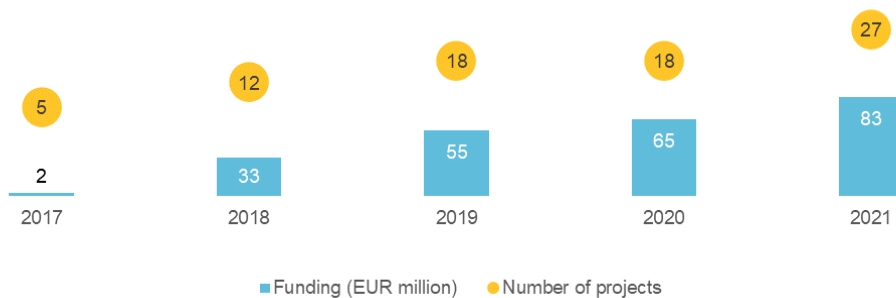
Author	Year	Title
Transec, CIVIPOL	2020	Combined Evaluation of the European Union's Humanitarian Intervention in Iraq and in the Protection Sector (2014-2018)
Transparencia Venezuela	2021	Los CLAP: La dominación se entrega puerta a puerta
UN OCHA Financial Tracking Service	2020	European Commission's Humanitarian Aid and Civil Protection Department 2020
UNFPA	2021	Humanitarian response in Venezuela
UNICEF	2019	Country Office Annual Report - Venezuela
UNICEF	2020	Situation Report. January – June 2020
UNICEF	2021	Situation Report. April 2021
UNICEF	2021	Children on the move, including from Venezuela, and COVID-19. April 2021
UNICEF	2021	Situation Report. February 2021
UNICEF	2021	Situation Report. Annual 2021
UNICEF	2021	Situation Report. Mid-year 2021
UNICEF	2021	Situation Report March 2021
UNICEF	2021	Situation Report May 2021
UNICEF	2022	Health
United Nations Office for the Coordination of Humanitarian Affairs	2022	OCHA: Global Humanitarian Overview 2022 – Venezuela
USAID	2022	Factsheet 'Crisis regional de Venezuela – Emergencia compleja'
USAID	2022	CRISIS REGIONAL POR LA SITUACIÓN DE VENEZUELA – Respuesta del Gobierno de Estados Unidos a la Emergencia Compleja
Venezuela al dia	2019	BCV admite hiperinflación de 53.798.500% desde 2016
Vick, Karl	2021	YOu Don't ave to Be Rich to Do the RIght Thing. Colombia's President Iván Duque on Welcoming Venezuelan Refugees
Vzat	2021	Encuesta Nacional VZAT: Efectos de la pandemia sobre las mujeres venezolanas.
Vzat	2021	VZAT National Survey: Impact of the COVID pandemic on Venezuelan women
WFP	2022	Venezuela
WFP	2022	WFP Venezuela Actualización Operativa
WFP	2022	WFP Venezuela Operational Update
World Bank	2022	Hospital beds (per 1,000 people) – Venezuela, RB
WOLA	2020	The Impact of US Sanctions on Oil Production and the Humanitarian Emergency in Venezuela
Xchange	2019	Latin America Spotlight: the Venezuela-Colombia border
Zambrano	2022	Dolarizacion y desdolarizacion, ¿un dilema en Venezuela?'

ANNEX 2 PORTFOLIO ANALYSIS

A2.1 COMPONENT A: VENEZUELAN REGIONAL CRISIS

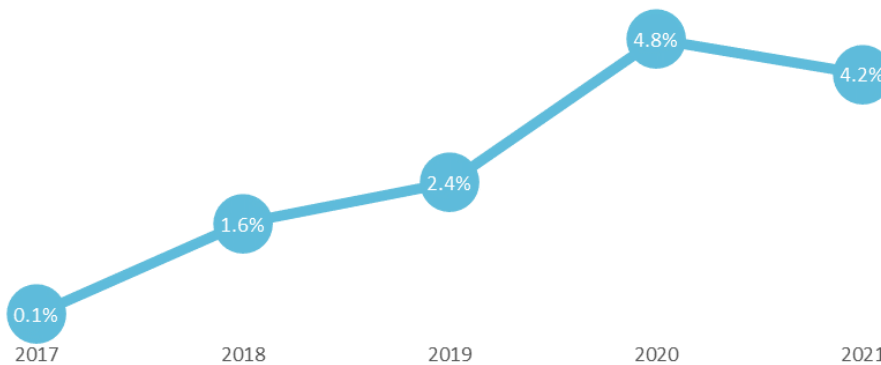
This provides an aggregated analysis of the actions in scope at regional level.

Table 2. DG ECHO funding and number of projects to the Venezuelan regional crisis from 2017 to 2021



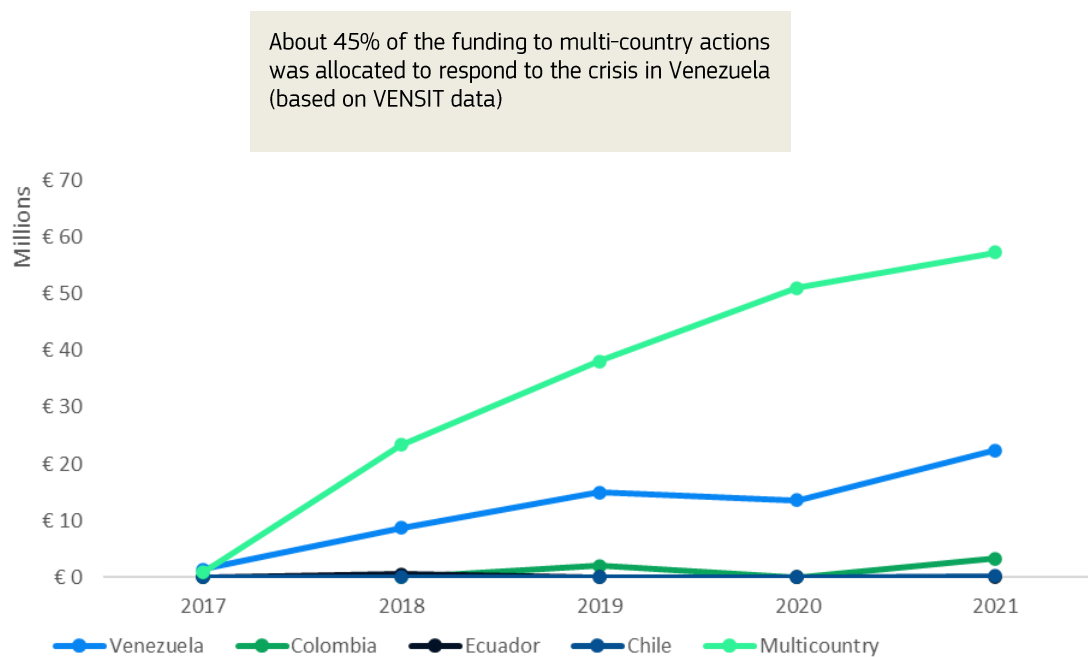
Source: HOPE database. ICF Analysis.

Table 3. Share of DG ECHO funding to the Venezuelan regional crisis compared to DG ECHO global allocation, 2017 to 2021



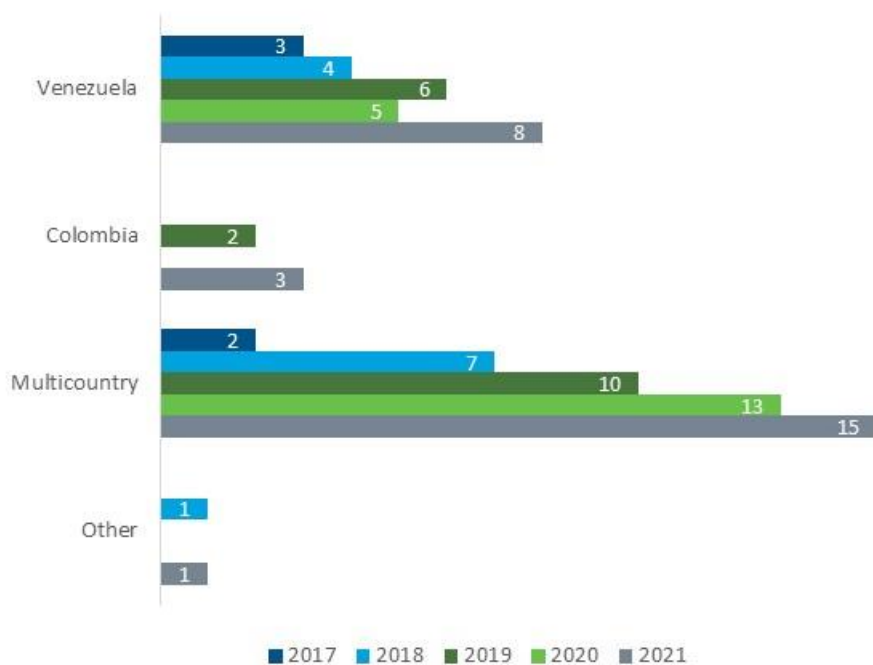
Source: HOPE database. ICF Analysis.

Table 4. Evolution of DG ECHO funding to the Venezuelan regional crisis per country



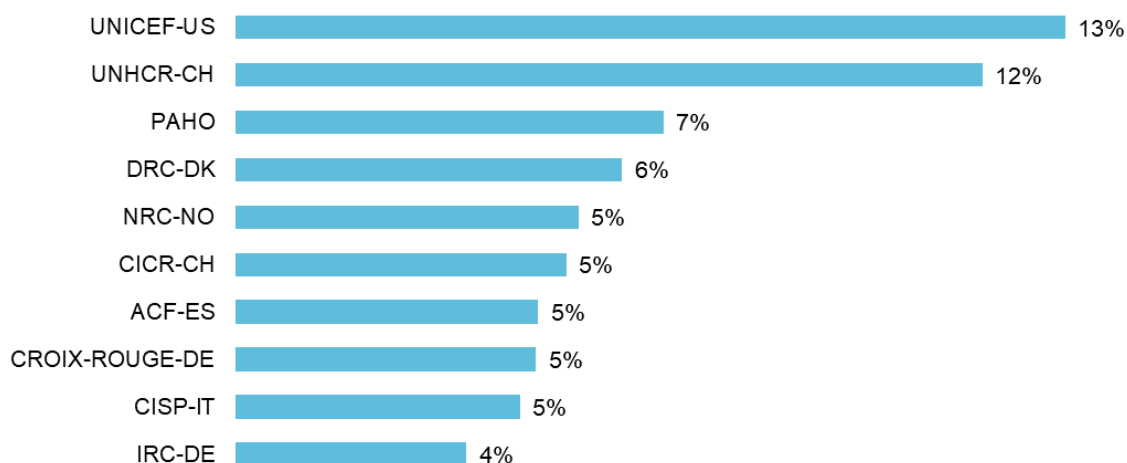
Source: HOPE database. ICF Analysis.

Table 5. Evolution of number of projects to respond to the Venezuelan regional crisis per country, 2017-2021



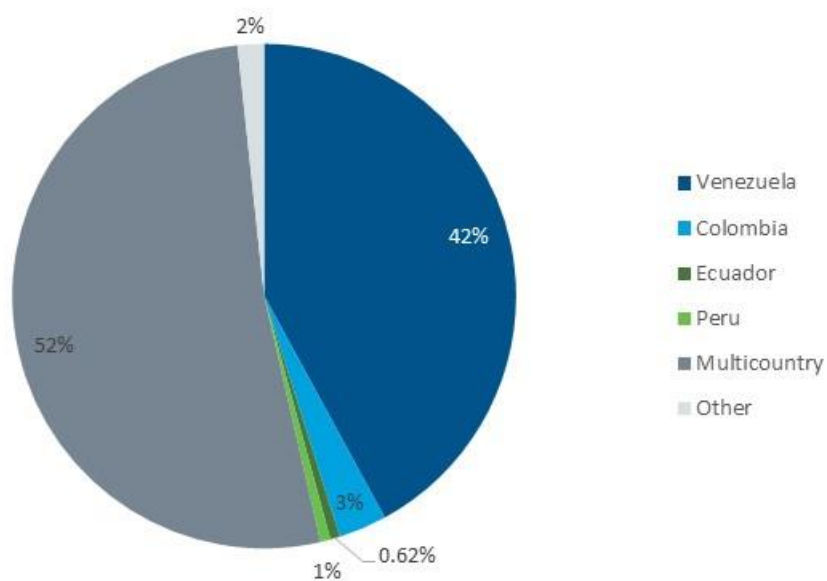
Source: HOPE database. ICF Analysis.

Table 6. DG ECHO main partners of DG ECHO's response to the Venezuelan regional crisis, 2017-2021



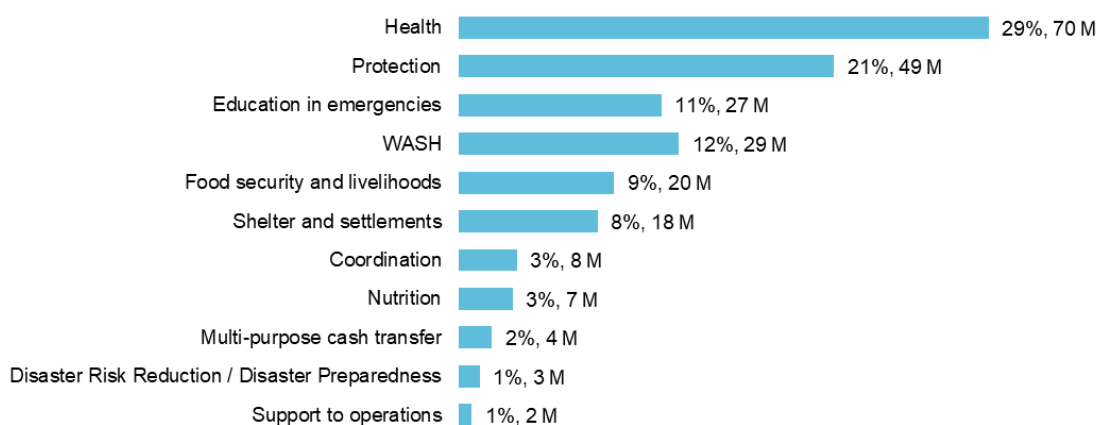
Source: HOPE database. ICF Analysis.

Table 7. Distribution of beneficiaries reached by projects to respond to the Venezuelan regional crisis by country in 2017-2021



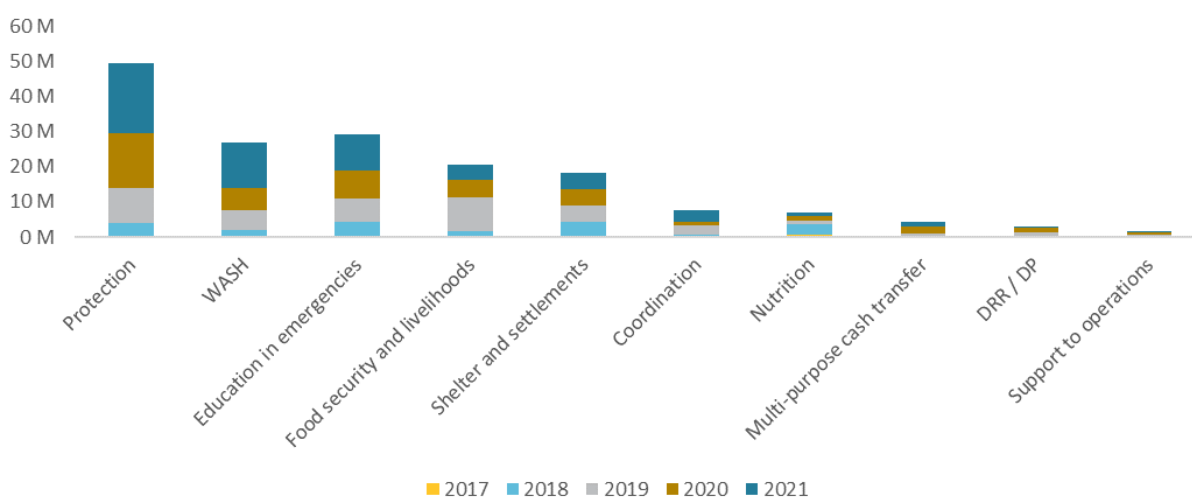
Source: HOPE . ICF Analysis.

Table 8. DG ECHO funding allocated to the Venezuelan regional crisis per sector



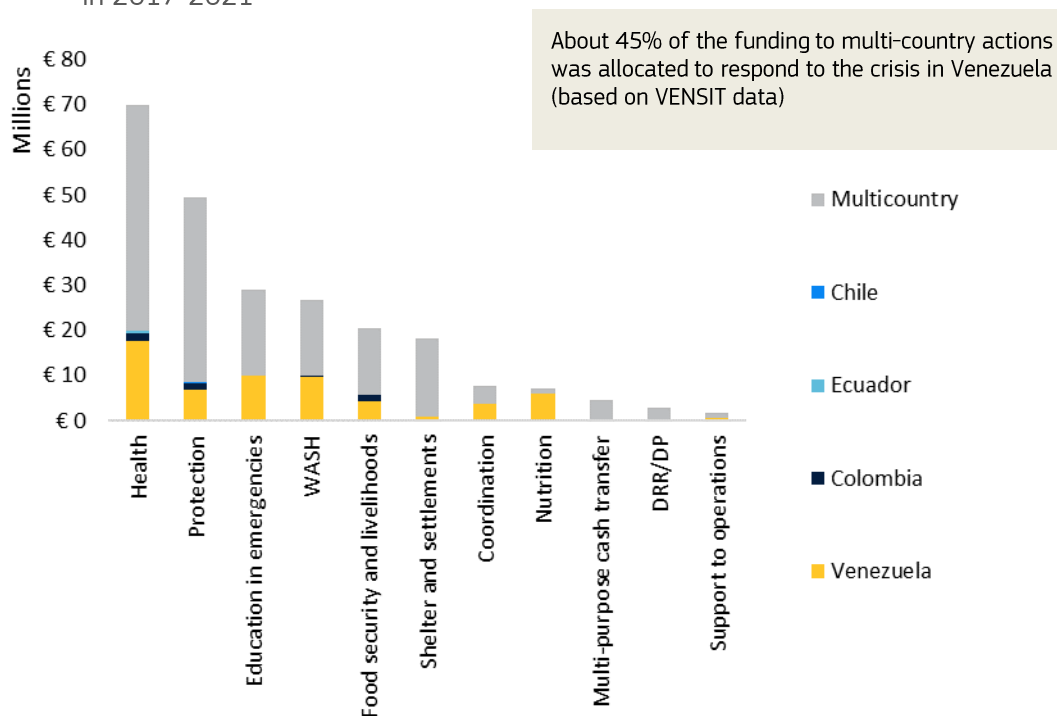
Source: HOPE database. ICF Analysis.

Table 9. Annual DG ECHO funding to the Venezuelan regional crisis, by sector and per year 2017-2021



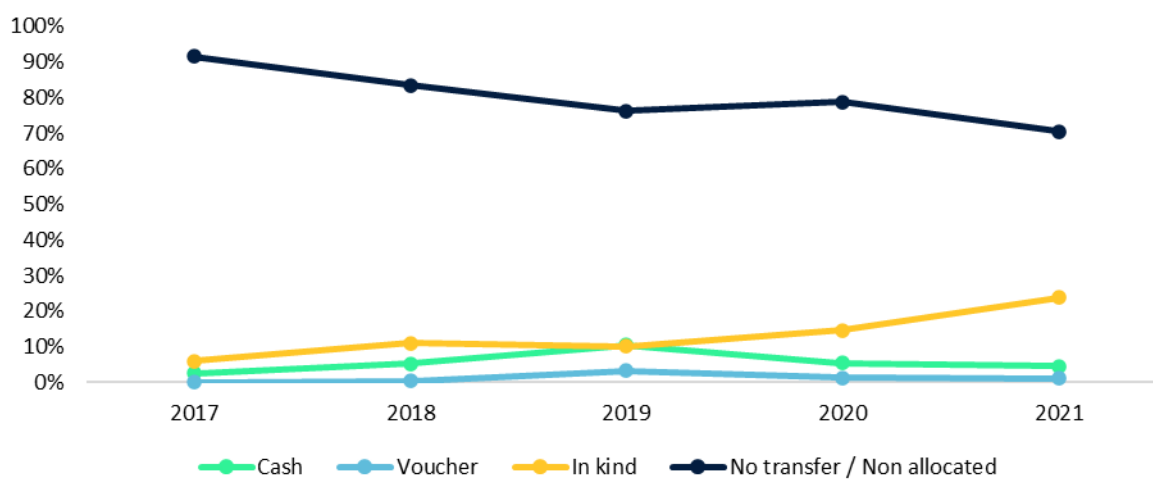
Source: HOPE database. ICF Analysis.

Table 10. DG ECHO funding to the Venezuelan regional crisis by sector (EUR million) per country in 2017-2021



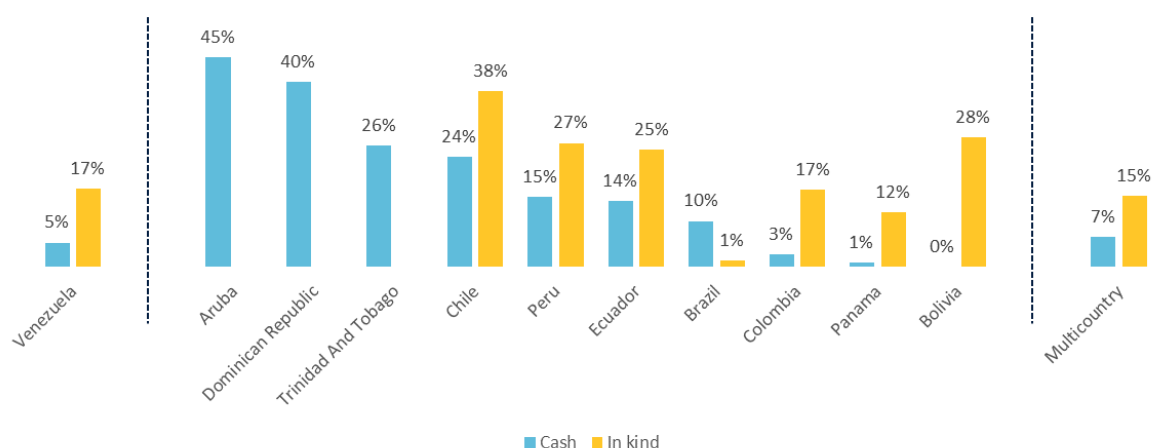
Source: HOPE database. ICF Analysis.

Table 11. Evolution of DG ECHO modalities of fund transfers to beneficiaries in the context of the Venezuelan regional crisis, 2017-2021



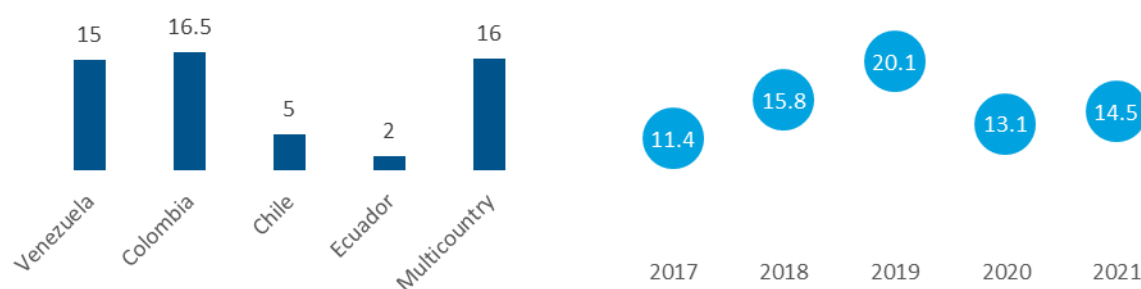
Source: HOPE database. ICF Analysis.

Table 12. DG ECHO Funding to the Venezuelan regional crisis by transfer modality per country, in 2017-2021 (%)



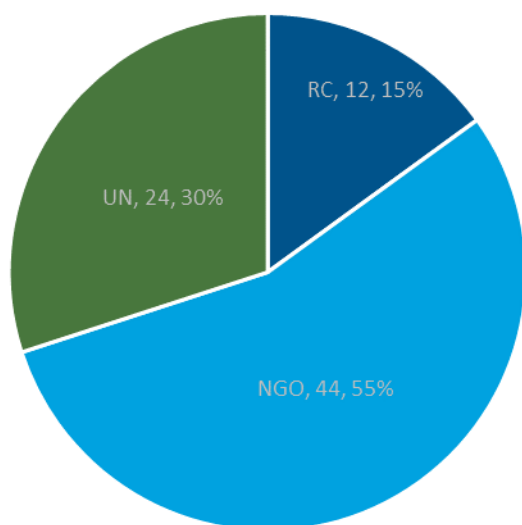
Source: HOPE database. ICF Analysis.

Table 13. Average duration of DG ECHO Funded actions to respond to the Venezuelan regional crisis per year and per country, in 2017-2021 (months)



Source: HOPE database. ICF Analysis.

Table 14. Profile of the DG ECHO Partners to respond to the Venezuelan regional crisis per year and per country, in 2017-2021

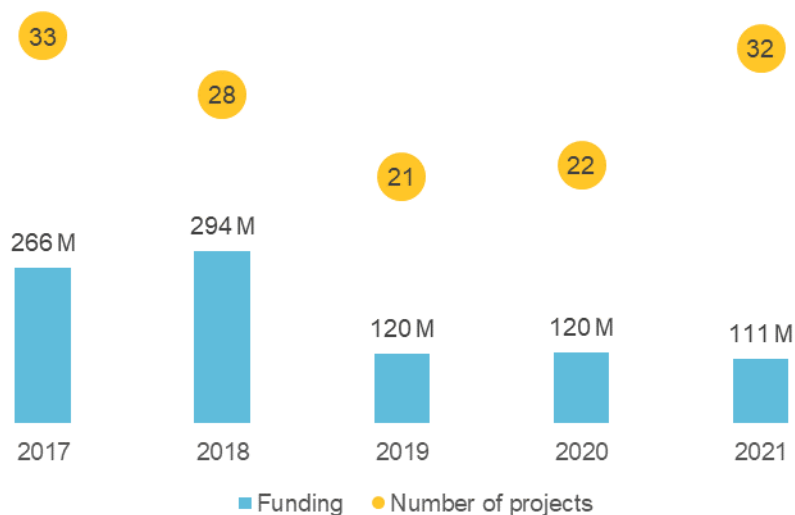


Source: HOPE database. ICF Analysis.

A2.2 COMPONENT B: DG ECHO – UNHCR PARTNERSHIP

The analysis below was based on data retrieved from DG ECHO's HOPE/EVA databases. In total, 136 actions were identified as being within the remit of the UNHCR evaluation.

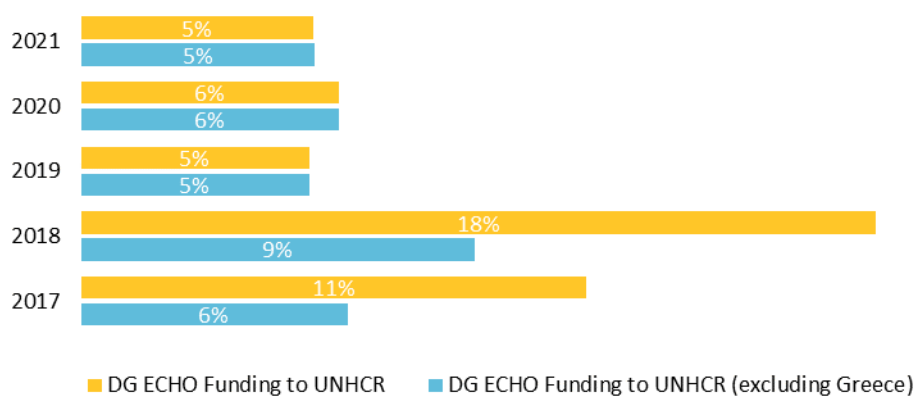
Table 15. Annual DG ECHO funding to UNHCR actions by financial year (in Euro) and number of projects, 2017-2021



Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

Note: values are based on financial year. To estimate the number of actions per year in cases where there were actions containing multiple contracts in different years, the year of the first contract was used. If actions were conducted across multiple countries, the assumption made is that the funding was distributed across all countries equally.

Table 16. Proportion of DG ECHO funding directed to UNHCR, 2017-2021



Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

Table 17. Breakdown of DG ECHO funding for UNHCR actions by region and financial year, 2017-2021

Share of funding to UNHCR per region						
Region/Year	2017	2018	2019	2020	2021	Total
Africa	18.99%	10.19%	11.85%	28.48%	18.87%	16.45%
Asia	4.79%	0.88%	8.14%	7.56%	18.52%	6.01%
Europe	62.51%	60.32%	21.85%	14.61%	16.57%	44.54%
LAC	0.19%	3.50%	7.07%	6.31%	7.31%	3.84%
Middle East	12.78%	25.10%	51.08%	42.51%	38.72%	28.87%
Other	0.75%	0.00%	0.00%	0.54%	0.00%	0.29%

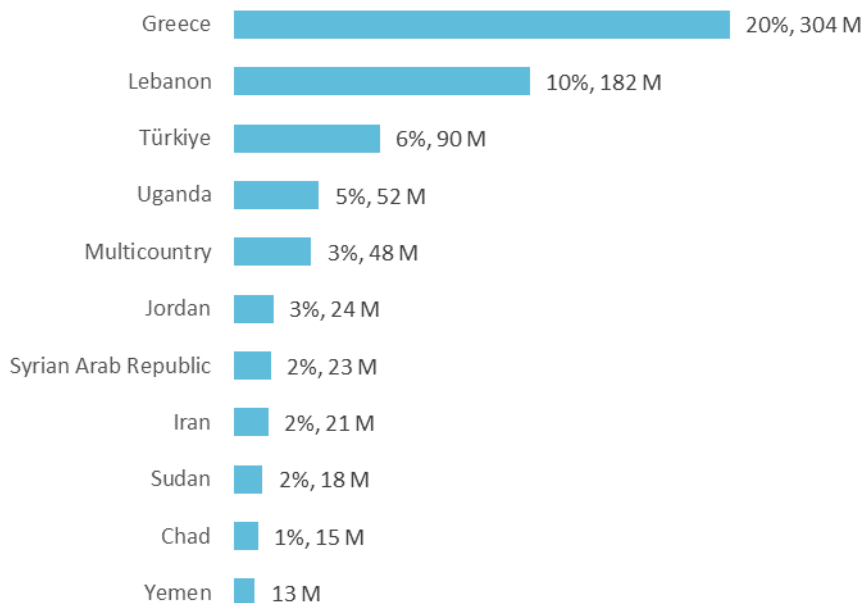
Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

Table 18. Breakdown of DG ECHO funding for UNHCR actions by sector and financial year, 2017-2021

Share of funding to UNHCR per sector						
Sector/Year	2017	2018	2019	2020	2021	Total
Multi-purpose cash transfer	19.0%	48.4%	40.0%	31.0%	33.5%	34.6%
Protection	44.0%	12.3%	46.2%	40.2%	46.4%	33.9%
Shelter and settlements	25.6%	34.4%	2.9%	10.7%	5.3%	21.0%
Health	7.0%	2.4%	7.0%	11.9%	6.7%	6.1%
Coordination	0.9%	0.6%	2.7%	3.1%	1.0%	1.3%
Food security and livelihoods	1.8%	1.1%	0.3%	0.0%	1.0%	1.1%
WASH	1.1%	0.6%	0.3%	0.5%	1.6%	0.8%
Disaster Risk Reduction / Disaster Preparedness	0.0%	0.0%	0.6%	0.8%	3.5%	0.6%
Education in emergencies	0.2%	0.1%	0.1%	1.9%	1.0%	0.5%
Support to operations	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Nutrition	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%

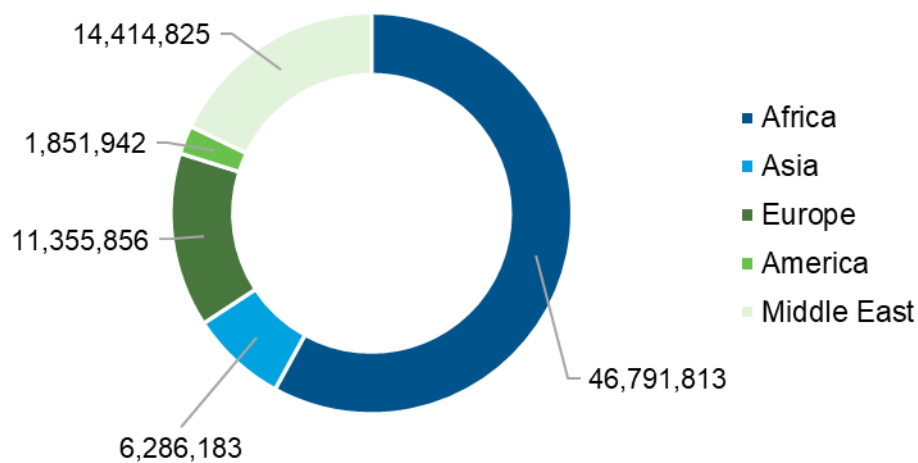
Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

Figure 1. Top ten countries receiving DG ECHO funding for UNHCR actions, 2017-2021



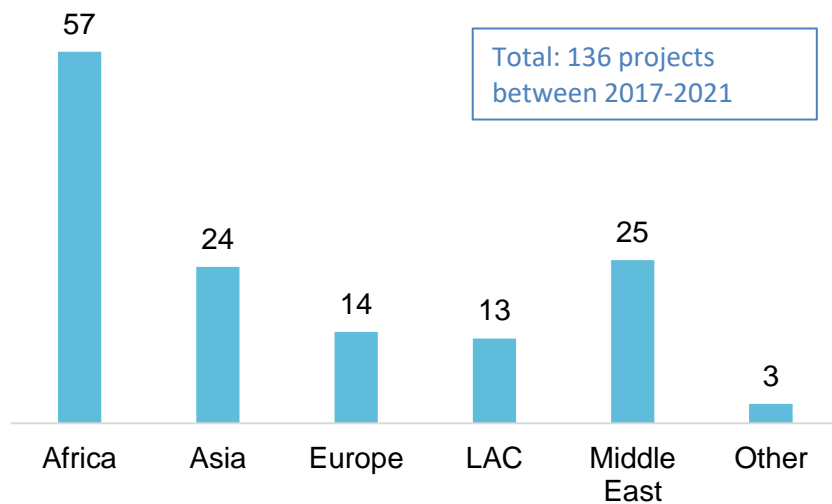
Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

Figure 2. Geographical coverage of beneficiaries of DG ECHO-funded UNHCR actions (in Euro), 2017-2021



Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

Figure 3. Number of DG ECHO funded UNHCR projects by region, 2017-2021



Source: HOPE/EVA data extracted on 12/10/22 ICF analysis.

ANNEX 3 SOCIAL MEDIA ANALYSIS

Using the Talkwalker social media listening tool, we extracted comments from Twitter which contained pre-identified keywords and hashtags related to the humanitarian crisis inside Venezuela and the support provided to countries in the region that have received large numbers of Venezuelan migrants and refugees. The extracted comments spanned a two-year timeframe (December 1st 2020 – November 30th 2022) and were from accounts designated as being from individuals, located in 13 countries within South America¹, in order to capture reactions and sentiments from individuals affected by the crisis and who may have benefitted from DG ECHO-funded actions.

Due to the high volume of tweets which met the search criteria, we used a sample of 40,000 tweets (15%) for analysis (37,084 after the tweets had been cleaned). Tweets sent from within Venezuela made up 65% of the sample. A total of 63% of the comments were sent by males and 45% of the individuals who tweeted were in the 25-34 age range.

Figure 4. Total responses by country



Country	Number of tweets	Percentage
Venezuela	24,120	65.04%
Argentina	4,060	10.95%
Colombia	2,800	7.55%
Brazil	2,470	6.66%
Chile	1,927	5.20%
Peru	833	2.25%
Ecuador	436	1.18%
Panama	158	0.43%
Bolivia	154	0.42%
Dominican	106	0.29%
Guyana	9	0.02%
Trinidad and Tobago	7	0.02%
Aruba	4	0.01%

A3.1 ANALYSIS

Most of the extracted comments were information-based. These included coverage of the crisis as it unfolded and events such as the arrest of Alex Saab, the Venezuelan government envoy, the impact of COVID-19 on the health system, and the delivery of humanitarian aid. The tweets focused on humanitarian aid contained predominantly negative sentiment due to frequent mentions of President Maduro blocking outside aid and questioning of how and where aid had been used.

“The Venezuelan Dictatorship and Tyranny has caused the biggest migrant and refugee crisis in the world. There are already 6.8 million Venezuelans fleeing the country.” *August 2022, Colombia*

“Venezuelans today are walkers and they have to walk... a replica of the Nazi Holocaust... it looks like it's from a movie, but it's reality; Venezuela today walks, flees, Displaced, Refugees, brothers fleeing Pandemonium” *March 2021, Colombia*

¹ Venezuela, Colombia, Ecuador, Peru, Brazil, Trinidad & Tobago, Panama, Chile, Bolivia, Guyana, Dominican Republic, Aruba, Argentina

“What happened to humanitarian aid to Venezuela? #Corruption #Venezuela #usaid askaguaido”
July 2021, Venezuela

“In Venezuela there are people wondering what has happened to humanitarian aid. It turns out that there are people imprisoned for trying to implement the plans directed by international cooperation organizations...” *January 2021, Venezuela*

A smaller proportion of the tweets contained personal experiences either from individuals affected by the humanitarian crisis or from individuals in recipient countries. A few individuals affected by the crisis and located in Venezuela discussed humanitarian aid; these included individuals who expressed that they had not benefitted from the outside aid and questioned how it had been used, individuals who had benefitted from aid and were faced either with it being stopped or struggling with high costs, and individuals who expressed that aid was needed due to the near collapse of the health system particularly in light of the COVID-19 pandemic.

Among tweets from individuals displaced by the crisis, a few described the administrative difficulties they encountered in recipient countries while others expressed gratitude towards their host countries for facilitating integration.

“#venezuelanosenchile #3 years #thankyouChile” *March 2022, Chile*

“Thank you for that beautiful gesture for my people from Venezuela. You have a big heart. May God bless you and continue to give you a lot of health, wisdom and humility to continue helping people in any way. From me a Venezuelan here in your homeland Chile 😊” *December 2021, Chile*

“I am a Venezuelan immigrant in Colombia. They already vaccinated me with the first dose. They treated me as one more national. Thanks Colombia ♥ ♥” *May 2021, Colombia*

While tweets from displaced individuals did not express a negative reception from host countries, tweets from individuals in the recipient countries suggests a mixed view towards the entry of refugees. A few tweets from individuals in host countries expressed solidarity with refugees, while others felt the influx of refugees had a negative impact, for example, for communities on border regions with Venezuela, on resources in host countries, and on levels of criminality in host countries. A few tweets expressing negativity also questioned the term “refugee” particularly in relation to perceived increased criminality.

ANNEX 4 LIST OF STAKEHOLDERS CONSULTED

A4.1 FIELD CONSULTATIONS

Table 19. Venezuela

Stakeholder group	Stakeholder (role)	Consultation method
Implementing partners	Mercy Corps staff	Individual interviews (2)
Framework partners	Médicos del Mundo staff	Individual interviews (3)
		Group interview
Framework partners	IFRC Venezuela	Interview
Framework partners	UNHCR Venezuela	Interview
Framework partners	PAHO Venezuela	Interview
Framework partners	CISP Venezuela	Interview
Framework partners	OXFAM Venezuela	Interview
Framework partners	PUI Venezuela	Interview
Framework partners	UNICEF Venezuela	Interview
Implementing partners	Venezuelan Red Cross Caracas	Interviews (4)
Implementing partners	Venezuelan Red Cross (Zulia)	Interview
Implementing partners	Venezuelan Red Cross San Cristóbal	Interview
Implementing partners	Venezuelan Red Cross (San Fernando de Apure)	Interview
Implementing partners	Fe y Alegria	Interview
Implementing partners	Acción Solidaria	Interview
Coordination mechanisms	HCT (OCHA)	Interview
Coordination mechanisms	Foro ONGI Venezuela	Interview
Coordination mechanisms	Health Cluster Lead (PAHO)	Interview
Local authorities	Concejal de Salud (Municipio Torbes) [MDM]	Interview
Local authorities	Mayor (Rafael Urdaneta)	Interview
Other EU institutions	DG INTPA Field	Interview
Other	Comunidad de Naciones (San Cristóbal)	Interview
Other	Civilis/HumVenezuela	Interview
Beneficiaries (Healthcare institutions)	Hospital Medico Infantil Dr. Oropeza de Caricuao (staff) [Mercy Corps]	Group interview / FGD
Beneficiaries (Healthcare institutions)	Hospital Medico Infantil Dr. Oropeza de Caricuao (Director) [Mercy Corps]	Interview

Stakeholder group	Stakeholder (role)	Consultation method
Beneficiaries (Healthcare institutions)	Ambulatorio de San Josecito staff member [MDM]	Interview
Beneficiaries (Healthcare institutions)	Clínica Popular Especializada (staff) [MDM]	Group interview / FGD
Beneficiaries (Healthcare institutions)	Clínica Popular Especializada (Director)	Interview
Beneficiaries (Healthcare institutions)	Corposalud (San Cristóbal)	Group interview / FGD
Beneficiaries (Educational institutions)	Escuela Básica Estatal José Félix Ribas	Interview
Affected communities	Parroquia Eclesiástica San José Obrero	Interview
Total: 38 interviews (of which 4 group interviews)		

Table 20. Colombia

Stakeholder group	Stakeholder (role)	Consultation method
DG ECHO Field	Head of ECHO Field Office Bogotá	Interview
Framework partner	DRC (Country Team)	Group interview
Framework partner	DRC (La Guajira Team)	Group interview
Framework partner	OXFAM (Country Team)	Interviews (2)
Framework partner	CARE (Country Team)	Group interview
Framework partner	CARE (Cucuta and Pamplona Team)	Group interview
Framework partner	CARE (Nariño)	Group interview
Framework partner	NRC (Country Team)	Group interview
Framework partner	IRC (Country Team)	Group interview
Framework partner	UNHCR (Country Team)	Group interview
Framework partner	UNHCR (NDS Sub-Office)	Group interview
Framework partner	UNHCR (Sub-office Caribbean)	Group interview
Implementing partner	Corprodinco Cucuta (UNHCR)	Group interview
Implementing partner	Corprodinco Bucaramanga (CARE's IP)	Group interview
Implementing partner	Profamilia Bucaramanga (CARE's IP)	Group interview
Implementing partner	FMF Bucaramanga Team (OXFAM's IP)	Group interview
Implementing partner	FMF HQ (OXFAM's IP)	Group interview
Implementing partner	Pastoral Social (UNHCR's IP)	Group interview
Coordination mechanisms	National GIFMM	Group interview

Stakeholder group	Stakeholder (role)	Consultation method
Coordination mechanisms	Local GIFMM (NDS)	Group interview
Coordination mechanisms	OCHA	Interview
Coordination mechanisms	Protection co-lead (DRC)	Interview
Local authorities	Personería Municipal Ocaña	Group interview
Local authorities	Personería Municipal Cúcuta	
Local authorities	Secretaría de Desarrollo NDS	Group interview
Local authorities	Gobernanza Migratoria Ministerio Relaciones Exterior	
Local authorities	Personería Municipal Ipiales	Interview
Local authorities	UMGR Maicao	Interview
Local authorities	Secretaría de la Mujer (Pasto)	Interview
Donors	Canada	Interview
Donors	PRM (US)	Group interview
Affected communities / beneficiaries	Community leaders / UNHCR volunteers (UNHCR)	Focus group (Cúcuta)
Affected communities / beneficiaries	Young leaders of social organisations (UNHCR)	Focus group (Pasto)
Affected communities / beneficiaries	Local community (CARE)	Focus group (Ipiales)
Beneficiaries	Beneficiaries Corprodinco (UNHCR IP)	Focus group (Cúcuta)
Beneficiaries	Beneficiaries CATM (CARE)	Focus group (La Parada)
Beneficiaries	Beneficiaries Hermanos Caminantes (CARE)	Focus group (Pamplona)
Beneficiaries	Beneficiaries Centro Integral de la Mujer (CARE)	Focus group (Bucaramanga)
Beneficiaries	Venezuelan community leaders in Pasto (CARE)	Focus group (Pasto)
Beneficiaries	Female beneficiaries (CARE)	Focus group (Ipiales)
Beneficiaries	Beneficiaries FMF (OXFAM)	Focus group (Bucaramanga)
Total: 30 interviews (of which 21 group interviews) and 10 FGDs		

Table 21. Ecuador

Stakeholder group	Stakeholder (role)	Consultation method
DG ECHO Field	DG ECHO Head of Office Quito	Interview
Framework partner	UNHCR (country team)	Interview
Framework partner	UNICEF (country team)	Interview
Framework partner	CARITAS (country team)	Interview
Framework partner	Spanish Red Cross (International Delegate)	Interview
Framework partner	IOM (Head of Operations)	Interview
Framework partner	IFRC (Programs and operations coordinator)	Interview
Framework partner	CARITAS (Team “Casa Buen Samaritano -Quito”)	Interview
Framework partner	UNHCR (Team Sierra Centro Office)	Interview
Framework partner	UNHCR (Head of Office Lago Agrio and GTRM Lead)	Interview
Framework partner	CARITAS (Team Sucumbíos)	Interview
Framework partner	UNHCR (Head of Office Tulcan)	Interview
Framework partner	UNICEF (Focal Point Carchi)	Interview
Framework partner	CARITAS (Team Tulcan)	Interview
Framework partner	UNHCR (Protection team Tulcan)	Interview
Framework partner	UNHCR (Protection Officer and GTRM Ibarra Lead)	Interview
Framework partner	CARITAS (Team Ibarra)	Interview
Implementing partner	Fundacion Mujeres de Sucumbios - Lago Agrio (UNHCR)	Interview
Implementing partner	Fundacion Tarabita -Lago Agrio (UNHCR)	Interview
Implementing partner	COOPI - Lago Agrio (UNICEF)	Interview
Implementing partner	HIAS Team Integrated Support Space – Tulcan (UNICEF)	Interview
Implementing partner	COOPI Team Tulcan (UNICEF)	Interview
Implementing partner	Interagency Office Montufar (Fudela, NRC, HIAS) (UNHCR)	Group interview
Implementing partner	NRC Tulcan Head of Office (UNHCR)	Interview
Implementing partner	Mision Scalabriniana Team “Albergue Cristo Peregrino” (UNHCR)	Interview
Implementing partner	HIAS Head of Office Ibarra (UNHCR)	Interview

Stakeholder group	Stakeholder (role)	Consultation method
Coordination mechanisms	OCHA (Humanitarian Affairs Officer)	Interview
Coordination mechanisms	GTRM Interagency co-lead (UNHCR and IOM)	Group interview
Coordination mechanisms	GTRM protection co-lead (UNHCR and NRC)	Group interview
Coordination mechanisms	UNCCS (lead team UNHCR, WFP, UNICEF)	Group interview
Coordination mechanisms	Organisations involved in coordination in Lago Agrio (IOM, JRS, Fudela, NRC, GIZ, UN women, CISP, HIAS, CARITAS)	Group interview
Coordination mechanisms	GTRM Tulcan (RET international, CARITAS, RIOS, COOPI, AISOS, HIAS, NRC, Red Cross, IOM, WFP, Alas de Colibri, CAT Rumichaca, UNICEF, Fudela, UNHCR)	Group interview
National and local authorities	Ministry of Foreign Affairs and Human Mobility (Director of International Protection)	Interview
National and local authorities	Public Defender (General Coordinator of Defense Management, and the National Consultant on Human Mobility)	Interview
National and local authorities	Ministry of Foreign Affairs and Human Mobility Deputy Minister of Human Mobility)	Interview
National and local authorities	Director Sustainable Development Montufar	Interview
National and local authorities	Consultant – Public Defender's Office Tulcan	Interview
Other EU institutions	EU Delegation (Cooperation Officer)	Interview
Other donors	GIZ (Country Director, Deputy Regional Refugee Coordinator or delegates)	Interview
Other donors	Bureau of Population, Refugees, and Migration (Regional Refugee Coordinator and the Deputy Regional Refugee Coordinator)	Group interview
Beneficiaries/affected communities	Volunteers and leaders of associations of Venezuelan migrants	Focus group
Beneficiaries	HIAS beneficiaries (UNHCR + UNICEF)	Focus group
Beneficiaries	Equidad Foundation beneficiaries (UNHCR)	Focus group

<i>Stakeholder group</i>	<i>Stakeholder (role)</i>	<i>Consultation method</i>
Beneficiaries	ASA beneficiaries (UNHCR)	Focus group
Beneficiaries	Local agencies (Committee on Children and Gender-Based Violence)	Focus group
Beneficiaries	NRC Beneficiaries legal assistance (UNHCR)	Focus group
Beneficiaries	CARITAS beneficiaries access to regularisation	Focus group
Beneficiaries	CARITAS beneficiaries “Casa Buen Samaritano – Lago Agrio” (Venezuelans currently staying at the house)	Focus group
Beneficiaries	Fundación Mujeres de Sucumbíos – victims of SGBV: beneficiaries of art therapy (UNHCR)	Focus group
Beneficiaries	COOPI beneficiaries Access to documentation (UNICEF)	Focus group
Beneficiaries	CARITAS beneficiaries receiving protection assistant (Lago Agrio)	Focus group
Beneficiaries	HIAS complementary fund (Tulcan) beneficiaries (UNICEF)	Focus group
Beneficiaries	HIAS complementary fund (Tulcan) beneficiary (UNICEF)	Focus group
Beneficiaries	UNHCR + Implementing partners protection assistance - Pimampiro	Focus group
Beneficiaries	CARITAS beneficiaries of psychosocial assistance (Ibarra)	Focus group
Total: 40 interviews (of which 7 group interviews) and 15 FGDs		

Table 22. Panama

<i>Stakeholder group</i>	<i>Stakeholder (role)</i>	<i>Consultation method</i>
DG ECHO Field	DG ECHO Head of Regional Office	Interview
DG ECHO Field	DG ECHO Regional Protection Expert	Interview
DG ECHO Field	DG ECHO Programme Officer (Regional Office)	Interview
DG ECHO partners	UNHCR Regional Office	Interview
Coordination mechanism	(Former) Regional Protection Sector Co-lead (UNHCR)	Interview
Coordination mechanism	OCHA Regional Office	Interview
Coordination mechanism	RMD Coalition	Interview
Coordination mechanism	Regional R4V Platform (UNHCR and IOM)	Group interview

Stakeholder group	Stakeholder (role)	Consultation method
Total: 8 interviews (of which 1 group interview)		

Table 23. Chad

Stakeholder group	Stakeholder (role)	Consultation method
DG ECHO Field	Head of Office	Group interview
DG ECHO Field	Technical Assistant	
DG ECHO Field	Programme Assistants (2)	
UNHCR Field	Deputy Protection Representative – N'Djamena	Group interview
UNHCR Field	Deputy Operations Representative – N'Djamena	
UNHCR Field	Associate Programme Officer – Baga Sola	Group interview
UNHCR Field	Livelihoods Associate – Baga Sola	
UNHCR Field	Associate Cluster Protection Officer – Baga Sola	
UNHCR Field	Senior Registration Assistant – Baga Sola	
UNHCR Field	Assistant Protection Officer – Baga Sola	
UNHCR Field	Senior Protection Assistant – Baga Sola	
UNHCR Field	Community-based Protection Associate – Baga Sola	
UNHCR Field	Field Associate – Baga Sola	
UNHCR Field	Field Associate – Baga Sola	
UNHCR Field	Associate Field Officer – Baga Sola	
UNHCR Field	Field Assistant – Baga Sola	
UNHCR Field	Assistant field safety adviser	
Implementing partner	Lutheran World Federation (LWF) – N' Djamena	Interview
Implementing partner	HIAS – N'Djamena	Interview
Implementing partner	CIAUD – Baga Sola	Group interview
Implementing partner	AIRD – Baga Sola	
Implementing partner	HIAS – Baga Sola	
Implementing partner	LMI – Baga Sola	
Implementing partner	CRT – Baga Sola	
Implementing partner	JRS – Baga Sola	
Implementing partner	IRC – Baga Sola	
Implementing partner	Intersos – Baga Sola	
Framework partner	IRC – Senior Protection Manager	Interview
National authorities	CNARR – Baga Sola	Interview
National authorities	CNARR – N'Djamena	Interview
National authorities	Ministry of Women, Family and Child Protection	Group interview

Stakeholder group	Stakeholder (role)	Consultation method
Other EU institutions	EU Delegation – Resilience/Nexus Programme Officer	Interview
Other stakeholders	Protection Cluster Coordinator – N'Djamena	Interview
Other stakeholders	CCM/Shelter cluster coordinator – N D'jamena	Interview
Other humanitarian actors	OCHA – Baga Sola	Interview
Other Humanitarian actors	OCHA – N' Djamena	Interview
Other humanitarian actors	Baga Sola: COOPI BCI HELP IHDL SoS village ACF ALIMA CICR COOPI Association des femmes juristes Concern Worldwide Oxfam Intersos Care OCHA UNFPA WFP UNDP IOM CRT	Group interview
Total: 16 interviews (of which 6 group interviews)		

Table 24. Jordan

Stakeholder group	Stakeholder (role)	Consultation method
DG ECHO	Head of Office – Amman Office	Group interview
DG ECHO	Field Officer – Amman Office	
DG ECHO	Regional protection expert	
UNHCR	Senior Protection Officer (continuous registration) – Amman	Group interview
UNHCR	Protection Officer (continuous registration) – Amman	
UNHCR	Senior Protection Officer (capacity development) – Amman	Interview
UNHCR	Senior Protection Officer (legal) – Amman	Interview
UNHCR	Senior Interagency Coordination Officer	Interview
UNHCR	Assistant Protection Officer - representative of the Chairs of the Protection Working Group	Group interview
UNHCR	Responsible for funding and partnerships	Interview
UNHCR	UNHCR Head of Field Office Zaatari	Group interview
UNHCR	Protection Officer – Zaatari camp	
UNHCR	Protection Officer – Zaatari camp (registration)	
Implementing partner	Arab Renaissance for Democracy and Development (ARDD) - Amman	Group interview
Implementing partner	Arab Renaissance for Democracy and Development (ARDD) – Zaatari camp	
Implementing partner	Jordan River Foundation (JFR)	Group interview
DG ECHO Framework Partner and Implementing partner	CARE – Protection Officer in Azraq camp	Group interview
DG ECHO Framework Partner and Operational partner	UNFPA protection officers – Zaatari camp (various)	Group interview
DG ECHO Framework Partner and Operational partner	IOM – Country Director	Group interview
Framework Partner and Operational partner	IOM – Officer	
Framework Partner and Operational partner	NRC – Country Director	Interview
Framework Partner and Operational partner	Plan International – Protection Officer	Interview
Framework Partner and Operational partner	UNICEF – Child Protection Coordinator	Interview
Framework Partner and Operational partner	INTERSOS – Head of Mission	Interview

Stakeholder group	Stakeholder (role)	Consultation method
National authorities	Syrian Refugee Affairs Directorate (SRAD)	Group interview
National authorities	Refugee Affairs Coordination Office (RACO)	
National authorities	Ministry of Planning and International Cooperation (MOPIC)	
National authorities	Sharia Court – Zaatari camp	Interview
Other stakeholders	INGO Forum (JIF): Senior coordinator Medair (member) International Rescue Committee (member)	Group interview
Other stakeholders	Jordan National Forum (JONAF) Coordinator Community Media Network	
Total: 20 interviews (of which 11 group interviews)		

Table 25. Bangladesh

Stakeholder group	Stakeholder (role)	Consultation method
DG ECHO Field	Technical Assistant - Cox's Bazar	Interview
DG ECHO Field	Head of Office - Dhaka	Interview
UNHCR	Head of Operations - Cox's Bazar Office	Interview
UNHCR	Senior Protection Officer - Cox's Bazar Office	Group interview
UNHCR	National Protection Officer - Cox's Bazar Office	
UNHCR	Donor Relations Officer - Cox's Bazar Office	Interview
UNHCR	Senior Protection Officer (CBP) – Cox's Bazar Office	Interview
UNHCR	Senior Inter-Agency Coordinator - UNHCR Regional Office, Bangkok	Interview
Inter-Sector Coordination Group (ISCG)	Principal Coordinator, Policy Officer, Senior External Relations Coordinator	Group interview
Total: 8 interviews (of which 2 group interviews)		

A4.2 KEY INFORMANT INTERVIEWS

Table 26. KIIs completed (Venezuela crisis component)

Stakeholder group	Stakeholder
DG ECHO HQ	Nicolas CUESTA (Desk Officer – Former LAC Team Leader)
DG ECHO Field	Andres TRIVINO (Programme officer – Regional Office Panama)
DG ECHO Field	Corita TASSI (Regional Protection Expert – Regional Office Panama)
DG ECHO Field	Roman MAJCHE (Programme Officer for South Cone – Regional Office Panama)
DG ECHO Field	Joelle VAN WINGHEM (Regional Health Expert – Regional Office Panama)
DG ECHO Field (now independent)	Ashkan ALIZADEH (Former Health Expert 2018-2020)
Other EU institutions	Nicolas Muller (DG INTPA HQ)
Other EU institutions	Kostantin von Mentzingen (EEAS HQ)
Framework partners	DIAKONIE (Colombia)
Framework partners	WFP (Venezuela) (6 interviewees)
Framework partners	UNHCR (Regional Office Panama)
Framework partners	UNICEF (Peru)
Framework partners	CARITAS (Brazil)
Framework partners	UNICEF (Venezuela)
Framework partners	IRC (Peru)
Framework partners	IRC (Venezuela)
Framework partners	GERMAN RED CROSS (Colombia and Venezuela)
Framework partners	ACF (Colombia)
Framework partners	SAVE THE CHILDREN (Regional)
National R4V platforms	R4V Brazil
National R4V platforms	R4V Peru (IOM)
National R4V platforms	R4V Peru (UNHCR)
Cluster/Sectors	Former Regional Protection Sector Lead (UNHCR)
Cluster/Sectors	FSN Cluster Colombia (WFP)
Cluster/Sectors	Shelter Cluster Venezuela (UNHCR)
Other donors	AECID HQ
Other donors	AECID Regional (Panama)

Table 27. KIIs completed (DG ECHO-UNHCR partnership component)

Stakeholder group	Stakeholder
DG ECHO	
DG ECHO HQ	Alexandre PORTERET (Focal Point for Forced Displacement)
DG ECHO HQ	Benjamin LEMERLE (Desk Officer for relations with UNHCR)
DG ECHO HQ	Susanne MALLAUN (Head of Unit – Strategic partnerships)
DG ECHO HQ	Arianna SGAMOTTA (Communication and visibility)
DG ECHO Field	DG ECHO Country Office Lebanon
DG ECHO Field	DG ECHO Country Office Myanmar
DG ECHO Field	DG ECHO Country Office Afghanistan
DG ECHO Field	DG ECHO Country Office South Sudan
DG ECHO Field	DG ECHO Country Office Türkiye
DG ECHO Field	DG ECHO Country Office Uganda
DG ECHO Field	DG ECHO Country Office Ethiopia
Other EU institutions	EUDEL Geneva
Other EU institutions	DG HOME
UNHCR	
UNHCR HQ	External Relations Officer
UNHCR HQ	Communications Unit
UNHCR HQ	Global Issues Unit (2 interviewees)
UNHCR HQ	Former Head of EU Visibility Team
UNHCR HQ	Associate Head of Service
UNHCR Field	UNHCR Regional Bureau East and Horn of Africa and the Great Lakes region
UNHCR Field	UNHCR Country Office Afghanistan
UNHCR Field	UNHCR Country Office Türkiye
UNHCR Field	UNHCR Country Office Lebanon
UNHCR Field	UNHCR Country Office Kenya
UNHCR Field	UNHCR Country Office Myanmar
UNHCR Field	UNHCR Country Office Brazil
UNHCR Field	UNHCR Country Office Uganda
UNHCR Field	UNHCR Country Office Ethiopia
UNHCR Field	UNHCR Country Office South Sudan
Other donors	Germany

ANNEX 5 ONLINE SURVEY RESULTS

A5.1 ONLINE SURVEY FOR DG ECHO PARTNERS

Two online surveys were conducted as part of the fieldwork and consultation process with the purpose of collecting primary quantitative and qualitative data on (i) DG ECHO interventions in response to the Venezuela crisis and (ii) DG ECHO-UNHCR partnership.

This report analyses the responses to the online survey on the first component of the combined evaluation, i.e., DG ECHO's response to the Venezuelan crisis. As a key part of the evaluation, it collects DG ECHO Framework Partners' views on the design, implementation and functioning of DG ECHO funded actions in response to the Venezuelan regional crisis over the period 2017-2021.

In total, the survey received 39 responses, which were analysed by the in-house data team in ICF. The survey was launched on 23 January 2023 and closed on 31 March 2023. This report presents a full overview of results, which will be used to inform some of the evaluation questions of the study.

The table below summarises some key elements of this activity:

Table 28. Overview of different elements from the survey.

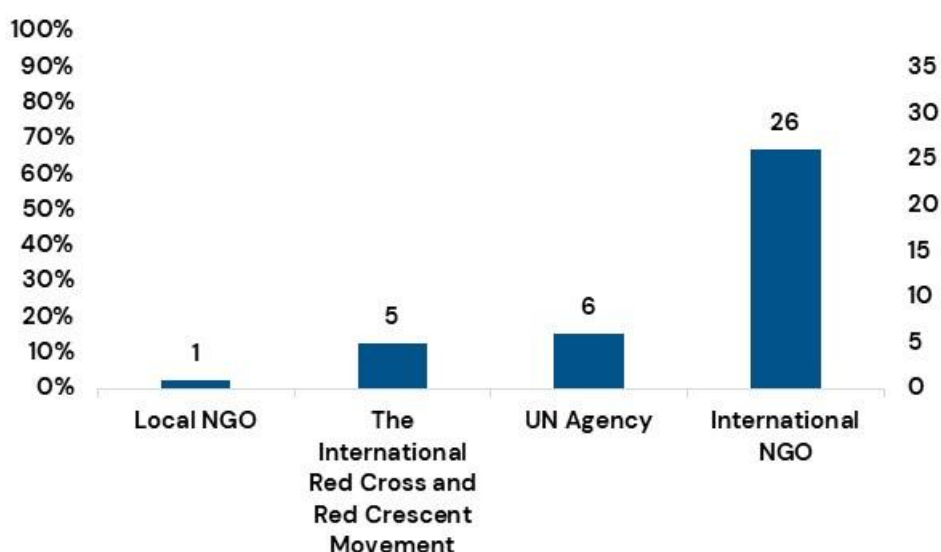
Overview of the survey	
Objective of the survey	To understand the main features of the design, implementation and functioning of DG ECHO funded actions, including key challenges, enabling factors and good practices in response to the Venezuelan regional crisis over the period 2017-2021.
Link to evaluation questions	Relevance, coherence, effectiveness, efficiency, EU added value, sustainability
Stakeholders to be targeted	Framework partners including UN Agencies, (I)NGOs and International Organisations (IOs) implementing projects in response to the Venezuelan regional crisis over the period 2017-2021.
Structure of the questionnaire	This survey is composed by 44 questions divided into 7 sections as follows: Section 1 (5 questions) – General information about the organisation of the respondent and DG ECHO funded actions Section 2 (7 questions) – Relevance of DG ECHO's response Section 3 (4 questions) – Coherence of DG ECHO's response Section 4 (16 questions) – Effectiveness of DG ECHO's response Section 5 (3 questions) – Efficiency of DG ECHO's response Section 6 (8 questions) – Sustainability of DG ECHO's response Section 7 (2 questions) – EU Added Value of DG ECHO's response
Language	English
Software	Qualtrics
Tool for dissemination	Dissemination via email by ICF based on a list of contacts sent by the Commission. This list included DG ECHO NGO, IOs and MSSA partners. Initially, contacts were encouraged to further disseminate the survey to key members of their staff. Since it was not possible to know whether the preliminary contacts were disseminating the survey, it was decided to directly send the survey to contacts extracted from the funded action's Single Forms.

Overview of the survey	
Timing of implementation	The survey was launched on 23 January 2023 and closed on 31 March 2023. The dissemination to additional contacts was conducted on 8 February 2023. It remained open for 10 weeks. Reminders were sent on 22 February 2023.

A5.1.1 Section I: General background information

A5.1.1.1 Type of organisation of respondents

Figure 5. Q1 Which organisation do you work for? (n=39)



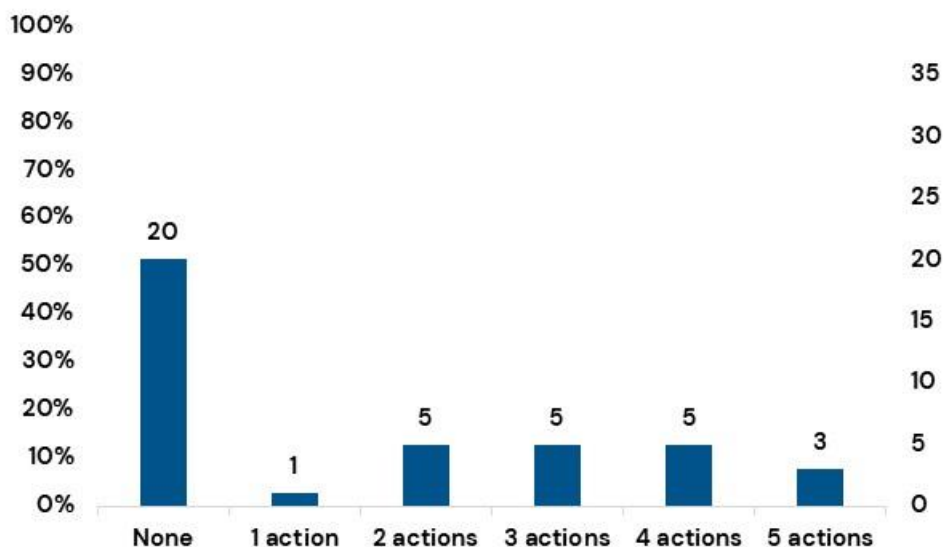
Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Table 29. Name of respondents' organisations (n=39)

Organisation type	Organisation names
International NGOs	Action Against Hunger (3), Danish Refugee Council (2), Humanity & Inclusion (2), Ayuda en Acción (1), Caritas Germany (1), Caritas Germany and Caritas Switzerland (1), CESVI (1), COOPI Cooperazione Internazionale (1), Italian Association for Solidarity among People (AISPO) (1), Médicos del Mundo España (1), Mercy Corps (1), Norwegian Refugee Council (1), OXFAM Intermón (1), Première Urgence Internationale (1), Save the Children (1), Save the Children Sweden (1), Secours Catholique - Caritas France (1), Solidarites International (1), Télécoms Sans Frontières (1)
UN Agencies	UNICEF (2), PAHO/WHO (2), FAO (1), IOM (1)
International Red Cross and Red Crescent Movement	German Red Cross-Colombia (1), IFRC (1), Sociedad Nacional de la Cruz Roja Colombiana (1), Spanish Red Cross (1)
Local NGO	Oficina de Derechos Humanos del Vicariato Apostólico de Puerto Ayacucho (1)

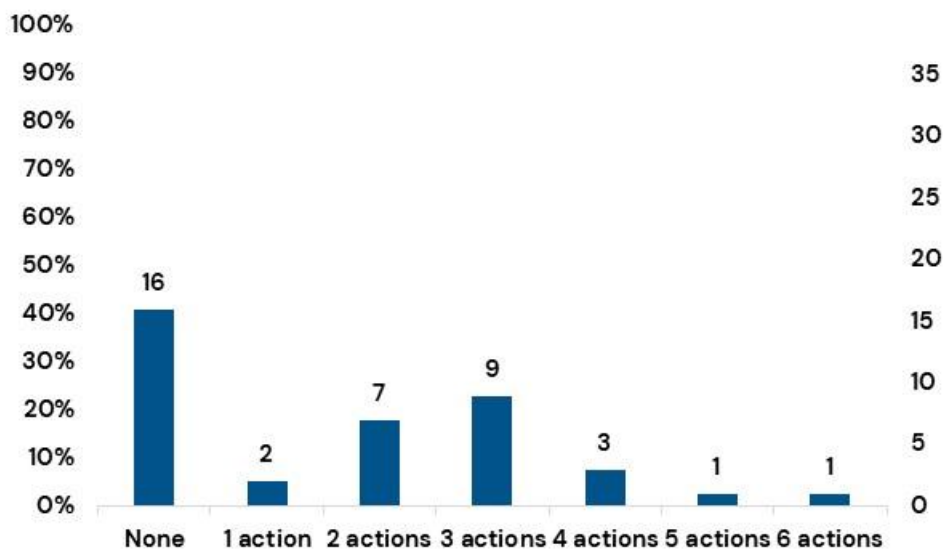
A5.1.1.2 Number of DG ECHO funded actions

Figure 6. Q2A In ow many actions funded by DG ECHO in response to the Venezuelan regional crisis were you directly involved as a *manager*? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

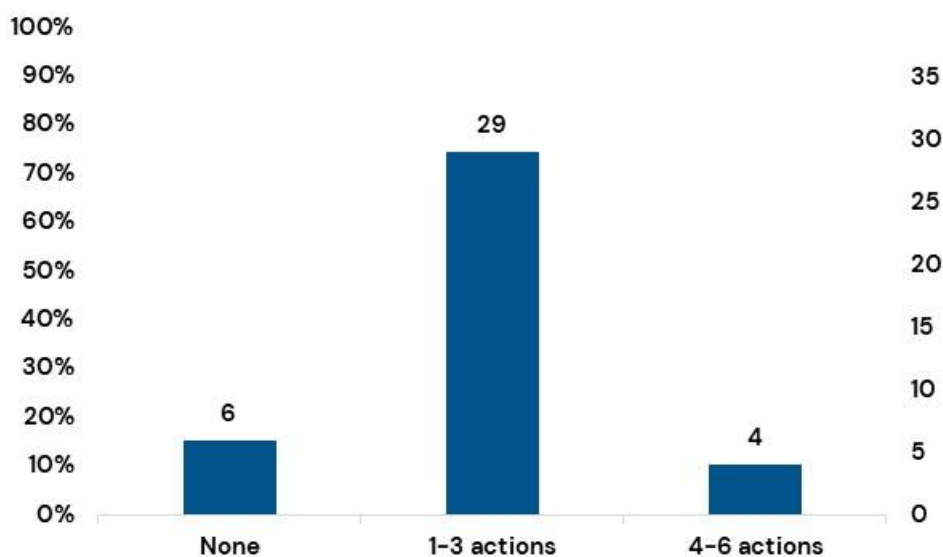
Figure 7. Q2B In ow many actions funded by DG ECHO in response to the Venezuelan regional crisis were you directly involved as a *team member*? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

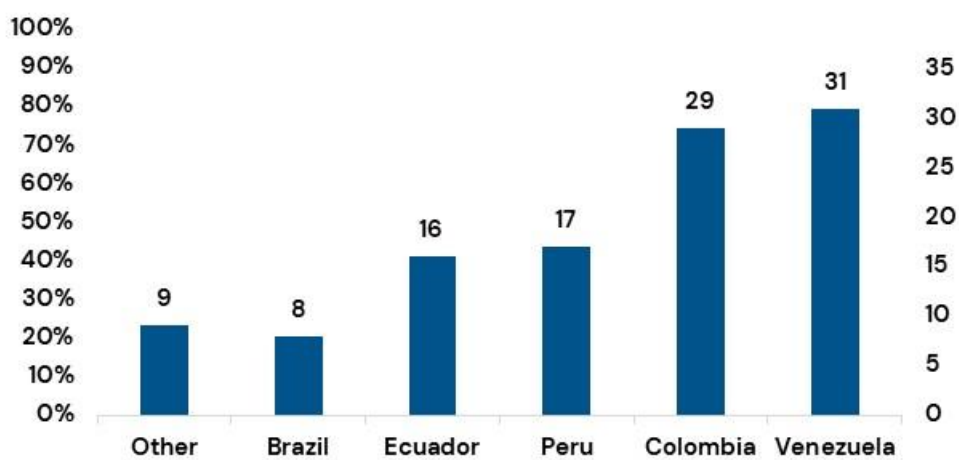
A5.1.1.3 Country coverage of DG ECHO funded actions

Figure 8. Q3 How many of these actions were multi-country? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Figure 9. Q4 In which countries did the actions take place?

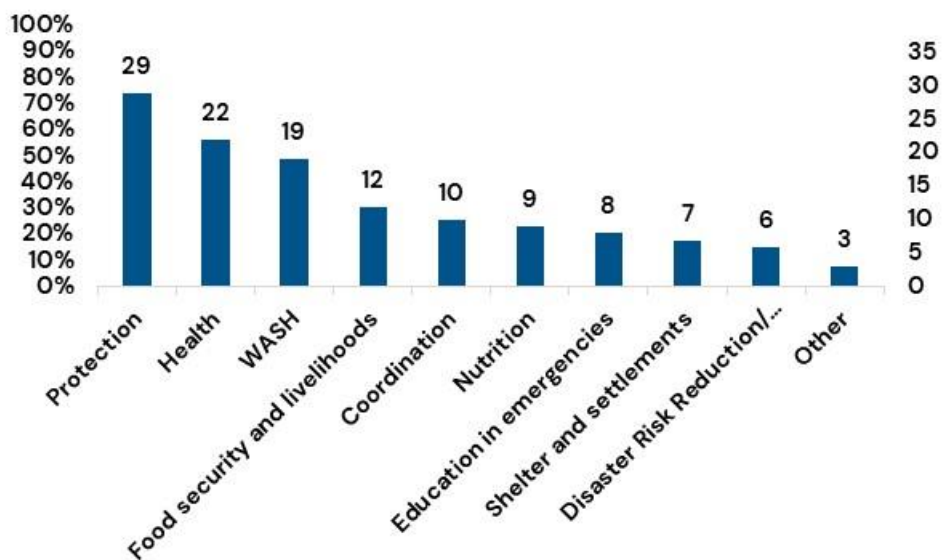


Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Other. Trinidad and Tobago (5), Bolivia (3), Aruba (1), Curaçao (1), Dominican Republic (1), Honduras (1), Guatemala (1), El Salvador (1).

A5.1.1.4 Thematic focus of DG ECHO funded actions

Figure 10. Q5 What was the main thematic focus of your organisation's actions that received DG ECHO funding in response to the Venezuelan regional crisis?



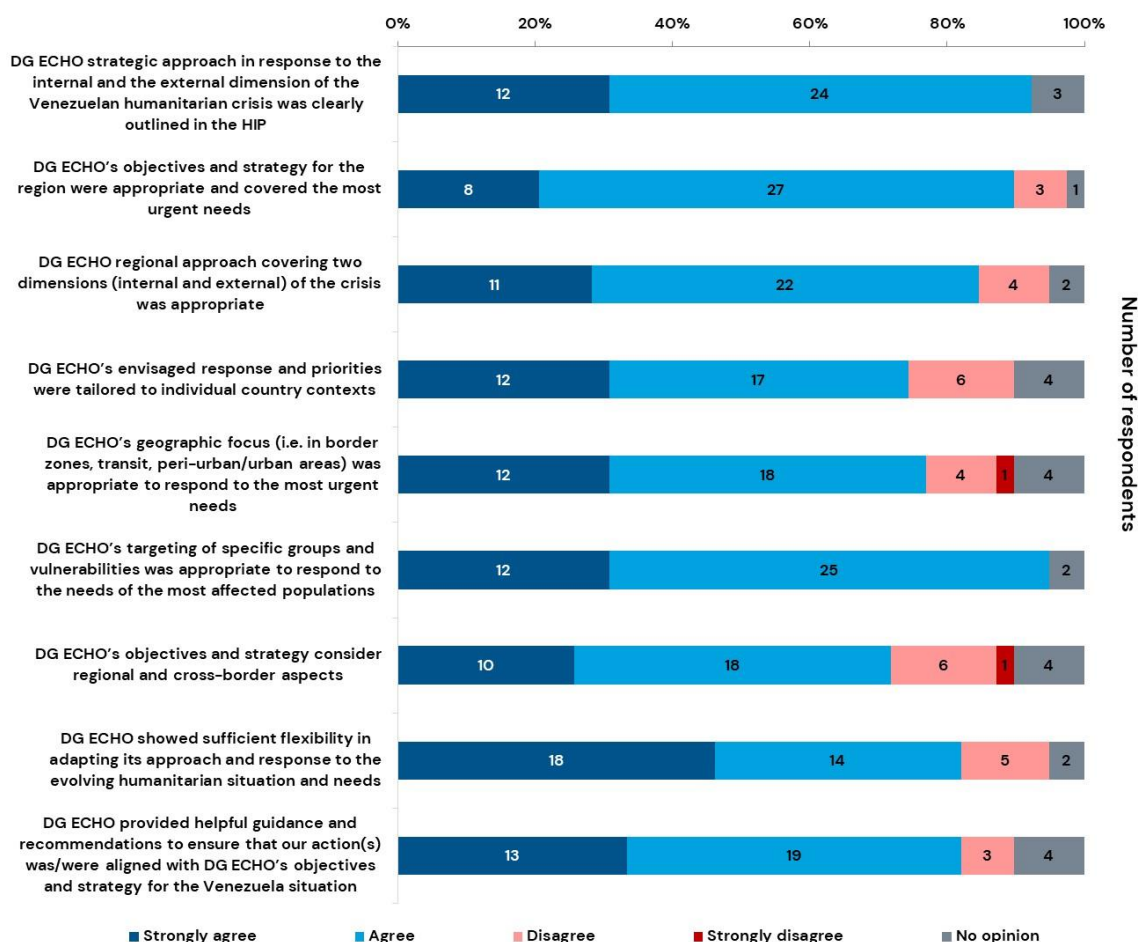
Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Other. Disability (1), MPC (1), information management (1), emergency (1) and CASH (1)

A5.1.2 Section II: Relevance of DG ECHO's Strategy and response to the Venezuelan regional crisis during the period 2017-2021

A5.1.2.1 DG ECHO strategy in response to the Venezuelan crisis

Figure 11. Q6 To what extent do you agree with the following statements regarding DG ECHO strategy in response to the Venezuela situation? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question include:

Geographical coverage. DG ECHO attempted to emphasize a geographical coverage where the presence of international NGOs was lower, in order to assist prioritised populations in unattended areas. However, other respondents acknowledged that it would have been strategic to include as a priority response actions in affected host communities

Sectoral coverage. DG ECHO's prioritised sectors of intervention do not always fully respond to the needs on the ground. Food Security and Livelihoods is never prioritized by DG ECHO (only as a complementary action) but is always among the population's most pressing needs.

Flexibility in the response. Respondents valued DG ECHO as a flexible partner who is receptive to adapting actions based on the evolution of the crisis and humanitarian needs. However, they would benefit if administrative procedures to exercise this flexibility were also simplified and expedite, and more flexibility was integrated into the design stage to favour flexibility since the beginning of the actions.

Coordination activities. Overall, DG ECHO is seen as a promoter of coordination efforts to ensure a timely response to the Venezuela crisis. With the establishment of its office in Caracas, it has further facilitated these efforts in a transparent and efficient manner. Nevertheless, the relationship with the UN system in Venezuela is and remains unclear.

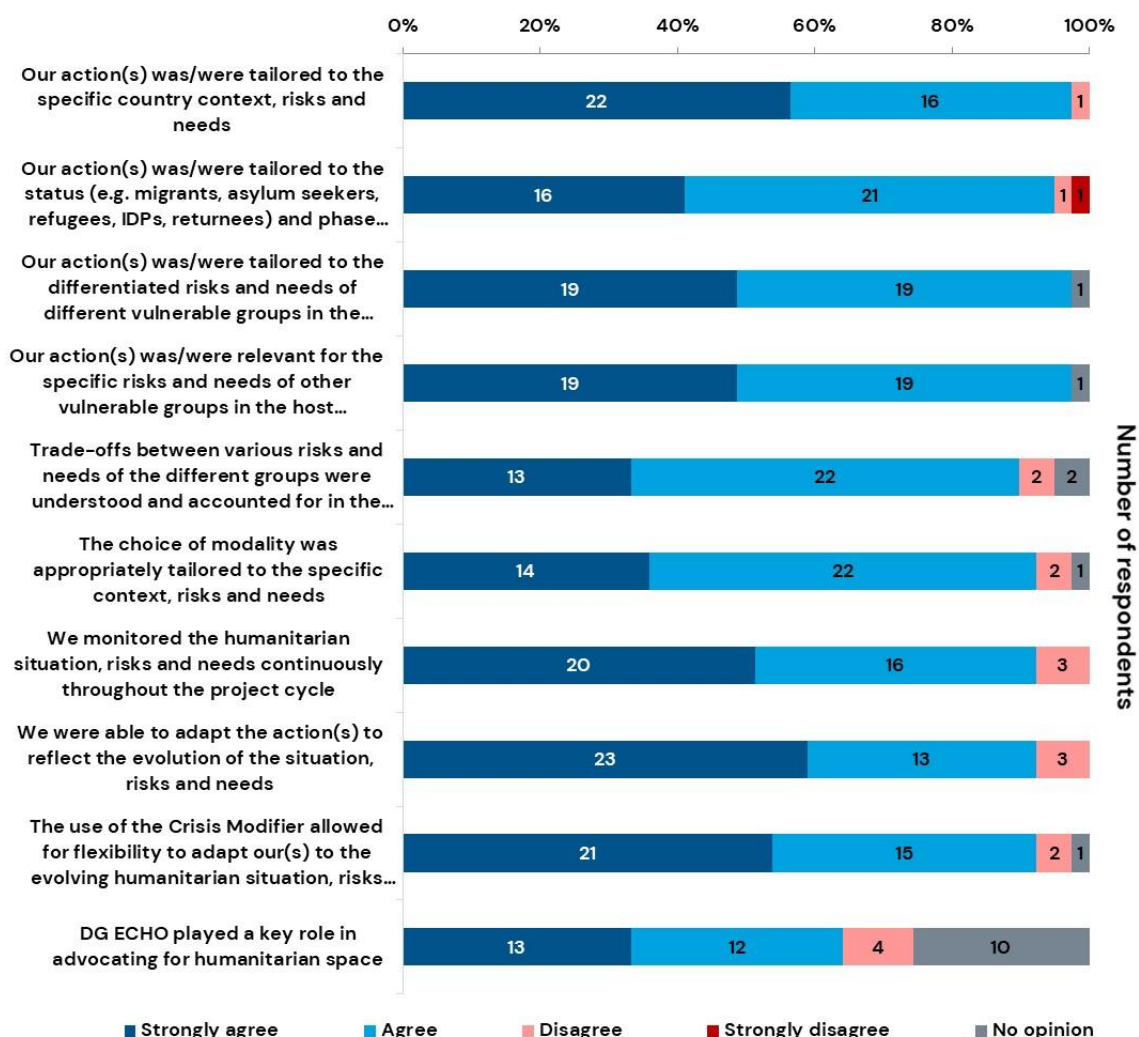
Advice support from DG ECHO. Complaints about contradicting feedback or recommendations on how to design interventions to respond to DG ECHO's priorities from DG ECHO HIPTAs and thematic experts. Other respondent emphasized that limited technical advice was provided between 2020 and 2021 from DG ECHO, only operational advice was provided.

Regional multi-country approach. The geographical focus was reported as adequate; however, border and transit zones in some parts of the region are considered to be over-served, leaving behind areas of arrival of migrants where there is no presence of any humanitarian organisation. DG ECHO's approach to a regional response seemed primarily administrative-based, i.e., simplifying contract management through multi-country actions, rather than a result of a strategic approach. The context, caseloads and response are different in each country and therefore achieving a proper cross-border, regional approach is a challenge. While a regional approach is sensible and desirable (beyond contract management), operationalizing it is difficult as very often the systems are not fit for cross border collaboration (e.g., setting up referral systems across countries, border-crossing monitoring, etc.). Finally, regional (multi-country) interventions were at different points in time encouraged (to provide a comprehensive response to persons on the move) and discouraged (because it is easier for DG ECHO to manage separate grant contracts, one per country).

Evolution of the crisis. The nature of the Venezuelan crisis in the region has been evolving since 2019, initially requiring emergency humanitarian assistance, while years later the need to generate a more dynamic humanitarian-development nexus was noticed. It would therefore be pertinent for the objectives and strategy to shift gradually to this process. Even if the HIP is focused on emergency activities, resilience activities are more appropriate to propose a context of adapted response.

A5.1.2.2 Relevance of the funded actions

Figure 12. Q7 To what extent do you agree with the following statements regarding the relevance of your funded action(s)? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question include:

Flexibility in needs assessment. DG ECHO has considered the tools to analyze the different needs in the country through an open dialogue and evolving in a positive way so that all its partners respond in the best possible way and adapt to the challenging context of the country.

Reprioritisation of needs and risks due to funding constraints. Partners reported that actions are initially tailored to the specific country context, risks and needs. However, after the assessment of proposals DG ECHO usually asks partners to reduce the requested funding, pushing them to redesign the actions prioritising needs and risks.

Tailoring to status. DG ECHO correctly adapted to the status of each profile, especially those in an irregular situation. However, within Venezuela, there was a lack of emphasis on the "people left behind" who for various reasons were unable to migrate to other countries in the region. Also, the particular needs and risks of the host communities were partially recognised.

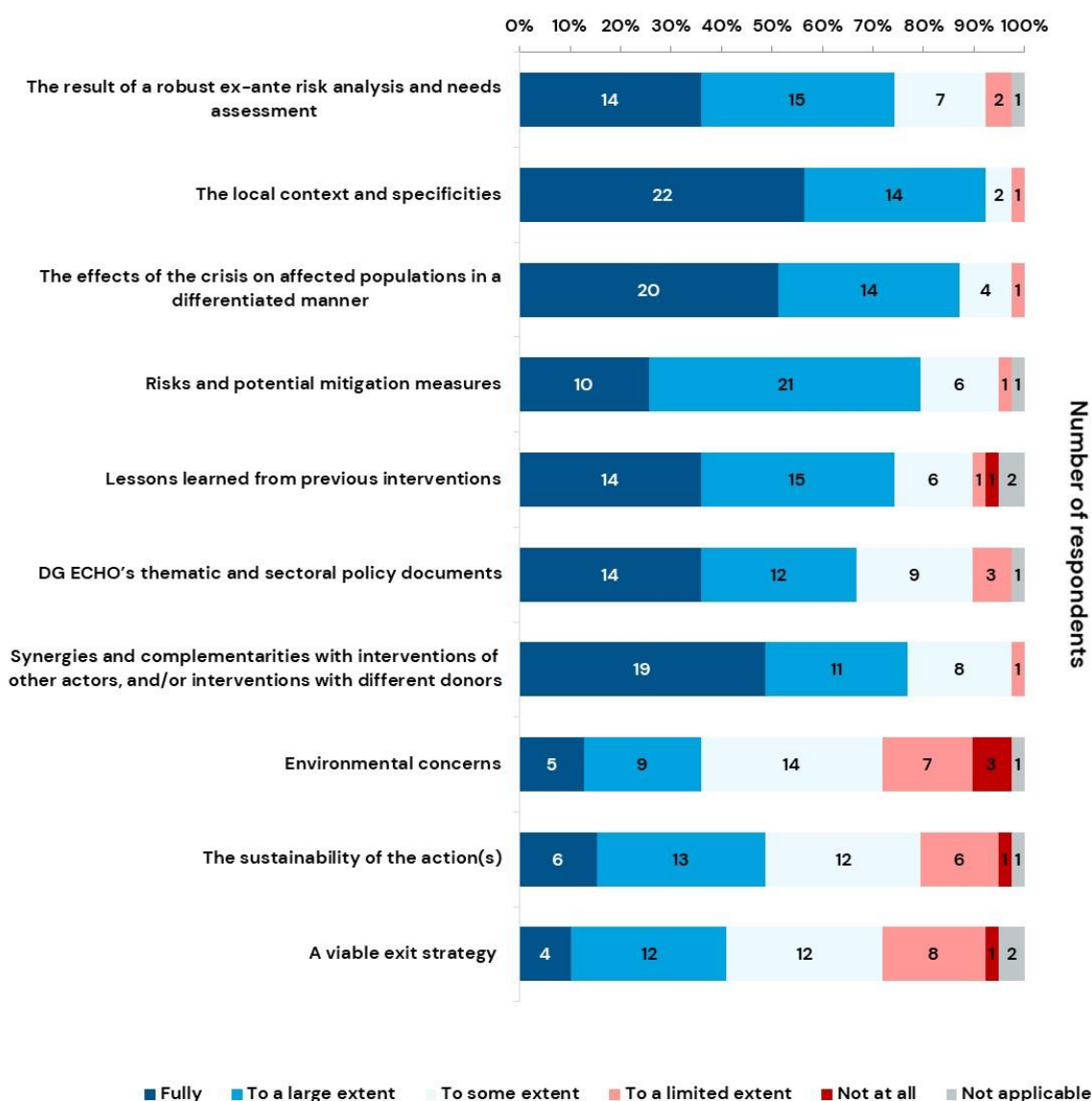
Limited relevance for some neighbouring countries. It would be important to further develop DG ECHO's objectives and strategy for South American countries such as Ecuador, Peru and Bolivia,

given that the HIP is developing a general strategy for this area, which has played an important role in the context of the migratory crisis from Venezuela.

Use of crisis modifiers. Although not all partners used crisis modifiers, those who did highlighted it as a key tool for addressing in a very short period of time new emergency situations faced in the country. Some partner used CM during the Covid-19 pandemic, although with mixed experiences.

A5.1.2.3 Design and implementation of the actions

Figure 13. Q8 To what extent did the design and implementation of your action(s) take account of the following? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question include:

Limited capacity for robust risk assessments. Robust risk assessments require huge funding, which is difficult for partners to conduct in several countries.

Sustainability concerns. Respondents reported some difficulties to ensure sustainability in the actions, although with some positive examples. In one case, sustainability is enhanced by the

participation and capacity building of local partners (local CSO) with permanent presence in the intervention areas. Similarly, DG INTPA is trying to improve livelihoods of women victims of violence who have been identified and were recipients of services in the framework of DG ECHO actions.

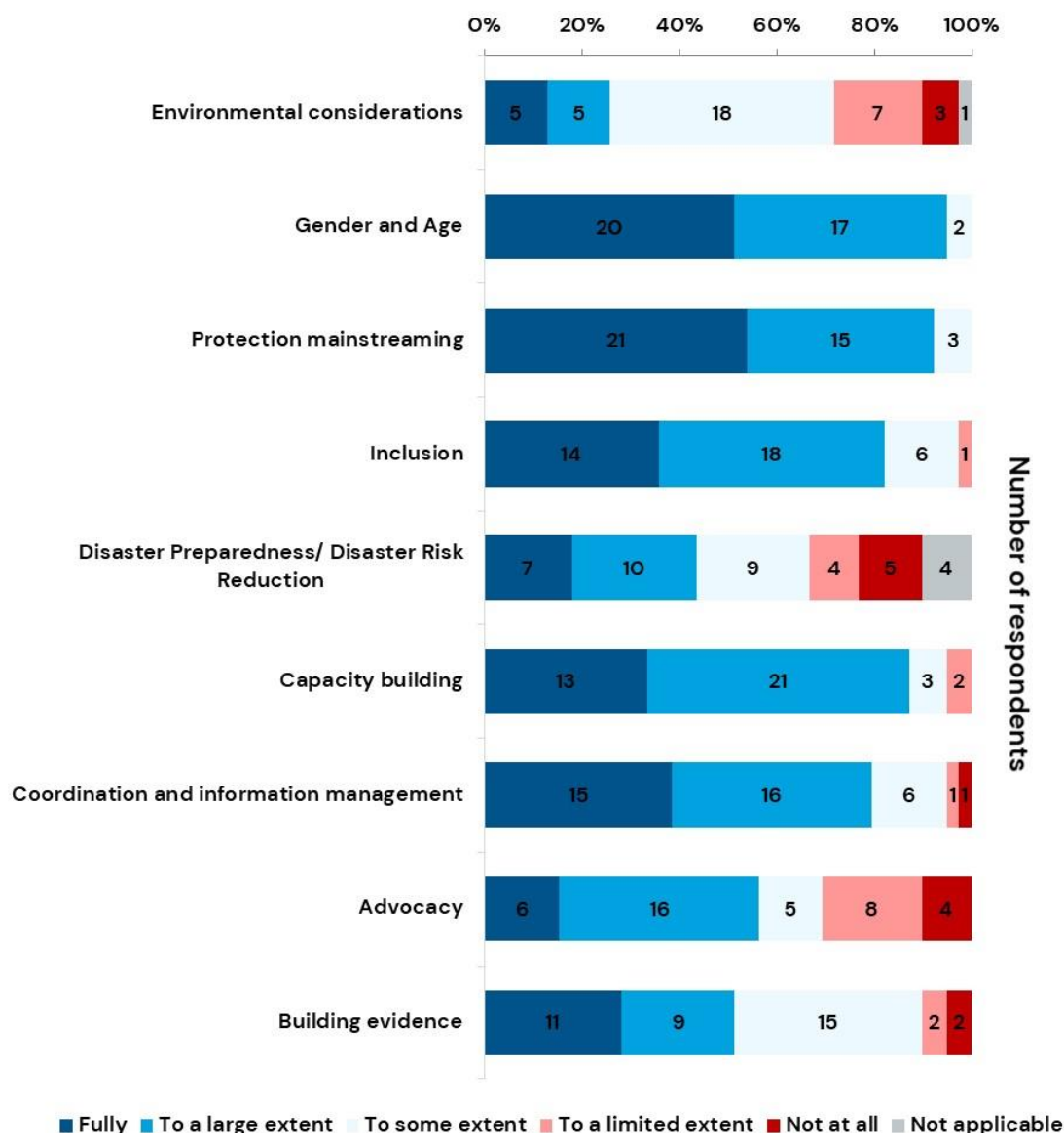
Viability concerns regarding exit strategy. Respondents showed concerns on the viability of exit strategies due to the enormous and increasing needs of the Venezuelan population. For instance, UNICEF considered that it will be critical for DG ECHO to engage closely with other EU partners, such as DG INTPA, to advocate for additional nexus/development funding to be invested in support of Venezuelans and other migrants and refugees in host countries. As an example, one action closed operations in Bolivia, where the local implementing partner continues established coordination with UNHCR to continue the support for vulnerable migrants.

Gradual inclusion of environmental concerns. One respondent highlighted that environmental considerations are being gradually incorporated in the actions financed by DG ECHO and other donors.

Difficulties in daily working conditions. Respondents reported that the lack of official information, hyperinflation, migration, and polarized political and economic situation created very difficult work conditions.

A5.124 Horizontal aspects in design and implementation of actions

Figure 14. Q9 To what extent did the design and implementation of your action(s) take into account the following horizontal issues? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question include:

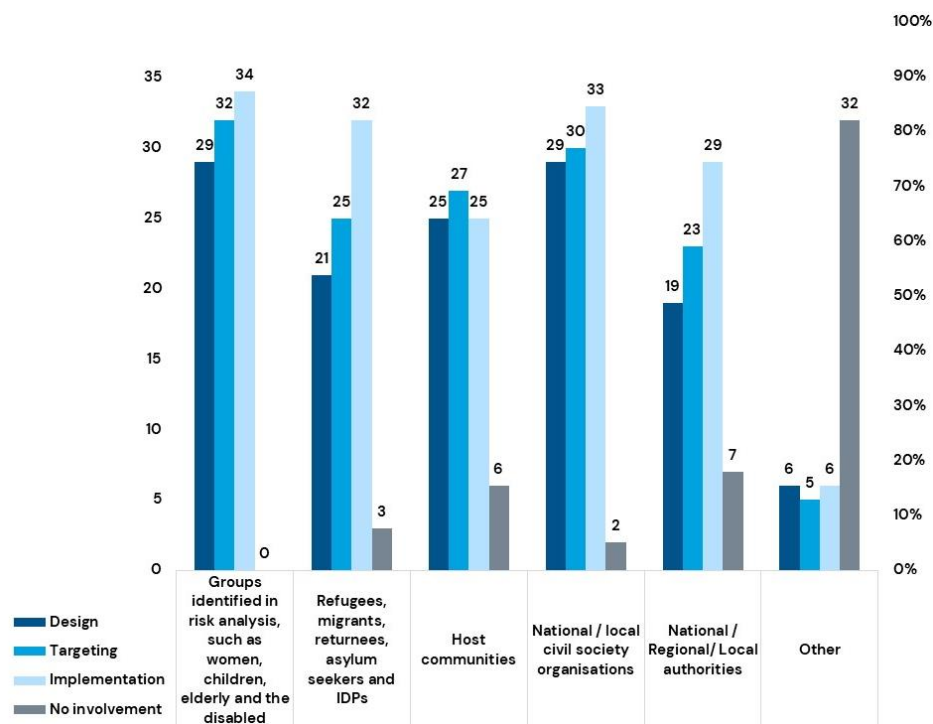
Increasing inclusion of cross-cutting issues. DG ECHO-funded actions have been increasingly involving cross-cutting issues based on needs and risk analysis and the context of each of the implementing partners and prioritised areas.

Central role of protection mainstreaming. Protection mainstreaming has been the basis for the integration of other approaches such as gender and age, inclusion, and capacity building.

Environmental considerations. One respondent was reluctant to the extent to which DG ECHO is able to fund environmental considerations.

A5.125 Involvement of actors in design, targeting and implementation of actions

Figure 15. Q10 Were the following groups involved in your action(s)? For each group, select the stage at which they were involved



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question include:

Inclusion of local communities and actors in decision-making. These actors are increasingly included in the design and implementation of projects.

Inclusion of groups in need of special protection in decision-making. Groups in need of special protection, refugees, migrants, host communities, grassroots organisations and migrant organisations participated in the design of the proposal through individual surveys and focus groups. These profiles were also defined as part of the prioritisation criteria for beneficiaries, who in turn provided feedback on how they expected the activities and deliverables to be developed and fed back into the process in the closing phase.

Hiring of local staff. In one action, half of the staff hired for the action was local (Brazilian) and half Venezuelan. This added value to the intervention and facilitated the interaction with the assisted communities.

A5.126 Challenges faced during needs assessment and beneficiary targeting

Table 30. Q11 Please indicate any specific challenges faced when conducting risks analysis and needs assessment

Action element	Key challenges	Specific challenges reported
Needs assessment	Security	Remote camps location Access difficulties Lack of trust from local authorities in new areas Presence of armed paramilitary groups

Action element	Key challenges	Specific challenges reported
		History internal military conflict
	Lack of access to communities	Problems with fuel delivery in Venezuela Difficulties in land access to some communities (e.g., Amazonas) Long distances to some communities Presence of armed paramilitary groups
	Lack of field capacity	Problems to recruit specialized staff Need to strengthen humanitarian standards of CSOs and national NGOs Limited involvement of local authorities Same staff required to work in several location
	Absence of reliable data	Lack of official data updated and no update of census since 2011 Low levels of primary data Problems to comply with monitoring indicators Poor humanitarian coordination
	Limitation of the humanitarian space	Territorial team coordination to be strengthened Problems to visit different locations for assessment Decentralization of the humanitarian country team Low visibility – beneficiaries think some organisations are part of the government
	Others	Time available to prepare proposals from publication of HIPs until deadline is not sufficient to allow in depth localized risk analysis and needs assessment based on DG ECHO's prioritisation
Beneficiary targeting	Security	Remote camps location Access difficulties Conflict environment Victims of human trafficking Complex and unstable situation especially in vulnerable areas where there is high presence and control from police/military
	Lack of access to communities	Problems with fuel delivery in Venezuela Isolation and long distances to some communities Difficulties in access to unpaved areas, especially during rainy season Need to target beneficiaries indirectly in some areas
	Lack of field capacity	Lack of reliable telecommunication Problems to recruit specialized staff Need to strengthen humanitarian standards of CSOs and national NGOs Limited involvement of local authorities
	Absence of reliable data	Lack of official data updated and no update of census since 2011 Low levels of primary data Problems to comply with monitoring indicators

Action element	Key challenges	Specific challenges reported
		Poor humanitarian coordination
	Limitation of the humanitarian space	Territorial team coordination to be strengthened Decentralization of the humanitarian country team Low visibility – beneficiaries think some organisations are part of the government Lack of clear regulation of INGOs in Venezuela
	Others	Implementation period for Action is too short for a complex poli-crisis like Venezuela, resulting in rapid punctual interventions instead of focusing on true strategic high-impact interventions and a fragmentation of humanitarian assistance efforts

Key points raised in the open question include:

Lack of openness about real needs. Some implementation areas have had the presence of armed actors and/or other actors such as trafficking networks that prevent beneficiaries from talking transparently about their needs.

Lack of reliable data. In the case of Venezuela, having reliable secondary sources was a challenge given the lack of statistical production and the Venezuelan government's closure of the space. This was overcome through the creation of our own monitoring instruments and in some cases the request to lower down DG ECHO's visibility standards in order to be able to develop actions in the field.

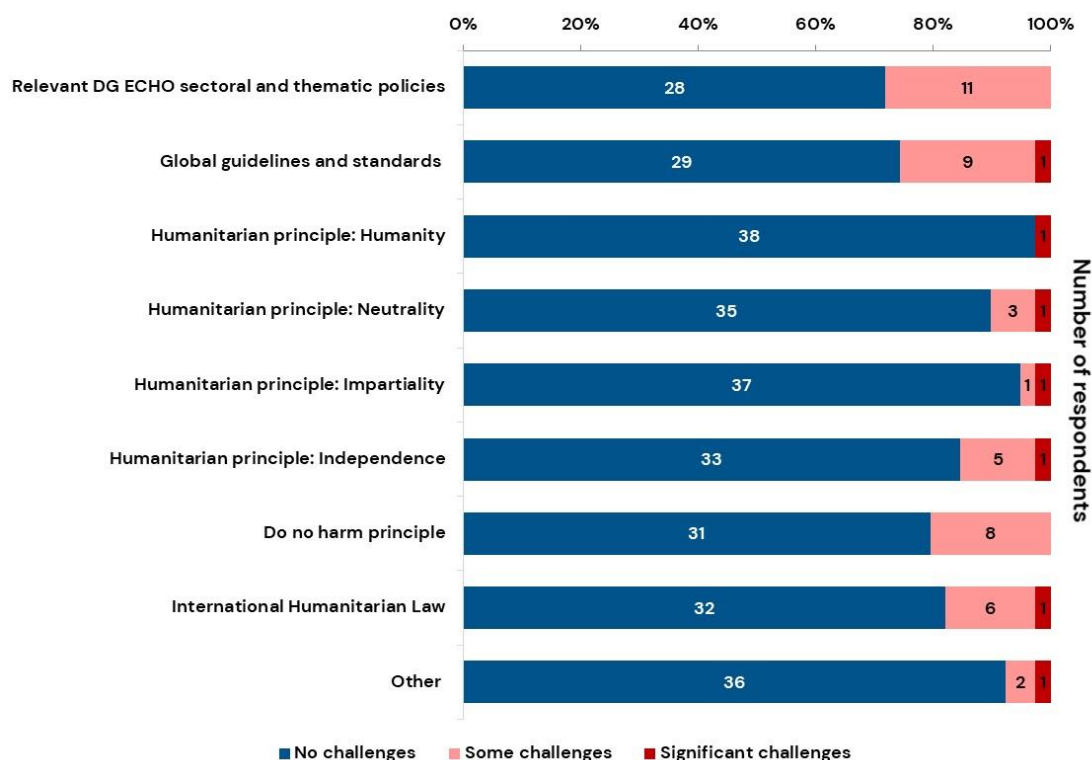
Concerns for different groups of people with disability. Need to incorporate reasonable adjustments of requirements for people with different types of disability (e.g., visual impairments, loss of audition, limitations in movements, intellectual disability)

Limited humanitarian space. The politicization of humanitarian aid in Venezuela especially in 2019 made it very difficult for humanitarian actors to gain access. This issue has improved for international organizations and UN System agencies, but for NGOs the humanitarian space continues to be a challenge.

A5.1.3 Section III: Coherence of DG ECHO's Strategy and response to the Venezuelan regional crisis during the period 2017-2021

A5.1.3.1 Alignment with DG ECHO policies and humanitarian principles

Figure 16. Q13 Please indicate if you encountered any challenges in aligning your action(s) with the following (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

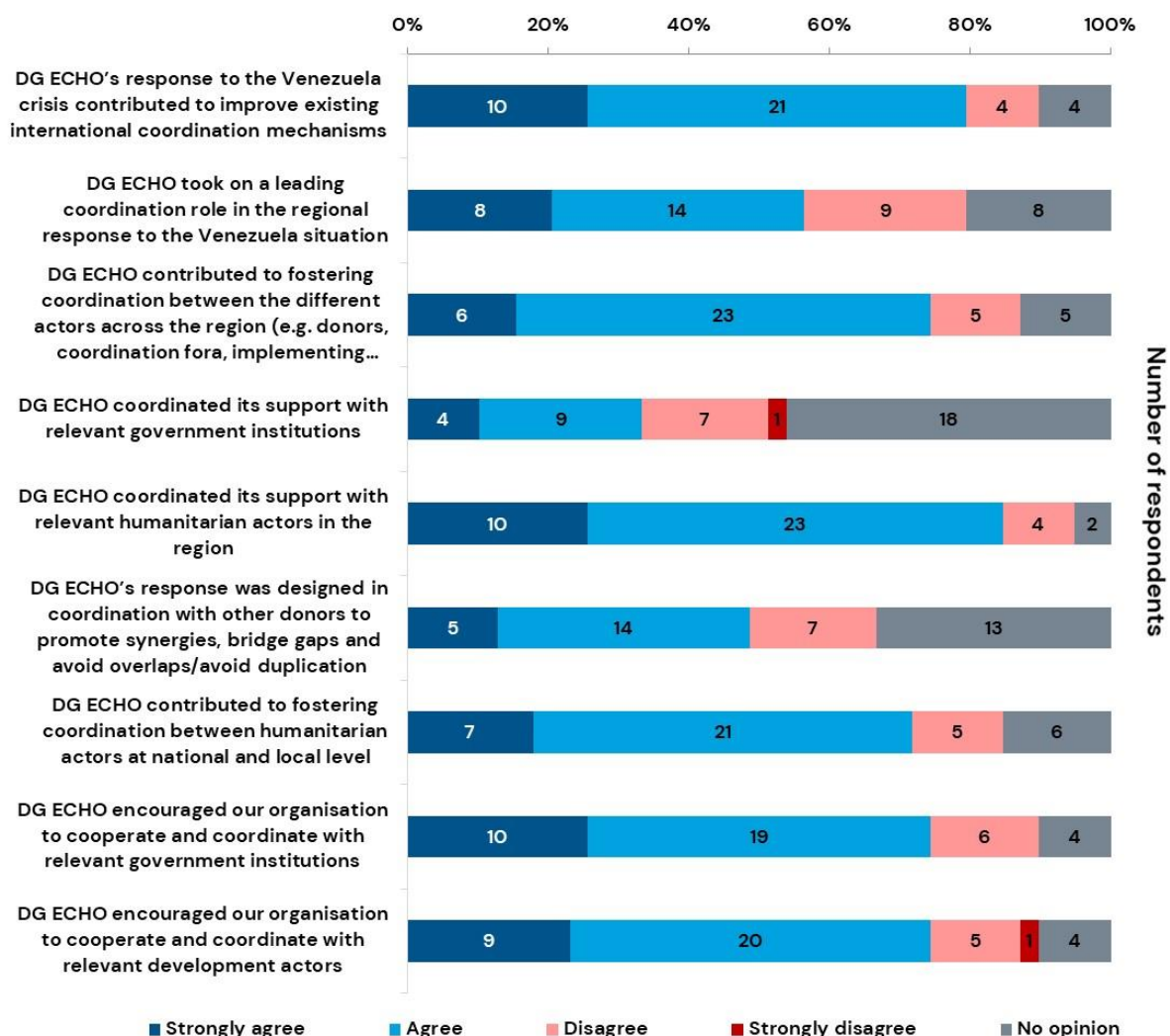
Key area	Specific challenges reported
Relevant DG ECHO sectoral and thematic policies	Discrepancies between DG ECHO's sectors and organisations' internal sectors Challenges in adapting the organisations' programming to what DG ECHO expects for each specific sector, especially protection Adapting the guidelines to legal local framework
Global guidelines and standards	Difficulties to implement in a restrictive environment Hard to reach because of the duration of projects
Humanitarian principle: Humanity	Governmental control not respecting the humanitarian space
Humanitarian principle: Neutrality	Due to working with government authorities (e.g. education), it is difficult to not to be perceived as aligned with them
Humanitarian principle: Impartiality	Not always easy to implement with local partners and authorities, due to political polarization in the country
Independence	Local authorities sometimes try to get organisations to work in places previously identified by them

	Since some actions are very donor-dependent, it is often challenging to truly prioritize the most urgent needs to follow the donors' agendas and priorities
Do no harm	The needs of host communities impacted by migration were not always prioritized. Need to improve humanitarian standard for actions implemented by local partners
International Humanitarian Law	Lack of information
Other	Lack of national statistics obliged to collect reliable data

Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

A5.1.3.2 Coordination of the actions

Figure 17. Q14 To what extent do you agree with the following statements in relation to coordination? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question included:

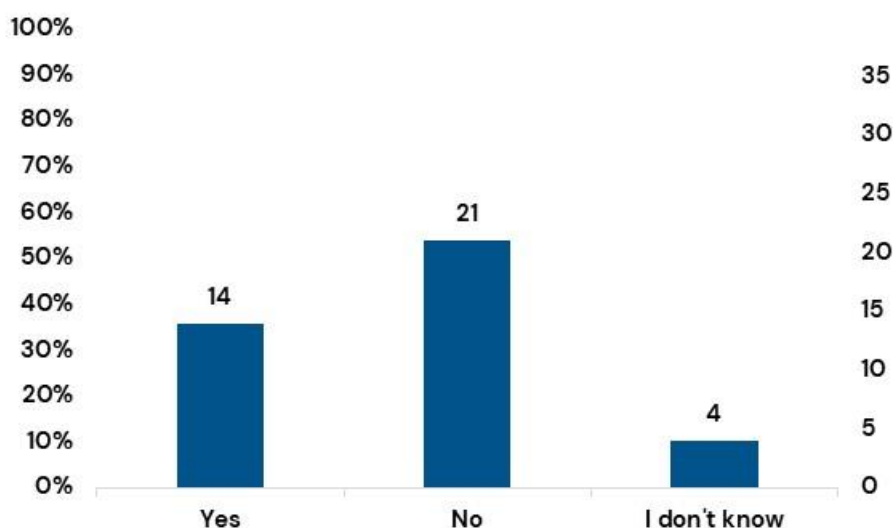
Advocacy and visibility efforts from DG ECHO. DG ECHO played an important role in advocacy and increasing visibility of the response, as well as mobilizing the international donor community to provide more resources through the (co-)organization of several high-level Solidarity Conferences

Lack of consideration of national organisations' agendas. DG ECHO has been a key donor in fostering coordination through structures designed to respond to mixed migration flows in the region such as GIFMM, GTRM, GTM. However, these coordination spaces sometimes respond only to the work agendas of the main UN funds or programmes and INGOs, leaving aside the priorities of national organisations.

Need to foster regular dialogues with partners. There has been a lack of coordination on DG ECHO's part to promote regular dialogue between its partners and the nexus with other donors promoting integration.

A5.1.3.3 Challenges in the coordination of the actions

Figure 18. Q15 Did your organisation encounter coordination challenges when designing and/or implementing your actions? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question included:

Networking with state organisations – Difficulties to communicate with state organisations, deinstitutionalisation in remote areas (e.g., the Mayor rules from the capital cities and is not present the municipality) and continuous changes in institutional landscape.

Unequal power of humanitarian organisations. UN's dominant role in country level coordination mechanisms often leaves little room for other actors (INGOs, local NGOs) and often leads to duplication of efforts as information is not shared transparently in coordination forums.

Differences in working strategies. Differences in organisation methodologies and strategies led to time-consuming harmonisation processes. For example, interagency coordination is difficult when a beneficiary needs to be identified with different criteria in order to be eligible for different actions from more than one sector and actor of intervention.

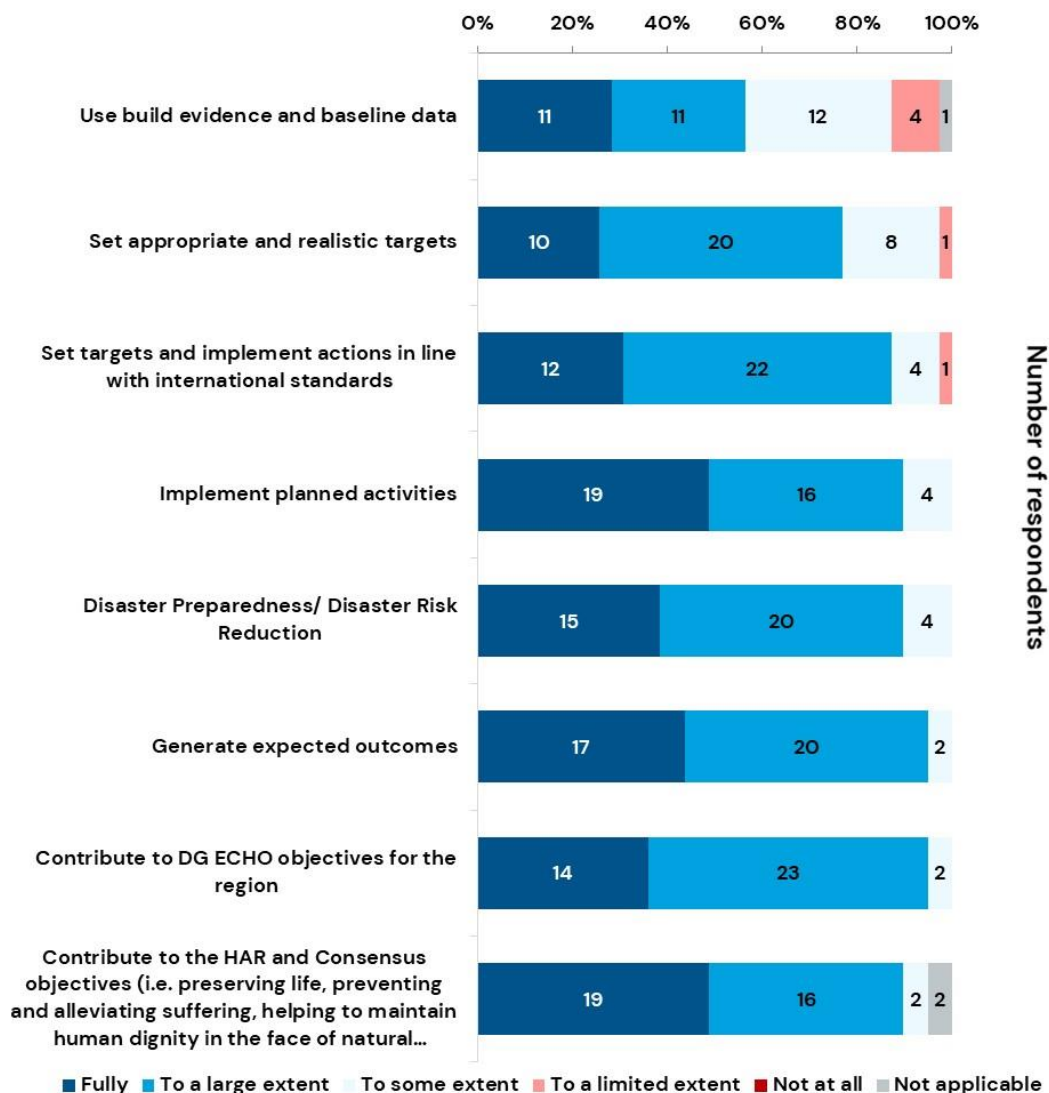
Challenges associated to Covid-19. For example, exacerbation of prices in the consumable supply chain and logistical problems in the implementation of the missions

Work conditions for humanitarian actors. Challenging conditions for humanitarian actors in Venezuela, as well as governmental restrictions to humanitarian work

A5.1.4 Section IV: Effectiveness of the response to the Venezuelan regional crisis during the period 2017-2021

A5.1.4.1 General issues in the effectiveness of the actions

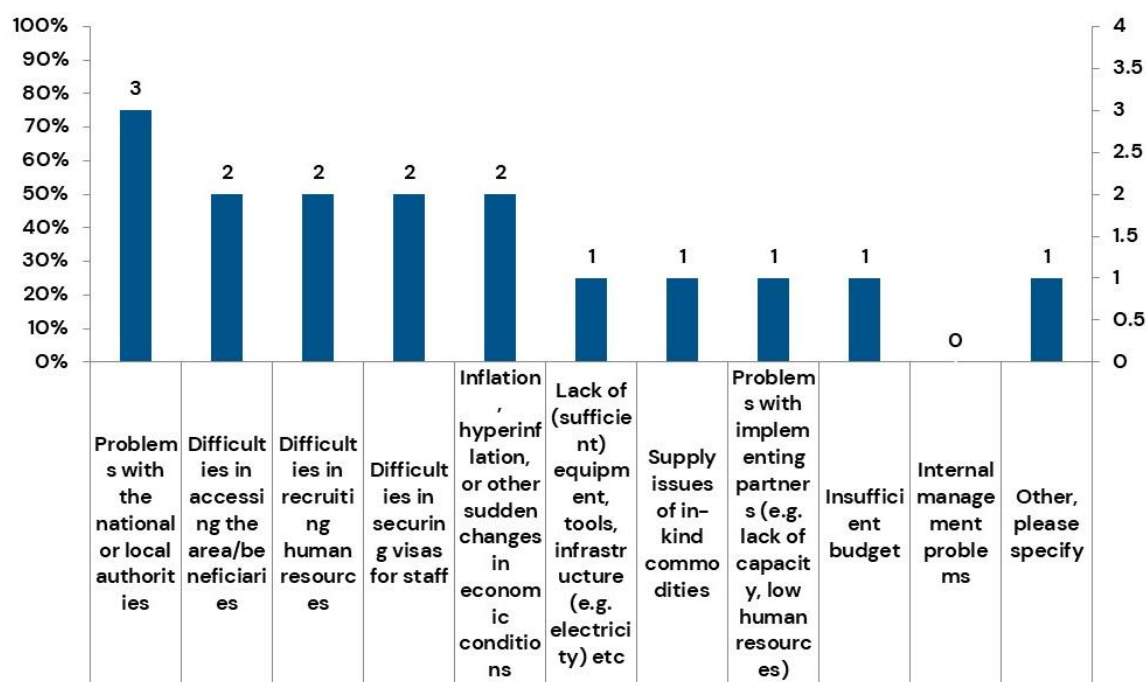
Figure 19. Q17 As part of your action(s), to what extent were you able to: (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key areas	Specific challenges reported
Setting baseline data	<ul style="list-style-type: none"> Lack of presence of the service before the intervention Accessibility limitations by the relevant authority Lack of previous data, information and reports Lack of good connectivity
Setting targets	<ul style="list-style-type: none"> Underestimation of material and financial resources

Figure 20. Q20 Please indicate the main reasons that prevented the implementation of some of the activities



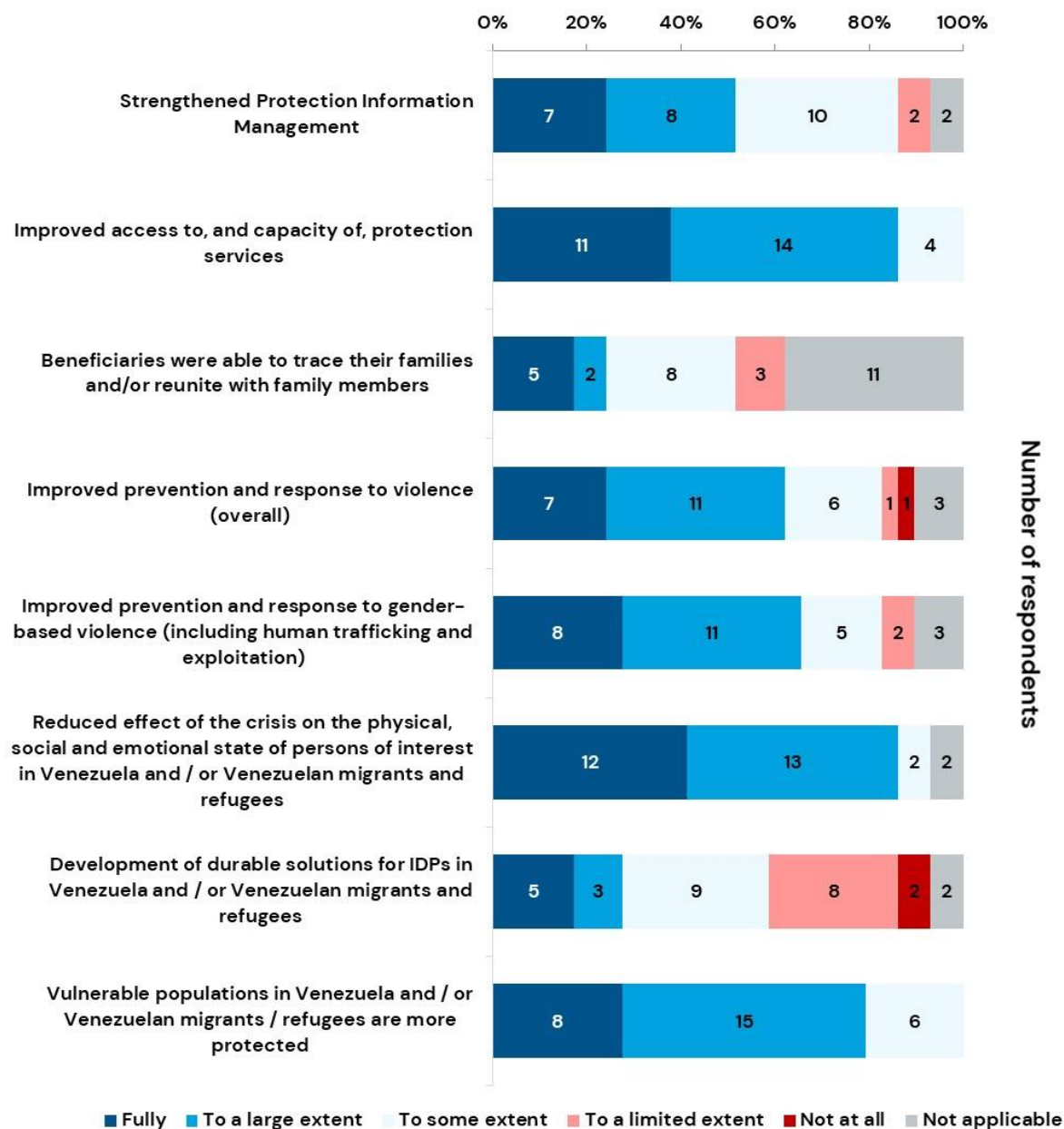
Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Some ways in which challenges were anticipated or mitigated include:

- Relying on a **robust monitoring system** to design and implement informed and data-backed actions
- **Ongoing monitoring and dialogue** with implementing teams to adapt methodologies and processes to meet objectives
- **Ongoing revision of strategies and action plans** with DG ECHO's country office
- Allowing for **mobile interventions** in order to cover as much of the mobile population as possible
- Adjustment of priorities and objectives during the **Covid-19 pandemic**

A5.1.4.2 Effectiveness in the protection sector

Figure 21. Q22 To what extent did your action(s) contribute to the following changes and results in the protection sector? (n=29)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question covered:

Information dissemination. The promotion of safe and informed migration was pursued through dissemination of information on rights through mass campaigns and individual attention, thus contributing to the reduction of exposure to situations of violence, including GBV.

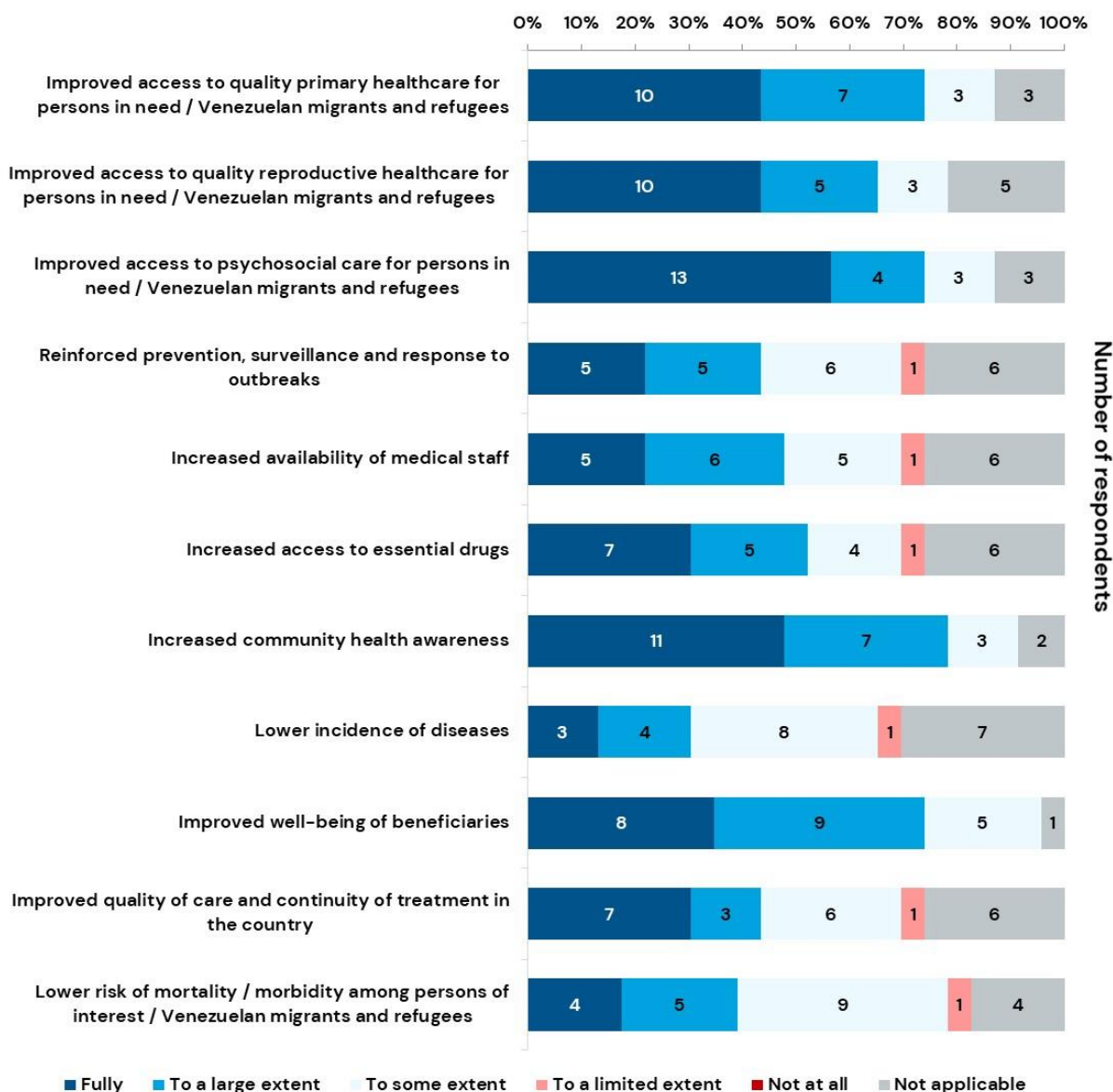
Limited long-term approach. DG ECHO-funded actions are usually for emergency response; durable solutions are not a priority.

Family reunification. One of the projects promoted family reunification through activities such as humanitarian transport.

Communication activities. Communication meant contributing not only to peoples' well-being, but also serve as a self-help mechanism through which beneficiaries could access social resources.

A5.1.4.3 Effectiveness in the health sector

Figure 22. Q23 To what extent did your action(s) contribute to the following changes and results in the health sector? (n=23)

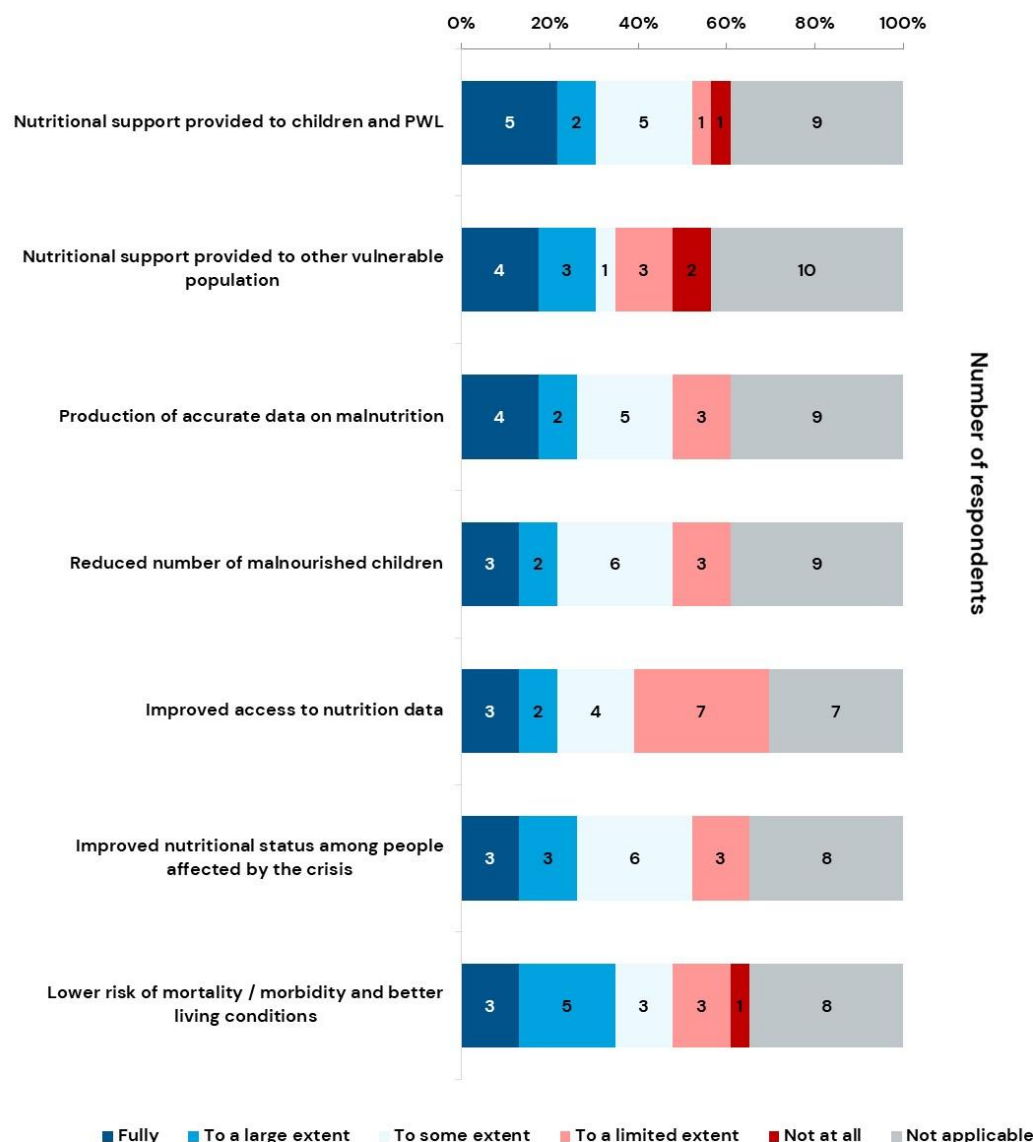


Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

The main point raised in the open question referred to the **limited impact due to lack of funding**, particularly indigenous populations and those in remote areas

A5.1.4.4 Effectiveness in the nutrition sector

Figure 23. Q24 To what extent did your action(s) contribute to the following changes and results in the nutrition sector? (n=23)

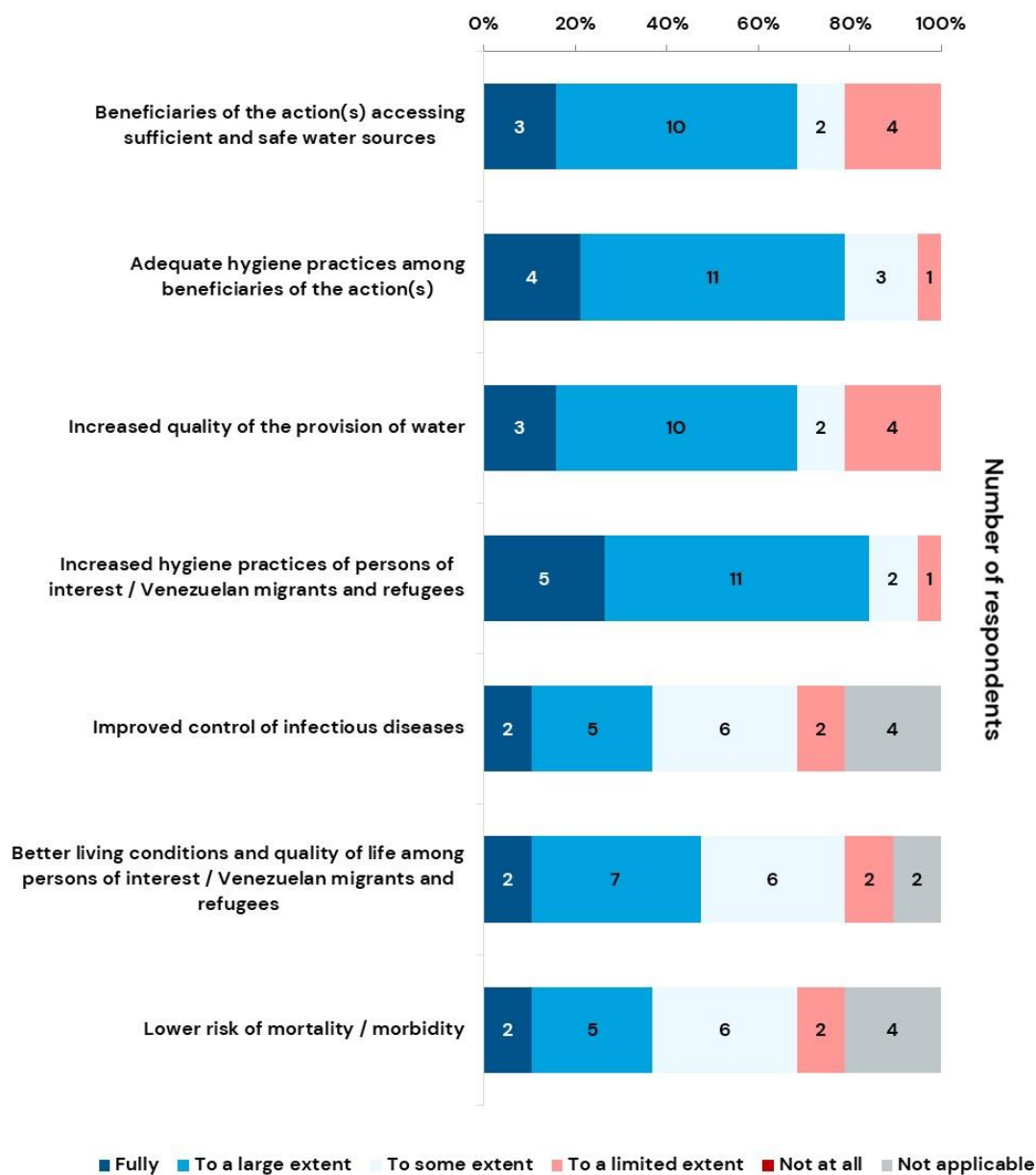


Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

The main point raised in the open question recommended the **prioritisation of prevention of SAM and MAM** within response priorities.

A5.1.4.5 Effectiveness in the WASH sector

Figure 24. Q25 To what extent did your action(s) contribute to the following changes and results in the WASH sector? (n=19)

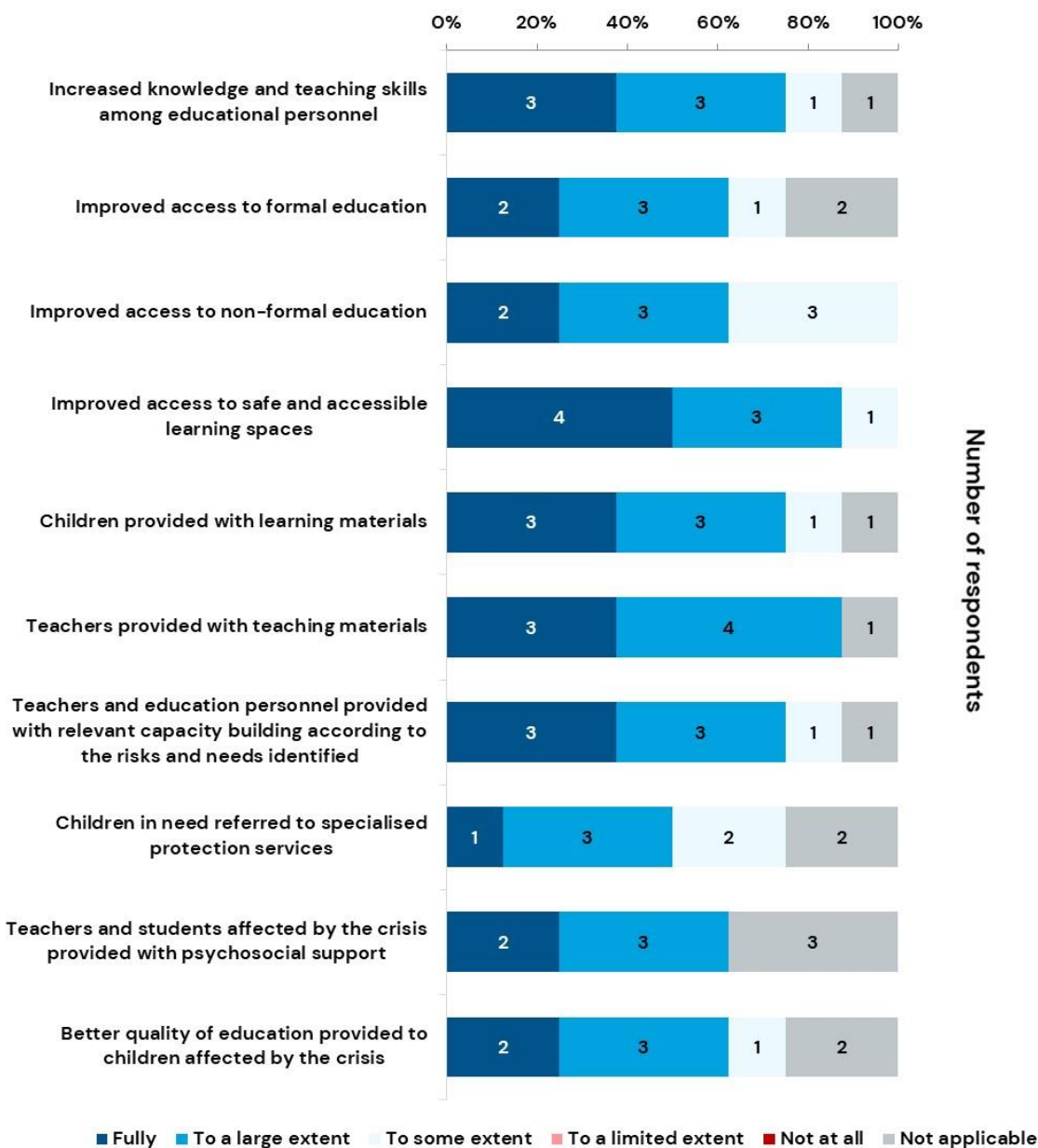


Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

The main point raised in the open question referred to the **limited impact due to lack of funding**, particularly indigenous populations and those in remote areas.

A5.1.4.6 Effectiveness in the education in emergencies sector

Figure 25. Q26 To what extent did your action(s) contribute to the following changes and results in the education in emergencies sector? (n=8)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

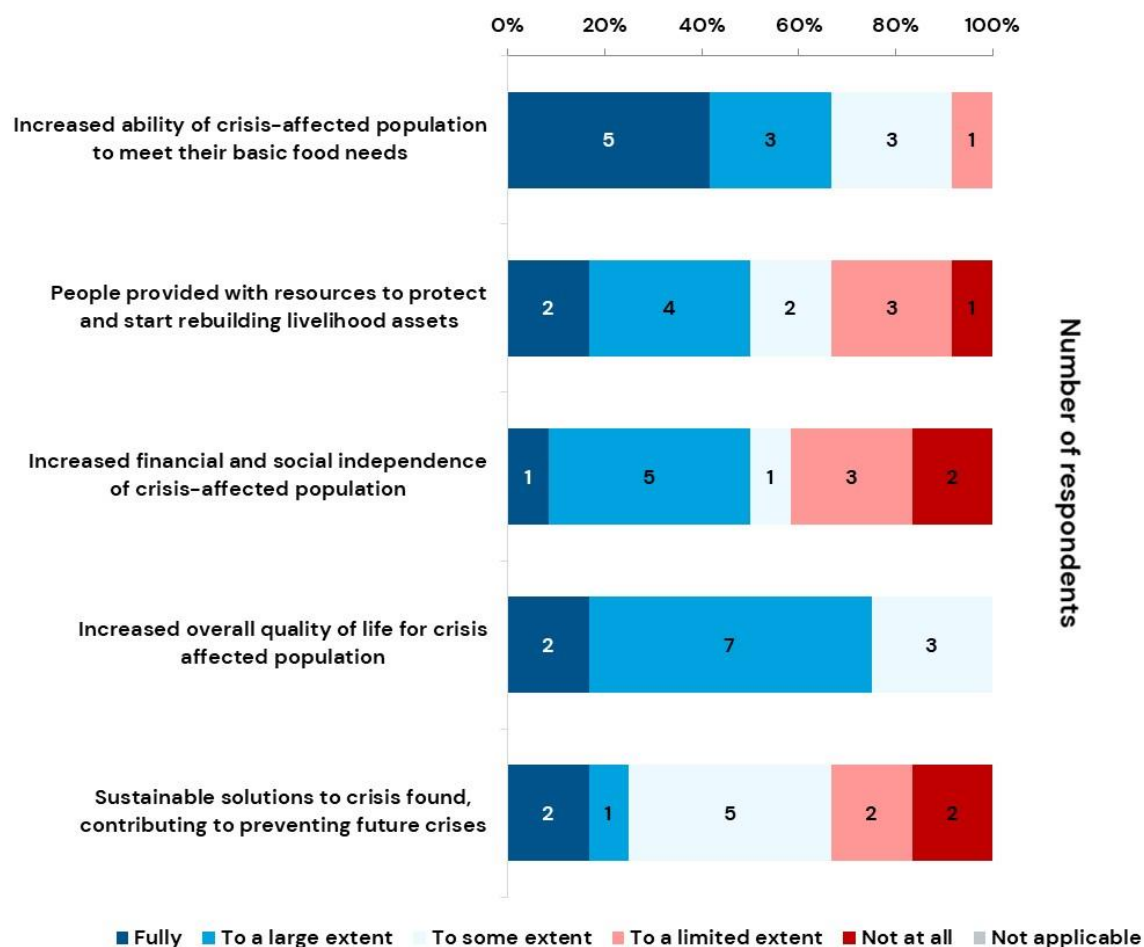
Key points raised in the open question covered:

DG ECHO's added value through specific targets. DG ECHO's global commitments to EiE with specific funding targets for this sector has had a strong added value of DG ECHO as a donor in this sector.

Adaptations during Covid-19 supported by DG ECHO. During the COVID-19 pandemic other types of learning materials emerged, such as zoom, google classroom, kahoot, and those were provided/supported with funding from DG ECHO.

A5.1.4.7 Effectiveness in the food security and livelihoods sectors

Figure 26. Q27 To what extent did your action(s) contribute to the following changes and results in the food security and livelihoods sector? (n=12)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question covered:

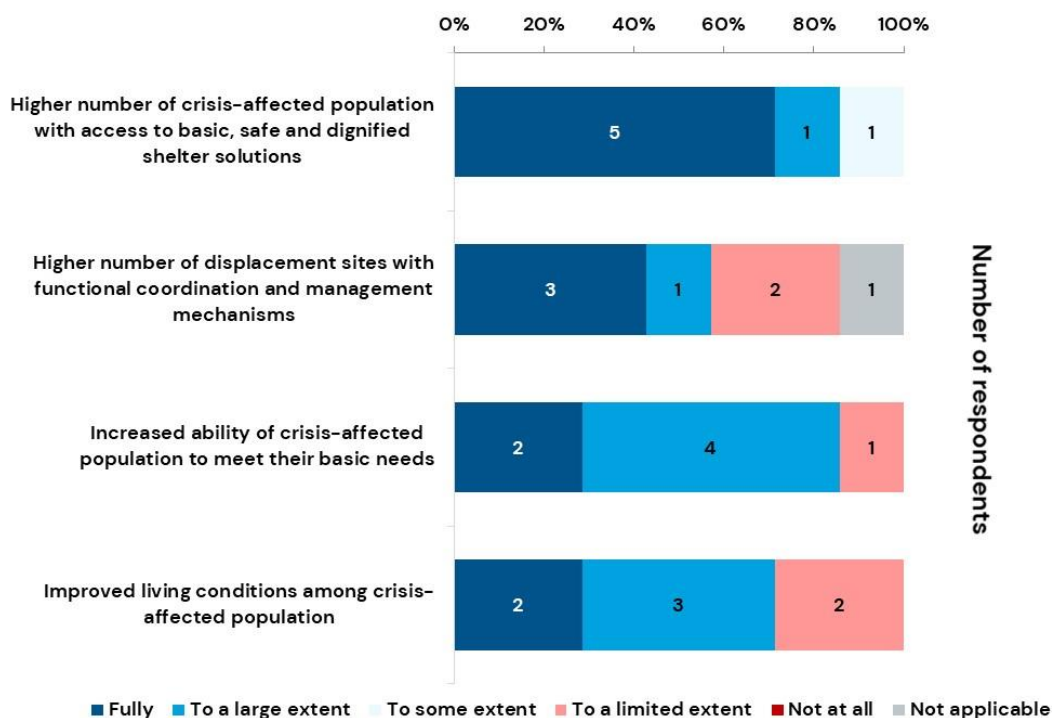
Varied modalities of food access activities. The action had a wide range of modalities of food access activities, which responded to food needs in terms of profiles, contexts, and availability. This included the delivery of in-kind food packages, serviced rations, soup kitchens and food vouchers/cards.

Promotion of rapid recovery in conflict affected areas. Rapid recovery was promoted through livelihoods in areas particularly affected by the armed conflict in Colombia, where there was a confluence with the migrant population.

Ensuring sustainability of the actions. Technical support and workshops were provided to promote the sustainability of the actions. However, given the difficulties for integration faced by migrants, the action has faced limitations to guarantee financial independence as well as sustainable solutions. In addition, the pandemic and the measures adopted by governments in the region led in many cases to a deterioration in the situation of improvement already experienced by families and migrants.

A5.1.48 Effectiveness in the shelter and settlements sector

Figure 27. Q28 To what extent did your action(s) contribute to the following changes and results in the shelter and settlements sector? (n=7)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question covered:

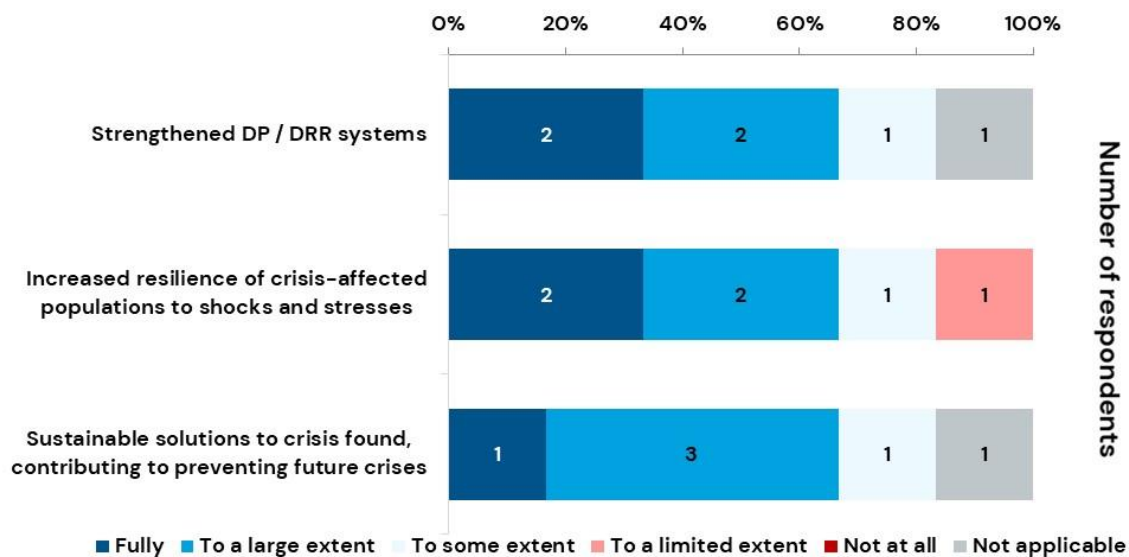
Collective shelters for transit migrants and migrants who wanted to stay. Through the offer of *Casas de Acogida* (collective shelters), the action provided basic, safe and dignified shelter solutions for families and especially vulnerable people. In the case of transit migrants, the migration conditions were dignified by providing a space for rest, recovery and satisfaction of other unmet needs such as food, hygiene, primary health and psychosocial care in emergencies. In the case of migrants who wanted to stay, exit plans were prepared in coordination with other organisations and state institutions to support their transition towards stabilisation.

Limitations of working with the Venezuelan government. Purchasing from local organizations and institutions in a country with severe international sanctions to local bank accounts extends agreement times to twice the length.

Limited sustainability of the actions. Given the impacts of the pandemic and the limitations to integration, measures are sometimes not sufficient to improve the living conditions of the migrant population in the long term.

A5.1.4.9 Effectiveness in the disaster risk reduction / preparedness sector

Figure 28. Q29 To what extent did your action(s) contribute to the following changes and results in the disaster risk reduction / preparedness sector? (n=6)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

The main point raised in the open question referred to the **limited impact due to lack of funding**, particularly indigenous populations and those in remote areas

A5.1.4.10 Effectiveness in the coordination sector

Figure 29. Q30 To what extent did your action(s) contribute to the following changes and results in the field of coordination and advocacy? (n=10)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised in the open question covered:

The project allowed to impact the national and subnational level with the **Health Cluster Coordination**

As part of the **R4V**, UNICEF, with support of DG ECHO and other donors, has been the (co-)lead in the Child Protection, Education, WASH and Nutrition working groups and the GBV area of responsibility, as well as the CBI cross-sectoral group.

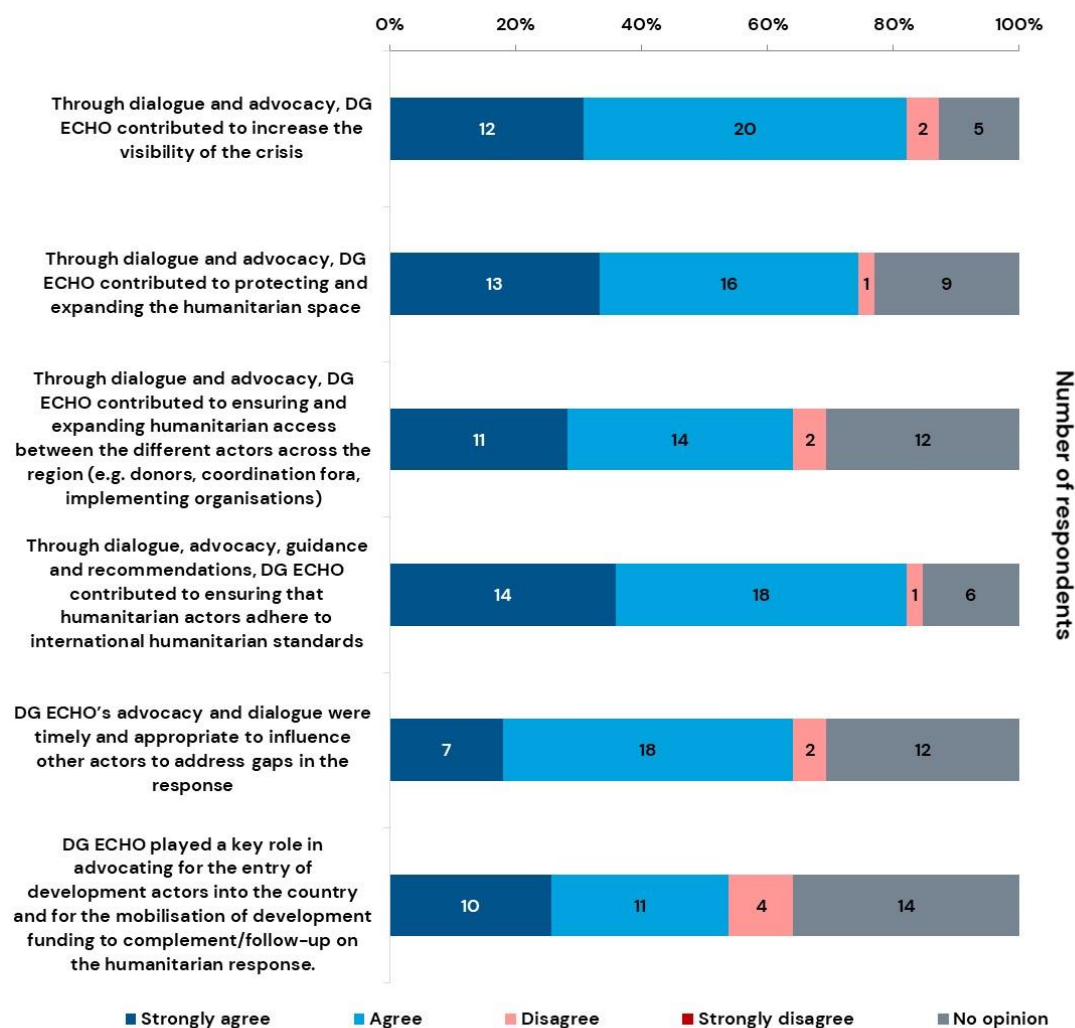
Unintended effects of the actions

Some of the reported unintended effects, both positive and negative, that occurred as a result of the actions included:

- **Emphasis on multi-country approach.** One of the projects claimed to provide valuable input in reading the Venezuelan migration crisis as a problem that transcends borders. It detected connections in terms of protection risks and generated possible collaborative strategies that connected the response and favoured individuals and their households to mitigate or reduce their vulnerabilities to threats in their mobility dynamics.
- **Involvement of national authorities.** One of the actions ensured the presence of the health minister in the National Coordination Cluster, which was the only cluster with ministry officials.
- **Publication of data to use by other organisations.** Data compiled by one of the actions and published in HumVenezuela has been gradually used by donors and in particular by DG ECHO under HIPs.
- **Sustainability of the actions through activities with beneficiaries.** Activities included the involvement of women organisations and local food producers.
- **Increase visibility of disabled migrants.** One of the projects focused on advocating for the needs and priorities of PwD.
- **Exchanges of information and best practices.** One of the action's regional presence, and the promotion of cross-border coordination has allowed for greater exchange between implementing partners across the Action through working groups, enabling the sharing of experiences, the generation of best practices and increased compliance with technical standards.
- **Creation of new monitoring system.** Caritas developed with the support of DG ECHO its own information and monitoring system to serve all humanitarian organisations involved.

A5.1.4.11 Dialogue and advocacy

Figure 30. Q32 To what extent do you agree with the following statements? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

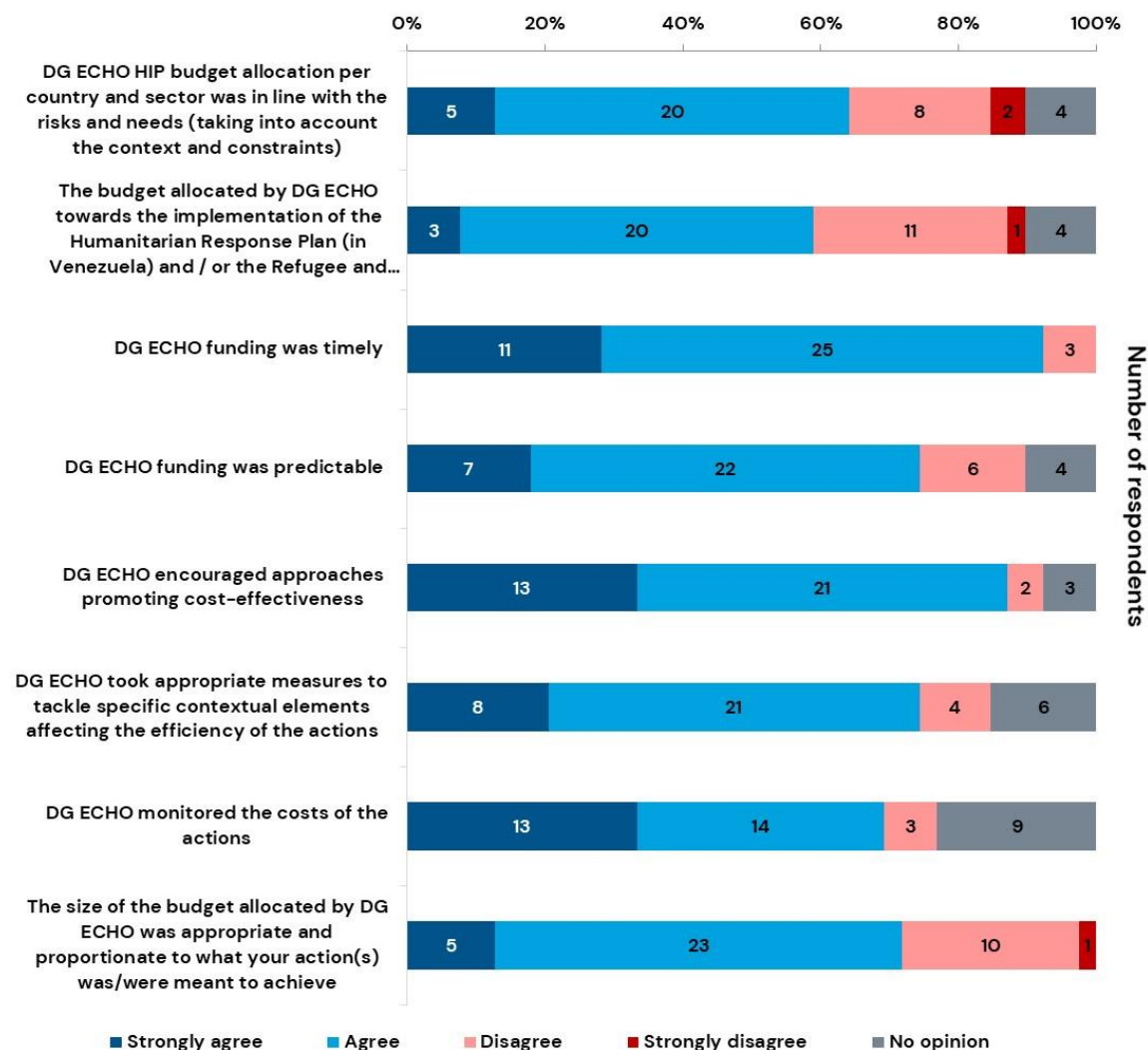
Key points raised in the open question included:

- **Shortcomings on DG ECHO's visibility contribution.** DG ECHO has contributed extensively to the visibility of the humanitarian crisis in the region and its double and triple impact; however, this has not yet resulted in strong response actions by development actors or governments in the region. DG ECHO also needs to make a greater effort to generate the nexus between humanitarian and development actions already present in some territories.
- **Added value of DG ECHO in the health sector.** One of the respondents stated that without the DG ECHO's help, they could not have ameliorated the health situation of a lot of people in Venezuela.
- **Evolution of prioritisation of visibility.** One of the actions reported higher concerns on DG ECHO visibility from 2022.

A5.1.5 Section V: Efficiency of the response to the Venezuelan regional crisis during the period 2017-2021

A5.1.5.1 General issues with the efficiency of DG ECHO response

Figure 31. Q33 Please rate your level of agreement with the following statements (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Key points raised included:

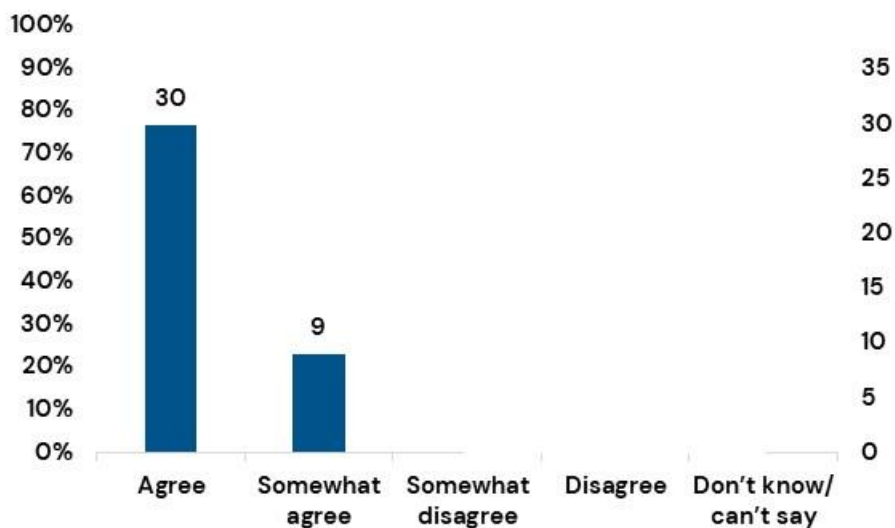
- **Unpredictability of funding reduced effectiveness of actions.** Derived from hyperinflation, dollarization of economy, external events like the Covid-19 pandemic, Ukraine's war, natural disasters, etc.
- **Need to combine short and long-term objectives.** One of the actions pointed that the protracted nature of the Venezuelan crisis required a long-term intervention, with focus on punctual objectives in sectors such as healthcare too.
- **Lack of sufficient funding.** The scale of the Venezuelan migration crisis was larger in comparison to the funding mobilized by the international donor community.
- **Reprioritization of funding after Ukraine's war.** The needs are high in Venezuela. The DG ECHO allocated funding in Venezuela is not sufficient. And in 2022, due to the

Ukraine conflict, we saw that the DG ECHO budget allocated to Venezuela was affected/reduced.

- **Difficulties in piloting, coordination and reporting due to the complex nature of the crisis.** Overcomplicated multi-country - multi-sector - multi-partner grants with different internal timeframe and subject to numerous MR made overall project piloting, coordination and reporting extremely difficult and overall quite inefficient.
- **Flexibility of DG ECHO's funding.** DG ECHO confers a considerable flexibility so that actions are as appropriate to the context as possible and at the same time comply with international standards.

A5.1.5.2 Level of efficiency and cost-effectiveness of the actions

Figure 32. Q34 The action(s) and activities carried out with DG ECHO's support were efficient and/or cost effective?(*)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

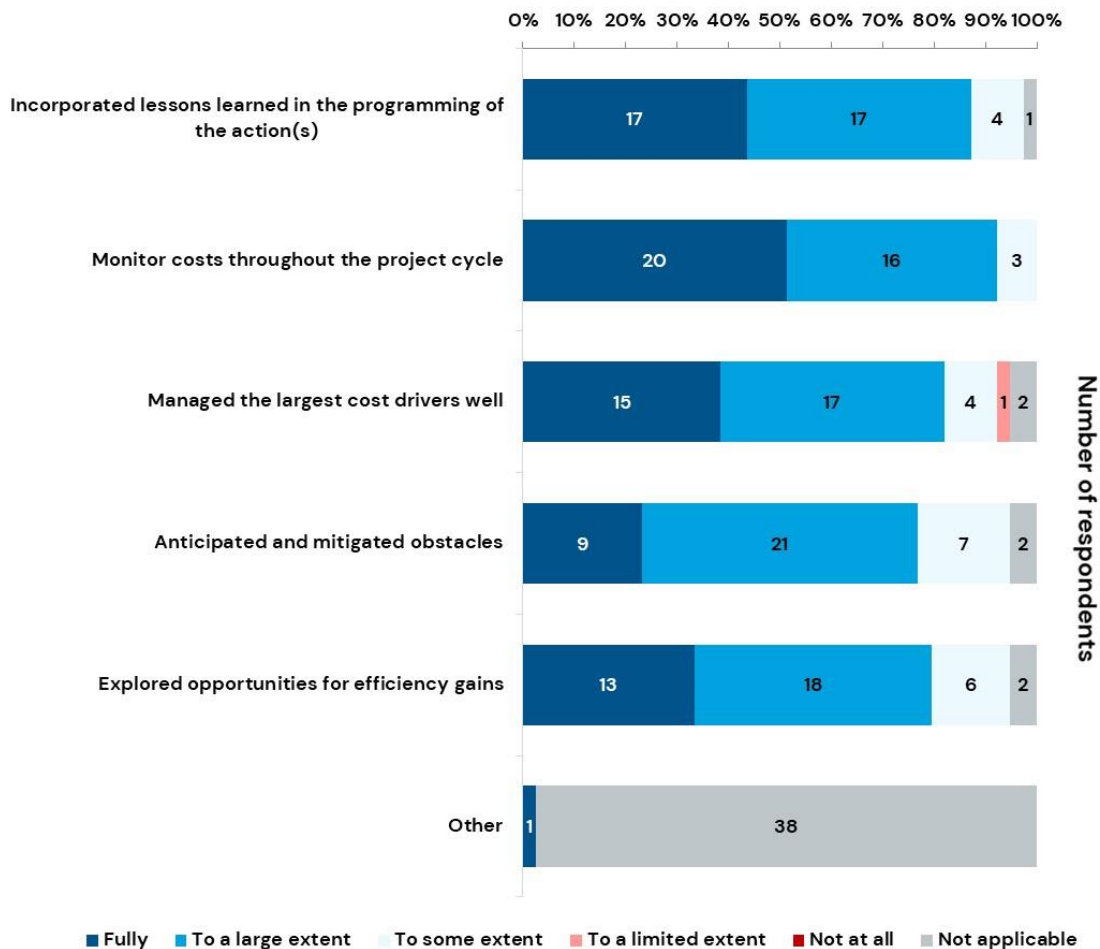
Key points raised included:

Hyperinflation. The inflation in Venezuela is very high and this affects cost efficiency. Respondents report to not know if DG ECHO takes inflation into account when designing the HIP.

Evolving conditions require changes in budget allocations. Many evolving situations such as the revoke of permits for delivering CBI by the national Government and the beginning of some migratory returns required drastic movement in the budget.

A5.1.5.3 Strategies to ensure efficiency and cost-effectiveness of the actions

Figure 33. Q35 To ensure efficiency/cost-effectiveness, to what extent did your organisation. (n=39)

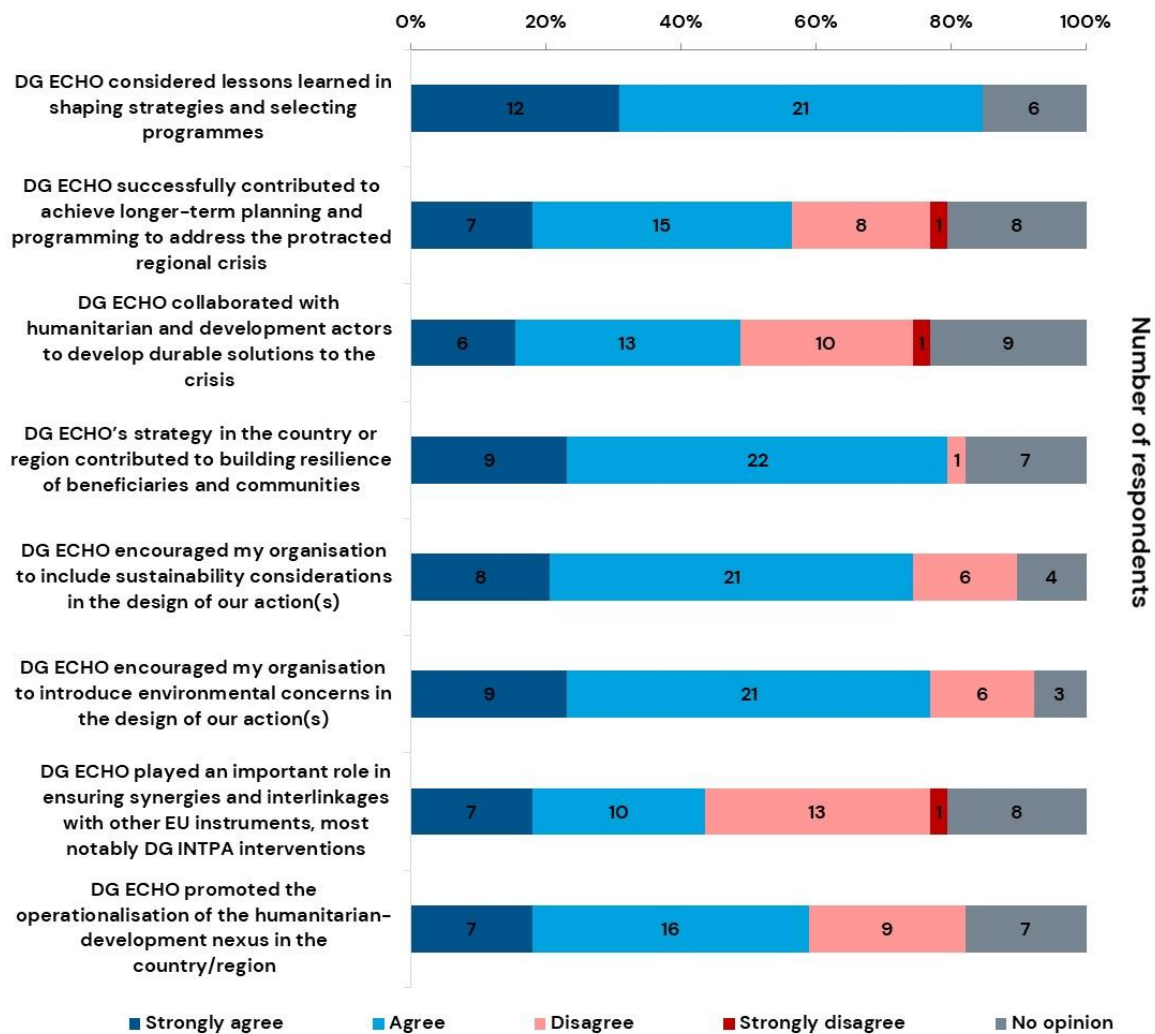


Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

A5.1.6 Section VI: Sustainability of the response to the Venezuelan regional crisis during the period 2017-2021

A5.1.6.1 General issues with the sustainability of DG ECHO's response

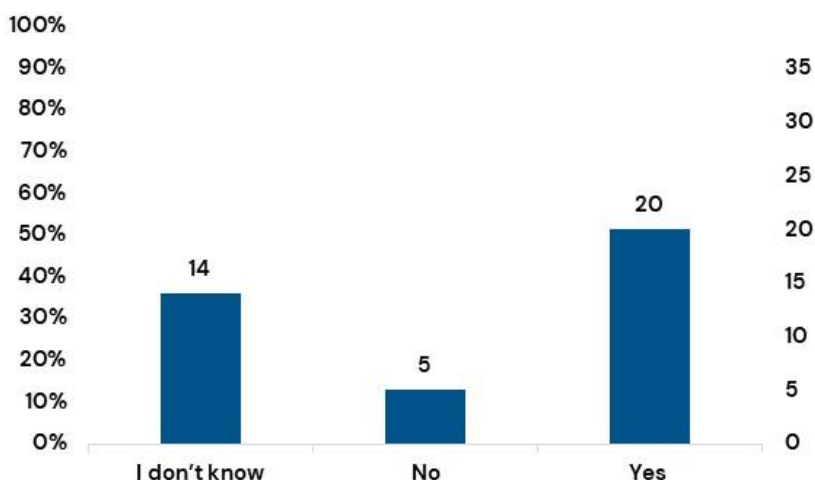
Figure 34. Q36 To what extent do you agree with the following statements? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

A5.1.62 DG ECHO's role in the operationalisation of the Nexus

Figure 35. Q37 In your view, could DG ECHO have done more to promote the operationalisation of the Nexus in the country/region? (n=39)



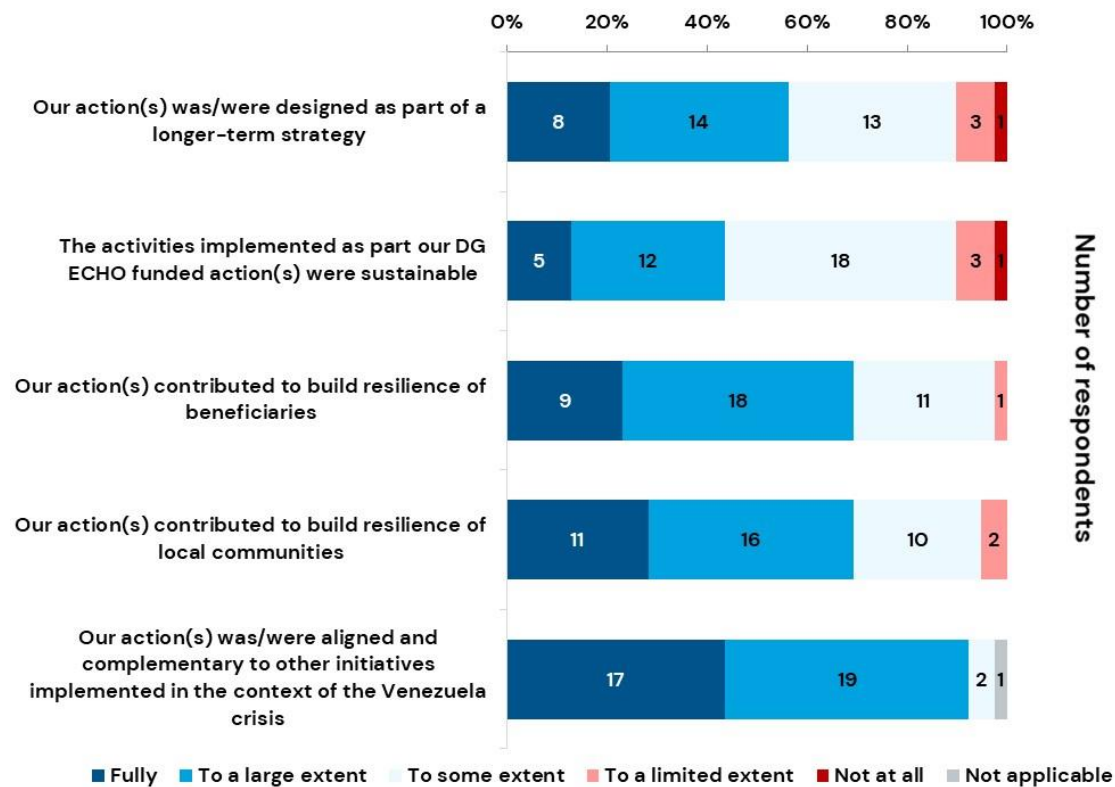
Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

For those who provided an affirmative response, some points raised included:

- **Funding duration and predictability.** Beyond increasing funding in Nexus activities, it would be useful to extend the duration of regular DG ECHO projects to improve emergency activities related to the nexus. Also, providing more predictable, flexible, multi-year financing.
- **Improving synergies with development actors.** Carry out a mapping of development actors present in the areas where its humanitarian actions are implemented and promoted dialogue for the creation of synergies. In addition, DG ECHO could better support to make specific connections with EU developmental actors and its partners to identify opportunities for nexus programming.
- **Take a leader role in field coordination.** Need to improve coordination between DG ECHO offices and EU delegations in the field. Also, taking a more leading role in coordinating Nexus programming
- **Improving monitoring.** Introduce KRI/KOI indicators to measure the scope of these actions (standard indicators to contribute to an overall result/objective in terms of Nexus in the country/region)

A5.1.6.3 Long-term approach, sustainability and resilience of the actions

Figure 36. To what extent do you agree with the following statements (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

Factors which contributed to the sustainability of the actions:

- **Training of beneficiaries and awareness raising activities.** In one of the actions, the family and community networks trained in the different strategies of the project (GBV, care routes, first aid, traditional midwives) guaranteed the sustainability of the actions, since the empowerment process had started since 2018 (first project), and had been reinforced with new participants, and follow-up of those already trained. Similarly, in a different action, support was provided to teachers and parents on how to protect their children and the establishment of child-friendly spaces in the communities.
- **Involvement of national authorities and limitation of parallel structures.** For example, the articulation of the activities with the Ministry of Health throughout the "Integrated Route of Health Services" allowed the active participation of governmental institutions in the sector and the region, also as a guarantee for the sustainability of the projects in the future. To avoid the creation of parallel structures, projects were integrated into national and regional mandates, plans and strategies and the Organization regular technical cooperation delivery, working through existing institutions/structures to build capacities and reinforce mechanisms in place.
- **Involvement of civil society organisations.** National Civil Society Organisations have improved their knowledge of and have gained improved access to other national and regional Coordination mechanism platforms such as clusters, donor conferences, etc. Also, they have gained visibility and credibility.
- **Inclusion of all stakeholders in all phases.** Inclusion from the design to the implementation contributed to the sustainability of our actions

Factors which hindered the sustainability of the actions:

- **Strict focus on emergency projects of short duration** (lack of multi-annual funding)
- **Nature of the crisis.** The nature of the crisis made that the key focus was on basic needs (shelter, food, water) and population on the move
- **Funding concerns.** Persistent funding gaps and need for stronger linkages with nexus/development programmes and funding opportunities.
- **Impact of Covid-19.** The deterioration of the context due to the pandemic made it impossible to provide other, more livelihood-oriented types of solutions.
- **Volatility of relations with national authorities and limited capacity at local level**

Factors which contributed to build resilience:

- **Facilitating information to migrants and refugees.** Providing PNIP with legal information, counselling and assistance to access the Refugee Status Determination (RSD) process and other legal forms of status as well as basic services. This also included awareness raising activities on rights and access to services.
- **Capacity building of local partners.** Capacity building for local partners, communities and engagement of local authorities reinforcing service delivery and structures.
- **Involvement of civil society organisations.** Maintained activities with same NSCO and communities over the years, building trusty relationship.
- **Transversality and holistic approach in the response.** Working with actors from different sectors to purpose traversal activities contributed to build resilience.
- **Comprehensive protection strategy at the community level.** This included the strengthening grassroots structures and organisations, as well as linking protection services such as psychosocial care, legal counselling, support for regularisation and access to rights through information promotion and management.
- **Capacity building on SGBV.** SGBV is an issue and building the capacity of the communities in forming protection committees and referring cases is a key practice.

Challenges in building resilience:

- **Needs remained after completion of actions.** When the project ended, the needs remained due to the constant influx of new refugees.
- **Evolving and compounding needs.** The crisis in dynamic and the context has evolved continuously, including the compounding of other crises, such as the COVID-19 pandemic, natural disasters and internal conflicts/unrest.
- **Limited humanitarian experience of local partners.** This required a strong capacity building effort.

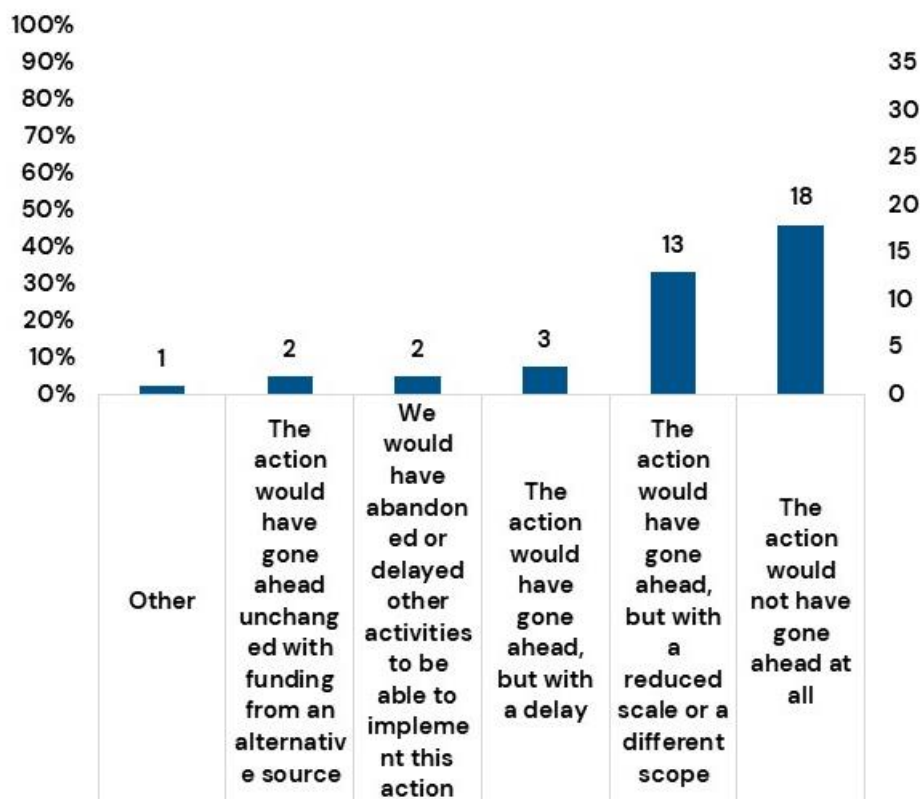
Further comments with regards to DG ECHO contribution to promote sustainability, built resilience and strengthened the nexus

- Need to strengthen the triple nexus to **move from emergency projects to development projects.**
- Increase funding for **strengthening implementing partners.**
- Maintaining the **centrality of protection** as well as a strong sectoral protection response
- Promoting a nexus approach through **early recovery action**, coordinating with development agencies to support nexus project.
- Generating evidence for **advocacy initiatives** in order to increase **funding mobilisation, expansion of donor base and diversification of sources of funding.**

A5.1.7 Section VII: EU Added Value of DG ECHO's response to the Venezuelan regional crisis during the period 2017-2021

A5.1.7.1 General issues with the Added Value of DG ECHO's response

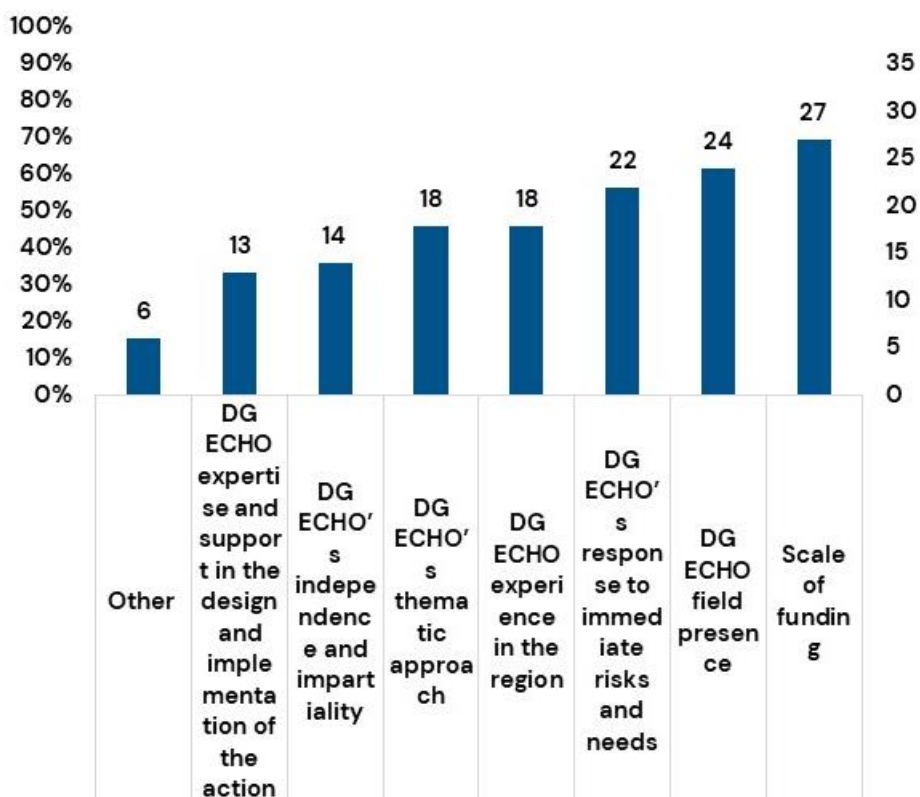
Figure 37. Q44 What would have been the likely consequence(s) for your action if your organisation had not received DG ECHO funding? (n=39)



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

A5.1.72 Specificities of DG ECHO's intervention

Figure 38. Q45 What were the specificities or distinguishing features of DG ECHO's intervention in the country in which your organisation implemented the action(s) compared to other donors' interventions in the country?



Source: ICF elaboration (2023) based on results of survey to DG ECHO framework partners

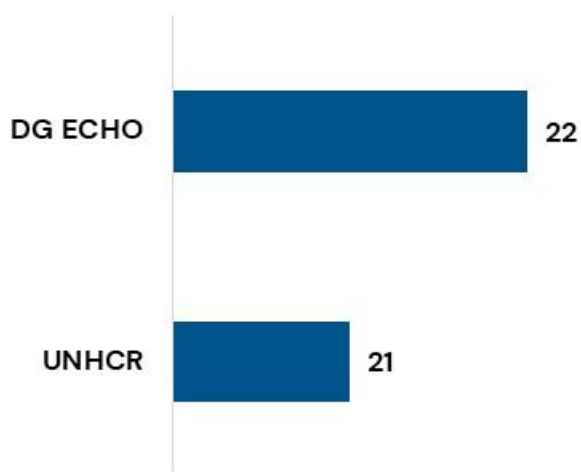
Some specificities mentioned covered:

- Flexibility and adaptability to changing environments.
- Multi-country approach
- Efficient coordination
- Accessible focal points

A5.2 DG ECHO-UNHCR PARTNERSHIP SURVEY RESULTS

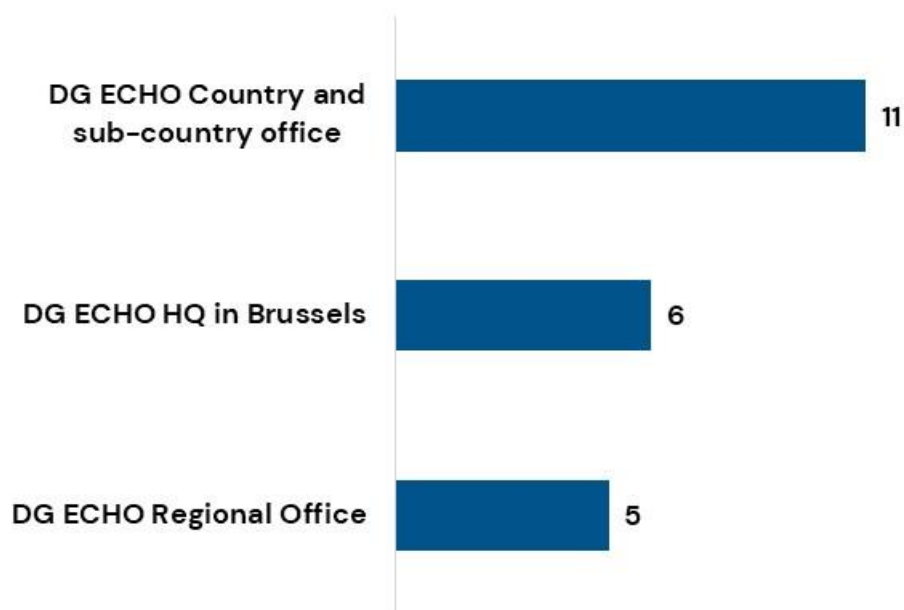
A5.2.1 Organisations

Figure 39. Q1 Which organisation do you represent? (n=43)



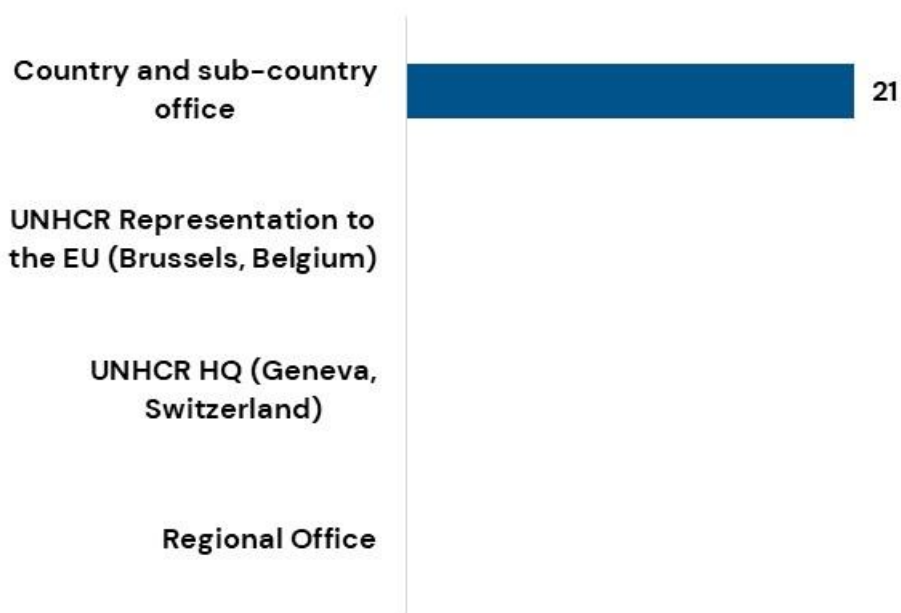
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 40. Q2 Where are you based? (n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

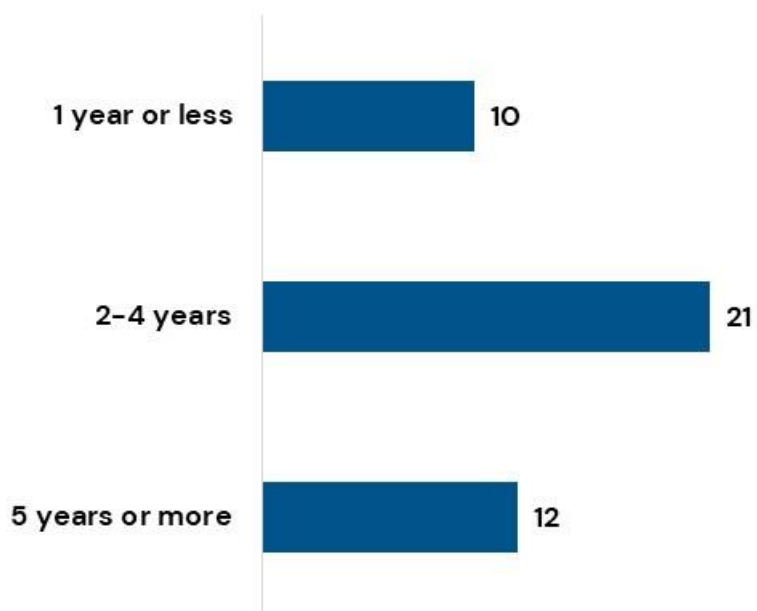
Figure 41. Q3 Where are you based? (n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

A5.2.2 Years of experience

Figure 42. Q4 How long have you been at your position? (n=43)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

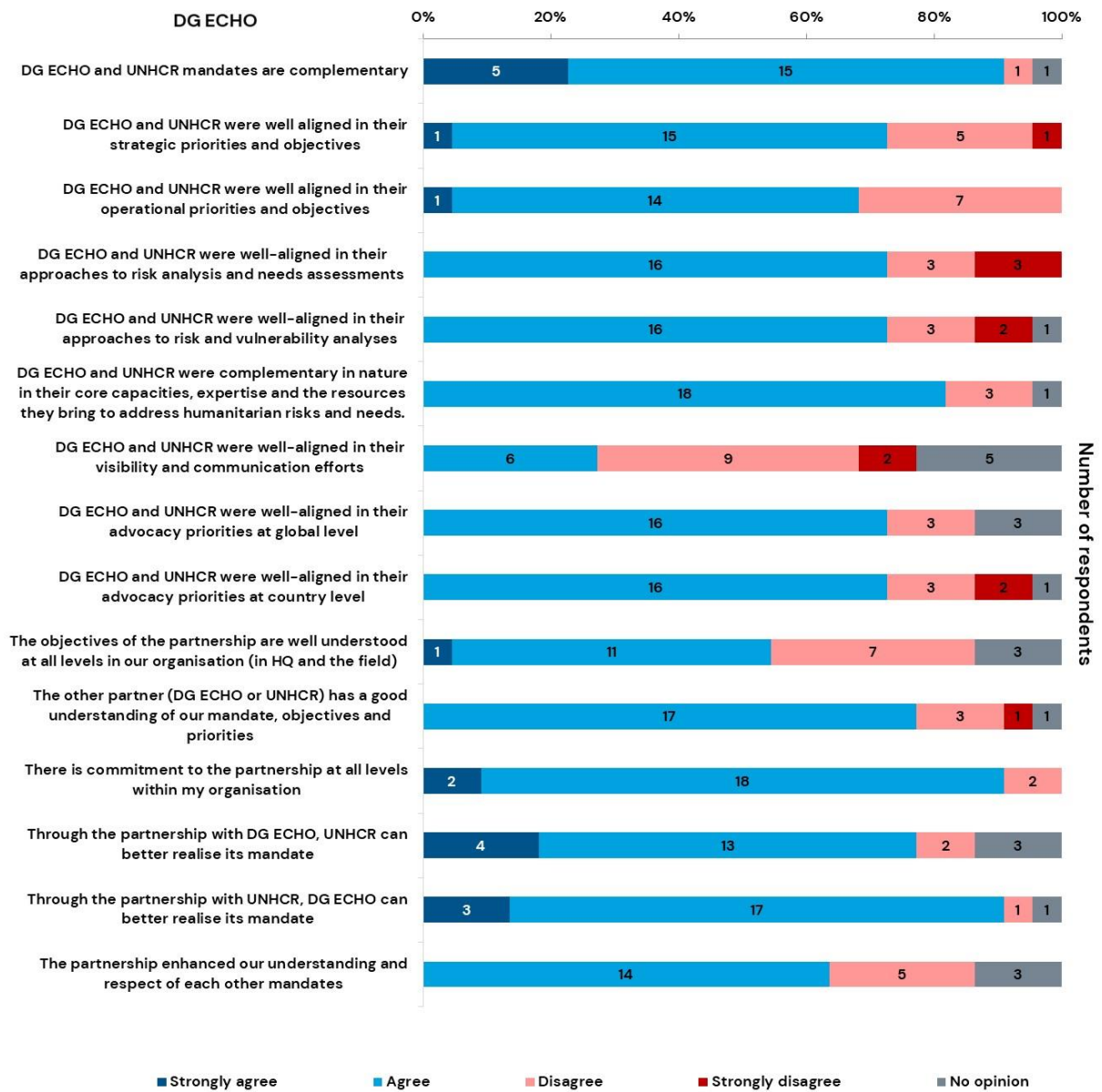
Figure 43. Q4 Organisation breakdown

Profile/Category	n	1 year or less	2-4 years	5 years or more
<i>Total</i>	<i>n=43</i>	10	21	12
Location (DG ECHO)				
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	8	3
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	3	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	2	3
Location (UNHCR)				
<i>Country and sub-country office</i>	<i>n=21</i>	9	8	4

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

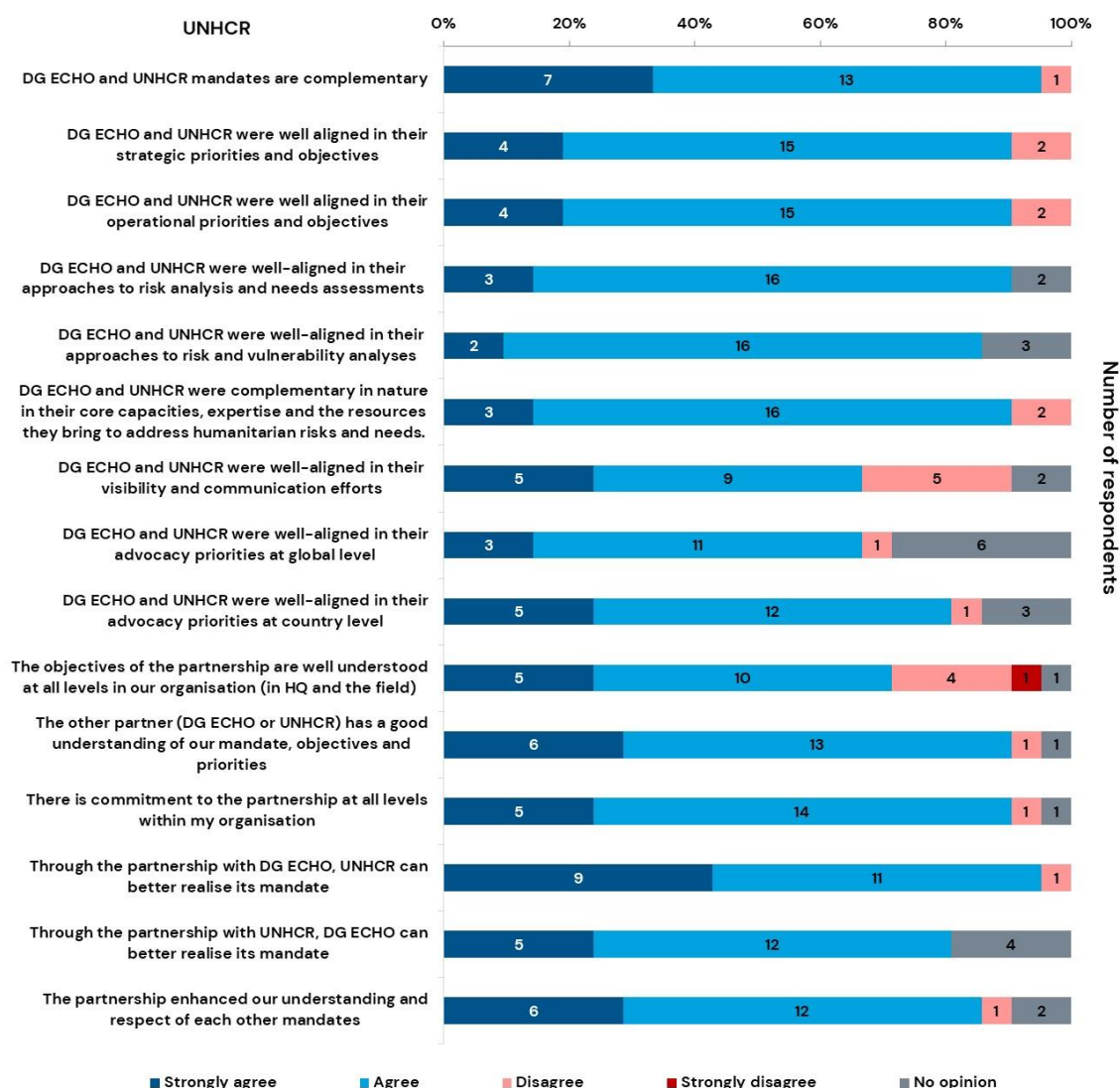
A5.2.3 Alignment between DG ECHO and UNHCR (Coherence)

Figure 44. Q5 To what extent do you agree or disagree with the following statements? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 45. Q5 To what extent do you agree or disagree with the following statements? (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 31. Q5 Open questions by respondent organisation

Key points raised in the open questions covered:

	DG ECHO	UNHCR
DG ECHO and UNHCR mandates are complementary	Both are aligned with humanitarian principles (one respondent) Sometimes only complementary from a theoretical perspective (one respondent)	Limited clarity of DG ECHO's mandate complementarity (two respondents). One of the respondents agrees with the statement, while the other one disagrees with it.
DG ECHO and UNHCR were well aligned in their strategic priorities and objectives	Both organisations are not always equally sensitive to all priorities (one respondent) UNHCR has focused on mixed migrations, de-emphasizing both asylum and refugee rights and	DG ECHO sometimes has different strategic priorities which are mostly humanitarian (based on overall trends from three answers) Although they agreed with the statement, one respondent also

	DG ECHO	UNHCR
	internal displacement. It seems to depend on country teams (two respondents from country and sub-country offices)	mentioned DG ECHO priorities did not cover refugee and refugee returnee operations in South Sudan.
DG ECHO and UNHCR were well aligned in their operational priorities and objectives	Some divergences about IDPs support and degree of involvement of local actors. UNHCR views DG ECHO as a donor and not a policy maker (two respondents from Brussels HQ) DG ECHO and UNHCR had and still have diverging views on coordination, which affects operational effectiveness. (one respondent from country and sub-country office)	While the HIP is clear, its interpretation from DG ECHO is sometimes unclear (one respondent) There have been challenges with the protection elements of some activities (one respondent)
DG ECHO and UNHCR were well-aligned in their approaches to risk analysis and needs assessments	UNHCR 's approach to needs assessments has resulted in fragmented analyses based on status and nationality, which does not align with DG ECHO 's needs-based approach (one respondent from a country or sub-country office) One respondent from Brussels HQ says it depends on contexts: in Tajikistan UNHCR was not proactive in needs assessment, despite having received funding for that.	Lack of information on DG ECHO risk analysis and reasonings behind it (one respondent) Another participant fully agreed with the statement.
DG ECHO and UNHCR were well-aligned in their approaches to risk and vulnerability analyses	UNHCR maintains a very rigid analysis of vulnerabilities and rarely adapts them to the context (one respondent) Two respondents mentioned there are different approaches between the two partners.	Lack of information on DG ECHO risk analysis and reasonings behind it (one respondent) Aligning approaches required lengthy consultations (one participant)
DG ECHO and UNHCR were complementary in nature in their core capacities, expertise and the resources they bring to address humanitarian risks and needs	Diverging views on coordination led to UNHCR establishing a parallel structure, missing the opportunities for complementarity and building on existing resources (one respondent)	One respondent agreed that there is complementarity between DG ECHO and UNHCR.
DG ECHO and UNHCR were well-aligned in their visibility and communication efforts	Overall, respondents think that UNHCR is not very proactive on this type of collaboration (at least three respondents from different offices), but things have improved (one respondent from Brussels HQ)	One respondent mentioned that DG ECHO generally has been understanding of the operational limitations that could impede visibility
DG ECHO and UNHCR were well-aligned in their advocacy priorities at global level	One comment from one respondent from a country or sub-country office mentions that advocacy for durable solutions and bridges between funding instruments (DG ECHO/DG INTPA) are taking place to make the	Desire for better links between UNHCR and DG ECHO offices in the field and both headquarters (one participant) Other participants were not aware.

	DG ECHO	UNHCR
	humanitarian landscape evolve toward new approaches	
DG ECHO and UNHCR were well-aligned in their advocacy priorities at country level	Highly context dependent (two respondents, one from Brussels HQ and one from a regional office)	DG ECHO has been supporting UNHCR in its advocacy (one participant)
The objectives of the partnership are well understood at all levels in our organisation (in HQ and the field)	There is constant information sharing and exchanges, but somehow it is challenging for the field to grasp HQ priorities and initiatives with HCR (one respondent from Brussels HQ)	One participant mentioned that DG ECHO relations towards UNHCR are not always fully professional and respectful. Another participant mentioned operational realities should be better communicated between DG ECHO field and DG ECHO HQ
The other partner (DG ECHO or UNHCR) has a good understanding of our mandate, objectives and priorities	Concerns regarding implementation and prioritisation issues (four respondents) UNHCR mainly sees DG ECHO as a donor, not as a partner (one respondent from Brussels HQ)	One participant thinks that the role and the importance of protection in the cluster coordination and the concept of "centrality of protection" were not clearly understood by the donors and external stakeholders.
There is commitment to the partnership at all levels within my organisation	Higher commitment at HQ level than at field level (one respondent from a country or sub-country office) Highly dependent of specific people (one respondent from Brussels HQ)	NA
Through the partnership with DG ECHO, UNHCR can better realise its mandate	NA	One participant was concerned about the reduction of funding to UNHCR and lack of transparency on how funding is distributed to other partners The other respondent agrees with the statement.
Through the partnership with UNHCR, DG ECHO can better realise its mandate	NA	One respondent thinks that DG ECHO needs to adhere to principles of partnership in its funding decisions
The partnership enhanced our understanding and respect of each other mandates	Different levels of engagement with UNHCR at DG ECHO HQ and field level where the latter maintains its focus on operational priorities and quality programming, while HQ focuses more on the political partnership between the two agencies. This results in conflicting messages to the partner (one respondent from a regional office)	Again, one participant mentions that DG ECHO relations towards UNHCR are not always fully professional and respectful

Figure 46. Q5 Organisation breakdown

DG ECHO and UNHCR mandates are complementary						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
<i>Total</i>	<i>n=43</i>	12	28	2	0	1
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	3	7	1	0	0
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	2	4	0	0	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	4	0	0	1
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	7	13	1	0	0
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0
<i>2-4 years</i>	<i>n=13</i>	5	7	1	0	0
<i>5 years or more</i>	<i>n=8</i>	0	7	0	0	1
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	4	5	0	0	0
<i>2-4 years</i>	<i>n=8</i>	3	5	0	0	0
<i>5 years or more</i>	<i>n=4</i>	0	3	1	0	0
DG ECHO and UNHCR were well aligned in their strategic priorities and objectives						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
<i>Total</i>	<i>n=43</i>	5	30	7	1	0
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	1	8	2	0	0
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	5	0	1	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	2	3	0	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	4	15	2	0	0

Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	1	9	3	0	0
5 years or more	n=8	0	5	2	1	0
Years of experience (UNHCR)						
1 year or less	n=9	3	6	0	0	0
2-4 years	n=8	1	6	1	0	0
5 years or more	n=4	0	3	1	0	0
DG ECHO and UNHCR were well aligned in their operational priorities and objectives						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	5	29	9	0	0
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	1	7	3	0	0
DG ECHO HQ in Brussels	n=6	0	5	1	0	0
DG ECHO Regional Office	n=5	0	2	3	0	0
Location (UNHCR)						
Country and sub-country office	n=21	4	15	2	0	0
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	1	10	2	0	0
5 years or more	n=8	0	3	5	0	0
Years of experience (UNHCR)						
1 year or less	n=9	3	6	0	0	0
2-4 years	n=8	1	7	0	0	0
5 years or more	n=4	0	2	2	0	0
DG ECHO and UNHCR were well-aligned in their approaches to risk analysis and needs assessments						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion

Total	n=43	3	32	3	3	2
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	9	1	1	0
DG ECHO HQ in Brussels	n=6	0	5	0	1	0
DG ECHO Regional Office	n=5	0	2	2	1	0
Location (UNHCR)						
Country and sub-country office	n=21	3	16	0	0	2
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	9	2	2	0
5 years or more	n=8	0	6	1	1	0
Years of experience (UNHCR)						
1 year or less	n=9	2	7	0	0	0
2-4 years	n=8	1	6	0	0	1
5 years or more	n=4	0	3	0	0	1
DG ECHO and UNHCR were well-aligned in their approaches to risk and vulnerability analyses						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	2	32	3	2	4
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	10	1	0	0
DG ECHO HQ in Brussels	n=6	0	5	0	0	1
DG ECHO Regional Office	n=5	0	1	2	2	0
Location (UNHCR)						
Country and sub-country office	n=21	2	16	0	0	3
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	10	2	1	0
5 years or more	n=8	0	5	1	1	1
Years of experience (UNHCR)						

1 year or less	n=9	2	7	0	0	0
2-4 years	n=8	0	6	0	0	2
5 years or more	n=4	0	3	0	0	1

DG ECHO and UNHCR were complementary in nature in their core capacities, expertise and the resources they bring to address humanitarian risks and needs.

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
------------------	---	----------------	-------	----------	-------------------	------------

Total	n=43	3	34	5	0	1
-------	------	---	----	---	---	---

Location (DG ECHO)

DG ECHO Country and sub-country office	n=11	0	8	2	0	1
DG ECHO HQ in Brussels	n=6	0	6	0	0	0
DG ECHO Regional Office	n=5	0	4	1	0	0

Location (UNHCR)

Country and sub-country office	n=21	3	16	2	0	0
--------------------------------	------	---	----	---	---	---

Years of experience (DG ECHO)

1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	9	3	0	1
5 years or more	n=8	0	8	0	0	0

Years of experience (UNHCR)

1 year or less	n=9	2	5	2	0	0
2-4 years	n=8	0	8	0	0	0
5 years or more	n=4	1	3	0	0	0

DG ECHO and UNHCR were well-aligned in their visibility and communication efforts

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
------------------	---	----------------	-------	----------	-------------------	------------

Total	n=43	5	15	14	2	7
-------	------	---	----	----	---	---

Location (DG ECHO)

DG ECHO Country and sub-country office	n=11	0	3	5	1	2
DG ECHO HQ in Brussels	n=6	0	1	4	0	1
DG ECHO Regional Office	n=5	0	2	0	1	2

Location (UNHCR)						
Country and sub-country office	n=21	5	9	5	0	2
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	5	5	1	2
5 years or more	n=8	0	1	4	1	2
Years of experience (UNHCR)						
1 year or less	n=9	2	5	2	0	0
2-4 years	n=8	2	2	3	0	1
5 years or more	n=4	1	2	0	0	1
DG ECHO and UNHCR were well-aligned in their advocacy priorities at global level						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	3	27	4	0	9
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	8	0	0	3
DG ECHO HQ in Brussels	n=6	0	5	1	0	0
DG ECHO Regional Office	n=5	0	3	2	0	0
Location (UNHCR)						
Country and sub-country office	n=21	3	11	1	0	6
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	9	1	0	3
5 years or more	n=8	0	6	2	0	0
Years of experience (UNHCR)						
1 year or less	n=9	3	4	0	0	2
2-4 years	n=8	0	5	1	0	2
5 years or more	n=4	0	2	0	0	2
DG ECHO and UNHCR were well-aligned in their advocacy priorities at country level						

<i>Profile/Category</i>	<i>n</i>	<i>Strongly agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly disagree</i>	<i>No opinion</i>
<i>Total</i>	<i>n=43</i>	5	28	4	2	4
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	8	2	1	0
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	5	0	1	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	3	1	0	1
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	5	12	1	0	3
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0
<i>2-4 years</i>	<i>n=13</i>	0	9	3	1	0
<i>5 years or more</i>	<i>n=8</i>	0	6	0	1	1
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	3	6	0	0	0
<i>2-4 years</i>	<i>n=8</i>	1	5	0	0	2
<i>5 years or more</i>	<i>n=4</i>	1	1	1	0	1
The objectives of the partnership are well understood at all levels in our organisation (in HQ and the field)						
<i>Profile/Category</i>	<i>n</i>	<i>Strongly agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly disagree</i>	<i>No opinion</i>
<i>Total</i>	<i>n=43</i>	6	21	11	1	4
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	9	1	0	1
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	1	4	0	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	0	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	5	10	4	1	1
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	1	0	0

2-4 years	n=13	1	7	3	0	2
5 years or more	n=8	0	4	3	0	1
Years of experience (UNHCR)						
1 year or less	n=9	3	5	1	0	0
2-4 years	n=8	1	3	3	0	1
5 years or more	n=4	1	2	0	1	0
The other partner (DG ECHO or UNHCR) has a good understanding of our mandate, objectives and priorities						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	6	30	4	1	2
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	9	2	0	0
DG ECHO HQ in Brussels	n=6	0	4	1	1	0
DG ECHO Regional Office	n=5	0	4	0	0	1
Location (UNHCR)						
Country and sub-country office	n=21	6	13	1	0	1
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	12	1	0	0
5 years or more	n=8	0	4	2	1	1
Years of experience (UNHCR)						
1 year or less	n=9	3	6	0	0	0
2-4 years	n=8	2	5	1	0	0
5 years or more	n=4	1	2	0	0	1
There is commitment to the partnership at all levels within my organisation						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	7	32	3	0	1
Location (DG ECHO)						

DG ECHO Country and sub-country office	n=11	1	10	0	0	0
DG ECHO HQ in Brussels	n=6	1	4	1	0	0
DG ECHO Regional Office	n=5	0	4	1	0	0
Location (UNHCR)						
Country and sub-country office	n=21	5	14	1	0	1
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	1	0	0
2-4 years	n=13	2	10	1	0	0
5 years or more	n=8	0	8	0	0	0
Years of experience (UNHCR)						
1 year or less	n=9	2	7	0	0	0
2-4 years	n=8	1	5	1	0	1
5 years or more	n=4	2	2	0	0	0
Through the partnership with DG ECHO, UNHCR can better realise its mandate						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	13	24	3	0	3
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	2	6	2	0	1
DG ECHO HQ in Brussels	n=6	2	3	0	0	1
DG ECHO Regional Office	n=5	0	4	0	0	1
Location (UNHCR)						
Country and sub-country office	n=21	9	11	1	0	0
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	4	7	1	0	1
5 years or more	n=8	0	5	1	0	2
Years of experience (UNHCR)						
1 year or less	n=9	4	5	0	0	0
2-4 years	n=8	4	4	0	0	0

5 years or more n=4 1 2 1 0 0

Through the partnership with UNHCR, DG ECHO can better realise its mandate

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	8	29	1	0	5

Location (DG ECHO)

DG ECHO Country and sub-country office	n=11	1	10	0	0	0
DG ECHO HQ in Brussels	n=6	2	2	1	0	1
DG ECHO Regional Office	n=5	0	5	0	0	0

Location (UNHCR)

Country and sub-country office	n=21	5	12	0	0	4
--------------------------------	------	---	----	---	---	---

Years of experience (DG ECHO)

1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	3	10	0	0	0
5 years or more	n=8	0	6	1	0	1

Years of experience (UNHCR)

1 year or less	n=9	4	4	0	0	1
2-4 years	n=8	1	4	0	0	3
5 years or more	n=4	0	4	0	0	0

The partnership enhanced our understanding and respect of each other mandates

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	6	26	6	0	5

Location (DG ECHO)

DG ECHO Country and sub-country office	n=11	0	8	2	0	1
DG ECHO HQ in Brussels	n=6	0	3	2	0	1
DG ECHO Regional Office	n=5	0	3	1	0	1

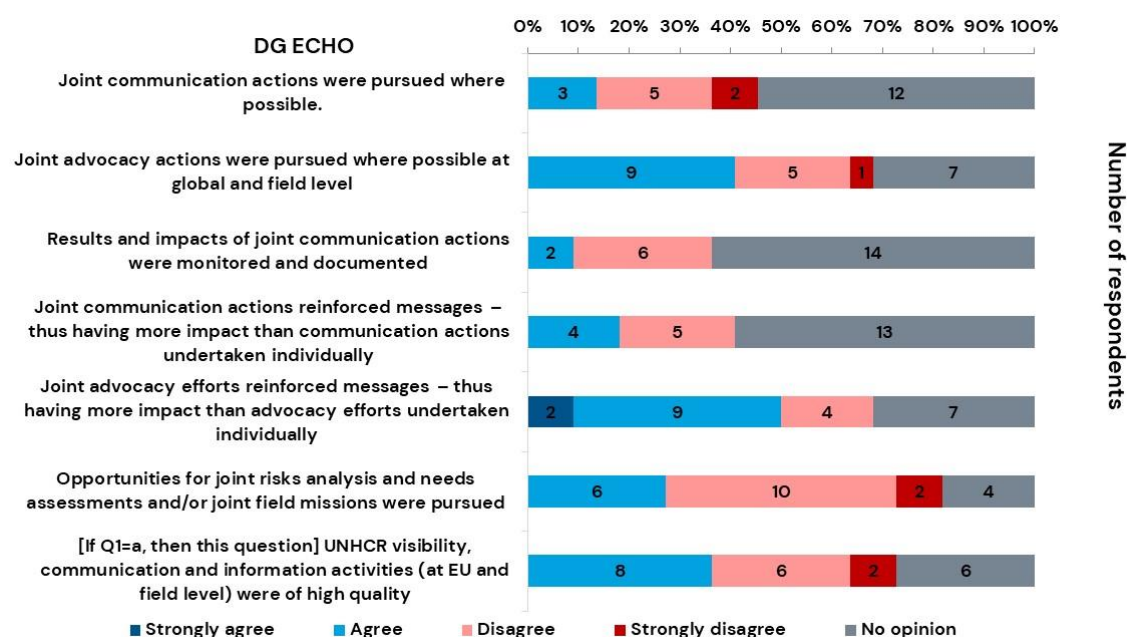
Location (UNHCR)

Country and sub-country office	n=21	6	12	1	0	2
--------------------------------	------	---	----	---	---	---

Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	9	2	0	2
5 years or more	n=8	0	4	3	0	1
Years of experience (UNHCR)						
1 year or less	n=9	3	6	0	0	0
2-4 years	n=8	2	4	0	0	2
5 years or more	n=4	1	2	1	0	0

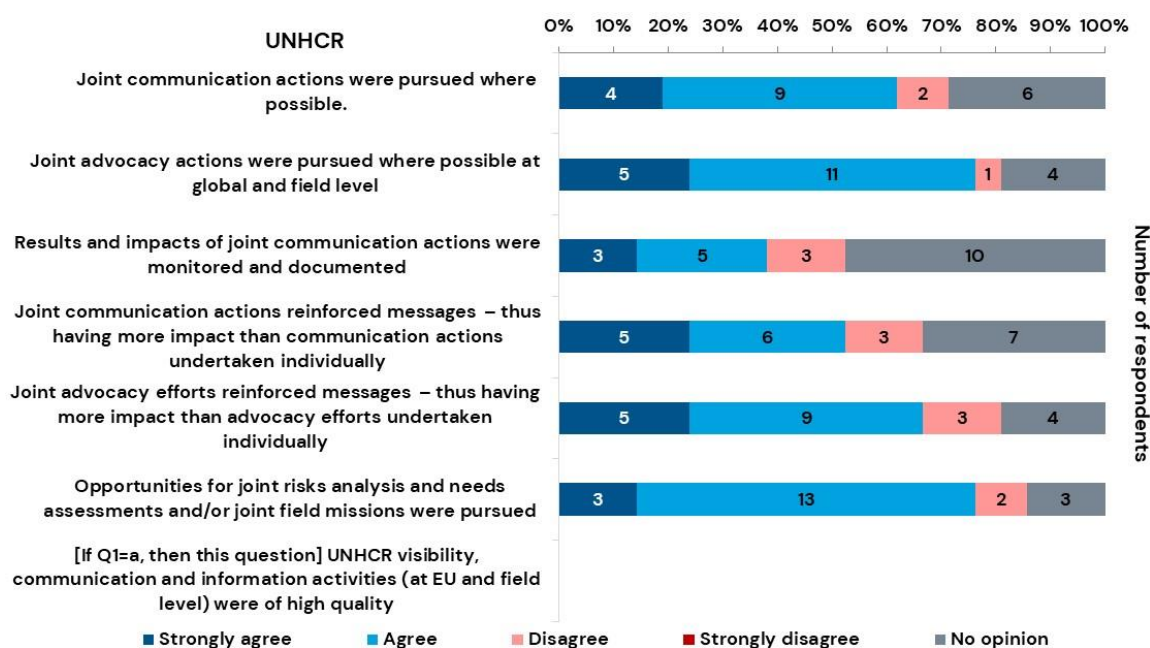
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 47. Q6 To what extent do you agree or disagree with the following statements? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 48. Q6 To what extent do you agree or disagree with the following statements? (UNHCR n=21)²



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Key points raised in the open question covered (only by DG ECHO)

Overall, all eight comments referred to a **limited or lack of communication** between the partners, which extends into advocacy and interest from UNHCR. These comments came from respondents from Brussels HQ, regional office, and country or sub-country offices.

At field level, UNHCR is **reluctant to include DG ECHO's visibility in many items**, and when it does, it is **with a minimum of visibility**. For example, in Tajikistan, UNHCR included visibility items in a detention camp for Afghan refugees that was not funded by DG ECHO, as DG ECHO was not in agreement with the creation of that camp (one respondent from Brussels HQ)

In most of the cases, the visibility and communication activities were related to UNHCR visibility and **not enough to acknowledge**, in the country of implementation, **the support the EU is providing to UNHCR to run its activities** (one respondent from Brussels HQ)

UNHCR was always very low profile in promoting DG ECHO support, **allegedly because the actions are usually multi-donors** (one respondent from Brussels HQ)

Figure 49. Q6 Organisation breakdown

Joint communication actions were pursued where possible.						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	4	12	7	2	18

² The last item was not asked to UNHCR representatives

Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	1	4	0	6
DG ECHO HQ in Brussels	n=6	0	2	1	1	2
DG ECHO Regional Office	n=5	0	0	0	1	4
Location (UNHCR)						
Country and sub-country office	n=21	4	9	2	0	6
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	2	5	0	6
5 years or more	n=8	0	0	0	2	6
Years of experience (UNHCR)						
1 year or less	n=9	3	4	1	0	1
2-4 years	n=8	1	3	0	0	4
5 years or more	n=4	0	2	1	0	1
Joint advocacy actions were pursued where possible at global and field level						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	5	20	6	1	11
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	4	4	0	3
DG ECHO HQ in Brussels	n=6	0	3	1	1	1
DG ECHO Regional Office	n=5	0	2	0	0	3
Location (UNHCR)						
Country and sub-country office	n=21	5	11	1	0	4
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	5	5	0	3
5 years or more	n=8	0	3	0	1	4

Years of experience (UNHCR)						
1 year or less	n=9	3	3	0	0	3
2-4 years	n=8	1	6	0	0	1
5 years or more	n=4	1	2	1	0	0
Results and impacts of joint communication actions were monitored and documented						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	3	7	9	0	24
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	1	3	0	7
DG ECHO HQ in Brussels	n=6	0	1	3	0	2
DG ECHO Regional Office	n=5	0	0	0	0	5
Location (UNHCR)						
Country and sub-country office	n=21	3	5	3	0	10
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	1	0	0
2-4 years	n=13	0	2	3	0	8
5 years or more	n=8	0	0	2	0	6
Years of experience (UNHCR)						
1 year or less	n=9	3	1	2	0	3
2-4 years	n=8	0	3	0	0	5
5 years or more	n=4	0	1	1	0	2
Joint communication actions reinforced messages – thus having more impact than communication actions undertaken individually						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion

Total	n=43	5	10	8	0	20
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	1	2	0	8
DG ECHO HQ in Brussels	n=6	0	2	3	0	1
DG ECHO Regional Office	n=5	0	1	0	0	4
Location (UNHCR)						
Country and sub-country office	n=21	5	6	3	0	7
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	2	4	0	7
5 years or more	n=8	0	1	1	0	6
Years of experience (UNHCR)						
1 year or less	n=9	4	3	1	0	1
2-4 years	n=8	1	1	1	0	5
5 years or more	n=4	0	2	1	0	1
Joint advocacy efforts reinforced messages – thus having more impact than advocacy efforts undertaken individually						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	7	18	7	0	11
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	5	3	0	3
DG ECHO HQ in Brussels	n=6	1	2	1	0	2
DG ECHO Regional Office	n=5	1	2	0	0	2
Location (UNHCR)						
Country and sub-country office	n=21	5	9	3	0	4
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	1	5	3	0	4
5 years or more	n=8	1	3	1	0	3

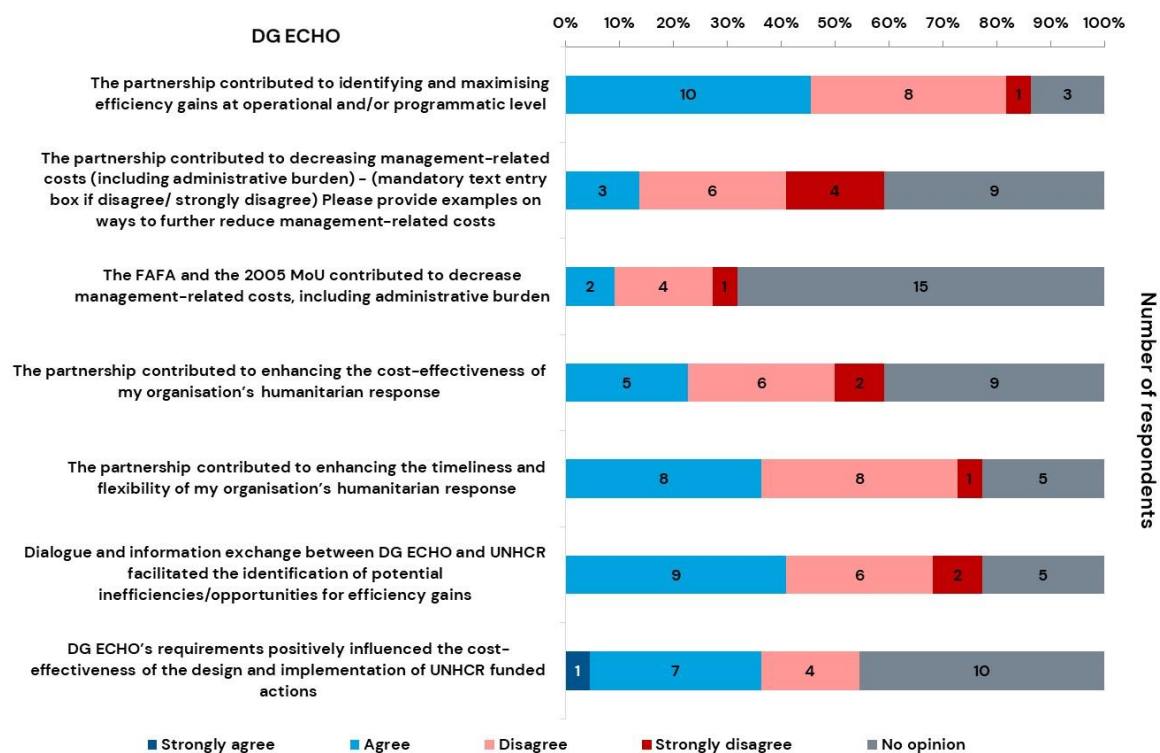
Years of experience (UNHCR)						
1 year or less	n=9	2	4	1	0	2
2-4 years	n=8	1	4	1	0	2
5 years or more	n=4	2	1	1	0	0
Opportunities for joint risks analysis and needs assessments and/or joint field missions were pursued						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	3	19	12	2	7
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	2	7	1	1
DG ECHO HQ in Brussels	n=6	0	2	2	0	2
DG ECHO Regional Office	n=5	0	2	1	1	1
Location (UNHCR)						
Country and sub-country office	n=21	3	13	2	0	3
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	3	8	0	2
5 years or more	n=8	0	2	2	2	2
Years of experience (UNHCR)						
1 year or less	n=9	3	4	0	0	2
2-4 years	n=8	0	6	1	0	1
5 years or more	n=4	0	3	1	0	0
[If Q1=a, then this question] UNHCR visibility, communication and information activities (at EU and field level) were of high quality						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=22	0	8	6	2	6

Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	6	2	1	2
DG ECHO HQ in Brussels	n=6	0	0	4	0	2
DG ECHO Regional Office	n=5	0	2	0	1	2
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	6	3	1	3
5 years or more	n=8	0	2	3	1	2

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

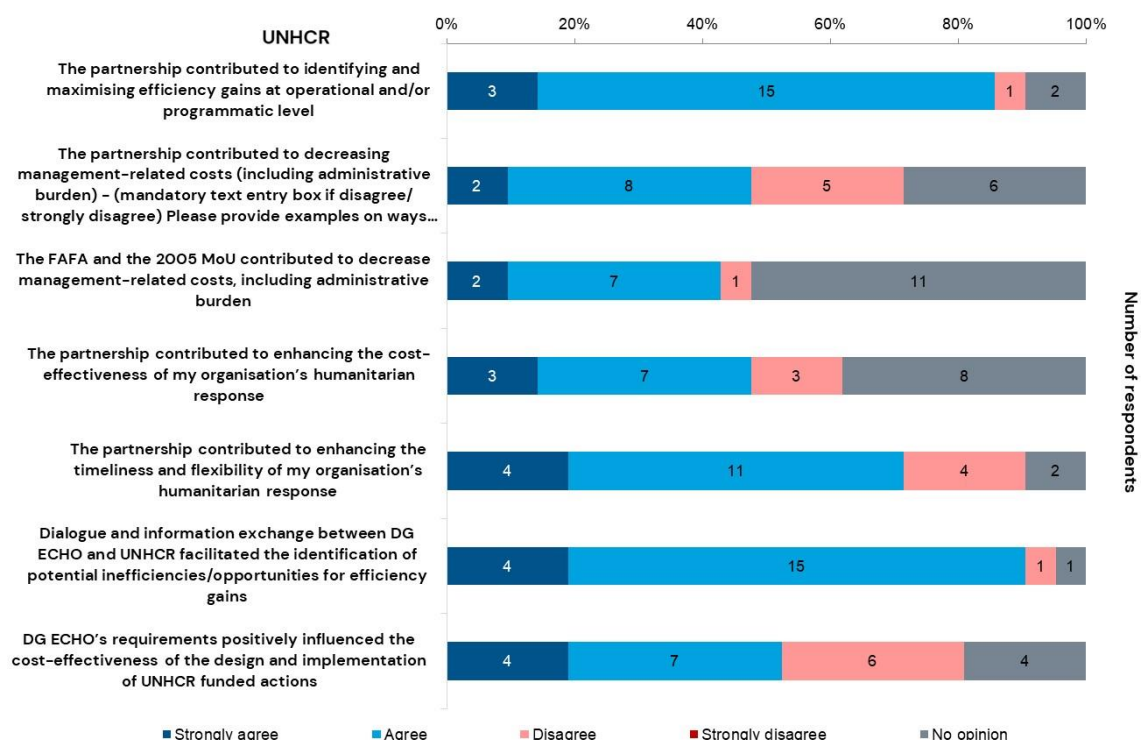
A5.2.4 Efficiency and cost-effectiveness

Figure 50. Q7 To what extent do you agree or disagree with the following statements? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 51. Q7 To what extent do you agree or disagree with the following statements? (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 32. Q7 Open questions by respondent organisation

Key points raised in the open question covered:

	DG ECHO	UNHCR
Please provide examples of how the partnership contributed to enhancing the cost-effectiveness of response	<p>Overall, perceptions of UNHCR are not positive in this area. Several respondents from different offices highlighted cost inefficiency and focus on particular activities from UNHCR's side. However, there were some positive comments, as seen below:</p> <p>Negative opinions</p> <p>Overall, views of limited cost-effectiveness in UNHCR activities (at least four respondents)</p> <p>Frequent delays in proposals and reports, which do not always meet minimum quality requirements, creating additional work for DG ECHO (one respondent from Brussels HQ)</p> <p>High costs of maintaining a parallel coordination structure at country level (one respondent from a country or sub-country office)</p>	<p>Overall, comments indicate that there are certain elements that allow enhancing cost-effectiveness of responses.</p> <p>One participant specified that UNHCR has considered cost-effectiveness of the implementation in their discussions with DG ECHO (e.g., if a project can be implemented by a partner funded by DG ECHO more cost-effectively, UNHCR agrees with DG ECHO to support the partner)</p> <p>Another participant highlighted that the partnership supported activities that were conducted through existing implementation mechanisms and systems already in place.</p> <p>Another participant thinks the financing of coordination structures (such as the RMRP) enhances the effectiveness of the response, not only</p>

	DG ECHO	UNHCR
	<p>Positive opinions</p> <p>UNHCR is able to bring partners together and establish joint actions that are beneficial for cost-effectiveness (one respondent from a country or sub-country office)</p> <p>UNHCR relies on implementing partners strongly rooted in the communities (one respondent from a country or sub-country office)</p> <p>UNHCR works as an intermediary for DG ECHO to reach local CSOs (one respondent from a country or sub-country office)</p>	<p>for UN agencies but also for civil society organizations.</p> <p>Participating in the working groups of the coordination structures allows constant interaction and fresh information on what is going on in the field and which answers are needed (ne participant)</p> <p>Frequent field missions are important to touch base with reality and protection gaps affecting the survival and dignity of people forced to flee (one participant).</p> <p>One participant was not sure if having a funding contract with ECHO contributes to enhancing cost-effectiveness, given the “non-flexibility of the funding which are tightly earmarked, it does not allow my organization to use them to respond to the needs whenever wherever those occur”</p>
<p>Please provide examples of how the partnership contributed to enhancing the timeliness and flexibility of response</p>	<p>Similar to the previous statement, several respondents focussed on late reports and limitations, but positive comments related to fast actions from UNHCR and certain possibilities for improvements.</p> <p>Negative opinions</p> <p>As a donor, DG ECHO has to adapt to UNHCR reporting frames and data collection tools, as well as delays in report submission (one respondent)</p> <p>The nature and mandate of UNHCR does not foster timeliness and flexibility (two respondents)</p> <p>Positive opinions</p> <p>UNHCR is crucial for protection-related work and coordination with the authorities (one respondent from a country office)</p> <p>UNHCR is able to flexibly respond to unforeseen events, namely short term protection emergency response intervention (one respondent from a country office)</p>	<p>Overall, respondents acknowledge that UNHCR has been able to deliver concrete results that improved the asylum system thanks to ECHO funding. However, there are some objectives, activities, indicators, and timelines that pose limitations for UNHCR, and need more flexibility</p> <p>Negative opinions</p> <p>Tightly earmarked funds hinder the flexibility of the response (one respondent)</p> <p>Being bound by specific objectives, activities, indicators, and timelines is a limitation for UNHCR. More flexibility would mean great impact and less administrative burden to UNHCR and DG ECHO (one respondent)</p> <p>Positive opinions</p> <p>The partnership contributed to the timeliness and flexibility of UNHCR's humanitarian response in Bangladesh through its multi-donor and multi-sector funding approaches, as well as 12-month implementation period (January-December) which is in line with UNHCR's own implementation/reporting timelines (one respondent)</p>

	DG ECHO	UNHCR
		<p>DG ECHO discusses with UNHCR on timelines of projects when required. They also use this information to plan their donor missions (one respondent)</p> <p>Thanks to DG ECHO financing, UNHCR and its partners have been able to cooperate delivering concrete results and achieving goals that improved the asylum system and contributed to its shortfalls (one respondent)</p> <p>The retroactive coverage of the funding was very helpful as it allowed for flexible management of overall funding (one respondent)</p>
<i>Please provide examples on ways to further reduce management-related costs</i>	Use DG ECHO KOI and KRI (one respondent from Brussels HQ)	<p>DG ECHO reporting requirements are currently 'exorbitant' (one respondent)</p> <p>Need for more flexible monitoring (one respondent)</p> <p>Huge administrative burden compared to most of other donors. (one respondent)</p>
<i>Please provide examples on ways to further to mitigate inefficiencies</i>	<p>At least six respondents insisted on improving the dialogue between the two partners. However, one respondent from HQ mentioned that implementation beyond dialogue should be improved as well.</p> <p>UNHCR does not usually follow DG ECHO's recommendations, namely when raising issues about delay in reporting, UNHCR agrees but does not take further action (one respondent from Brussels HQ)</p> <p>Increase amount of information shared by the HCR (one respondent from a country or sub-country office)</p> <p>Foster dialogue and information exchange, as well as common partnership approach (several respondents, as part of dialogue-related comments)</p> <p>Overall, strengthen dialogue at country and regional level (e.g., through bi-monthly meetings to identify opportunities, address inefficiencies and improve the added value of DG ECHO funding to UNCHR)</p>	Dialogue needs to improve, and DG ECHO needs to move from seeing itself as a funder to a partner (one respondent)
<i>Please provide examples on how DG ECHO's requirements positively influenced</i>	UNHCR must systematically follow DG ECHO's requirements and project advice (one respondent from Brussels HQ)	The elimination of the separation between nationalities, which obliged to write two different projects in the past, was positively viewed, as well as the decision to implement 'extension' for

	DG ECHO	UNHCR
the cost-effectiveness of actions		projects that have the same objectives through different years. (two respondents)

Figure 52. Q7 organisation breakdown

The partnership contributed to identifying and maximising efficiency gains at operational and/or programmatic level						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
<i>Total</i>	<i>n=43</i>	3	25	9	1	5
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	6	3	1	1
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	3	3	0	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	0	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	3	15	1	0	2
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0
<i>2-4 years</i>	<i>n=13</i>	0	6	4	1	2
<i>5 years or more</i>	<i>n=8</i>	0	3	4	0	1
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	2	6	0	0	1
<i>2-4 years</i>	<i>n=8</i>	0	7	0	0	1
<i>5 years or more</i>	<i>n=4</i>	1	2	1	0	0
The partnership contributed to decreasing management-related costs (including administrative burden) - (mandatory text entry box if disagree/ strongly disagree) Please provide examples on ways to further reduce management-related costs						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
<i>Total</i>	<i>n=43</i>	2	11	11	4	15
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	2	3	2	4
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	1	2	1	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	1	1	3
Location (UNHCR)						

Country and sub-country office	n=21	2	8	5	0	6
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	3	3	3	4
5 years or more	n=8	0	0	3	1	4
Years of experience (UNHCR)						
1 year or less	n=9	2	4	2	0	1
2-4 years	n=8	0	3	1	0	4
5 years or more	n=4	0	1	2	0	1
The FAFA and the 2005 MoU contributed to decrease management-related costs, including administrative burden						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	2	9	5	1	26
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	1	2	0	8
DG ECHO HQ in Brussels	n=6	0	0	2	1	3
DG ECHO Regional Office	n=5	0	1	0	0	4
Location (UNHCR)						
Country and sub-country office	n=21	2	7	1	0	11
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	2	2	0	9
5 years or more	n=8	0	0	2	1	5
Years of experience (UNHCR)						
1 year or less	n=9	2	3	0	0	4
2-4 years	n=8	0	2	0	0	6
5 years or more	n=4	0	2	1	0	1
The partnership contributed to enhancing the cost-effectiveness of my organisation's humanitarian response						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	3	12	9	2	17

Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	4	3	1	3
DG ECHO HQ in Brussels	n=6	0	0	2	1	3
DG ECHO Regional Office	n=5	0	1	1	0	3
Location (UNHCR)						
Country and sub-country office	n=21	3	7	3	0	8
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	3	5	1	4
5 years or more	n=8	0	2	1	1	4
Years of experience (UNHCR)						
1 year or less	n=9	1	3	1	0	4
2-4 years	n=8	1	3	1	0	3
5 years or more	n=4	1	1	1	0	1
The partnership contributed to enhancing the timeliness and flexibility of my organisation's humanitarian response						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	4	19	12	1	7
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	6	4	0	1
DG ECHO HQ in Brussels	n=6	0	2	2	1	1
DG ECHO Regional Office	n=5	0	0	2	0	3
Location (UNHCR)						
Country and sub-country office	n=21	4	11	4	0	2
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	7	5	0	1
5 years or more	n=8	0	1	3	1	3
Years of experience (UNHCR)						
1 year or less	n=9	2	4	2	0	1
2-4 years	n=8	1	4	2	0	1

5 years or more n=4 1 3 0 0 0

Dialogue and information exchange between DG ECHO and UNHCR facilitated the identification of potential inefficiencies/opportunities for efficiency gains

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
------------------	---	----------------	-------	----------	-------------------	------------

Total n=43 4 24 7 2 6

Location (DG ECHO)

DG ECHO Country and sub-country office n=11 0 4 3 2 2

DG ECHO HQ in Brussels n=6 0 3 2 0 1

DG ECHO Regional Office n=5 0 2 1 0 2

Location (UNHCR)

Country and sub-country office n=21 4 15 1 0 1

Years of experience (DG ECHO)

1 year or less n=1 0 1 0 0 0

2-4 years n=13 0 3 4 2 4

5 years or more n=8 0 5 2 0 1

Years of experience (UNHCR)

1 year or less n=9 3 6 0 0 0

2-4 years n=8 0 7 0 0 1

5 years or more n=4 1 2 1 0 0

DG ECHO's requirements positively influenced the cost-effectiveness of the design and implementation of UNHCR funded actions

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
------------------	---	----------------	-------	----------	-------------------	------------

Total n=43 5 14 10 0 14

Location (DG ECHO)

DG ECHO Country and sub-country office n=11 0 5 2 0 4

DG ECHO HQ in Brussels n=6 0 1 1 0 4

DG ECHO Regional Office n=5 1 1 1 0 2

Location (UNHCR)

Country and sub-country office n=21 4 7 6 0 4

Years of experience (DG ECHO)

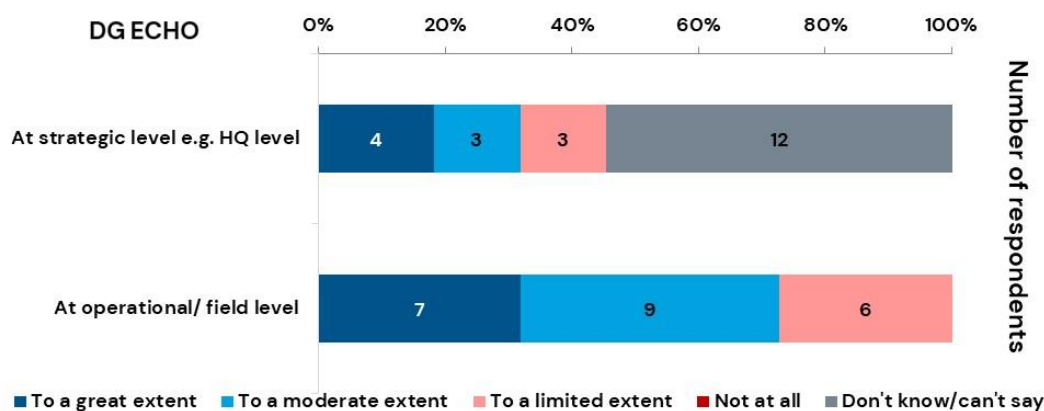
1 year or less n=1 0 0 0 0 1

2-4 years	n=13	0	3	4	0	6
5 years or more	n=8	1	4	0	0	3
Years of experience (UNHCR)						
1 year or less	n=9	3	2	2	0	2
2-4 years	n=8	0	3	3	0	2
5 years or more	n=4	1	2	1	0	0

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

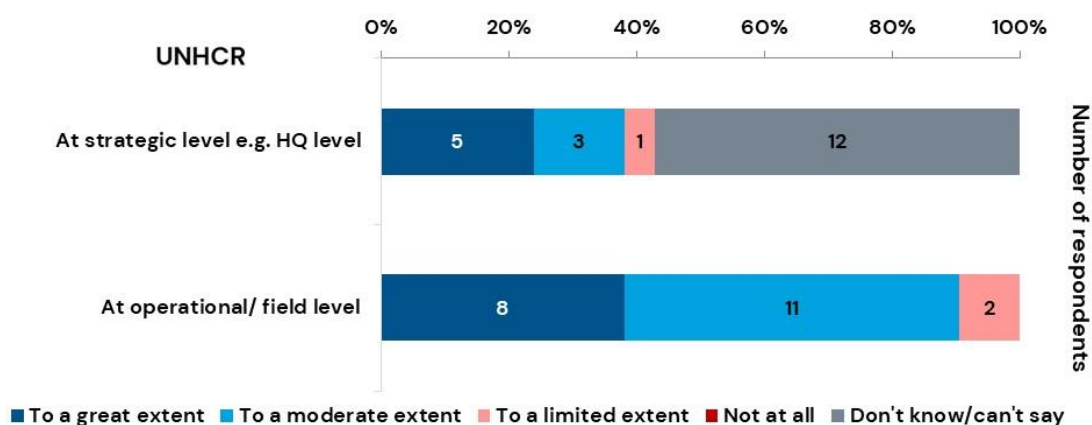
A5.2.5 Dialogue, communication and cooperation

Figure 53. Q8 To what extent was there a structured, strategic, timely and functional dialogue and information exchange (formal and/or informal) between DG ECHO and UNHCR staff? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 54. Q8 To what extent was there a structured, strategic, timely and functional dialogue and information exchange (formal and/or informal) between DG ECHO and UNHCR staff? (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

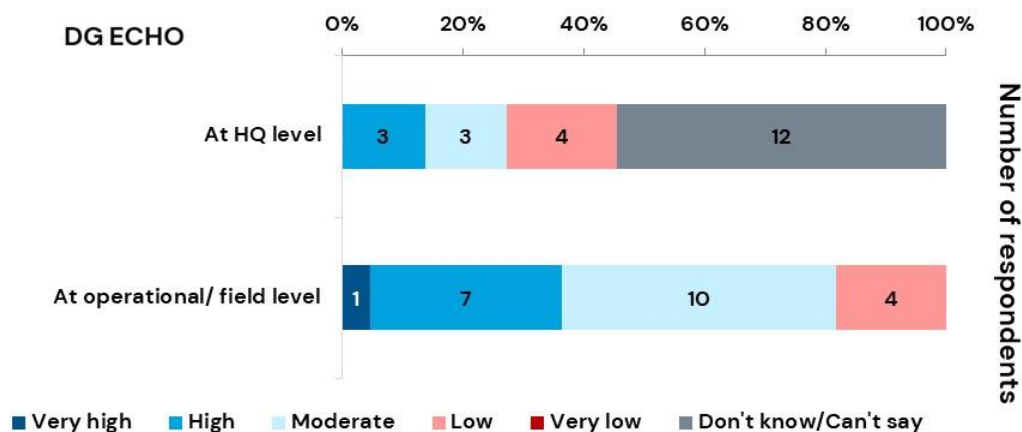
Figure 55. Q8 Organisation breakdown

At strategic level e.g. HQ level						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
Total	n=43	9	6	4	0	24
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	2	0	1	0	8
DG ECHO HQ in Brussels	n=6	2	2	2	0	0

DG ECHO Regional Office	n=5	0	1	0	0	4
Location (UNHCR)						
Country and sub-country office	n=21	5	3	1	0	12
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	2	2	1	0	8
5 years or more	n=8	2	0	2	0	4
Years of experience (UNHCR)						
1 year or less	n=9	2	1	1	0	5
2-4 years	n=8	1	1	0	0	6
5 years or more	n=4	2	1	0	0	1
At operational/ field level						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
Total	n=43	15	20	8	0	0
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	4	4	3	0	0
DG ECHO HQ in Brussels	n=6	2	2	2	0	0
DG ECHO Regional Office	n=5	1	3	1	0	0
Location (UNHCR)						
Country and sub-country office	n=21	8	11	2	0	0
Years of experience (DG ECHO)						
1 year or less	n=1	1	0	0	0	0
2-4 years	n=13	4	7	2	0	0
5 years or more	n=8	2	2	4	0	0
Years of experience (UNHCR)						
1 year or less	n=9	5	4	0	0	0
2-4 years	n=8	1	7	0	0	0
5 years or more	n=4	2	0	2	0	0

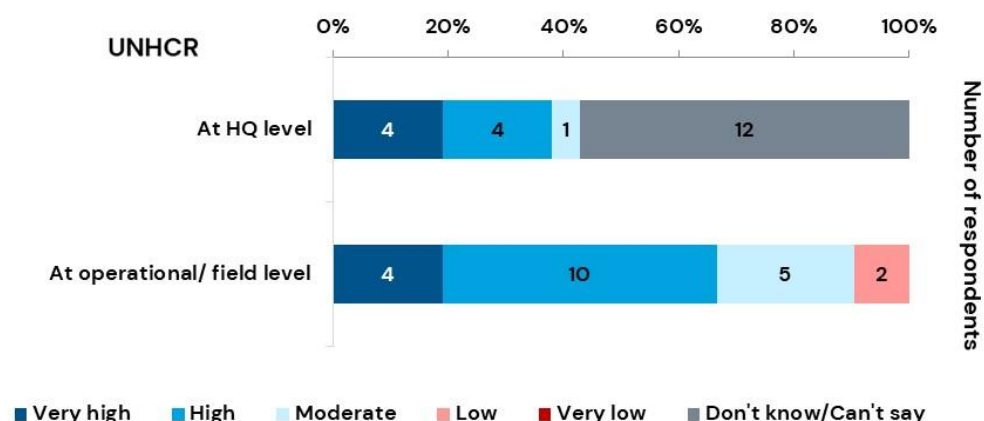
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 56. Q9 How would you rate the quality of the dialogue taking place between DG ECHO and UNHCR: (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 57. Q9 How would you rate the quality of the dialogue taking place between DG ECHO and UNHCR: (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 33. Q9 Open questions by respondent organisation

	DG ECHO	UNHCR
Please explain why you rate the quality of the dialogue low and describe the issues affecting the quality of the dialogue	<p>Dialogue takes place mostly among senior managers, leaving aside the actual issues operational people are concerned about (one respondent from Brussels HQ)</p> <p>UNHCR sees DG ECHO as a donor only and does not present much information on how its actions are coordinated or take into consideration other actors (one respondent from Brussels HQ)</p> <p>Even if sometimes dialogue is good and fluent, UNHCR doesn't follow some of DG ECHO's requirements, policies, deadlines, quality of the proposal or advises about</p>	<p>Lack of adherence to principles of the Partnership make both organisations work in parallel. DG ECHO has showed its preference to work through NGOs and not UNHCR (one respondent)</p> <p>Disagreements due to limited funding and conflicting priorities at country level (one respondent)</p>

	how to improve concrete projects.(one respondent from Brussels HQ)	
<i>In your view, how could the quality of the dialogue be enhanced at strategic and/or operational level?</i>	<p>UNHCR should take into account the comments made by DG ECHO during this dialogue, as well as to improve the timeliness and quality of proposals and reports (one respondent)</p> <p>Increasing proactivity from HCR side in term of communication. DG ECHO field offices always have to request information and meetings. (one respondent from a country or sub-country office)</p> <p>Creating dialogue on strategic and operational issues, including thematic and technical experts and HQ people (one respondent from Brussels HQ)</p> <p>Fostering more frequent and meaningful interaction (one respondent from a country or sub-country office)</p>	<p>Fostering dialogue on the Partnership (two respondents)</p> <p>UNHCR and DG ECHO need to have more conversations around strategic issues and how to jointly work together and advocate alongside other development partners and stakeholders (one respondent)</p> <p>One respondent highlighted that, although the dialogue is low, it does not mean the response is not effective, using Malaysia as an example.</p>

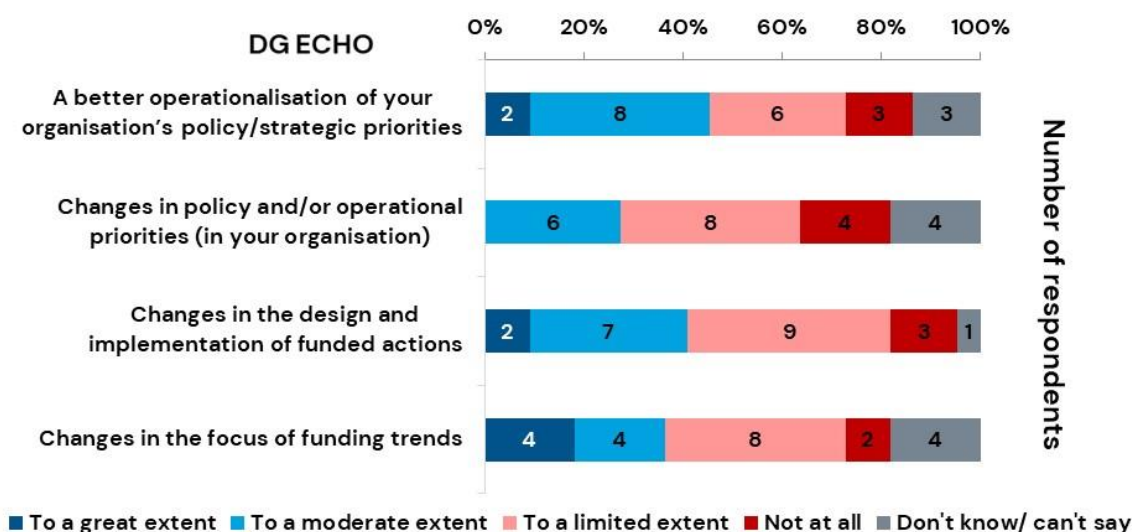
Figure 58. Q9 Organisation breakdown

At HQ level							
Profile/Category	n	Very high	High	Moderate	Low	Very low	Don't know/ Can't say
<i>Total</i>	<i>n=43</i>	4	7	4	4	0	24
Location (DG ECHO)							
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	1	1	1	0	8
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	2	1	3	0	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	1	0	0	4
Location (UNHCR)							
<i>Country and sub-country office</i>	<i>n=21</i>	4	4	1	0	0	12
Years of experience (DG ECHO)							
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0	0
<i>2-4 years</i>	<i>n=13</i>	0	1	2	2	0	8
<i>5 years or more</i>	<i>n=8</i>	0	1	1	2	0	4
Years of experience (UNHCR)							
<i>1 year or less</i>	<i>n=9</i>	3	1	0	0	0	5
<i>2-4 years</i>	<i>n=8</i>	0	2	0	0	0	6
<i>5 years or more</i>	<i>n=4</i>	1	1	1	0	0	1

At operational/ field level							
Profile/Category	n	Very high	High	Moderate	Low	Very low	Don't know/ Can't say
<i>Total</i>	<i>n=43</i>	5	17	15	6	0	0
Location (DG ECHO)							
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	1	4	5	1	0	0
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	1	3	2	0	0
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	2	2	1	0	0
Location (UNHCR)							
<i>Country and sub-country office</i>	<i>n=21</i>	4	10	5	2	0	0
Years of experience (DG ECHO)							
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0	0
<i>2-4 years</i>	<i>n=13</i>	1	3	6	3	0	0
<i>5 years or more</i>	<i>n=8</i>	0	3	4	1	0	0
Years of experience (UNHCR)							
<i>1 year or less</i>	<i>n=9</i>	3	5	1	0	0	0
<i>2-4 years</i>	<i>n=8</i>	0	4	4	0	0	0
<i>5 years or more</i>	<i>n=4</i>	1	1	0	2	0	0

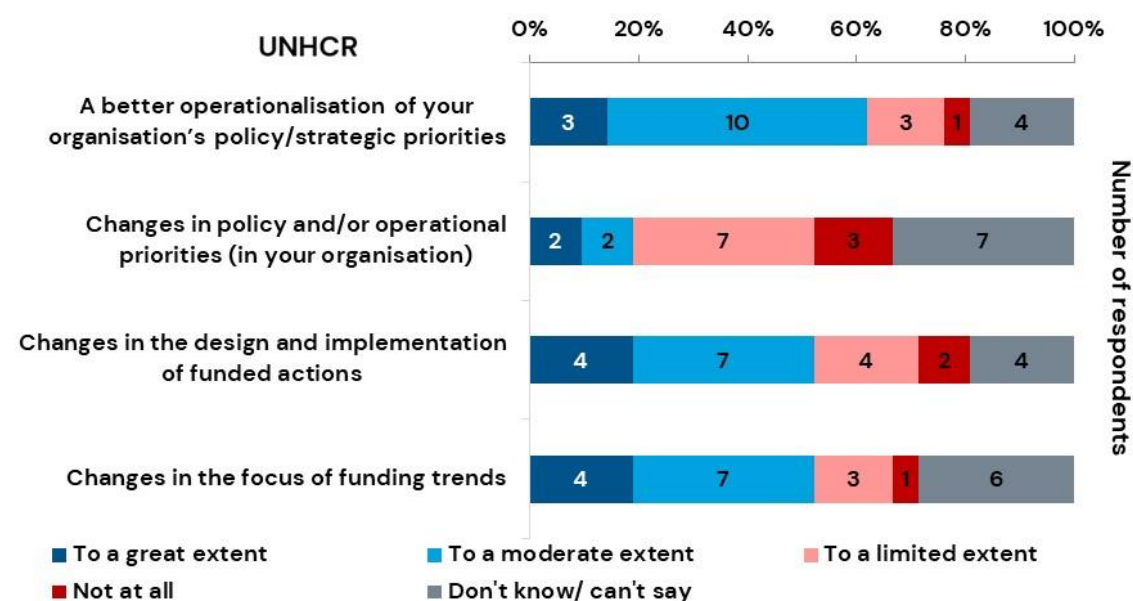
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 59. Q10 To what extent did strategic and operational dialogue and information exchange between DG ECHO and UNHCR lead to: (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 60. Q10 To what extent did strategic and operational dialogue and information exchange between DG ECHO and UNHCR lead to: (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 34. Q10 Open questions by respondent organisation

Key points raised in the open question included:

	DG ECHO	UNHCR
A better operationalisation of your organisation's policy/strategic priorities	Partnership helped better understand UNHCR capacities and priorities in the field (one respondent from a country or sub-country office)	Dialogue helped to update priorities and provide inputs to donors (one respondent) DG ECHO's financial and diplomatic support has helped facilitate the

	DG ECHO	UNHCR
	Some misalignments in specific projects were reported (one respondent from Brussels HQ)	implementation of UNHCR's priorities (one respondent)
Changes in policy and/or operational priorities (in your organisation)	<p>Concerns that most times dialogue occurs at DG ECHO HQ level, having thus little impact on operational priorities (one respondent from Brussels HQ)</p> <p>Monitoring missions were key to have a better understanding of the needs in the ground and adapt the operational strategy (one respondent from a country or sub-country office)</p> <p>Examples:</p> <p>DG ECHO accepted new UNHCR mandate to work on IDP in DRC (one respondent from a country or sub-country office)</p> <p>Inclusion of legal aid/assistance into DG ECHO programmes (one respondent from a country or sub-country office)</p>	Impact of dialogue was rated as small on operational priorities, and no specific changes were reported (six respondents)
Changes in the design and implementation of funded actions	<p>Information/updates/strategies provided by UNHCR are often used to appraise relevance and effectiveness of partners funded actions (one respondent from a country or sub-country office)</p> <p>Operational dialogue is used to ensure that DG ECHO funding has an added value. (one respondent from a country or sub-country office)</p>	<p>Overall, responses are mixed, but there can be changes when needed by UNHCR.</p> <p>Use of modification request to demand additional funds from DG ECHO (one respondent)</p> <p>The EU Minimum Environmental Requirements has influenced the structure of proposals (one respondent)</p>
Changes in the focus of funding trends between DG ECHO and UNHCR	<p>Overall, limited impact of dialogue with UNHCR on DG ECHO's funding trends</p> <p>Even if UNHCR is trying to diversify their activities, DG ECHO's interest to fund them is based on their added value on protection activities, particularly registration of and documentation for refugees (one respondent from Brussels HQ)</p> <p>Example</p> <p>DG ECHO stopped supporting IDP activities and focused only on refugees since DG ECHO did not share UNHCR's strategic approach when assisting IDPs (one respondent from Brussels HQ)</p>	<p>Concerns on how funding trends seem to be contingent on personal relationships rather than actual needs (one respondent)</p> <p>UNHCR mostly focuses on core mandate (one respondent)</p>

Figure 61. Q10 Organisation breakdown

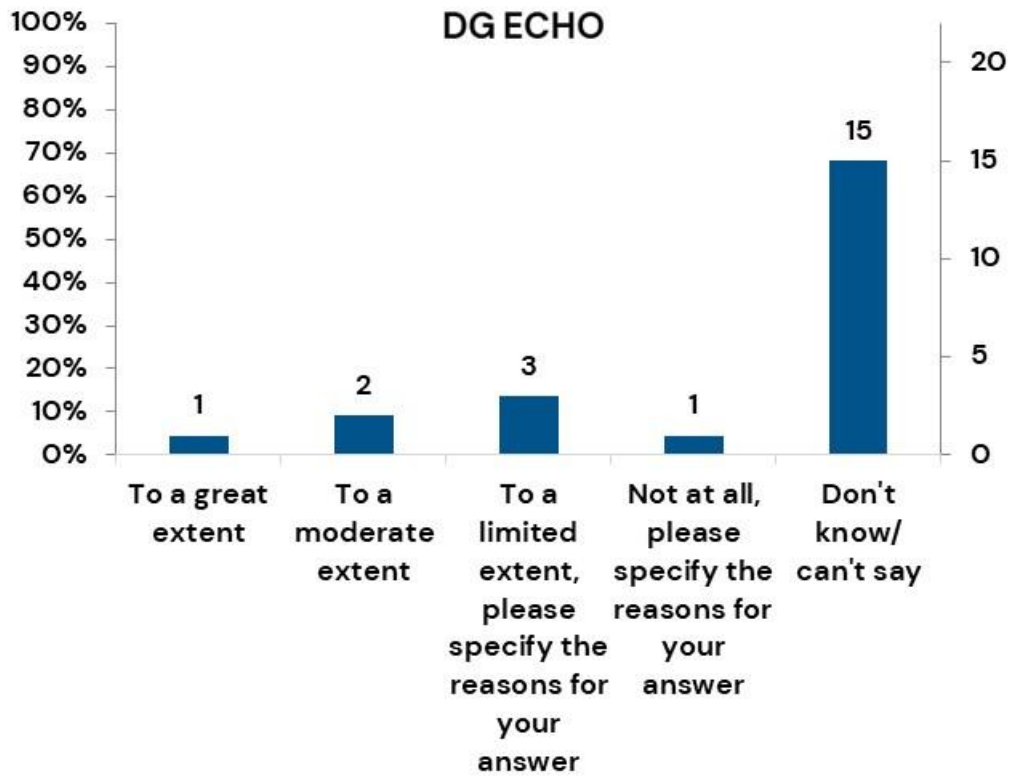
A better operationalisation of your organisation's policy/strategic priorities						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	5	18	9	4	7
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	1	6	2	1	1
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	1	2	0	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	2	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	3	10	3	1	4
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	2	4	4	2	1
<i>5 years or more</i>	<i>n=8</i>	0	4	2	1	1
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	2	4	0	0	3
<i>2-4 years</i>	<i>n=8</i>	0	5	2	0	1
<i>5 years or more</i>	<i>n=4</i>	1	1	1	1	0
Changes in policy and/or operational priorities (in your organisation)						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	2	8	15	7	11
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	6	3	1	1
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	0	3	0	3
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	2	3	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	2	2	7	3	7

Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	4	5	3	1
5 years or more	n=8	0	2	3	1	2
Years of experience (UNHCR)						
1 year or less	n=9	1	1	1	1	5
2-4 years	n=8	0	1	4	1	2
5 years or more	n=4	1	0	2	1	0
Changes in the design and implementation of funded actions						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
Total	n=43	6	14	13	5	5
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	2	6	3	0	0
DG ECHO HQ in Brussels	n=6	0	1	4	0	1
DG ECHO Regional Office	n=5	0	0	2	3	0
Location (UNHCR)						
Country and sub-country office	n=21	4	7	4	2	4
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	1	4	5	2	1
5 years or more	n=8	1	2	4	1	0
Years of experience (UNHCR)						
1 year or less	n=9	2	3	1	0	3
2-4 years	n=8	1	3	2	1	1
5 years or more	n=4	1	1	1	1	0
Changes in the focus of funding trends						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say

<i>Total</i>	<i>n=43</i>	8	11	11	3	10
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	4	3	3	0	1
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	1	2	2	1
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	3	0	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	4	7	3	1	6
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	2	4	7	0	0
<i>5 years or more</i>	<i>n=8</i>	2	0	1	2	3
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	2	3	0	0	4
<i>2-4 years</i>	<i>n=8</i>	0	3	2	1	2
<i>5 years or more</i>	<i>n=4</i>	2	1	1	0	0

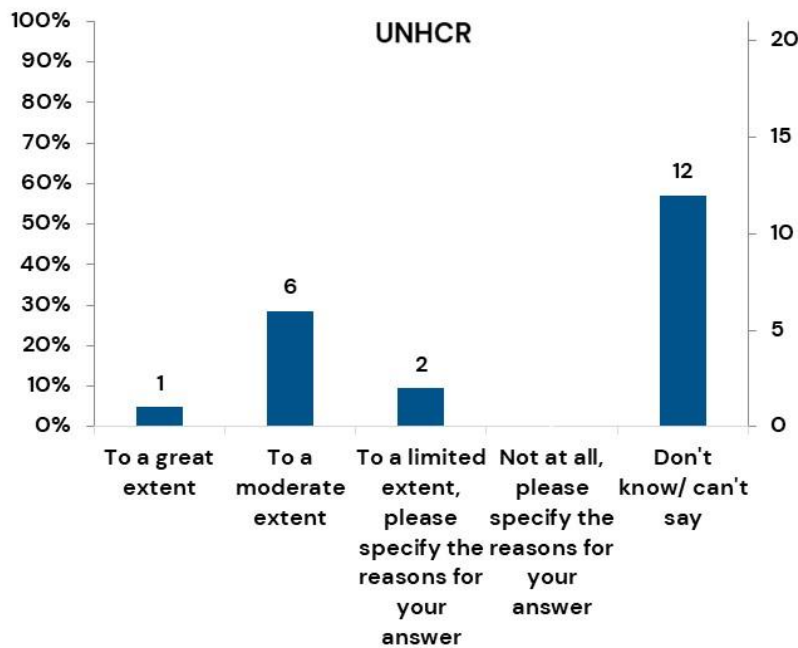
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 62. Q11 To what extent has the annual High-level dialogue between DG ECHO and UNHCR positively impacted the Strategic Partnership? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 63. Q11 To what extent has the annual High-level dialogue between DG ECHO and UNHCR positively impacted the Strategic Partnership? (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 35. Q11 Open questions by respondent organisation

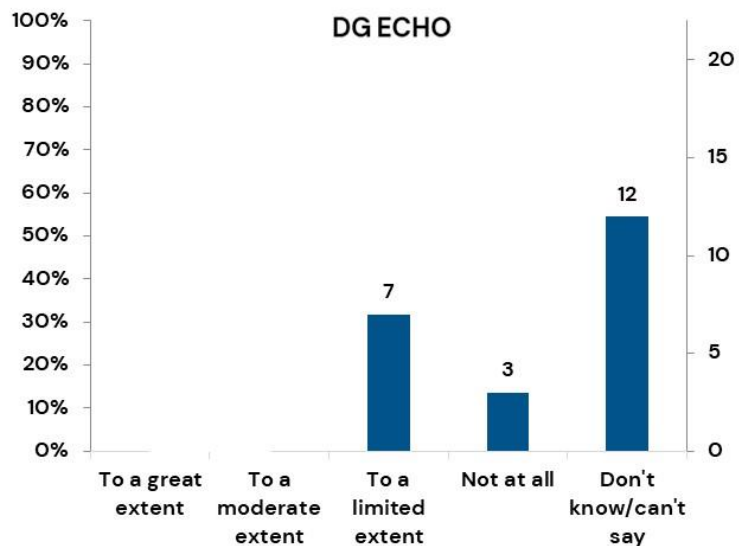
	DG ECHO	UNHCR
If to a limited extent, please specify the reasons for your answer	Theoretical discussions at HQ level are not always relevant for the field reality (one respondent from a country or sub-country office) Impact of the dialogues at field level is very limited (one respondent from a country or sub-country office)	Only one comment referring to disagreements due to limited funding and conflicting priorities at country level
If not at all, please specify the reasons for your answer	One respondent from Brussels HQ mentioned lack of transparency of high-level dialogue (although this is applicable to other organisations)	NA

Figure 64. Q11 Organisation breakdown

Profile/Category	n	To a great extent	To a moderate extent	To a limited extent, please specify the reasons for your answer	Not at all, please specify the reasons for your answer	Don't know/ can't say
<i>Total</i>	<i>n=43</i>	2	8	5	1	27
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	2	1	0	8
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	0	0	1	4
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	2	0	3
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	1	6	2	0	12
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	1	1	1	0	10
<i>5 years or more</i>	<i>n=8</i>	0	1	2	1	4
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	1	2	1	0	5
<i>2-4 years</i>	<i>n=8</i>	0	3	0	0	5
<i>5 years or more</i>	<i>n=4</i>	0	1	1	0	2

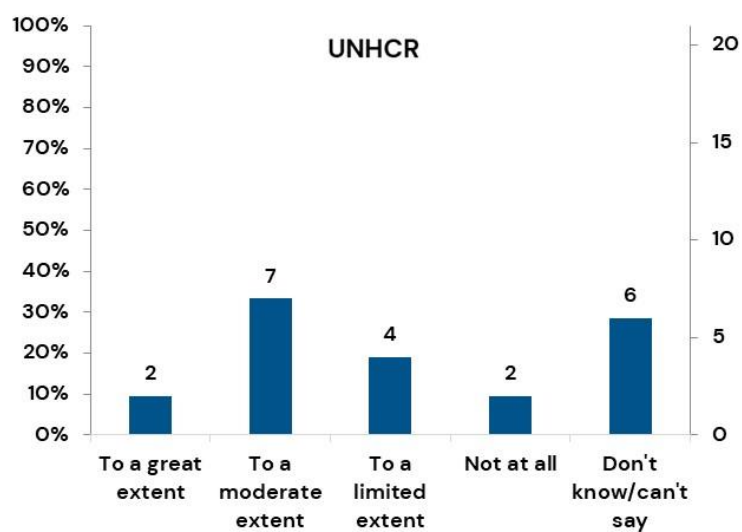
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 65. Q12 To what extent were UNHCR's local Implementing Partners adequately informed/aware of the outcomes of existing dialogue and information exchange between DG ECHO and UNHCR (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 66. Q12 To what extent were UNHCR's local Implementing Partners adequately informed/aware of the outcomes of existing dialogue and information exchange between DG ECHO and UNHCR (UNHCR n=21)



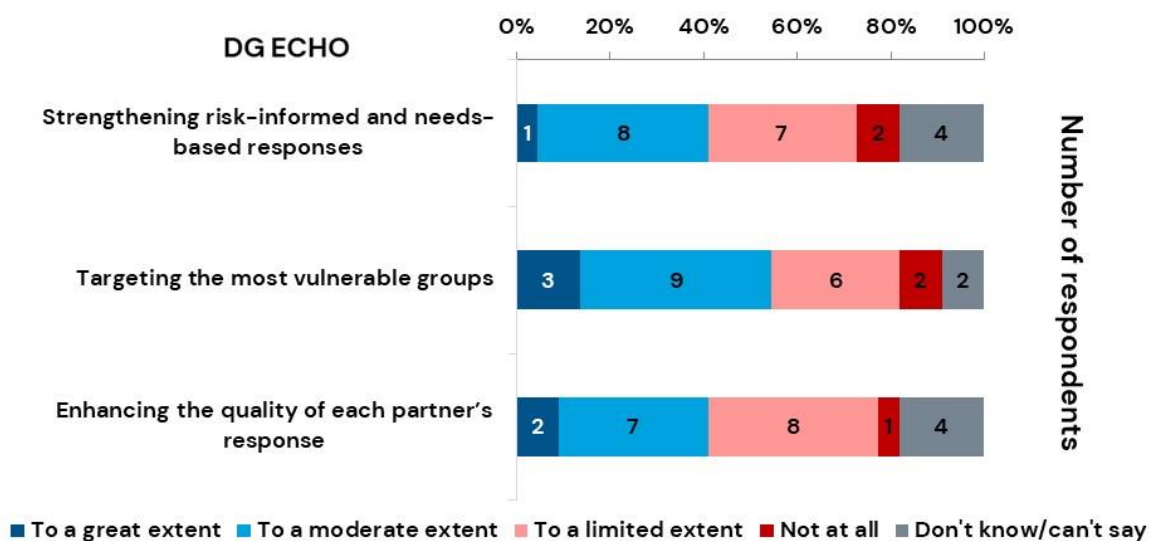
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 67. Q12 Organisation breakdown

<i>Profile/Category</i>	<i>n</i>	<i>To a great extent</i>	<i>To a moderate extent</i>	<i>To a limited extent</i>	<i>Not at all</i>	<i>Don't know/can't say</i>
<i>Total</i>	<i>n=43</i>	2	7	11	5	18
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	0	5	1	5
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	0	1	0	5
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	1	2	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	2	7	4	2	6
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	0	0	5	1	7
<i>5 years or more</i>	<i>n=8</i>	0	0	2	2	4
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	2	3	0	0	4
<i>2-4 years</i>	<i>n=8</i>	0	2	2	2	2
<i>5 years or more</i>	<i>n=4</i>	0	2	2	0	0

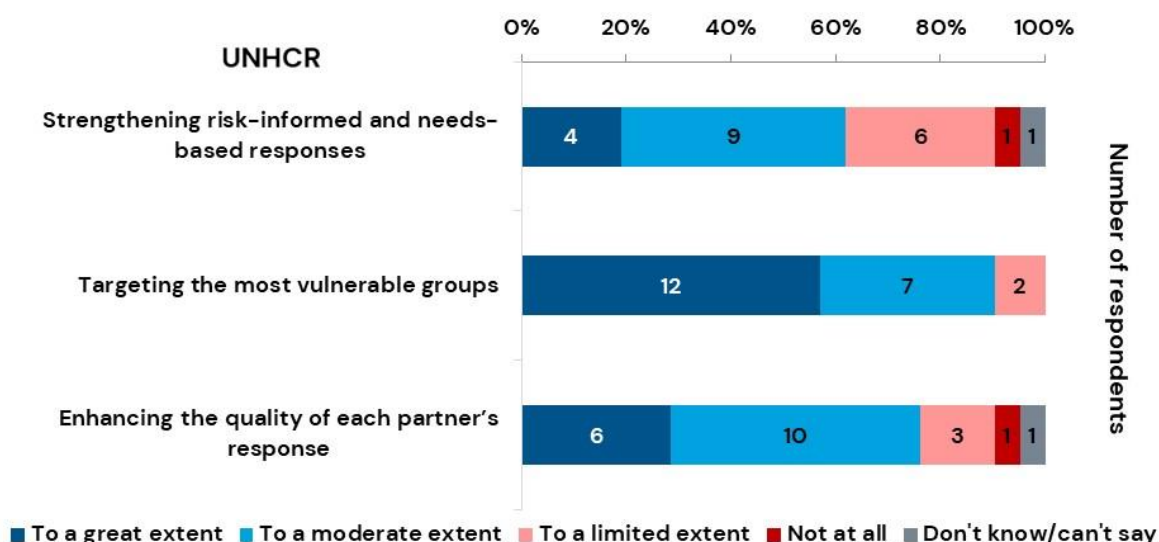
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 68. Q13 To what extent did the partnership contribute to the following: (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 69. Q13 To what extent did the partnership contribute to the following: (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 36. Q13 Open questions by respondent organisation

	DG ECHO	UNHCR
Strengthening risk-informed and needs-based responses	<p>Overall, there are mixed views on the quality of existing dialogue, but general agreement that dialogue is needed to improve response</p> <p>UNHCR information was perceived as very useful to improve DG ECHO's knowledge of field situation (one respondent from Brussels HQ)</p> <p>UNHCR's IDP strategy tends to follow the same guidelines as the refugee</p>	<p>Overall, there are mixed views on the quality of existing dialogue, but general agreement that dialogue is needed to improve response</p> <p>Uncertainty regarding DG ECHO's risk approach (one respondent)</p> <p>Quality dialogue and issues identified during field visits support improving programme design (one respondent)</p>

	DG ECHO	UNHCR
	response, which is not always suit for this purpose (one respondent from a regional office)	
Targeting the most vulnerable groups	<p>Overall, there are diverse opinions about how partners view who the most vulnerable are</p> <p>UNHCR's understanding of vulnerabilities was seen as rigid and rarely contextualised (one respondent from a regional office)</p> <p>UNHCR does not target the most vulnerable but rather status based affected population (one respondent from a regional office)</p>	<p>Overall, several participants agree that prioritising the most vulnerable is a core principle for UNHCR (four respondents)</p> <p>UNHCR follows the vulnerability criteria established for persons with specific protection needs which include persons with young children, medical needs, PwD, single-headed household, unaccompanied children, SGBV survivors, elderly persons, etc. (one respondent)</p> <p>DG ECHO has highlighted major gaps of new arrivals a followed up to find out what had been done to address the issues (one respondent)</p>
Enhancing the quality of each partner's response	<p>Overall, comments indicate that complementarity and understanding of divergences helped with refugee/IDP mandate and centrality of protection</p> <p>Yet, concerns that UNHCR does not always follow DG ECHO's comments or policies (one respondent from HQ)</p> <p>Need to foster dialogue/monitoring and improve quality of UNHCR proposals (two respondents from a country or sub-country office)</p>	<p>Overall, DG ECHO has supported the enhancement of UNHCR's response (seven respondents)</p> <p>DG ECHO has supported UNHCR capacity building and localisation efforts (one respondent)</p> <p>DG ECHO funding has allowed the continued implementation of protection interventions and increasing UNHCR capacities (one respondent)</p> <p>Quality dialogue and issues identified during field visits support improving programme design (one respondent)</p>

Figure 70. Q13 Organisation breakdown

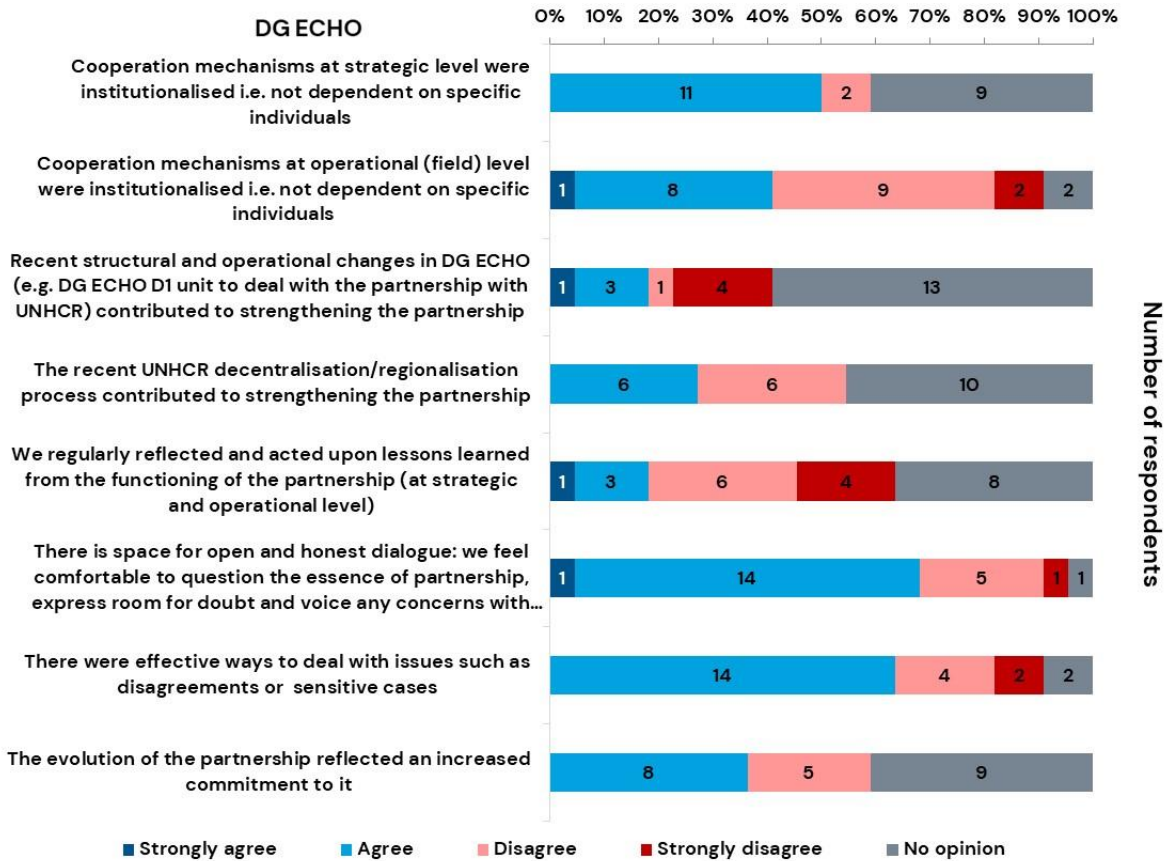
Strengthening risk-informed and needs-based responses						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	5	17	13	3	5
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	5	4	0	2
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	2	1	0	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	2	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	4	9	6	1	1

Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	1	5	4	1	2
5 years or more	n=8	0	2	3	1	2
Years of experience (UNHCR)						
1 year or less	n=9	2	5	1	0	1
2-4 years	n=8	1	4	3	0	0
5 years or more	n=4	1	0	2	1	0
Targeting the most vulnerable groups						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	15	16	8	2	2
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	2	6	1	0	2
DG ECHO HQ in Brussels	n=6	1	2	3	0	0
DG ECHO Regional Office	n=5	0	1	2	2	0
Location (UNHCR)						
Country and sub-country office	n=21	12	7	2	0	0
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	2	6	3	1	1
5 years or more	n=8	1	2	3	1	1
Years of experience (UNHCR)						
1 year or less	n=9	5	4	0	0	0
2-4 years	n=8	5	2	1	0	0
5 years or more	n=4	2	1	1	0	0
Enhancing the quality of each partner's response						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	8	17	11	2	5
Location (DG ECHO)						

<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	2	5	2	0	2
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	1	4	0	1
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	1	1
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	6	10	3	1	1
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	2	5	4	1	1
<i>5 years or more</i>	<i>n=8</i>	0	2	4	0	2
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	4	5	0	0	0
<i>2-4 years</i>	<i>n=8</i>	1	4	1	1	1
<i>5 years or more</i>	<i>n=4</i>	1	1	2	0	0

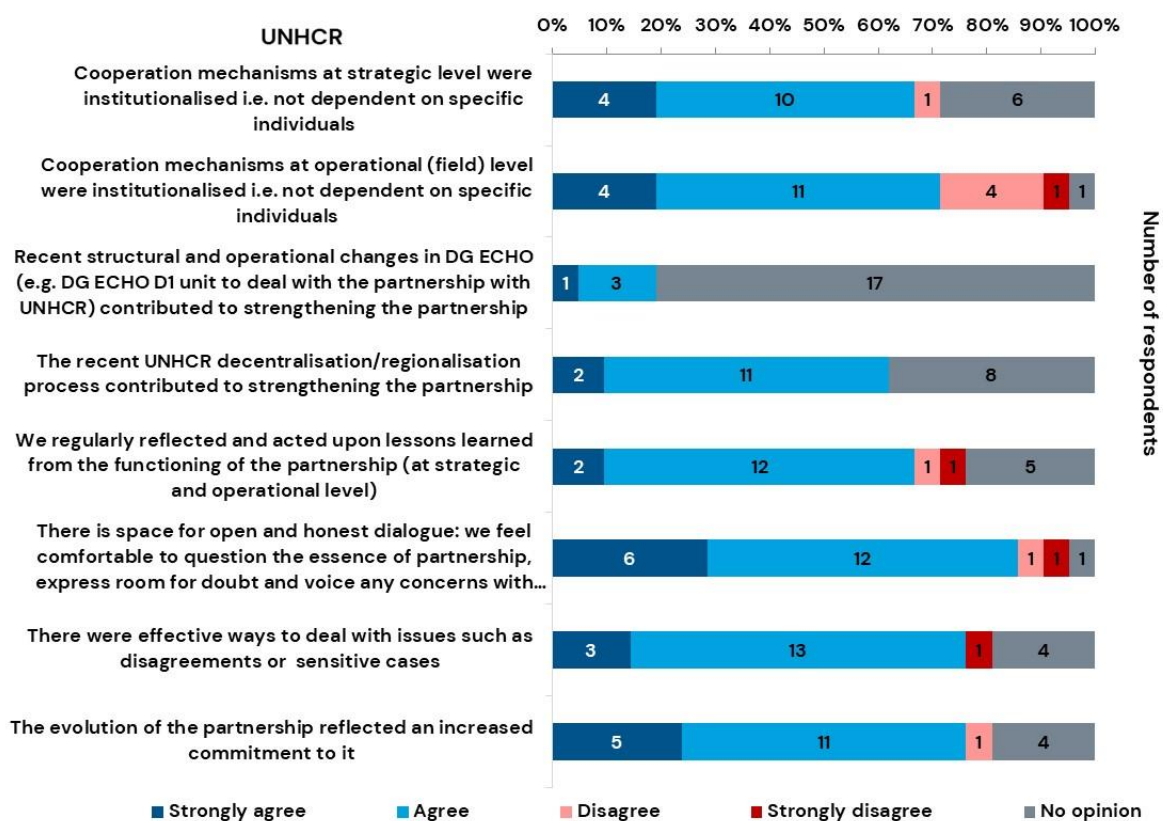
Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 71. Q14 To what extent do you agree or disagree with the following statements? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 72. Q14 To what extent do you agree or disagree with the following statements? (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 73. Q14 Organisation breakdown

Cooperation mechanisms at strategic level were institutionalised i.e. not dependent on specific individuals						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	4	21	3	0	15
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	3	1	0	7
DG ECHO HQ in Brussels	n=6	0	4	1	0	1
DG ECHO Regional Office	n=5	0	4	0	0	1
Location (UNHCR)						
Country and sub-country office	n=21	4	10	1	0	6
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	1	0	0

2-4 years	n=13	0	5	0	0	8
5 years or more	n=8	0	6	1	0	1
Years of experience (UNHCR)						
1 year or less	n=9	2	6	0	0	1
2-4 years	n=8	1	2	1	0	4
5 years or more	n=4	1	2	0	0	1
Cooperation mechanisms at operational (field) level were institutionalised i.e. not dependent on specific individuals						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	5	19	13	3	3
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	1	5	3	1	1
DG ECHO HQ in Brussels	n=6	0	1	4	1	0
DG ECHO Regional Office	n=5	0	2	2	0	1
Location (UNHCR)						
Country and sub-country office	n=21	4	11	4	1	1
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	1	0	0
2-4 years	n=13	1	5	4	2	1
5 years or more	n=8	0	3	4	0	1
Years of experience (UNHCR)						
1 year or less	n=9	2	5	2	0	0
2-4 years	n=8	1	4	2	0	1
5 years or more	n=4	1	2	0	1	0
Recent structural and operational changes in DG ECHO (e.g. DG ECHO D1 unit to deal with the partnership with UNHCR) contributed to strengthening the partnership						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	2	6	1	4	30
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	1	1	0	9

DG ECHO HQ in Brussels	n=6	1	1	0	2	2
DG ECHO Regional Office	n=5	0	1	0	2	2
Location (UNHCR)						
Country and sub-country office	n=21	1	3	0	0	17
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	1	0
2-4 years	n=13	1	1	0	1	10
5 years or more	n=8	0	2	1	2	3
Years of experience (UNHCR)						
1 year or less	n=9	1	1	0	0	7
2-4 years	n=8	0	2	0	0	6
5 years or more	n=4	0	0	0	0	4
The recent UNHCR decentralisation/regionalisation process contributed to strengthening the partnership						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	2	17	6	0	18
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	2	4	0	5
DG ECHO HQ in Brussels	n=6	0	1	0	0	5
DG ECHO Regional Office	n=5	0	3	2	0	0
Location (UNHCR)						
Country and sub-country office	n=21	2	11	0	0	8
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	4	3	0	6
5 years or more	n=8	0	2	3	0	3
Years of experience (UNHCR)						
1 year or less	n=9	2	1	0	0	6
2-4 years	n=8	0	8	0	0	0
5 years or more	n=4	0	2	0	0	2

We regularly reflected and acted upon lessons learned from the functioning of the partnership (at strategic and operational level)						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
<i>Total</i>	<i>n=43</i>	3	15	7	5	13
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	1	1	4	1	4
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	2	1	1	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	0	1	2	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	2	12	1	1	5
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	1	2	3	3	4
<i>5 years or more</i>	<i>n=8</i>	0	1	3	1	3
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	1	6	1	0	1
<i>2-4 years</i>	<i>n=8</i>	0	4	0	0	4
<i>5 years or more</i>	<i>n=4</i>	1	2	0	1	0
There is space for open and honest dialogue: we feel comfortable to question the essence of partnership, express room for doubt and voice any concerns with the other partner						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
<i>Total</i>	<i>n=43</i>	7	26	6	2	2
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	1	7	3	0	0
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	4	1	0	1
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	3	1	1	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	6	12	1	1	1
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0

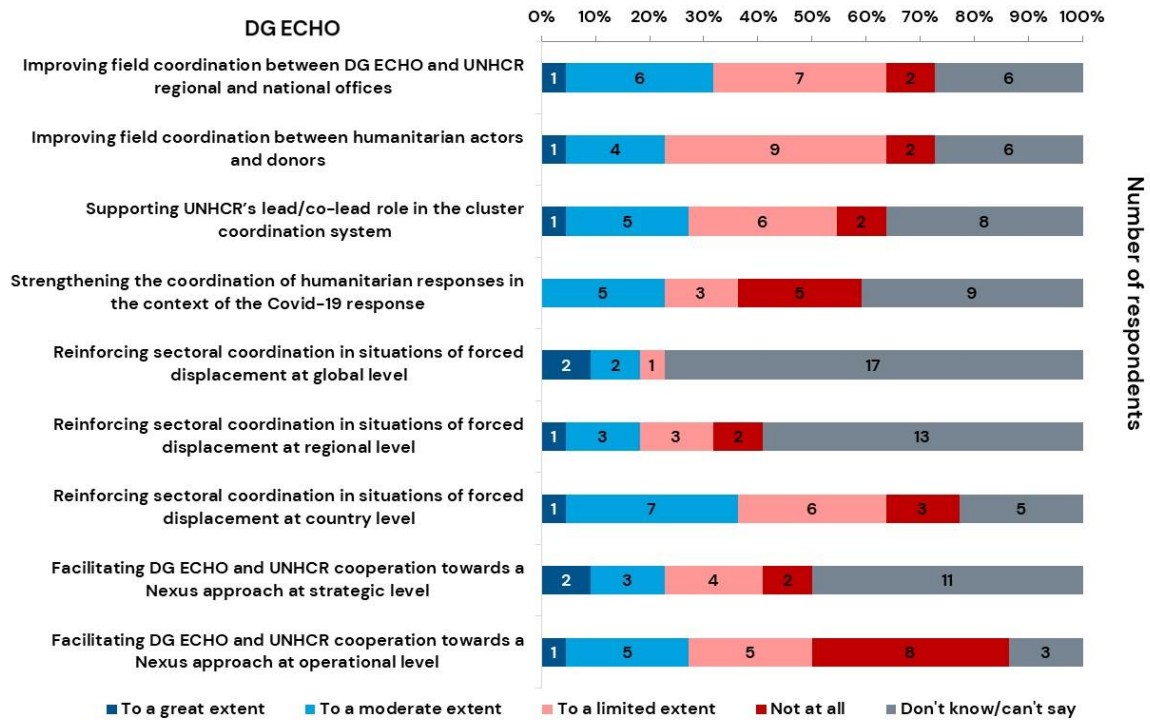
2-4 years	n=13	1	8	4	0	0
5 years or more	n=8	0	5	1	1	1
Years of experience (UNHCR)						
1 year or less	n=9	3	5	1	0	0
2-4 years	n=8	2	5	0	0	1
5 years or more	n=4	1	2	0	1	0
There were effective ways to deal with issues such as disagreements or sensitive cases						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	3	27	4	3	6
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	9	1	0	1
DG ECHO HQ in Brussels	n=6	0	3	2	1	0
DG ECHO Regional Office	n=5	0	2	1	1	1
Location (UNHCR)						
Country and sub-country office	n=21	3	13	0	1	4
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	10	3	0	0
5 years or more	n=8	0	3	1	2	2
Years of experience (UNHCR)						
1 year or less	n=9	2	6	0	0	1
2-4 years	n=8	0	5	0	0	3
5 years or more	n=4	1	2	0	1	0
The evolution of the partnership reflected an increased commitment to it						
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree	No opinion
Total	n=43	5	19	6	0	13
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	4	3	0	4

DG ECHO HQ in Brussels	n=6	0	2	1	0	3
DG ECHO Regional Office	n=5	0	2	1	0	2
Location (UNHCR)						
Country and sub-country office	n=21	5	11	1	0	4
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	6	3	0	4
5 years or more	n=8	0	2	2	0	4
Years of experience (UNHCR)						
1 year or less	n=9	2	5	0	0	2
2-4 years	n=8	1	4	1	0	2
5 years or more	n=4	2	2	0	0	0

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

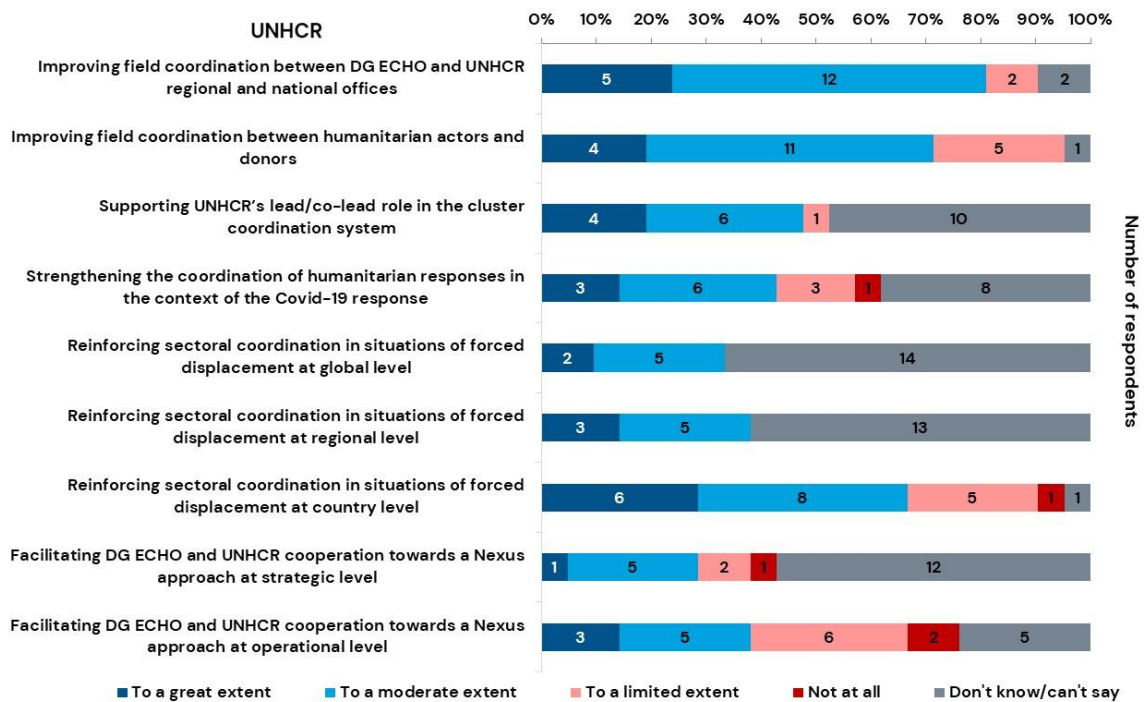
A5.2.6 Field and sectoral coordination

Figure 74. Q15 To what extent did the partnership contribute to the following: (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 75. Q15 To what extent did the partnership contribute to the following: (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 37. Q15 Open questions by respondent organisation

	DG ECHO	UNHCR
Improving field coordination between DG ECHO and UNHCR regional and national offices	Partnership is still quite focused on HQ level (two respondents from a country or sub-country office) Concerns on UNHCR coordination capacity (one respondent from a country or sub-country office)	DG ECHO field missions provided useful inputs (six respondents) Coordination and dialogue between UNHCR and DG ECHO is good at country level (one respondent)
Improving field coordination among humanitarian actors and donors	Concerns on UNHCR coordination capacity (two respondents)	DG ECHO provided useful inputs (six respondents). Example: DG ECHO has had an active role in organising donor missions to refugee camps in Kenya (one respondent) One respondent considered DG ECHO to have no influence over this matter.
Supporting UNHCR's lead/co-lead role in the cluster coordination system	UNHCR prioritises its objectives over the Cluster objectives (one respondent from a country or sub-country office) R4V coordination (UNHCR and IOM) could be improved (one respondent from a country or sub-country office)	NA
Strengthening the coordination of humanitarian responses in the context of the Covid-19 response	Overall, not much coordination from UNHCR during Covid-19	Some respondents do not report any funding from DG ECHO during Covid-19 (two respondents) For those who did, they stated that DG ECHO prioritised Covid-19 responses, e.g., through urgent camp visits (four respondents)
Reinforcing sectoral coordination in situations of forced displacement at global level	NA	NA
Reinforcing sectoral coordination in situations of forced displacement at regional level	NA	NA
Reinforcing sectoral coordination in situations of forced displacement at country level	NA	Two respondents think that DG ECHO provided useful advice, with one of them saying DG ECHO has strong voice among donors and coordination system
Facilitating DG ECHO and UNHCR cooperation towards a Nexus	Limited interest on the Nexus perceived from the side of UNHCR (one respondent from Brussels HQ)	Overall, limited interest on the Nexus perceived from the side of DG ECHO

	DG ECHO	UNHCR
approach at strategic level	Overall, need to enhance dialogue on Nexus It could be beneficial to involve DG INTPA (one respondent from a country or sub-country office)	
Facilitating DG ECHO and UNHCR cooperation towards a Nexus approach at operational level	Limited interest on the Nexus perceived from the side of UNHCR Overall, need to enhance dialogue on Nexus It could be beneficial to involve DG INTPA (one respondent from a country or sub-country office)	Overall, limited interest on the Nexus perceived from the side of DG ECHO Humanitarian and development activities remain too separated (one respondent)

Figure 76. Q15 Organisation breakdown

Improving field coordination between DG ECHO and UNHCR regional and national offices						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/ca n't say
<i>Total</i>	<i>n=43</i>	6	18	9	2	8
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	3	5	0	3
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	1	1	0	3
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	2	1	2	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	5	12	2	0	2
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	1	3	4	1	4
<i>5 years or more</i>	<i>n=8</i>	0	3	3	1	1
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	3	6	0	0	0
<i>2-4 years</i>	<i>n=8</i>	1	5	1	0	1
<i>5 years or more</i>	<i>n=4</i>	1	1	1	0	1
Improving field coordination between humanitarian actors and donors						

Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	5	15	14	2	7
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	1	6	1	3
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	2	0	1	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	3	0	1
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	4	11	5	0	1
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0
<i>2-4 years</i>	<i>n=13</i>	1	2	7	1	2
<i>5 years or more</i>	<i>n=8</i>	0	1	2	1	4
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	2	4	2	0	1
<i>2-4 years</i>	<i>n=8</i>	0	7	1	0	0
<i>5 years or more</i>	<i>n=4</i>	2	0	2	0	0
Supporting UNHCR's lead/co-lead role in the cluster coordination system						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	5	11	7	2	18
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	2	3	0	6
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	2	1	0	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	2	0
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	4	6	1	0	10
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	1	0	0	0
<i>2-4 years</i>	<i>n=13</i>	1	3	4	1	4

5 years or more	n=8	0	1	2	1	4
Years of experience (UNHCR)						
1 year or less	n=9	1	5	0	0	3
2-4 years	n=8	2	1	1	0	4
5 years or more	n=4	1	0	0	0	3
Strengthening the coordination of humanitarian responses in the context of the Covid-19 response						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
Total	n=43	3	11	6	6	17
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	2	2	2	5
DG ECHO HQ in Brussels	n=6	0	2	1	0	3
DG ECHO Regional Office	n=5	0	1	0	3	1
Location (UNHCR)						
Country and sub-country office	n=21	3	6	3	1	8
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	4	2	2	5
5 years or more	n=8	0	1	1	3	3
Years of experience (UNHCR)						
1 year or less	n=9	1	2	0	0	6
2-4 years	n=8	1	3	3	0	1
5 years or more	n=4	1	1	0	1	1
Reinforcing sectoral coordination in situations of forced displacement at global level						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
Total	n=43	4	7	1	0	31
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	0	1	0	10
DG ECHO HQ in Brussels	n=6	1	0	0	0	5

DG ECHO Regional Office	n=5	1	2	0	0	2
Location (UNHCR)						
Country and sub-country office	n=21	2	5	0	0	14
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	1	1	1	0	10
5 years or more	n=8	1	1	0	0	6
Years of experience (UNHCR)						
1 year or less	n=9	2	2	0	0	5
2-4 years	n=8	0	3	0	0	5
5 years or more	n=4	0	0	0	0	4
Reinforcing sectoral coordination in situations of forced displacement at regional level						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/ca n't say
Total	n=43	4	8	3	2	26
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	0	2	0	9
DG ECHO HQ in Brussels	n=6	1	1	1	0	3
DG ECHO Regional Office	n=5	0	2	0	2	1
Location (UNHCR)						
Country and sub-country office	n=21	3	5	0	0	13
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	1	2	1	0	9
5 years or more	n=8	0	1	2	2	3
Years of experience (UNHCR)						
1 year or less	n=9	2	2	0	0	5
2-4 years	n=8	0	3	0	0	5
5 years or more	n=4	1	0	0	0	3
Reinforcing sectoral coordination in situations of forced displacement at country level						

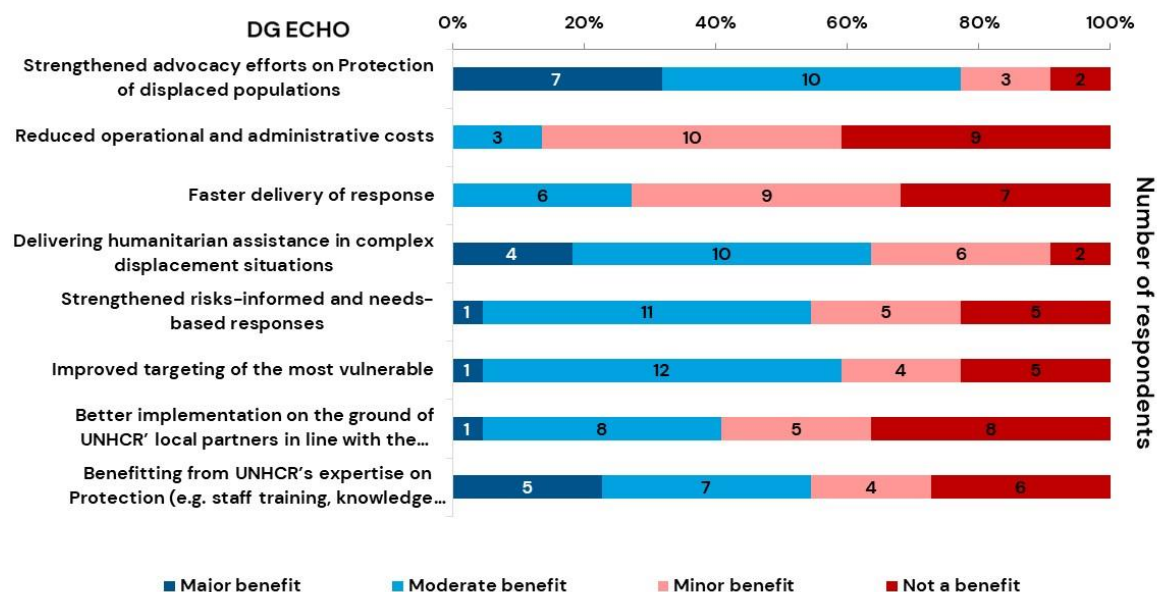
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	7	15	11	4	6
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	4	5	1	1
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	1	1	1	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	2	0	1	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	6	8	5	1	1
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	1	4	5	1	2
<i>5 years or more</i>	<i>n=8</i>	0	3	1	2	2
Years of experience (UNHCR)						
<i>1 year or less</i>	<i>n=9</i>	3	4	2	0	0
<i>2-4 years</i>	<i>n=8</i>	1	4	3	0	0
<i>5 years or more</i>	<i>n=4</i>	2	0	0	1	1
Facilitating DG ECHO and UNHCR cooperation towards a Nexus approach at strategic level						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
<i>Total</i>	<i>n=43</i>	3	8	6	3	23
Location (DG ECHO)						
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	1	2	0	1	7
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	1	0	2	1	2
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	0	2
Location (UNHCR)						
<i>Country and sub-country office</i>	<i>n=21</i>	1	5	2	1	12
Years of experience (DG ECHO)						
<i>1 year or less</i>	<i>n=1</i>	0	0	0	0	1
<i>2-4 years</i>	<i>n=13</i>	1	3	0	2	7

5 years or more	n=8	1	0	4	0	3
Years of experience (UNHCR)						
1 year or less	n=9	1	3	1	0	4
2-4 years	n=8	0	2	1	0	5
5 years or more	n=4	0	0	0	1	3
Facilitating DG ECHO and UNHCR cooperation towards a Nexus approach at operational level						
Profile/Category	n	To a great extent	To a moderate extent	To a limited extent	Not at all	Don't know/can't say
Total	n=43	4	10	11	10	8
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	1	3	2	5	0
DG ECHO HQ in Brussels	n=6	0	1	2	2	1
DG ECHO Regional Office	n=5	0	1	1	1	2
Location (UNHCR)						
Country and sub-country office	n=21	3	5	6	2	5
Years of experience (DG ECHO)						
1 year or less	n=1	0	0	0	0	1
2-4 years	n=13	0	5	2	5	1
5 years or more	n=8	1	0	3	3	1
Years of experience (UNHCR)						
1 year or less	n=9	2	2	1	1	3
2-4 years	n=8	0	3	5	0	0
5 years or more	n=4	1	0	0	1	2

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

A5.2.7 Benefits and impact of the partnership

Figure 77. Q16 What have been the main benefits of the partnership between DG ECHO and UNHCR? (DG ECHO n=22)³



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 78. Q16 Organisation breakdown

Strengthened advocacy efforts on Protection of displaced populations					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=22	7	10	3	2
Location (DG ECHO)					
DG ECHO Country and sub-country office	n=11	4	5	2	0
DG ECHO HQ in Brussels	n=6	2	2	1	1
DG ECHO Regional Office	n=5	1	3	0	1
Years of experience (DG ECHO)					
1 year or less	n=1	0	1	0	0
2-4 years	n=13	5	6	2	0
5 years or more	n=8	2	3	1	2
Reduced operational and administrative costs					

³ This question was only asked to DG ECHO representatives.

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
<i>Total</i>	<i>n=22</i>	0	3	10	9
Location (DG ECHO)					
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	2	5	4
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	0	3	3
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	1	2	2
Years of experience (DG ECHO)					
<i>1 year or less</i>	<i>n=1</i>	0	0	1	0
<i>2-4 years</i>	<i>n=13</i>	0	1	9	3
<i>5 years or more</i>	<i>n=8</i>	0	2	0	6
Faster delivery of response					
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
<i>Total</i>	<i>n=22</i>	0	6	9	7
Location (DG ECHO)					
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	0	3	5	3
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	0	1	2	3
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	2	2	1
Years of experience (DG ECHO)					
<i>1 year or less</i>	<i>n=1</i>	0	0	1	0
<i>2-4 years</i>	<i>n=13</i>	0	4	6	3
<i>5 years or more</i>	<i>n=8</i>	0	2	2	4
Delivering humanitarian assistance in complex displacement situations					
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
<i>Total</i>	<i>n=22</i>	4	10	6	2
Location (DG ECHO)					
<i>DG ECHO Country and sub-country office</i>	<i>n=11</i>	2	6	3	0
<i>DG ECHO HQ in Brussels</i>	<i>n=6</i>	2	1	2	1
<i>DG ECHO Regional Office</i>	<i>n=5</i>	0	3	1	1
Years of experience (DG ECHO)					

1 year or less	n=1	0	1	0	0
2-4 years	n=13	3	5	5	0
5 years or more	n=8	1	4	1	2

Strengthened risks-informed and needs-based responses

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
Total	n=22	1	11	5	5

Location (DG ECHO)

DG ECHO Country and sub-country office	n=11	0	7	2	2
DG ECHO HQ in Brussels	n=6	1	2	1	2
DG ECHO Regional Office	n=5	0	2	2	1

Years of experience (DG ECHO)

1 year or less	n=1	0	1	0	0
2-4 years	n=13	1	6	4	2
5 years or more	n=8	0	4	1	3

Improved targeting of the most vulnerable

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
Total	n=22	1	12	4	5

Location (DG ECHO)

DG ECHO Country and sub-country office	n=11	1	7	2	1
DG ECHO HQ in Brussels	n=6	0	4	0	2
DG ECHO Regional Office	n=5	0	1	2	2

Years of experience (DG ECHO)

1 year or less	n=1	0	1	0	0
2-4 years	n=13	1	7	3	2
5 years or more	n=8	0	4	1	3

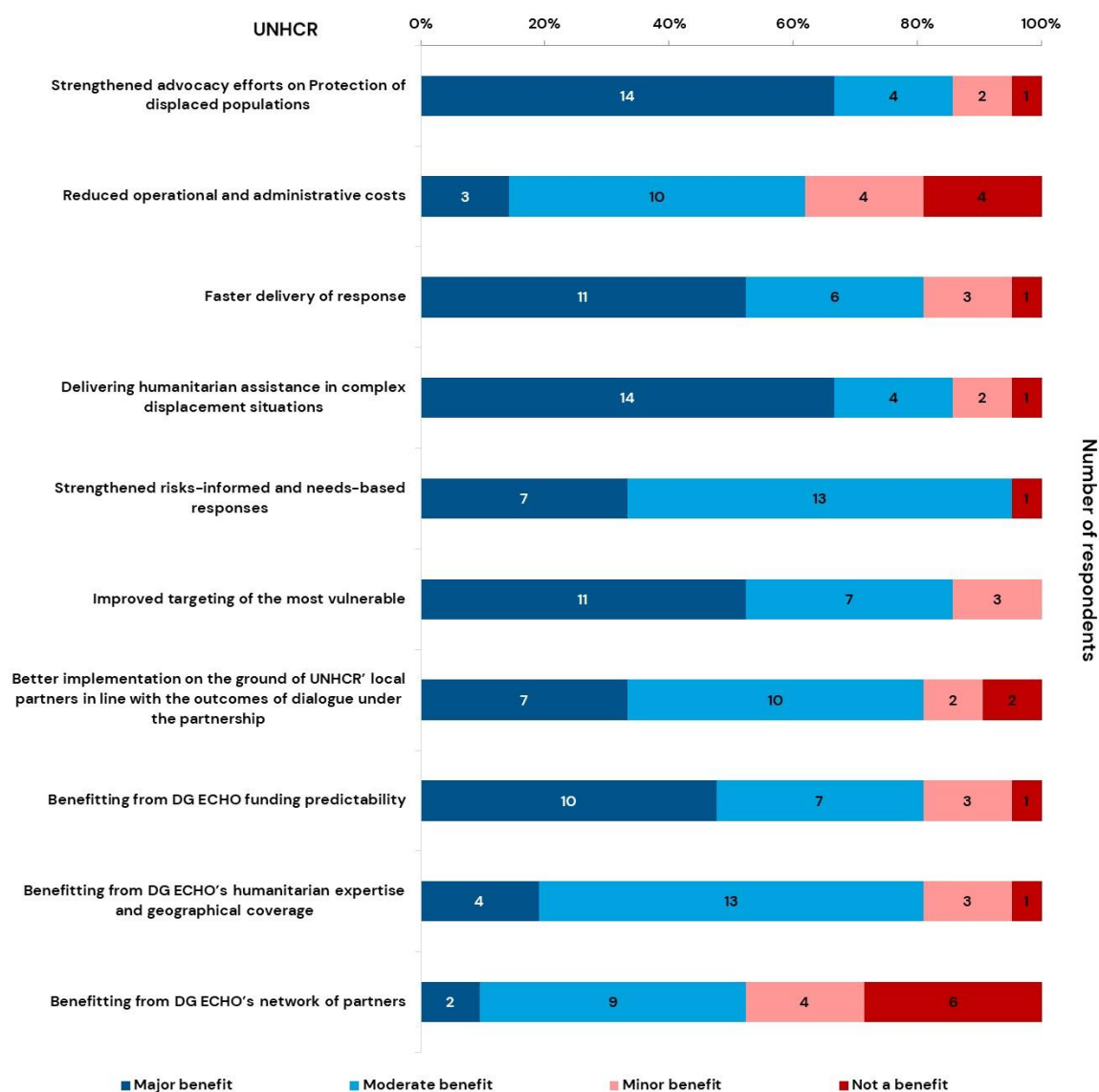
Better implementation on the ground of UNHCR' local partners in line with the outcomes of dialogue under the partnership

Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
Total	n=22	1	8	5	8

Location (DG ECHO)					
DG ECHO Country and sub-country office	n=11	1	4	3	3
DG ECHO HQ in Brussels	n=6	0	3	0	3
DG ECHO Regional Office	n=5	0	1	2	2
Years of experience (DG ECHO)					
1 year or less	n=1	0	1	0	0
2-4 years	n=13	1	5	4	3
5 years or more	n=8	0	2	1	5
Benefitting from UNHCR's expertise on Protection (e.g. staff training, knowledge sharing)					
Profile/Category	n	Strongly agree	Agree	Disagree	Strongly disagree
Total	n=22	5	7	4	6
Location (DG ECHO)					
DG ECHO Country and sub-country office	n=11	4	4	2	1
DG ECHO HQ in Brussels	n=6	1	2	1	2
DG ECHO Regional Office	n=5	0	1	1	3
Years of experience (DG ECHO)					
1 year or less	n=1	0	1	0	0
2-4 years	n=13	5	4	2	2
5 years or more	n=8	0	2	2	4

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 79. Q17 What have been the main benefits of the partnership between DG ECHO and UNHCR? (UNHCR n=21)⁴



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 38. Q17 Organisation breakdown

Strengthened advocacy efforts on Protection of displaced populations					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	14	4	2	1
Location (UNHCR)					

⁴ This question was only asked to UNHCR representatives.

Country and sub-country office	n=21	14	4	2	1
Years of experience (UNHCR)					
1 year or less	n=9	8	1	0	0
2-4 years	n=8	4	3	0	1
5 years or more	n=4	2	0	2	0
Reduced operational and administrative costs					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	3	10	4	4
Location (UNHCR)					
Country and sub-country office	n=21	3	10	4	4
Years of experience (UNHCR)					
1 year or less	n=9	2	5	1	1
2-4 years	n=8	0	4	3	1
5 years or more	n=4	1	1	0	2
Faster delivery of response					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	11	6	3	1
Location (UNHCR)					
Country and sub-country office	n=21	11	6	3	1
Years of experience (UNHCR)					
1 year or less	n=9	6	2	0	1
2-4 years	n=8	2	4	2	0
5 years or more	n=4	3	0	1	0
Delivering humanitarian assistance in complex displacement situations					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	14	4	2	1
Location (UNHCR)					
Country and sub-country office	n=21	14	4	2	1

Years of experience (UNHCR)					
1 year or less	n=9	7	2	0	0
2-4 years	n=8	4	2	1	1
5 years or more	n=4	3	0	1	0
Strengthened risks-informed and needs-based responses					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	7	13	0	1
Location (UNHCR)					
Country and sub-country office	n=21	7	13	0	1
Years of experience (UNHCR)					
1 year or less	n=9	5	4	0	0
2-4 years	n=8	1	7	0	0
5 years or more	n=4	1	2	0	1
Improved targeting of the most vulnerable					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	11	7	3	0
Location (UNHCR)					
Country and sub-country office	n=21	11	7	3	0
Years of experience (UNHCR)					
1 year or less	n=9	6	3	0	0
2-4 years	n=8	2	4	2	0
5 years or more	n=4	3	0	1	0
Better implementation on the ground of UNHCR' local partners in line with the outcomes of dialogue under the partnership					
Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
Total	n=21	7	10	2	2
Location (UNHCR)					
Country and sub-country office	n=21	7	10	2	2
Years of experience (UNHCR)					

1 year or less	n=9	5	3	0	1
2-4 years	n=8	0	6	2	0
5 years or more	n=4	2	1	0	1

Benefitting from DG ECHO funding predictability

Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
------------------	---	---------------	------------------	---------------	---------------

Total	n=21	10	7	3	1
-------	------	----	---	---	---

Location (UNHCR)

Country and sub-country office	n=21	10	7	3	1
--------------------------------	------	----	---	---	---

Years of experience (UNHCR)

1 year or less	n=9	4	4	1	0
2-4 years	n=8	3	2	2	1
5 years or more	n=4	3	1	0	0

Benefitting from DG ECHO's humanitarian expertise and geographical coverage

Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
------------------	---	---------------	------------------	---------------	---------------

Total	n=21	4	13	3	1
-------	------	---	----	---	---

Location (UNHCR)

Country and sub-country office	n=21	4	13	3	1
--------------------------------	------	---	----	---	---

Years of experience (UNHCR)

1 year or less	n=9	2	7	0	0
2-4 years	n=8	0	6	2	0
5 years or more	n=4	2	0	1	1

Benefitting from DG ECHO's network of partners

Profile/Category	n	Major benefit	Moderate benefit	Minor benefit	Not a benefit
------------------	---	---------------	------------------	---------------	---------------

Total	n=21	2	9	4	6
-------	------	---	---	---	---

Location (UNHCR)

Country and sub-country office	n=21	2	9	4	6
--------------------------------	------	---	---	---	---

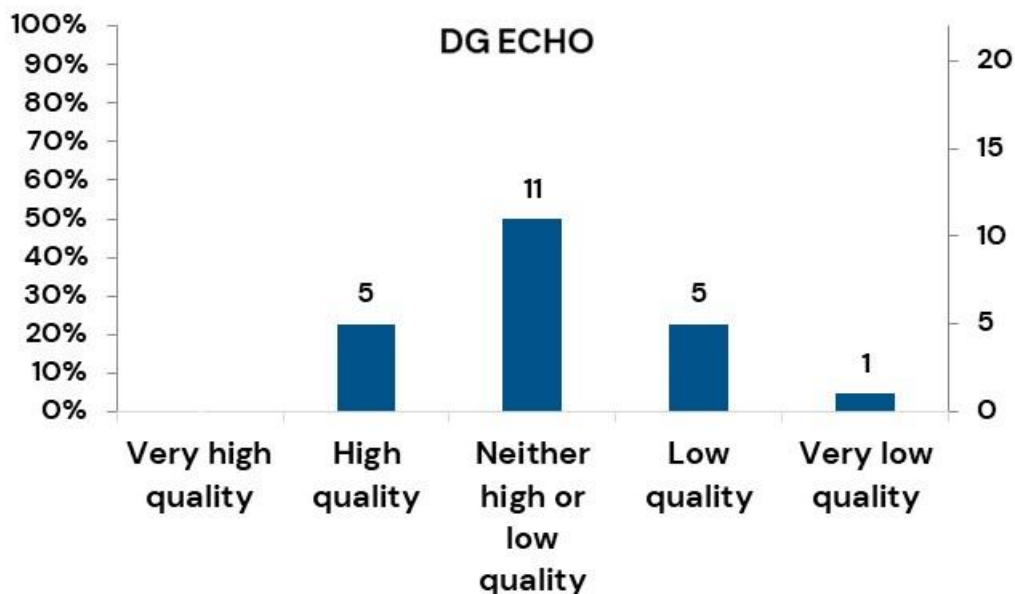
Years of experience (UNHCR)

1 year or less	n=9	2	4	1	2
2-4 years	n=8	0	3	2	3
5 years or more	n=4	0	2	1	1

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

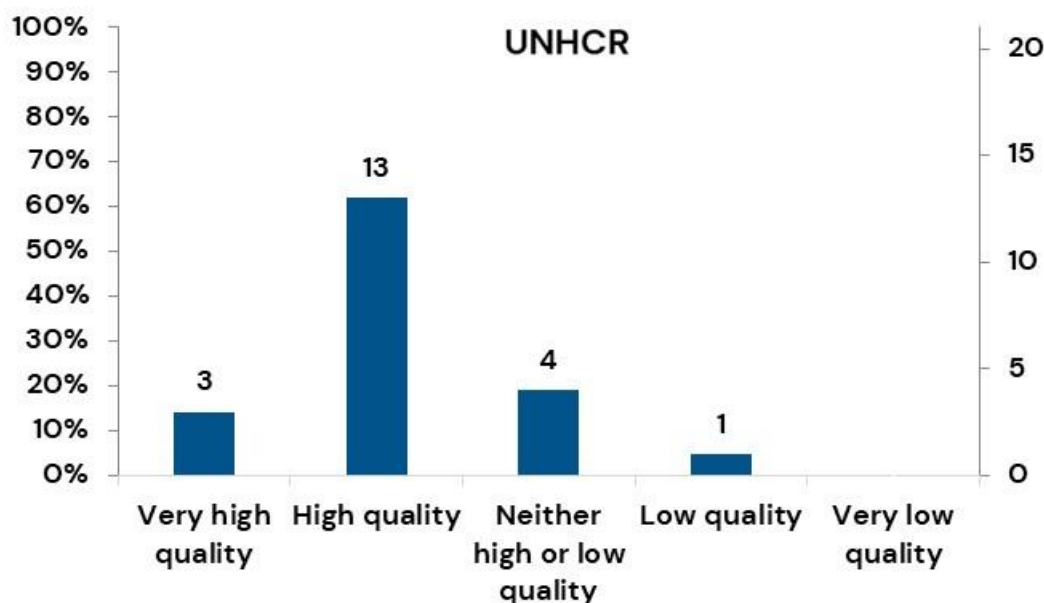
A5.2.8 Closing questions

Figure 80. Q18 Overall, how do you rate the DG ECHO-UNHCR partnership? (DG ECHO n=22)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 81. Q18 Overall, how do you rate the DG ECHO-UNHCR partnership? (UNHCR n=21)



Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Figure 82. Q18 Organisation breakdown

Profile/Category	n	Very high quality	High quality	Neither high or low quality	Low quality	Very low quality
Total	n=43	3	18	15	6	1
Location (DG ECHO)						
DG ECHO Country and sub-country office	n=11	0	3	6	2	0
DG ECHO HQ in Brussels	n=6	0	2	1	2	1
DG ECHO Regional Office	n=5	0	0	4	1	0
Location (UNHCR)						
Country and sub-country office	n=21	3	13	4	1	0
Years of experience (DG ECHO)						
1 year or less	n=1	0	1	0	0	0
2-4 years	n=13	0	4	5	3	1
5 years or more	n=8	0	0	6	2	0
Years of experience (UNHCR)						
1 year or less	n=9	1	8	0	0	0
2-4 years	n=8	1	3	4	0	0
5 years or more	n=4	1	2	0	1	0

Source: ICF elaboration (2023) based on results of survey to DG ECHO and UNHCR representatives

Table 39. Q19 Open questions by respondent organisation

	DG ECHO	UNHCR
If you consider there is room to further strengthen the partnership, explain why	<p>General recommendations</p> <p>Both DG ECHO and UNHCR should be more open to the other partner's concerns. (one respondent from Brussels HQ)</p> <p>One respondent from a regional office mentioned the need to foster a more honest and transparent dialogue and create a relation that goes beyond funding (such as an advocacy partner)</p>	<p>Overall, respondents were more likely to call for more flexibility, but other elements were mentioned by individual respondents:</p> <p>Need to institutionalise the understanding that DG ECHO is an important partner for UNHCR beyond just in terms of receiving funding, but that they are also an excellent partner to have in terms of advocacy.</p>

	DG ECHO	UNHCR
	<p>Need to further clarify differences in operational approaches, expectations on the level of support to local partners, and expectations on principled action and involvement of national authorities in sensitive issues linked to protection (two respondents from Brussels HQ)</p> <p>Recommendations within DG ECHO: HQ should better define the objective of the partnership (both at strategic and operational level) and keep into way more consideration the operational realities on the ground. The partnership remains very much at HQ level at this stage, rarely informed by field realities resulting in very different narratives at HQ or field level. (one respondent from a regional office)</p> <p>UNHCR should be helped to boost their role into the protection working group at field level as well as be supported in speaking out and take position at more global level in the key protection/refugee crisis. (one respondent from Brussels HQ)</p>	<p>Need to foster honest conversations around the principles of partnership, mutual respect, having a common purpose and common messaging on humanitarian issues</p> <p>Begin to consider longer term funding (12-24 months) for certain situations (such as long term forced displacements), to support a more effective planning and use of resources from UNHCR</p> <p>Need to increase the number of field visits and lower reporting requirements</p>
<i>If you consider there is no room to further strengthen the partnership, explain why</i>	NA	The DG ECHO/UNHCR partnership is currently very strong with a high level of funding, multiple activities and joint projects under the regular programme and flood response. (three respondents)

ANNEX 6 MINI-MOBILE SURVEY RESULTS

A6.1 INTRODUCTION

As part of the Evaluation of the European Union (EU) response to the Venezuelan regional crisis (2017 - 2021), ICF carried out a mini-mobile survey for beneficiaries of DG ECHO-funded actions. The survey was launched on 13 February 2023 and closed on 31 March 2023. This survey was a key part of the evaluation and collected information on the views and experiences of possible beneficiaries of funded activities.

In total, the survey received 336 responses. This report presents a full overview of results, which have been used to inform Case studies 1 (Health interventions in Venezuela) and 2 (Protection interventions outside of Venezuela). The results will also be fed into the Final report.

The table below summarises some key elements of this activity:

Table 40. Overview of different elements from the survey.

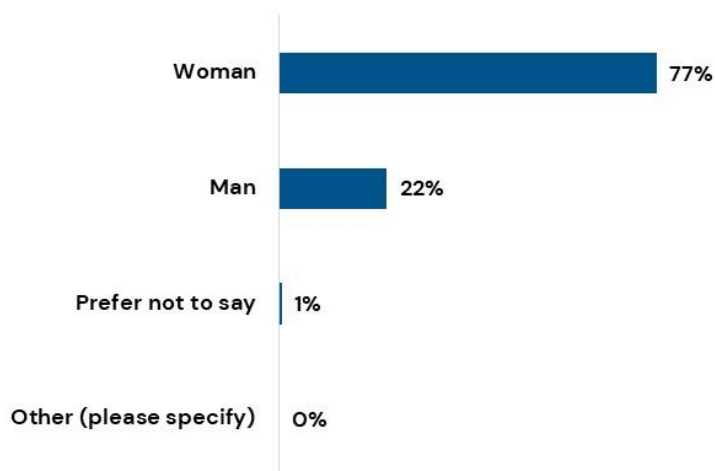
<i>Mini-mobile survey of beneficiaries</i>	
Objective of the survey	To gather beneficiary views and feedback on their needs, the support provided and the impact of partners activities on their life and well-being.
Link to evaluation questions	Relevance, effectiveness, sustainability
Target	Beneficiaries of funded projects from a selection of DG ECHO partners (Ayuda En Accion, Care, Caritas, CISP, Croix Rouge, Diakonie, DRC, IOM, MDM, NRC, Oxfam, SI, STC, UNICEF)
Structure of the questionnaire	In total, 18 questions plus socio-demographic questions. Section 1 included a question of DG ECHO and European Commission awareness. Section 2 included two questions on needs during the evaluation period. Section 3 included several sub sections on assistance and protection, asking questions about the services received, source, satisfaction, relevance, sustainability, and obstacles. Section 4 focussed on questions related to integration or discrimination. The final section focussed on final comments.
Language	Spanish and English
Tool for dissemination	Dissemination via framework partners using their beneficiary list and existing communication channels (e.g., social media). ICF prepared an online survey that could be easily accessed online, and a QR code that possible participants could use to access the survey with most smartphones with a camera. The link was added to a standardised message that was then shared with the partners. Then, partners shared it on their social media networks or internal communication lists. The partners could decide on posting the survey in English or Spanish, but participants could change the language of the survey.

A6.2 SOCIO-DEMOGRAPHIC PROFILE

A6.2.1 Gender

In total, 259 participants identified as women (77%), while 74 identified as men (22%). Two participants preferred not to say (1%), while one said 'Other' (0%).

Figure 83. D1 What is your gender? - Selected Choice (n=336)

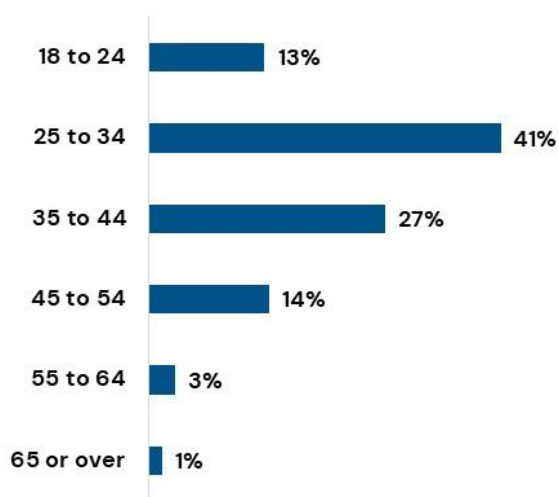


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A6.2.2 Age

In total, around four in ten participants said their ages ranged between 25 and 34 years old (41%, 137 participants), followed by 35 to 44 (27%, 92). Around one in ten said their ages ranged between 45 and 54 (14%, 47) and 18 to 24 (13%, 45). Lastly, 3% (10) reported ages between 55 and 64, and 1% (5) were aged 65 or over 65.

Figure 84. D2 What is your age? (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

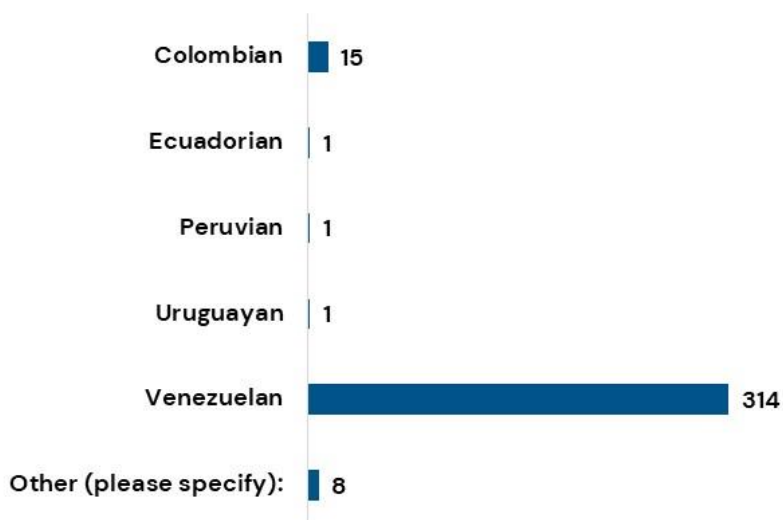
A6.2.3 Nationality

A majority of the participants were Venezuelan (92%, 314 participants), Colombian (4%, 15 participants) and Other (2%, 8 participants) which included four Jamaicans, one Cuban, and three participants who did not reveal their other nationality. Uruguay (1), Peru (1) and Ecuador (1) had

one participant each, but the proportion is not representative enough to change the percentage (0% each).

A majority of the participants reported only having one nationality (99%, 332), while those with more than one nationality were Venezuelan/unknown (1), Venezuelan/Colombian (2), and Colombian/Ecuadorian (1). In total, 22 participants reported having a unique or combined nationality that did not include Venezuela.

Figure 85. D3 What is your nationality? Select all that apply. - Selected Choice(n=336)

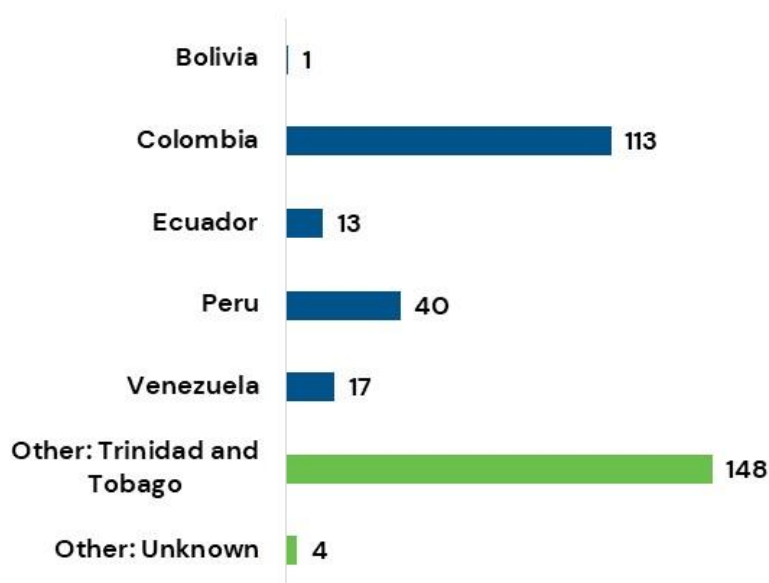


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A6.2.4 Current location

Almost half of the participants were located in 'Other' locations (45%, 152 participants), more specifically, Trinidad and Tobago (148 out of 152 participants who selected this option). This country was followed by Colombia (34%, 113) and Peru (12%, 40). Other participants reported being in Venezuela (5%, 17) and Ecuador (4%, 13), while one participant was in Bolivia (0%, 1). The figure below provides a summary these results.

Figure 86. D4 In what country are you currently located? - Selected Choice (n=336)

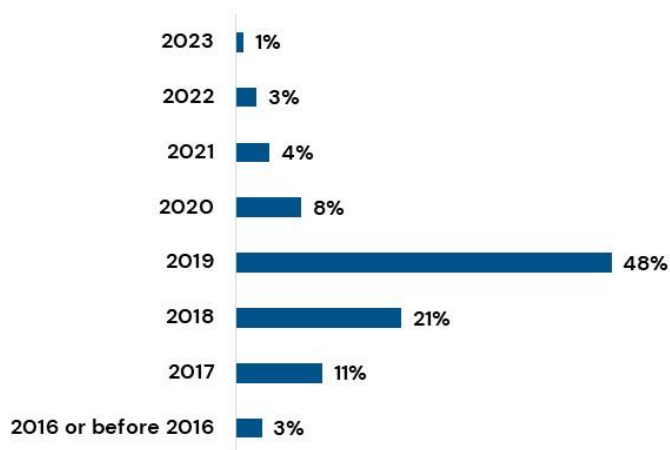


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries. Countries that were explicitly listed as an option answer are shown in blue, while countries that were reported by respondents who selected "Other" are shown in green.

A6.2.5 Year of departure (Venezuelans only)

Venezuelans who were not living in Venezuela (298) were asked the year they left the country. Almost half of Venezuelans in this survey left in 2019 (48%, 143 participants), followed by 2018 (21%, 63). Other participants left in 2017 (11%, 33), 2020 (8%, 25), 2021 (4%, 13), 2022 (3%, 8), and 2023 (1%, 3). Only 3% (10) left in 2016 or before that year.

Figure 87. D5 In what year did you leave Venezuela? (n=298)

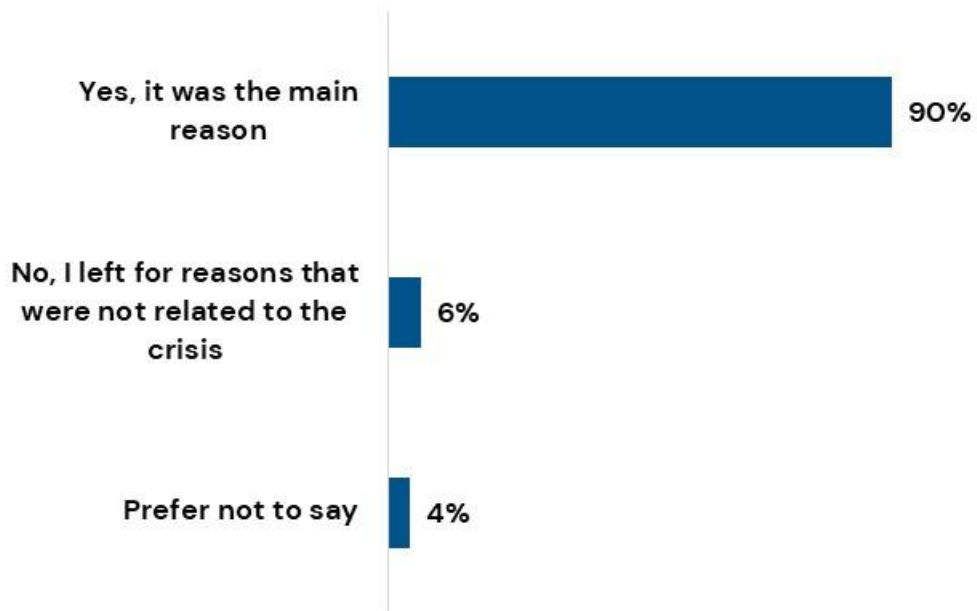


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A6.2.6 Main reason for leaving Venezuela (Venezuelans only)

Venezuelans who were not living in Venezuela (298) were then asked if the crisis was the main reason they left. A great majority said it was the main reason (90%, 268 participants), while 6% (18) said it was not the main reason, and 4% (12) preferred not to answer.

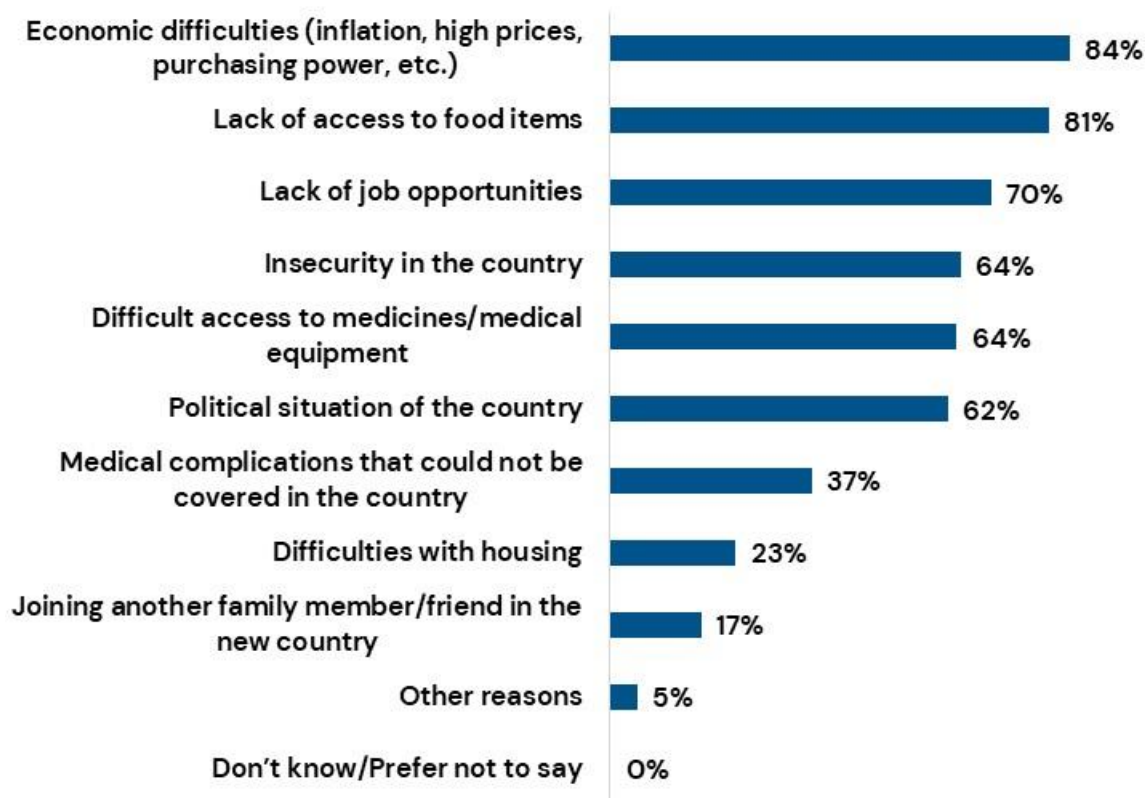
Figure 88. D6 Was the ongoing crisis in Venezuela the main reason why you left? (n=298)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

Respondents who answered 'Yes' (267) were then asked to select crisis-related reasons why they left. In total, 84% (225 participants) of these participants selected 'economic difficulties' as a reason why they left, followed by lack of access to food items (81%, 215) and lack of job opportunities (70%, 187). Around six in ten participants selected insecurity in the country, difficult access to medicines (each 64%, 172) and the political situation of the country (62%, 166). Other participants selected medical complications that could not be addressed in Venezuela (37%, 99), difficulties with housing (23%, 62) and joining a family member/friend (17%, 45). Only 5% (14) selected other reasons, and one participant (0%) preferred not to answer.

Figure 89. D7 Please select all the crisis-related reasons that apply (n=267)

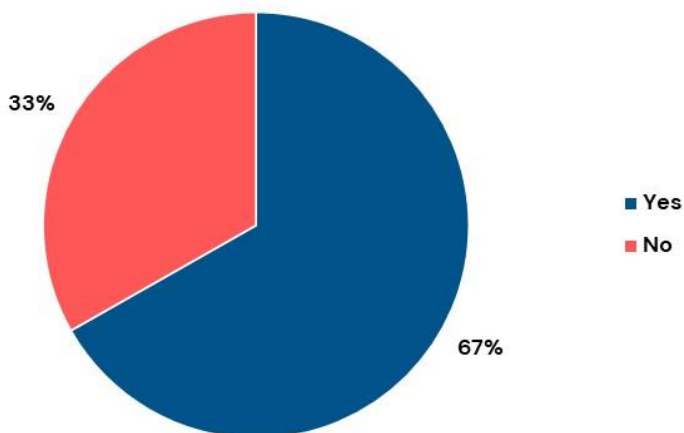


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A6.2.7 Intended destination.

Venezuelans who were not living in Venezuela (298) were asked whether their current location was their final destination. Just under seven in ten respondents (67%, 199) said it was, while a third (33%, 99) said it was not.

Figure 90. D8 Is the current country you are in your intended destination? (n=298)

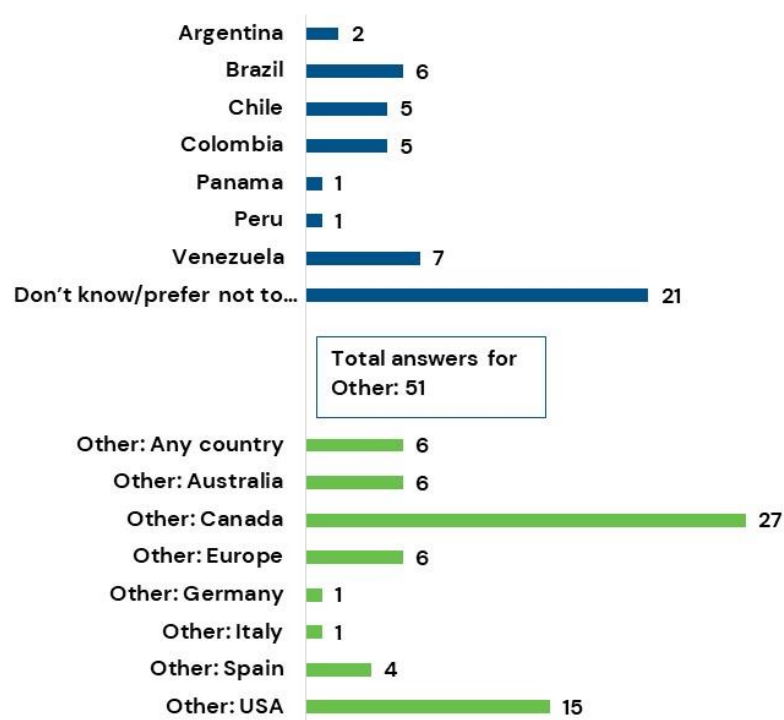


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

Participants who answered 'no' (99) were subsequently asked about their intended country of destination. Two in ten of the remaining respondents said "Don't know/prefer not to say" (21%, 21 participants), while a few respondents mentioned Venezuela (7%, 7), Brazil (6%, 6), Chile, Colombia (5%, 5 each), Argentina (2%, 2), Panama, and Peru (1%, 1 each).

A majority said 'Other' (52%, 51 participants), with a combination of options mainly including Canada, the USA, Australia, and any country (mainly referring to any place where they or their families could 'have a good life').

Figure 91. D9 Please indicate your intended destination. – Overall (n=99)

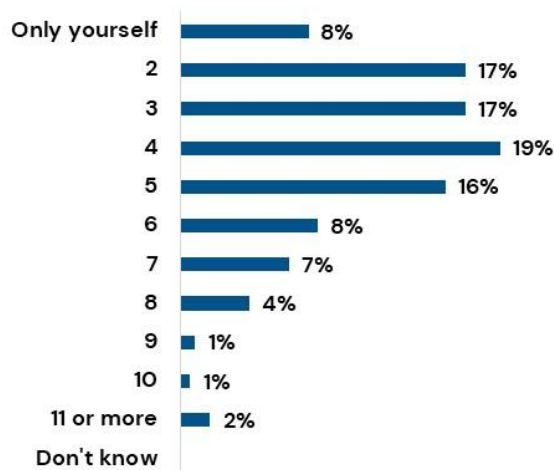


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries. Countries that were explicitly listed as an option answer are shown in blue, while countries that were reported by respondents who selected "Other" are shown in green.

A6.2.8 Household composition

All participants were asked how many people lived with them (including themselves). There was an even distribution of households composed of two, three, four, and five members (17%, 58 participants; 17%, 58; 19%, 65; and 16%, 54 respectively). Less than one in ten respondents lived in households with six or more family members, and 8% (26) reported living on their own.

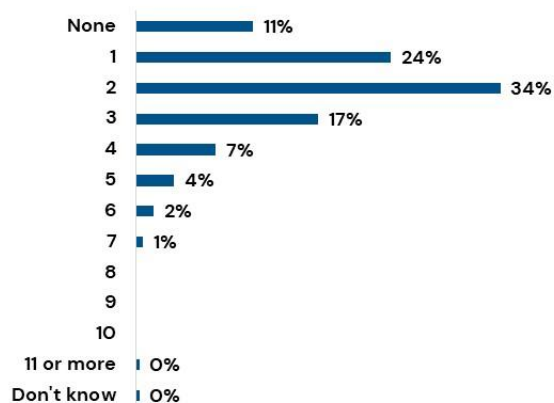
Figure 92. D10 How many people from your family currently live with you (including yourself)? (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

Households with more than one person (310) were then asked how many minors lived with them. Just under a third of the households had two minors (34%, 106 participants), followed by one (24%, 74), and three (17%, 53) or none (11%, 34). Less than one in ten had more than four minors living in their households.

Figure 93. D11 How many of your family members living with you are minors (younger than 18 years)? (n=310)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

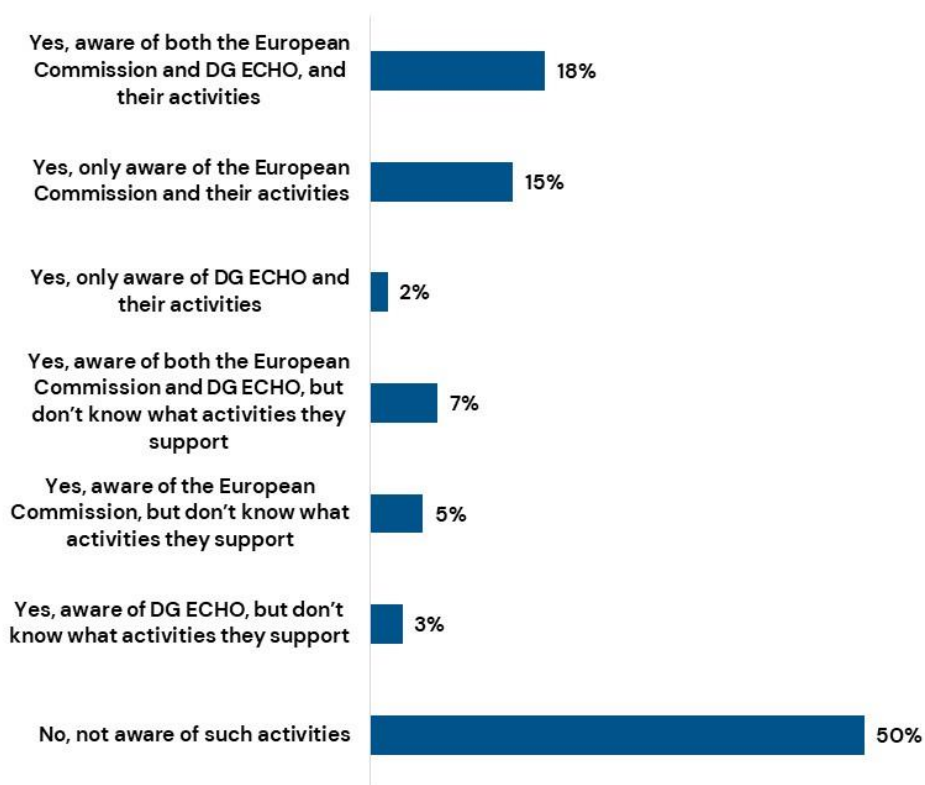
A6.3 MAIN QUESTIONNAIRE

A6.3.1 ECHO awareness

All participants were asked if they were aware of activities financed by the European Commission of the European Union or DG ECHO in the country they are currently located. Half of the respondents reported not knowing about DG ECHO or European Commission activities (50%, 169 participants). From the remaining participants, 18% (60) were aware of the European Commission, DG ECHO, and

their activities. A similar proportion was aware of the European Commission and their activities (15%, 49).

Figure 94. Q1 In general, are you aware of activities financed by the European Commission of the European Union (for example the department that is responsible for humanitarian aid and civil protection called DG ECHO) in the country you are currently located (support activities for asylum applicants such as interpretation, transportation, legal information, food, education, etc.)? (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- There were no significant differences between the awareness levels among women and men, with the exception of those answering 'no, not aware of such activities', where men were 10% above the proportion of women choosing the same option.⁵
- No notable differences were observed between the different age groups.
- A higher percentage of participants residing in Colombia were aware of the activities of both DG ECHO and the European Commission (34%), compared to participants residing in other countries.

⁵ Please note that the proportion of women is higher than the proportion of men, which could influence some of the demographic analysis throughout the survey.

Figure 95. Socio-demographic breakdown Q1

Profile/Category	n	Yes, aware of both the European Commission and DG ECHO, and their activities	Yes, only aware of the European Commission and their activities	Yes, only aware of DG ECHO and their activities	Yes, aware of both the European Commission and DG ECHO, but don't know what activities they support	Yes, aware of the European Commission, but don't know what activities they support	Yes, aware of DG ECHO, but don't know what activities they support	No, not aware of such activities
Total	<i>n</i> =336	18%	15%	2%	7%	5%	3%	50%
Gender								
Woman	<i>n</i> =259	18%	15%	2%	7%	7%	3%	48%
Man	<i>n</i> =74	19%	11%	0%	8%	1%	3%	58%
Age								
18 to 24	<i>n</i> =45	7%	11%	0%	7%	9%	2%	64%
25 to 34	<i>n</i> =137	19%	12%	1%	9%	7%	2%	50%
35 to 44	<i>n</i> =92	20%	22%	3%	4%	1%	5%	45%
45 to 54	<i>n</i> =47	21%	11%	2%	2%	6%	4%	53%
55 to 64	<i>n</i> =10	20%	20%	10%	20%	0%	0%	30%
65 or over	<i>n</i> =5	20%	0%	0%	0%	20%	0%	60%
Country of residence								
Colombia	<i>n</i> =113	34%	7%	3%	11%	7%	2%	37%
Ecuador	<i>n</i> =13	8%	0%	0%	8%	23%	0%	62%
Peru	<i>n</i> =40	18%	80%	3%	0%	0%	0%	0%
Venezuela	<i>n</i> =17	12%	6%	6%	6%	6%	0%	65%
Other	<i>n</i> =152	8%	5%	1%	6%	4%	6%	71%

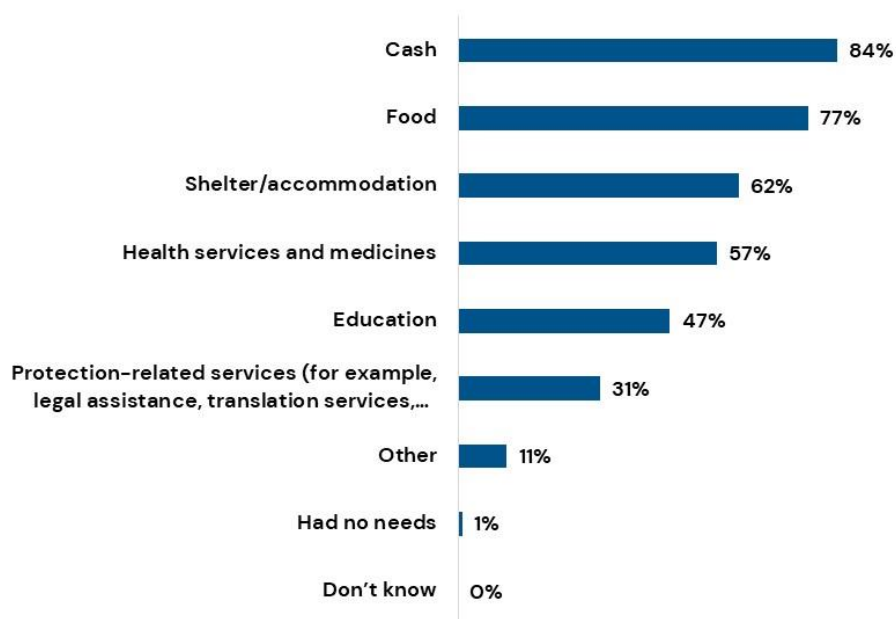
Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.⁶

⁶ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, Ecuador, Venezuela.

A6.3.2 Main needs during the evaluation period (2017-2021)

All participants were asked to highlight needs they had during the evaluation period. They could choose several answers. Participants were most likely to mention they had cash needs (84%, 281 participants) followed by food (77%, 259) shelter/accommodation (62%, 208), and health services and medicines (57%, 192). Other participants mentioned education (47%, 157), protection-related services (31%, 105) and other needs (11%, 36). Only 1% (3) reported having no needs. The figure below provides a summary these results.

Figure 96. Q2 What were your main needs when you arrived in the country you are currently located? (If you have not changed countries, think of your needs between 2017 and 2021) You may select more than one option. (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries

Among participants selecting 'Other' (36, participants), five provided comments, mainly reporting specific incidents (violation, kidnapping, etc.) or needs associated with children/pregnancies.

A socio-demographic analysis reveals some trends between groups (see table below):

- Participants identifying as women reported having more food needs (80%), which is 10 percentage points above participating men (70%).
- All participants aged 55 or over reported having food needs.
- Venezuelan participants who left in 2020 reported more significant shelter needs (80%).
- All participants residing in Peru had cash needs during the evaluation period (100%).
- These participants were also the most likely to have food needs (93%).
- Participants residing in Colombia were the most likely to have health needs (65%).

Figure 97. Socio-demographic breakdown Q2

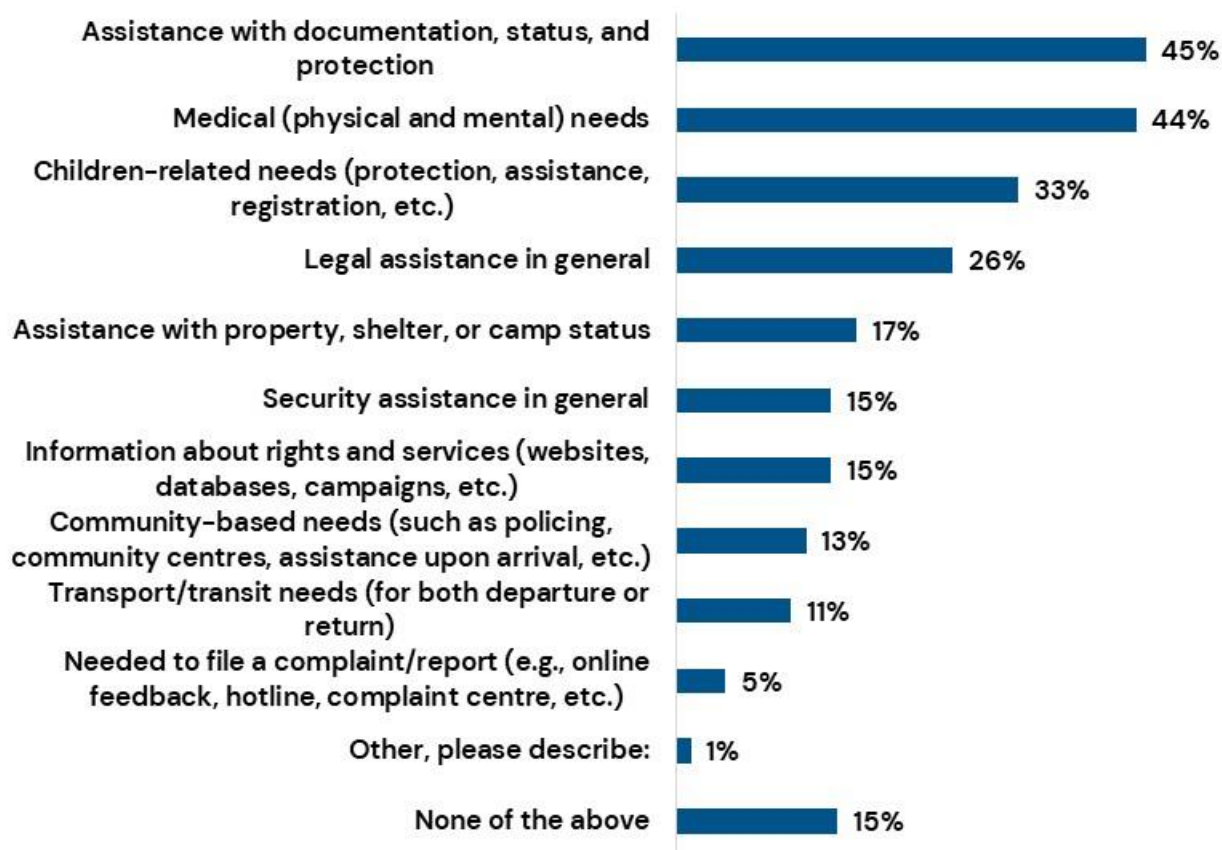
Profile/Category	n	Cash	Food	Shelter/ac commodat ion	Health services and medicines	Education	Protection-related services (for example, legal assistance, translation services, community centres, assistance upon arrival, etc.)	Other	Had no needs	Don't know
Total	n=336	84%	77%	62%	57%	47%	31%	11%	1%	0%
Gender										
Woman	n=259	85%	80%	61%	57%	48%	30%	9%	1%	0%
Man	n=74	81%	70%	68%	57%	41%	34%	15%	1%	0%
Age										
18 to 24	n=45	78%	82%	60%	60%	40%	33%	13%	0%	0%
25 to 34	n=137	86%	74%	66%	58%	51%	35%	9%	1%	0%
35 to 44	n=92	87%	80%	64%	53%	45%	25%	11%	1%	0%
45 to 54	n=47	74%	68%	43%	55%	45%	34%	15%	2%	0%
55 to 64	n=10	90%	100%	80%	80%	50%	20%	0%	0%	0%
65 or over	n=5	80%	100%	80%	60%	40%	20%	0%	0%	0%
Year of departure from Venezuela										
2022	n=8	88%	88%	63%	75%	75%	13%	25%	0%	0%
2021	n=13	77%	77%	31%	54%	31%	0%	8%	0%	0%
2020	n=25	88%	80%	80%	60%	64%	44%	4%	0%	0%
2019	n=143	89%	76%	66%	62%	46%	41%	9%	1%	0%
2018	n=63	89%	83%	57%	59%	46%	22%	17%	0%	0%
2017	n=33	82%	88%	73%	48%	45%	21%	6%	3%	0%
2016 or before 2016	n=10	100%	70%	50%	60%	20%	20%	10%	0%	0%
Country of residence										
Colombia	n=113	81%	80%	54%	65%	47%	17%	11%	1%	0%
Ecuador	n=13	85%	85%	69%	54%	54%	38%	8%	0%	0%
Peru	n=40	100%	93%	63%	43%	25%	23%	5%	0%	0%
Venezuela	n=17	53%	76%	29%	53%	47%	29%	18%	6%	0%
Other	n=152	86%	71%	71%	55%	52%	43%	12%	1%	0%

Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.⁷

Participants were then prompted into a selection of specific protection needs, with more than eight in ten respondents having at least one of them (85%, 284 participants). Under half of the participants mentioned they needed assistance with documentation, status, and protection (45%, 151), and a similar proportion of respondents mentioned medical needs (44%, 148). A third of the respondents (33%, 110) mentioned they had children-related needs, and just over a quarter (26%, 89) mentioned they needed legal assistance in general.

⁷ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela.

Figure 98. Q3 And, more specifically, did you have any of the following protection related needs? You may select more than one option. – Selected Choice (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- Participants identifying as men reported needing more assistance with documentation than women (50% vs 44%), while the results show women had about 10 percentage points more than men on medical needs (46% vs 36%), and children-related needs (35% vs 27%).
- Venezuelan participants who left in 2020 had more children-related needs (48%)
- Participants residing in Peru were most likely to need legal assistance in general (60%)

Figure 99. Socio-demographic breakdown Q3

Profile/Category	n	Assistance with documentation, status, and protection	Medical (physical and mental) needs	Children-related needs (protection, assistance, registration, etc.)	Legal assistance in general	Assistance with property, shelter, or camp status	Security assistance in general	Information about rights and services (websites, databases, campaigns, etc.)	Community-based needs (such as policing, community centres, assistance upon arrival, etc.)	Transport/transit needs (for both departure or return)	Needed to file a complaint/report (e.g., online feedback, hotline, complaint centre, etc.)	Other, please describe:	None of the above
Total	n=336	45%	44%	33%	26%	17%	15%	15%	13%	11%	5%	1%	15%
Gender													
Woman	n=259	44%	46%	35%	25%	15%	14%	15%	14%	10%	3%	2%	15%
Man	n=74	50%	36%	27%	30%	26%	20%	14%	9%	16%	9%	1%	14%
Age													
18 to 24	n=45	36%	31%	31%	20%	20%	9%	13%	11%	7%	4%	0%	33%
25 to 34	n=137	46%	37%	31%	26%	15%	13%	12%	9%	6%	4%	1%	15%
35 to 44	n=92	43%	59%	38%	30%	22%	18%	20%	16%	18%	5%	2%	11%
45 to 54	n=47	53%	40%	30%	30%	15%	15%	19%	13%	15%	9%	2%	11%
55 to 64	n=10	70%	70%	20%	30%	20%	20%	0%	20%	20%	0%	0%	0%
65 or over	n=5	0%	60%	40%	0%	0%	40%	20%	40%	0%	0%	0%	20%
Year of departure from Venezuela													
2022	n=8	63%	63%	38%	25%	25%	25%	13%	25%	50%	0%	0%	0%
2021	n=13	46%	69%	31%	0%	0%	0%	0%	23%	8%	0%	0%	15%
2020	n=25	32%	28%	48%	20%	20%	12%	20%	20%	12%	8%	0%	24%
2019	n=143	46%	47%	32%	29%	18%	16%	15%	12%	9%	7%	1%	14%
2018	n=63	52%	48%	38%	37%	22%	19%	24%	13%	11%	6%	2%	13%
2017	n=33	48%	48%	18%	24%	9%	12%	12%	6%	3%	0%	0%	21%
2016 or before 2016	n=10	30%	50%	10%	20%	10%	0%	10%	10%	0%	0%	20%	10%
Country of residence													
Colombia	n=113	50%	45%	29%	17%	17%	11%	12%	15%	14%	6%	4%	16%
Ecuador	n=13	62%	54%	54%	31%	8%	23%	15%	15%	15%	0%	0%	8%
Peru	n=40	50%	65%	35%	60%	8%	13%	13%	5%	0%	0%	0%	0%
Venezuela	n=17	24%	24%	47%	18%	6%	12%	6%	6%	24%	0%	0%	18%
Other	n=152	41%	39%	32%	26%	22%	18%	19%	13%	10%	6%	1%	19%

Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.⁸

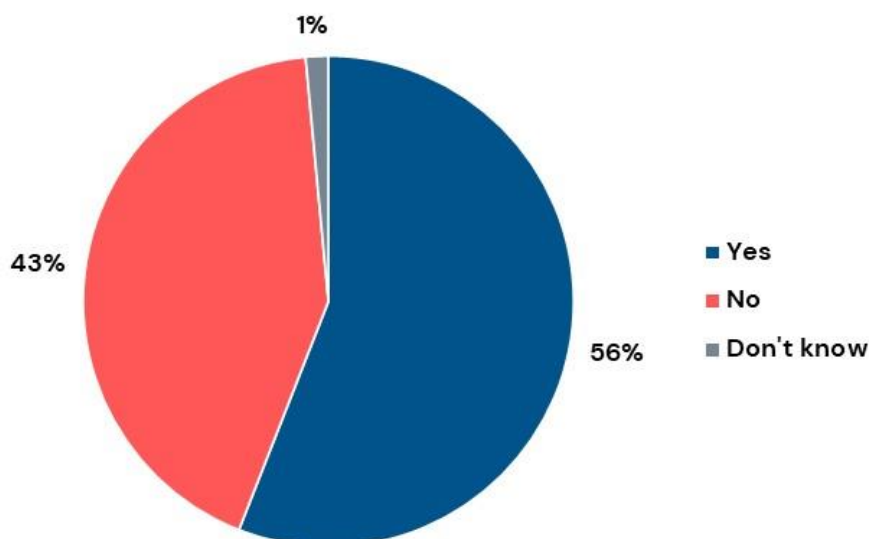
⁸ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela.

A6.3.3 Assistance/Protection

A6.3.3.1 Provision

All participants were asked if they had received assistance in the country they were located. A majority said yes (56%, 188 participants), while 43% (143) said no, and 1% (5) said don't know.

Figure 100. Q4 Have you received assistance (in cash, services, support, materials, etc.) from an organisation in the country you are currently located? (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- Participants identifying as women reported having received (58% vs 50% of the participating men).
- The proportion of participants who received help increases with age, with the lowest at 38% of those aged 18-24 and the highest for those 65 or above (100%)
- During the evaluation period, Venezuelan participants who left in 2021 reported receiving help (92%), followed by those who left in 2018 (67%)
- All of the participants residing in Peru reported having received help, followed by Ecuador (85%) and Colombia (58%)
- From the collected nationalities, Colombian participants were more likely to say they received help (73%) although they are not as representative of the sample as Venezuelans. Half of the Venezuelans who participated in this survey reported having received help (55%)

Figure 101. Socio-demographic breakdown Q4

Profile/Category	n	Yes	No	Don't know
Total	n=336	56%	43%	1%
Gender				
Woman	n=259	58%	41%	2%
Man	n=74	50%	49%	1%
Age				
18 to 24	n=45	38%	60%	2%
25 to 34	n=137	48%	50%	1%
35 to 44	n=92	65%	34%	1%
45 to 54	n=47	66%	32%	2%
55 to 64	n=10	90%	10%	0%
65 or over	n=5	100%	0%	0%
Year of departure from Venezuela				
2022	n=8	100%	0%	0%
2021	n=13	92%	8%	0%
2020	n=25	44%	52%	4%
2019	n=143	52%	48%	1%
2018	n=63	67%	33%	0%
2017	n=33	58%	36%	6%
2016 or before 2016	n=10	20%	80%	0%
Country of residence				
Colombia	n=113	58%	39%	4%
Ecuador	n=13	85%	15%	0%
Peru	n=40	100%	0%	0%
Venezuela	n=17	35%	65%	0%
Other	n=152	43%	56%	1%
Nationality				
Colombian	n=15	73%	20%	7%
Venezuelan	n=314	55%	44%	1%
Other	n=8	38%	63%	0%

Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.⁹

Participants who said they received help (188) were asked which organisations provided the assistance. A list of selected DG ECHO partners was presented. From this list, respondents were most likely to mention UNHCR (38%, 71 participants), followed by Ayuda en Accion (22%, 42) and the Danish Refugee Council (20%, 38). Other organisations outside the list were also mentioned (16%, 31), mainly including Helvetas Peru (21), but also Hias (5), Living Water Community (2), World Vision (1), and the Jesuit Refugee Service (1).

⁹ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela, Colombian, Other.

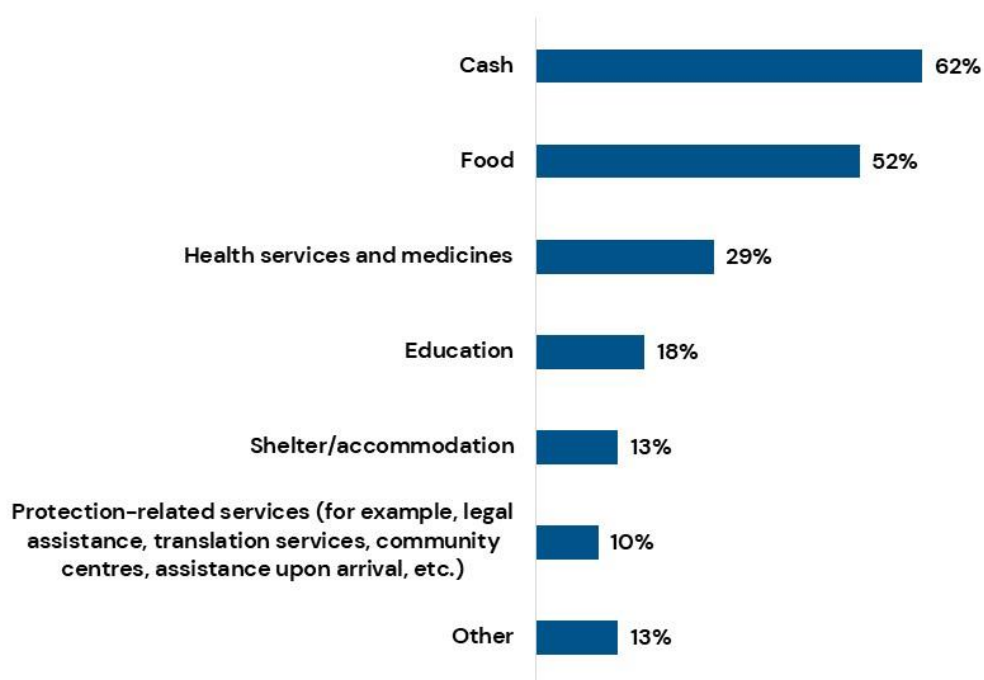
Figure 102. Q5 Could you select the organisations that you have received this assistance from, or have supported activities that have benefitted you or your family? – Selected Choice (n=188)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

Participants who said they received help (188) were then asked the type of aid they received. A majority of respondents said they received cash (62%, 117 respondents) and food (52%, 98), followed by health services (29%, 54), education (18%, 33), shelter (13%, 25), other (13%, 25), and protection related services (10%, 19).

Figure 103. Q6 What type of support have you received since your arrival in the current country you are located? (If you have not changed countries, think of support received between 2017 and 2021) You may select more than one option (n=188)



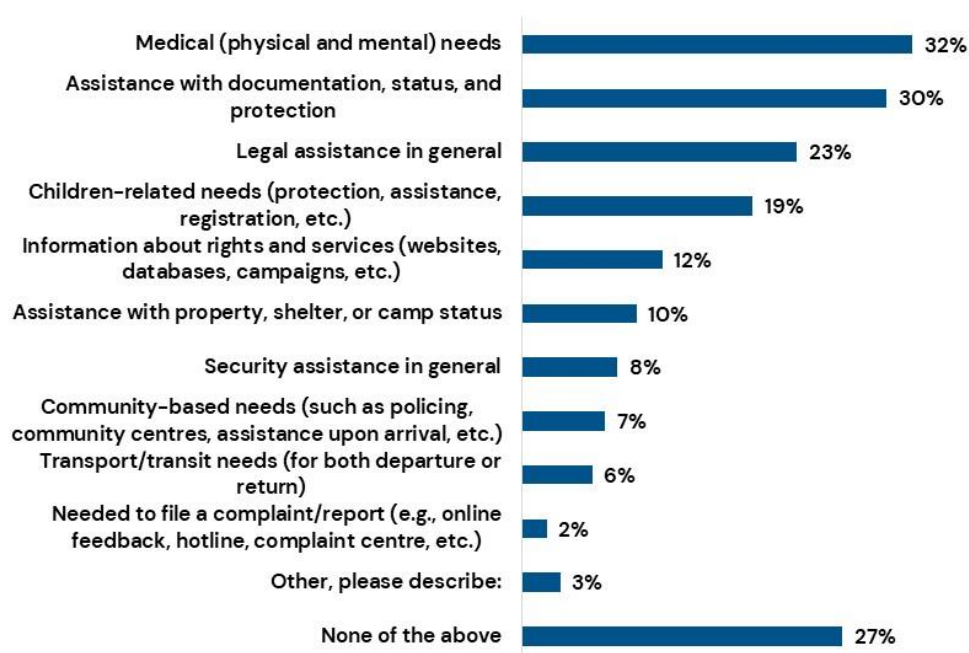
Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

All participants who received any kind of help (188)¹⁰ were also prompted into a selection of specific protection aid, which revealed a significant difference between protection provision in Q6 (10%, 19 participants) and this question (73%, 138). Just under a third of respondents mentioned they received medical support (32%, 61), followed by assistance with documentation, status, and protection (30%, 57). Other respondents mentioned legal assistance (23%, 43), children-related needs (19%, 36) and information about rights and services (12%, 22).

Among respondents who answered 'Other, please describe' (3%, 6), there were only six comments, which included food, psychological assistance, specific training, cash, and medical equipment.

¹⁰ Participants who answered 'yes' to Q4

Figure 104. Q7 And, more specifically, did you receive support with the following protection related activities? You may select more than one option. – Selected Choice (n=188)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

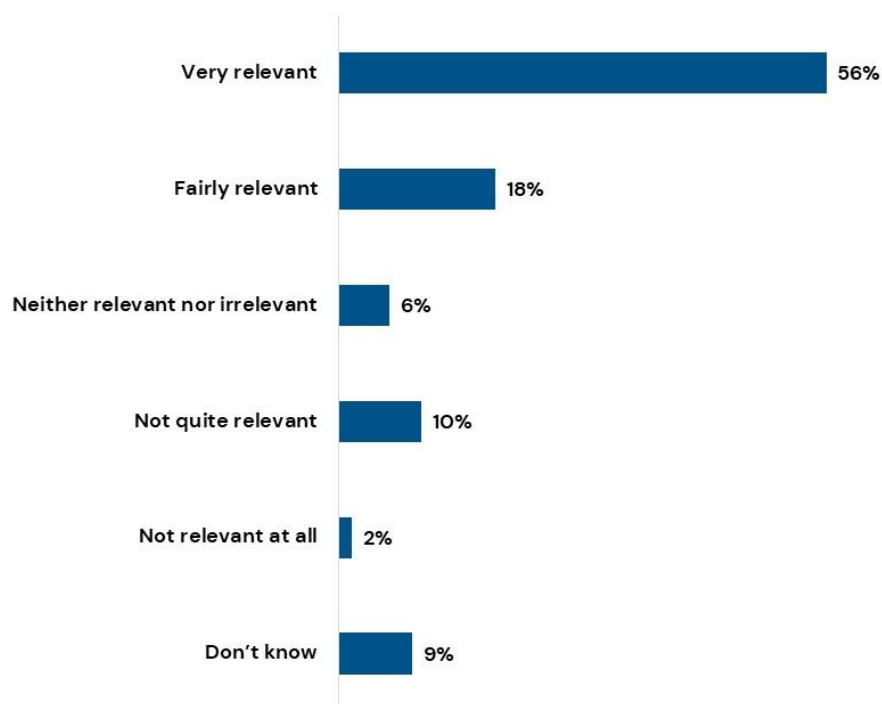
A6.3.3.2 Satisfaction

All respondents who selected any option other than 'None of the above' on Q7 (138) were asked about their satisfaction level with the services provided. In this sense, all categories but one showed levels of satisfaction above 70% (either fairly satisfied or very satisfied). Half of respondents who needed to file a complaint/report, were satisfied with the service (50%), although only four respondents mentioned this service.

A6.3.3.3 Relevance

Participants who said they received help (188) were then asked to rate the relevance of the activities or services provided to them or their families. More than seven in ten respondents (74%, 140 participants) said the services were either fairly or very relevant, with 56% (106) saying it was very relevant. One in ten or less said it was not quite relevant (10%, 18), neither relevant nor irrelevant (6%, 11) or not relevant at all (2%, 3). Just under one in ten said they don't know (9%, 16). The figure below provides a full overview of these results.

Figure 105. Q9 How relevant were the activities/services provided in relation to your needs and, if applicable, those of your family? (n=188)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- Participants identifying as women reported the aid they received was more relevant (59% vs 46% for men)
- Participants aged 35-44 had a higher proportion of respondents answering 'very relevant' (62%)
- Participants with a Venezuelan nationality who moved in 2018 had a higher proportion of 'very relevant' compared to other years (69%)
- Participants residing in Peru had a higher proportion of respondents selecting 'very relevant' (88%), which is the highest of all the other categories.

Figure 106. Socio-demographic breakdown Q9

Profile/Category	n	Very relevant	Fairly relevant	Neither relevant nor irrelevant	Not quite relevant	Not relevant at all	Don't know
Total	<i>n</i> =188	56%	18%	6%	10%	2%	9%
Gender							
Woman	<i>n</i> =149	59%	17%	6%	9%	1%	8%
Man	<i>n</i> =37	46%	24%	5%	14%	3%	8%
Age							
18 to 24	<i>n</i> =17	41%	41%	0%	12%	6%	0%
25 to 34	<i>n</i> =66	58%	11%	5%	11%	2%	15%
35 to 44	<i>n</i> =60	62%	18%	5%	8%	2%	5%
45 to 54	<i>n</i> =31	52%	16%	13%	10%	0%	10%
55 to 64	<i>n</i> =9	67%	22%	11%	0%	0%	0%
65 or over	<i>n</i> =5	40%	40%	0%	20%	0%	0%
Year of departure from Venezuela							
2022	<i>n</i> =8	63%	25%	0%	13%	0%	0%
2021	<i>n</i> =12	58%	25%	8%	0%	0%	8%
2020	<i>n</i> =11	64%	9%	0%	18%	0%	9%
2019	<i>n</i> =74	43%	26%	7%	16%	1%	7%
2018	<i>n</i> =42	69%	5%	10%	5%	2%	10%
2017	<i>n</i> =19	63%	21%	5%	0%	0%	11%
Country of residence							
Colombia	<i>n</i> =65	75%	12%	3%	2%	2%	6%
Ecuador	<i>n</i> =11	36%	36%	9%	9%	0%	9%
Peru	<i>n</i> =40	88%	13%	0%	0%	0%	0%
Venezuela	<i>n</i> =6	67%	17%	0%	0%	0%	17%
Other	<i>n</i> =66	21%	24%	12%	24%	3%	15%

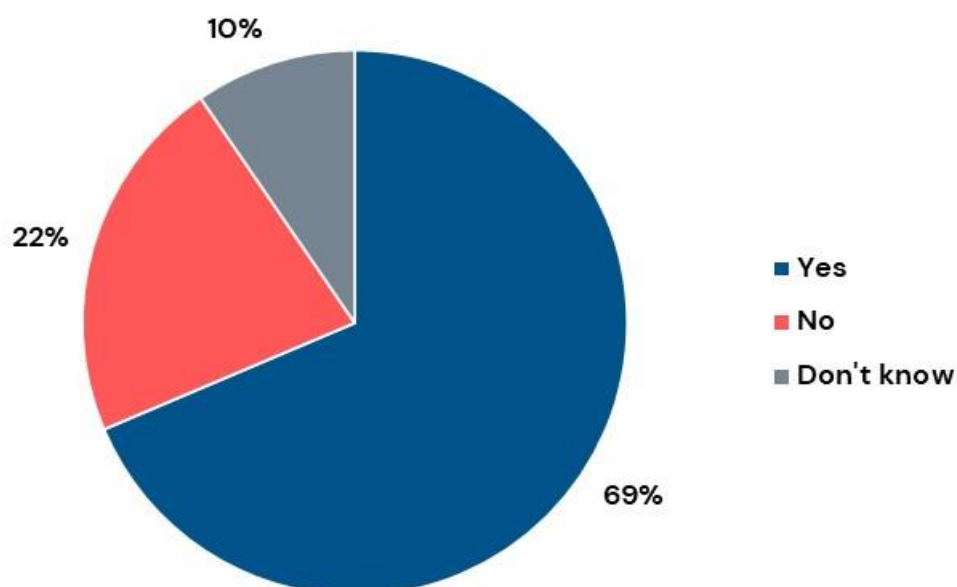
Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.¹¹

¹¹ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela, Colombian, Other.

A6.3.3.4 Complaint mechanisms/Sustainability

Participants who said they received help (188) were asked if they or their family members had access to channels to communicate questions or complaints about the received support. Just under seven in ten said they did (69%, 129 participants), while 22% (41) did not. One in ten respondents said they don't know (10%, 18). The figure below provides a full overview of these results.

Figure 107. Q10 If you or your family members had any questions or complaints about the support you received, were there channels to communicate them (e.g., online feedback, hotline, complaint centre, etc.)? (n=188)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- There are no relevant differences between participants identifying as women or men (70% 'yes' for women, and 65% for men)
- All participants aged 55 or over reported having access to complaint mechanisms. However, they are also the groups with the lowest numbers of participants. In this sense, the next age bracket reporting access to complaint mechanisms is the 18-24 group (76%).
- Venezuelan participants who left in 2017 reported having more access to complaint mechanisms than other years (79%), although all groups but one had a proportion above seven in ten (the only exception being 2019, with 62%).
- All participants residing in Peru had access to complaint mechanisms, followed by Colombia (78%).

Figure 108. Socio-demographic breakdown Q10

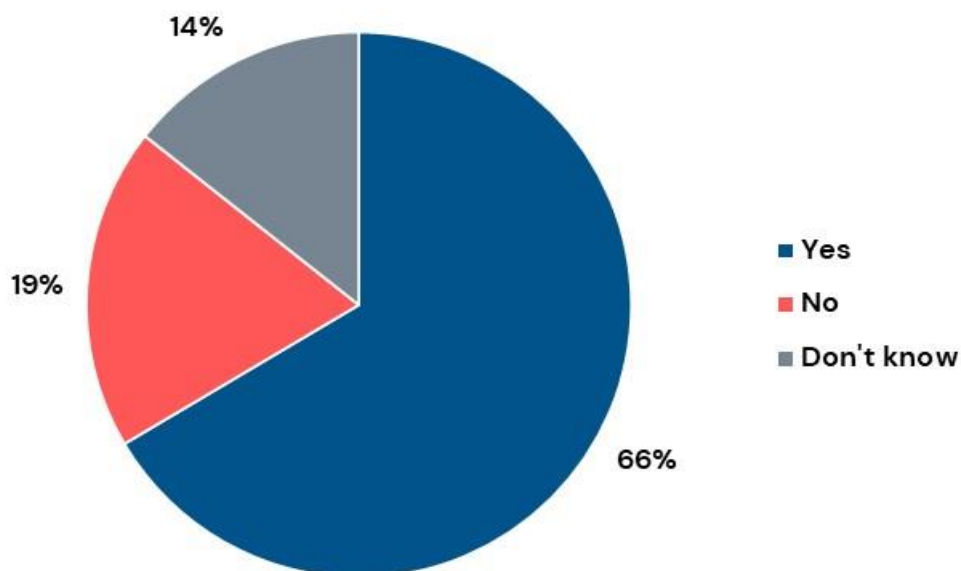
Profile/Category	n	Yes	No	Don't know
Total	n=188	69%	22%	10%
Gender				
Woman	n=149	70%	22%	8%
Man	n=37	65%	22%	14%
Age				
18 to 24	n=17	76%	24%	0%
25 to 34	n=66	59%	27%	14%
35 to 44	n=60	68%	18%	13%
45 to 54	n=31	71%	26%	3%
55 to 64	n=9	100%	0%	0%
65 or over	n=5	100%	0%	0%
Year of departure from Venezuela				
2022	n=8	75%	25%	0%
2021	n=12	75%	17%	8%
2020	n=11	73%	9%	18%
2019	n=74	62%	26%	12%
2018	n=42	76%	21%	2%
2017	n=19	79%	16%	5%
Country of residence				
Colombia	n=65	78%	18%	3%
Ecuador	n=11	45%	27%	27%
Peru	n=40	100%	0%	0%
Venezuela	n=6	50%	33%	17%
Other	n=66	45%	36%	18%

Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.¹²

¹² Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela, Colombian, Other.

Participants who said they received help (188) were also asked if they felt that the support provided to them or their family would help with future needs. Just under seven in ten said it will (66%, 125 participants), while 19% (36) it will not help. Just over one in ten respondents said they don't know (14%, 27). The figure below provides a full overview of these results.

Figure 109. Q11 Do you feel that the support provided to you or your family will help you with future needs? (n=188)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- There are no relevant differences between responses from participating men or women.
- Among all the age groups, respondents aged 55 to 64 had a higher proportion of participants selecting 'yes' (78%), closely followed by those aged 45 to 64 (77%).
- All participants residing in Venezuela selected 'yes', but this is the group with the lowest representation. In this sense, 98% of participants residing in Peru answered 'Yes', followed by Colombia (75%).

Figure 110. Socio-demographic breakdown Q11

Profile/Category	n	Yes	No	Don't know
<i>Total</i>	<i>n=188</i>	66%	19%	14%
Gender				
<i>Woman</i>	<i>n=149</i>	66%	19%	15%
<i>Man</i>	<i>n=37</i>	68%	22%	11%
Age				
<i>18 to 24</i>	<i>n=17</i>	71%	18%	12%
<i>25 to 34</i>	<i>n=66</i>	55%	27%	18%
<i>35 to 44</i>	<i>n=60</i>	72%	15%	13%
<i>45 to 54</i>	<i>n=31</i>	77%	13%	10%
<i>55 to 64</i>	<i>n=9</i>	78%	0%	22%
<i>65 or over</i>	<i>n=5</i>	60%	40%	0%
Country of residence				
<i>Colombia</i>	<i>n=65</i>	75%	14%	11%
<i>Ecuador</i>	<i>n=11</i>	55%	0%	45%
<i>Peru</i>	<i>n=40</i>	98%	3%	0%
<i>Venezuela</i>	<i>n=6</i>	100%	0%	0%
<i>Other</i>	<i>n=66</i>	38%	39%	23%

Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.¹³

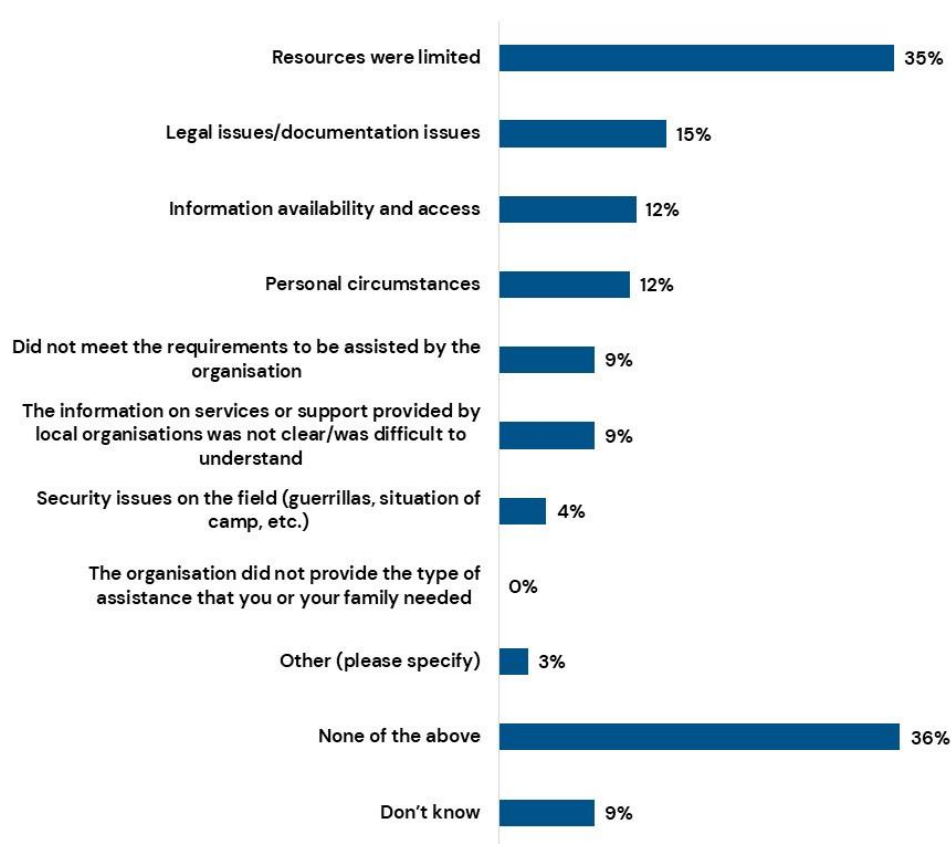
¹³ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, Ecuador, Venezuela, Colombia, Other.

A6.3.4 Obstacles

Participants who said they received help (188) were asked if they perceived any obstacles to the assistance provided. Overall, over six in ten respondents experienced obstacles (64%, 121 participants). Over a third of participants who received help mentioned resources were limited (35%, 66), while 15% (28) mentioned legal/documentation issues, 12% (23) mentioned information availability and access, and personal circumstances. The figure below provides a full overview of these results.

All respondents who selected 'Other' (5) provided comments which included a working permit, time, situational difficulties (theft inside the shelter, lack of access to transport tickets, etc.), and a general opinion on lack of targeting to beneficiaries who actually need food assistance.

Figure 111. Q13 Did you perceive any of the following obstacles to the assistance provided to you in the country you are currently located? - Selected Choice (n=188)

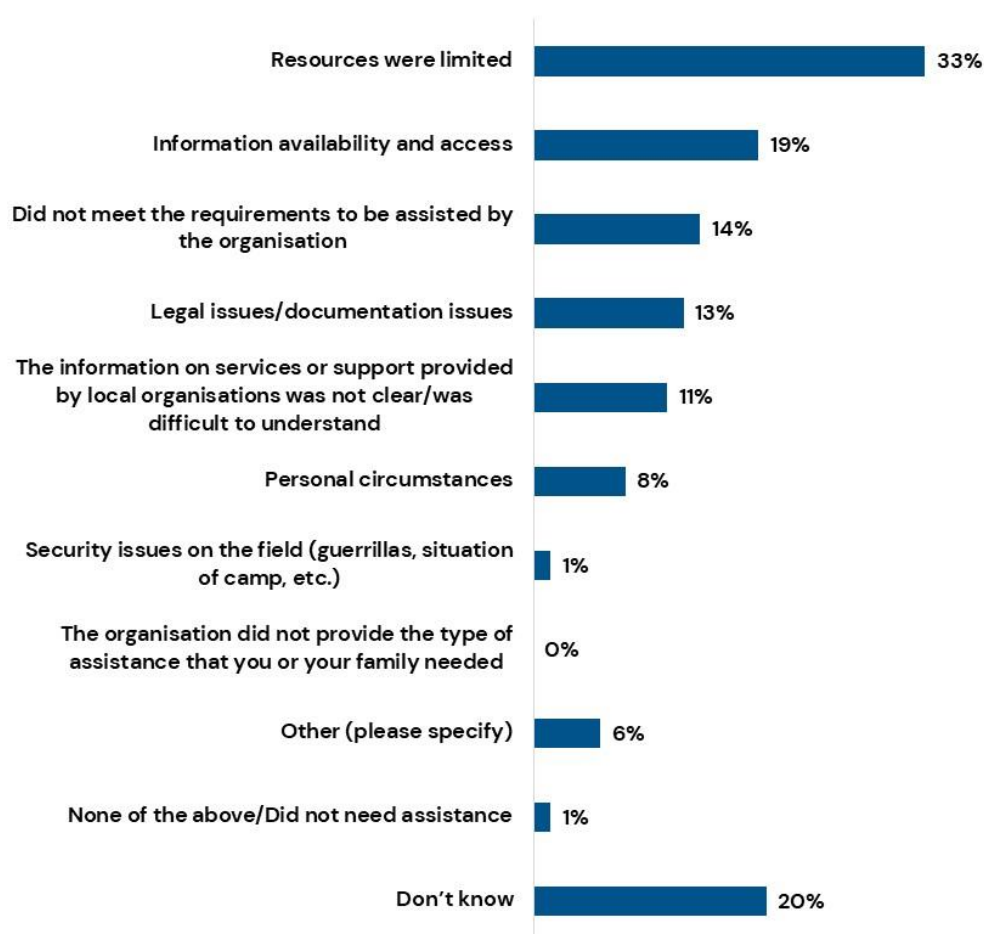


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A similar question was asked to participants who said they did not receive help (143)¹⁴. Overall, over seven in ten respondents experienced obstacles (79%, 113). A third of participants who received help mentioned resources were limited (33%, 47), while 19% (27) mentioned information availability and access, 14% (20) did not meet the requirements to be assisted by the organisation, and 13% (18) had documentation issues. The figure below provides a full overview of the remaining results.

All respondents who selected 'Other, please describe' provided additional comments, which mainly included lack of resources, no information received or lack of clarity of physical spaces to request help, problems with assessment of needs, or special needs that could not be covered.

Figure 112. Q12 What were the main obstacles that prevented you or your family from receiving assistance? - Selected Choice (n=143)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

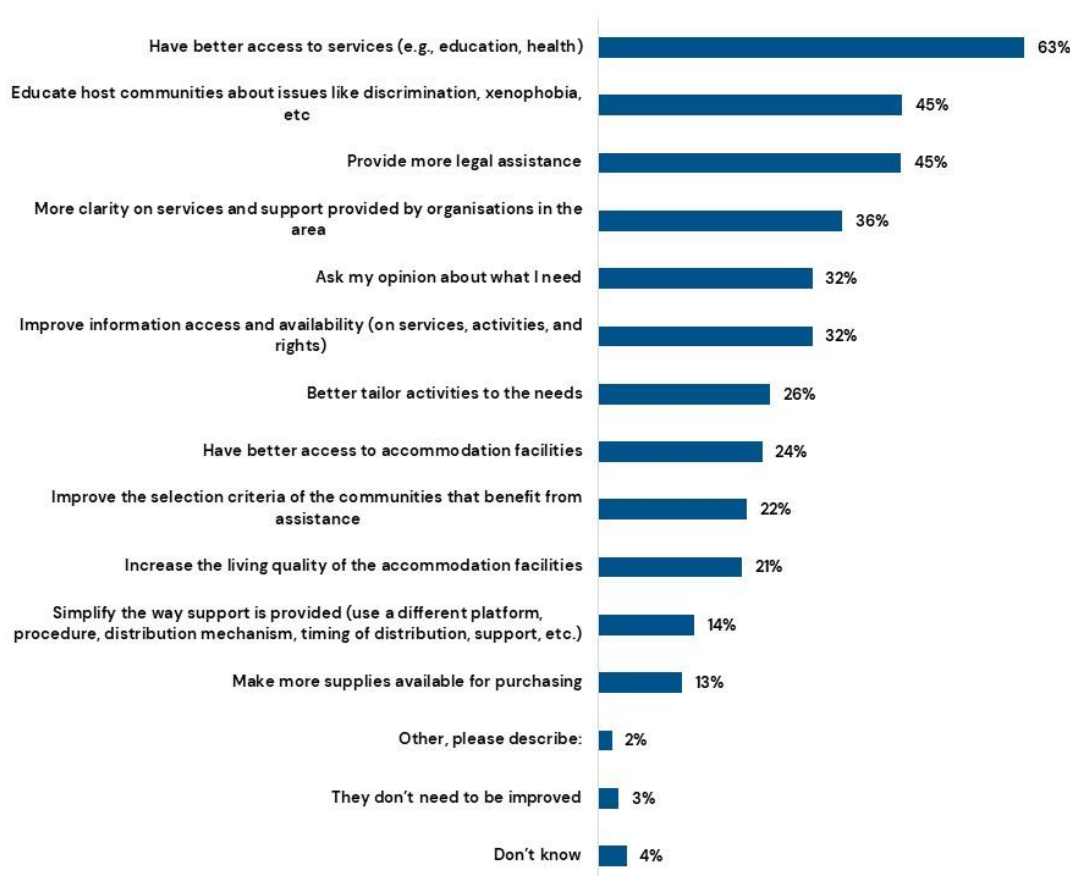
¹⁴ Participants who answered 'No' on Q4

A6.3.5 Improvement of assistance services

All participants were asked how they think assistance systems could be improved. Over six in ten respondents mentioned having better access to services (63%, 213), followed by educating host communities about issues like discrimination, xenophobia, etc. and more legal assistance (both 45%, 152 and 151 respectively). Around a third mentioned more clarity on services and support provided by organisations in the area (36%, 122), asking the opinions of beneficiaries, and improving information access and availability (32% each, 107 each).

In total, 3% (10) said that the assistance systems don't need to be improved, while 4% (14) said don't know. Among those who selected 'Other, please describe' (2%, 7), there were seven comments with more information, which included better outreach to lower social-income families, reduce labour exploitation and economic burdens, better medical assistance, more cash and accountability, less preference towards locals, and better treatment of mothers of children with disabilities.

Figure 113. Q14 How could the assistance systems be improved in the country you are currently located? You may select more than one option. – Selected Choice (n=336)

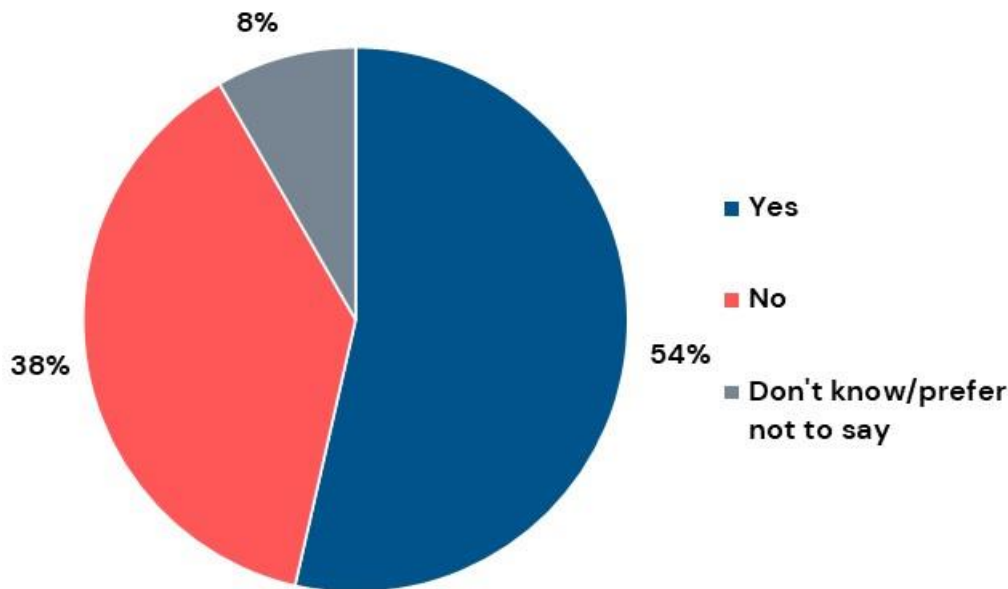


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A6.3.6 Inclusion and discrimination

All participants were asked if they felt integrated in their communities. Overall, a majority feels integrated (54%, 180 participants), while 38% (128) don't feel integrated. Under one in ten respondents answered 'Don't know' (8%, 28).

Figure 114. Q15 Do you feel integrated in the community you are currently staying in? Think of your access to local opportunities, activities, interactions with locals, etc. (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- There are no relevant differences between participants identifying as women or men.
- Among all participants, those aged 45 to 54 reported feeling more integrated than other age groups from the survey (70%)
- Almost nine in ten Venezuelan participants who left in 2022 said they felt integrated (88%) but this group has a lower number represented in the survey. In this sense, the next group after this one is for those participants who left in 2017 (76%)
- Respondents residing in Colombia had a higher proportion of participants feeling integrated (72%), followed by Peru (70%).

Figure 115. Socio-demographic breakdown Q15

Profile/Category	n	Yes	No	Don't know/pref er not to say
Total	n=336	54%	38%	8%
Gender				
Woman	n=259	53%	39%	8%
Man	n=74	55%	38%	7%
Age				
18 to 24	n=45	58%	33%	9%
25 to 34	n=137	48%	45%	7%
35 to 44	n=92	50%	40%	10%
45 to 54	n=47	70%	21%	9%
55 to 64	n=10	60%	30%	10%
65 or over	n=5	60%	20%	20%
Year of departure from Venezuela				
2022	n=8	88%	13%	0%
2021	n=13	62%	31%	8%
2020	n=25	36%	52%	12%
2019	n=143	41%	49%	10%
2018	n=63	60%	35%	5%
2017	n=33	76%	21%	3%
Country of residence				
Colombia	n=113	72%	21%	7%
Ecuador	n=13	62%	31%	8%
Peru	n=40	70%	30%	0%
Venezuela	n=17	53%	35%	12%
Other (please spe	n=152	35%	54%	11%

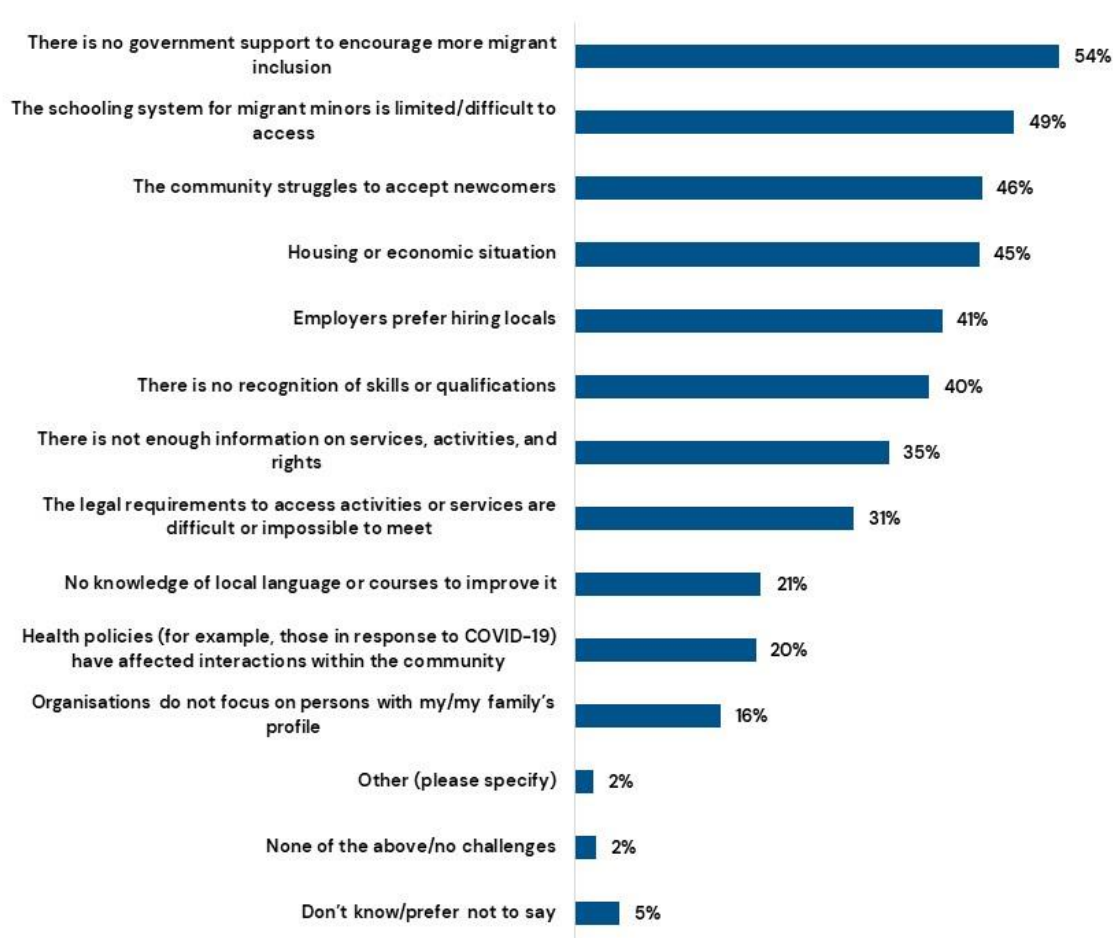
Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.¹⁵

¹⁵ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela, Colombian, Other.

All participants were asked about challenges to promote inclusion and integration. Overall, more than half of the respondents selected the lack of government support to encourage migrant inclusion (54%, 182), while just under half mentioned issues with the schooling systems for migrant minors (49%, 165). Over four in ten participants also mentioned that communities struggle to accept newcomers (46%, 153), issues with housing or the economic situation (45%, 152), employers preferring locals (41%, 138), and a lack of recognition of skills or qualifications (40%, 133). The figure below provides a full overview of these results.

Only 2% (8) said there were no challenges, while 5% (17) answered 'don't know'. Among respondents who selected 'Other, please describe' (7), there were five comments with more information, which included more education for persons and children with disabilities, legalisation of documents for migrants, dignified jobs for migrants, and a general comment on the lack of access to education for migrant children in Trinidad and Tobago.

Figure 116. Q16 In your opinion, what are the challenges to promote more inclusion and integration in your current community? Please select all that apply. - Selected Choice (n=336)

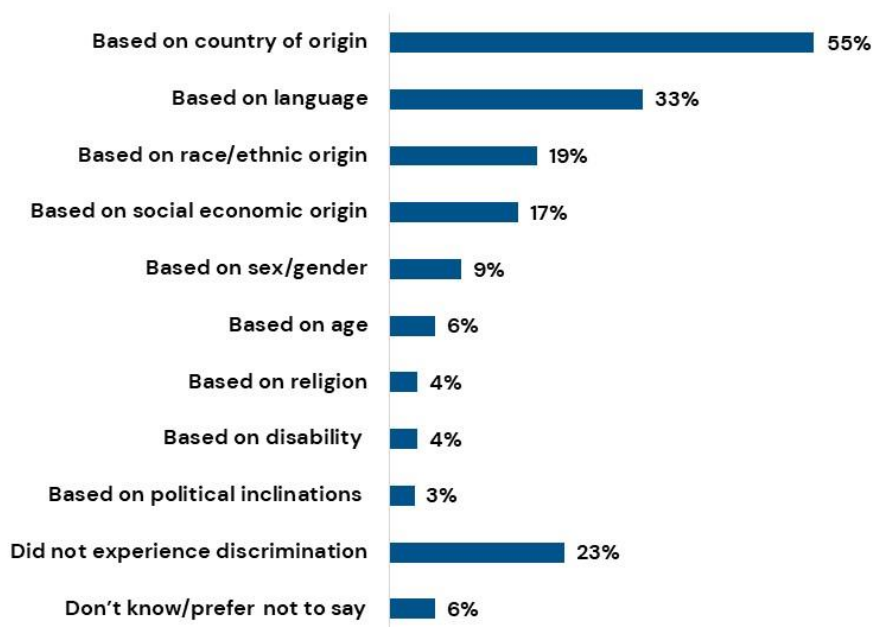


Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

The final question before comments was related to experiences of discrimination. Overall, at least 71% (240 participants) of the participants experienced a form of discrimination. More than half of the participants experienced discrimination based on their country of origin (55%, 184), followed by a third of participants experiencing language discrimination (33%, 110). The remaining options were selected by less than two in ten participants, including race/ethnic origin (19%, 64), and social economic origin (17%, 56). The remaining options were selected by less than one in ten respondents. The figure below provides a full overview of these results.

Over two in ten respondents (23%, 76) said they did not experience discrimination, while 6% (20) answered 'don't know/prefer not to say'.

Figure 117. Q17 During your stay in the country you are currently located, have you or the members of your family living with you experienced any form of discrimination (based on where you come from, your ethnicity, gender, etc.)? (n=336)



Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.

A socio-demographic analysis reveals some trends between groups (see table below):

- There were no significant differences between participants identifying as women or men.
- Older participants (55 or over) had a higher proportion of respondents experiencing age discrimination (20% each), although these groups were not as represented as other age brackets.
- Venezuelan participants who left the country in 2019 had a higher proportion of respondents experiencing discrimination based on their country of origin (62%), followed by those who left in 2020 (60%)
- Participants residing in other countries (mainly Trinidad and Tobago), had a higher proportion of respondents experiencing discrimination based on language (64% the official language being English¹⁶), and on country of origin (68%), participants residing in this country also reported higher discrimination based on race/ethnic origin (32%).
- Participants reporting other nationalities had a higher proportion of respondents experiencing discrimination based on country of origin (75%). However, they are not significantly representative of this survey. More than half of the participants with a Venezuelan nationality experienced the same kind of discrimination (55%).

¹⁶ UNHCR (2023), Trinidad and Tobago. Available online: [https://help.unhcr.org/trinidadandtobago/about-trinidad-and-tobago/living-in-trinidad-and-tobago/#:~:text=Language,and%20Hindustani\)%20into%20everyday%20conversation](https://help.unhcr.org/trinidadandtobago/about-trinidad-and-tobago/living-in-trinidad-and-tobago/#:~:text=Language,and%20Hindustani)%20into%20everyday%20conversation).

Figure 118. Socio-demographic breakdown Q15

Profile/Category	n	Based on country of origin	Based on language	Based on race/ethnic origin	Based on social economic origin	Based on sex/gender	Based on age	Based on religion	Based on disability	Based on political inclinations	Did not experience discrimination	Don't know/pref er not to say
Total	n=336	55%	33%	19%	17%	9%	6%	4%	4%	3%	23%	6%
Gender												
Woman	n=259	56%	32%	18%	18%	10%	5%	4%	3%	4%	23%	6%
Man	n=74	49%	36%	22%	12%	7%	8%	3%	4%	1%	23%	7%
Age												
18 to 24	n=45	53%	40%	18%	13%	9%	9%	7%	0%	7%	16%	13%
25 to 34	n=137	58%	41%	17%	23%	9%	3%	4%	4%	4%	21%	5%
35 to 44	n=92	57%	23%	23%	13%	9%	5%	2%	4%	0%	24%	4%
45 to 54	n=47	45%	23%	19%	6%	15%	9%	4%	2%	2%	28%	6%
55 to 64	n=10	50%	20%	20%	30%	0%	20%	0%	10%	10%	30%	0%
65 or over	n=5	60%	40%	20%	0%	0%	20%	0%	20%	0%	40%	0%
Year of departure from Venezuela												
2022	n=8	50%	25%	0%	13%	0%	0%	0%	0%	0%	50%	0%
2021	n=13	38%	8%	8%	0%	0%	0%	0%	8%	0%	54%	0%
2020	n=25	60%	52%	16%	24%	8%	8%	4%	0%	4%	16%	4%
2019	n=143	62%	47%	26%	16%	7%	6%	2%	3%	3%	20%	3%
2018	n=63	54%	21%	10%	13%	13%	5%	6%	3%	2%	27%	10%
2017	n=33	55%	18%	18%	21%	6%	9%	3%	6%	6%	21%	6%
Country of residence												
Colombia	n=113	37%	7%	9%	19%	5%	6%	2%	8%	4%	34%	12%
Ecuador	n=13	54%	15%	8%	15%	15%	15%	0%	0%	0%	31%	0%
Peru	n=40	65%	0%	10%	3%	3%	0%	5%	0%	0%	35%	0%
Venezuela	n=17	29%	18%	6%	18%	12%	6%	6%	6%	6%	24%	6%
Other	n=152	68%	64%	32%	18%	13%	7%	5%	1%	3%	11%	3%
Country of origin												
Colombian	n=15	33%	7%	7%	40%	13%	13%	0%	7%	7%	13%	20%
Venezuelan	n=314	55%	34%	18%	16%	9%	6%	3%	4%	3%	24%	5%
Other	n=8	75%	25%	63%	25%	38%	0%	13%	0%	0%	0%	0%

Source: ICF elaboration (2023) based on results of mini-mobile survey of beneficiaries.¹⁷

A6.3.7 Final comments

The final question of the survey invited participants to express any other comments on their current situation or assistance received.¹⁸ In total, 240 participants provided comments.

Overall, a review of these statements reveals that there was a similar proportion of very positive, positive, neutral, negative, and very negative statements. However, negative comments tended to include more detail than the positive ones, as expected by the evaluation team. The following main trends were observed in the responses:

- Among the different identified themes, many participants opted for simple, grateful messages to the services received, or no extra comments to add to the survey.¹⁹
- Other participants were positive about the services received, but encouraged organisations to have more projects for migrants, such as support to facilitate employability or entrepreneurship of migrants,²⁰

¹⁷ Some categories have been removed, as they did not have enough responses to provide a quality analysis. Still, some categories have lower numbers, and results for them should be considered carefully: 65 or over, 2022, 2021, 2016 or before 2016, Ecuador, Venezuela, Colombian, Other.

¹⁸ Q18 - Are there any other comments you would like to add about the assistance in the country you are currently located or the performance of the organisations that provide assistance there? Please share them below.

¹⁹ Some examples include: "I thank God for the support of organisations with workshops", "I have nothing but add, God bless you", "Immensely grateful to each of the organisations that helped me. Since they provided stability to me during very difficult moments, thank you and blessings."

²⁰ For example: "Grateful to DRC for everything it has provided to my family and in my community, but as a Venezuelan migrant who has already been in Colombia for 5 years, I only ask that there is more employability for entrepreneurship for the Venezuelan migrant population and that all organisations continue with the excellent job of transmitting information because 'he who does not know is like the one who does not see'. Thank you very much" or "I consider that they have a very friendly team, I just want to recommend that they make a day in which they can give aid for entrepreneurs who have some medical condition, so that they can survive economically and thus pay for medicines and food .. make more advertising in their different available activities to the refugee public, since many times they do courses

- While some were grateful, there were still comments highlighting the difficulties migrants face in other countries, often including documentation issues, perceptions about migrants, national laws stopping refugees from using services, etc.²¹. Other comments highlighted specific issues of possible corruption, alongside recommendations for the improvement of these problems.²²
- Comments did not always include geographical locations, but sometimes participants would mention Trinidad and Tobago or Colombia, as well as Venezuela.

and many people fail to obtain the information .. since if it is applied with different knowledge to the refugee, it would be easier to have an income and help each home, because in this country it is quite complicated to get a job for the immigration status that we have and with the language. However if you implemented English courses, hairdressing, baking, etc. many people could have work on their own. Regarding education, the Living Water has done an excellent job supporting children with their online classes, but the Ministry of this country does not recognise the studies of Venezuelan children with a refugee status and that is a fairly difficult issue for parents since the main thing about a child are their studies .. regarding help, I understand that if I have already received a help I have to wait 6 months to be able to choose another one, and I really need an economic help to acquire a freezer and thus sell ice cream from home since my medical condition (thrombophilia) does not allow me to stand up for a long time because I swell and my legs hurt me a lot due to 2 previous thrombosis, I am the mother of an 8 -year -old girl and a 5 -month -old baby .. Happy day, thank you very much" or

"Very grateful, the psychological workshops and the monetary service helped me. I hope they continue to carry out health and mental health workshops."

²¹ For instance: *"I would like to add that I am very grateful for being in this country, but I would also like to say that migrants here have a lot of difficulties, rents are high, and we work for only being able to afford rent and only that. We don't receive support of any kind and we know that they send support to many countries but nothing for us, in fact they don't give us anything, they look at us as if we were aliens."* Or

"Because we are foreigners, our benefits are limited, as are the salaries we receive..! Way below normal..! We do not have access to education, there are few institutions that serve us..! Organizations should focus more on legal assistance and immigration status..! The government does not recognize the card as a credential with some status..!" or

"Financial aid is very limited and there are no integration projects, there are no spaces for help in learning the language, and aid for children to study is very limited and very difficult to access. Venezuelans who are in Trinidad do not have the opportunity to have a normal life since there is no right to anything if you are in refugee status for the government, you are only illegal, additionally they do not recognize the UNHCR or respect the rights of the refugee. The best thing they can do for the Venezuelans who are in Trinidad is to relocate them or carry out a relocation campaign and get them out of here little by little. There are many people who have our children without studying and if the possibility of finding a good job will help us get out of here."

²² For example: *"It is no secret for anyone that within this organisation here on the island of Trinidad and Tobago there is a group of people who steal resources and do not help anyone. Only to them. And do not help the migrant community. Nowadays there are many problems in this country in terms of work, inflation also harms us migrants first since we are the most vulnerable in this country, there are those who hire us and pay us whatever they want, which is normally less. My recommendation is that they should put an eye on those who are managing those aid resources on the island of Trinidad and Tobago. Resources are deviating for other purposes, because they are not helping."* Or *"In Trinidad and Tobago, immigrants do not receive the necessary help and support to get ahead in this country. There is no access to education for children. My children have not studied for almost 4 years because here there is no opportunity for children to study in The schools of the country and of the UNHCR there are no places for the children, the food aid is given to I don't know what kind of people because I suffer from epilepsy and sugar and kidney problems and I have not received help with medicine or food In this country, the times that I go to request help, they do not give it to me, for several months I was assisted with food and it was in the year 2020 from there I do not receive help from anything or access to health systems or education in Trinidad there is no access to the health system to Venezuelans, unless they have money, but we are low-income, we have nothing. If they could review this situation in this country, they would realize that the resources that they approve of this country are only for their workers because they do not help or they support immigrants in no way and my family and I are registered by UNHCR as refugees and I am sick and I do not receive support or help from any organization here in this country since 2020 we are a family that left our country with 3 children looking for better benefits but here there is corruption and they do not comply with the aid I ask God that they can supervise this situation and help immigrants more thank you"*

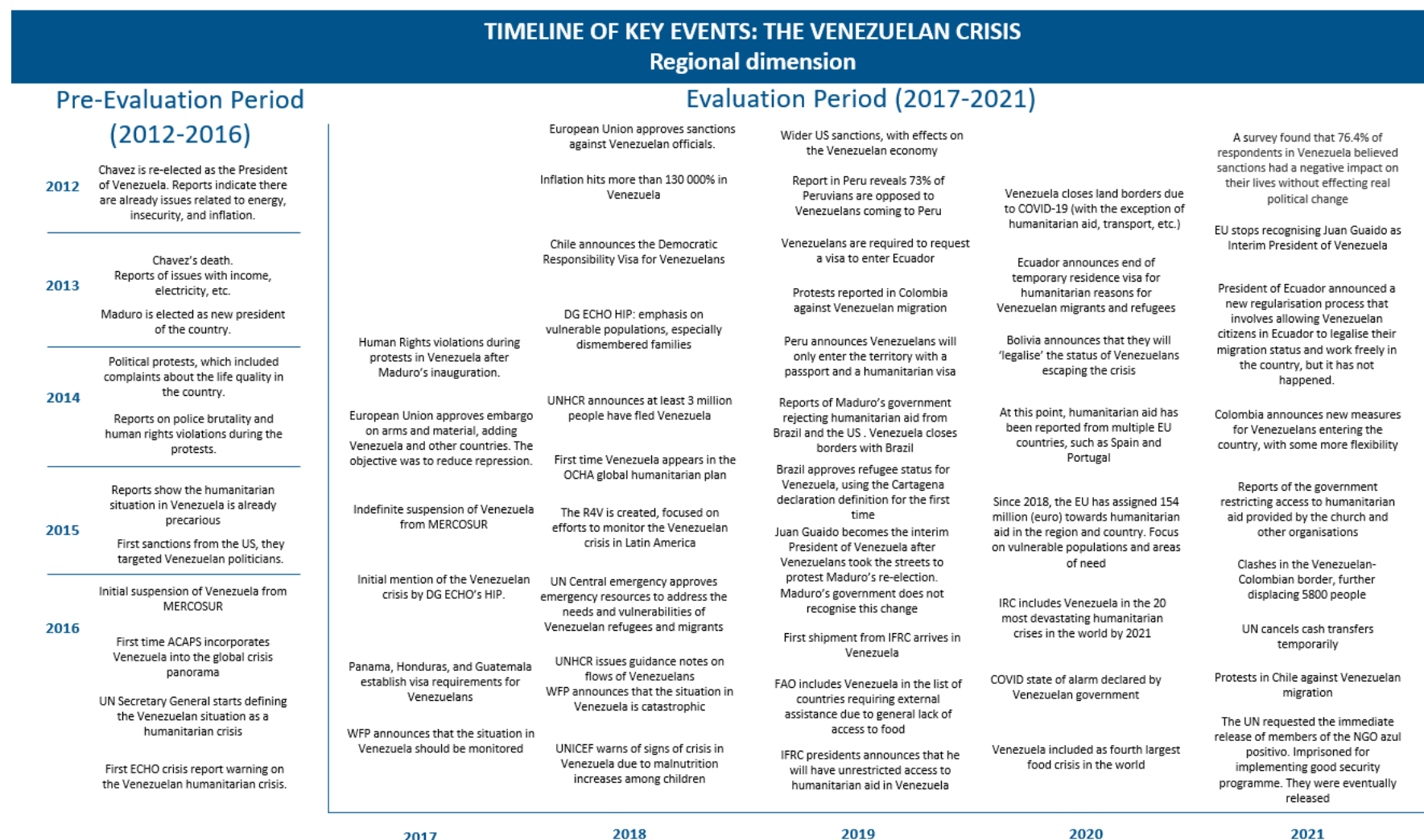
ANNEX 7 SUPPORTING EVIDENCE

A7.1 DG ECHO'S RESPONSE TO THE VENEZUELAN REGIONAL CRISIS

A7.1.1 Overview of the Venezuelan regional crisis

Figure 119 illustrates the timeline of key events that supports the overview of the context presented in Section 2.1.

Figure 119. Timeline of key events



Source: ICF (2023) with information from news sources, HumVenezuela and ACAPS

A7.1.2 Effectiveness

Table 41. Average pre-defined KOI targets used by DG ECHO-funded actions (against available international minimum standards)

Pre-defined Key Outcome Indicators (KOI)	Average target (portfolio)	Number of actions using the KOI	Minimum standards (if available)	
			Target	Source
Nutrition: Severe Acute Malnutrition Recovery rate	69%	5	75%	Sphere ²³
Nutrition: Coverage of the nutrition program	100%	3	50% (rural areas), 70% (urban areas), 90% (camps)	Sphere
Health: Crude mortality rate (number of deaths/10.000p/day)	3%	1	-	-
Food security: % of the target population with acceptable Food Consumption Score (FCS)	78%	9	80%	ECHO guidance ²⁴
Food security: % of 6-23 months old children in target population who receive a minimum acceptable diet (MAD)	57%	3	-	-
Food security: Average Coping Strategies Index (CSI) score for the target population	60	1	-	-
WASH: % of target population with adequate WASH services and hygiene practices	71%	9	-	-
WASH: % of target facilities (PHU, schools, markets) with basic WASH services functioning	92%	5	-	-
EiE: % of school-aged boys and girls continuously accessing quality and protective learning opportunities relevant to the emergency	78%	6	-	-
EiE: % targeted children who transition (1) into formal from NFE, or (2) into the next level of NFE, or (3) into the next academic year of formal education	80%	1	-	-
EiE: % targeted girls and boys who are retained in education at the end of the action	78%	9	-	-
Shelter and settlements: % of target population living in safe and dignified shelters in secure settlements	74%	5	-	-
DRR: % reduction in the number of affected people (experienced, expected or modelled)	30%	2	-	-
Protection: % of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner	Not available	0	-	-

²³ Sphere. 2018. Sphere Handbook.

²⁴ DG ECHO. N.D. KOI Guidance.

Source: ICF elaboration, based on project mapping (whole portfolio) and document review. Coloured cells mark whether the average of the KOI targets used for the DG ECHO-funded actions reviewed is higher (green) or lower (amber) than the international minimum standard.

Table 42. Key activities implemented by DG ECHO partners, per sector (2017–2021)

Sector	Main activities implemented
Health	<p>Health was the main priority sector in Venezuela (19 out of 22 actions covering Health interventions in the project mapping were implemented in Venezuela, either exclusively or through multi-country projects), but it was also one of the two main sectors funded in countries receiving Venezuelan migrants and refugees.²⁵ All the activities listed in the ToC were implemented, but the project mapping, KIIs and field interviews suggest that the following were the most common in Venezuela and the region:</p> <ul style="list-style-type: none"> • Strengthening of epidemic prevention and response capacities, specifically focusing on COVID-19 and malaria. • Provision of primary health. Stakeholder feedback suggests that these were particularly important in Venezuela and in Colombia, given the collapse of the healthcare system in Venezuela and the need to provide emergency care to Venezuelan migrants and refugees arriving in Colombia. Several DG ECHO partners provided these services through mobile health units (e.g. PAHO, the German Red Cross, ACF). For instance, the German Red Cross provided these services on a boat that travelled along the Orinoco River, offering these services to remote communities living close to the river. Similarly, in Colombia, ACF deployed extramural care teams in large urban settings. Some DG ECHO partners, like the German Red Cross, also reported treating chronic diseases.²⁶ • SRH and maternal health (especially Venezuela and Colombia): the field missions in Venezuela and Colombia demonstrated that SRH and maternal health services were also a key focus of Health interventions in both countries (see Case study 1 for further details on the activities implemented in Venezuela). In Colombia, several DG ECHO partners consulted provided these services (e.g. OXFAM, via Fundación Mujer y Futuro, CARE, ACF) provided these services to Venezuelan migrants and refugees and, some partners, also to local populations with limited access to these services. • Mental and psychological support was also one of the key activities in countries receiving Venezuelan migrants and refugees, but also in Venezuela. <p>Some activities were only implemented in Venezuela, namely the provision of medicines, rehabilitation of health centres and the provision of monetary incentives for healthcare workers (Venezuela) as part of the activities seeking to ensure access to quality healthcare and retain healthcare staff (see further details in Case study 1).</p>
Protection	<p>This was the main sector prioritised outside of Venezuela, but it was also a priority in Venezuela. Although only 10% of mini-mobile survey respondents indicated having received Protection support, all the activities from the ToC were implemented. The review of DG ECHO-funded actions and the field evidence collected in Colombia and Ecuador suggested that the main activities implemented related to:</p> <ul style="list-style-type: none"> • Legal support and information. In the region, this included the provision of information on protection risks and rights, services available to Venezuelan migrants and refugees, despite the fact that only 12% of beneficiaries answering to the mini-mobile survey indicated having received such type of assistance, this was one of the key elements of DG ECHO-funded actions in the countries visited (Colombia and Ecuador). As reported in the Protection case study, DG ECHO-funded actions also provided migrants/refugees with support to access documentation and regularisation (30% of beneficiaries who answered to the survey indicated they had received assistance with documentation, status and protection, and 23% reported having received general legal assistance, i.e. second and third most reported types of assistance in the mini-mobile survey). In Venezuela, the HIPs and HIPTAs underlined the need to provide information to people forced to flee their home as a means to increase their protection during their subsequent displacement (TA 2019), but the stakeholder feedback has not allowed to confirm nor deny whether this was effectively done. • Prevention and assistance to GBV and other kinds of violence. According to dashboard data, DG ECHO supported activities seeking to prevent GBV and other kinds of violence and assist victims. The field missions and KIIs confirmed that GBV prevention and response was a strong element of DG ECHO's Protection response, both inside and outside Venezuela (although the evidence on

²⁵ In the survey for mini-mobile beneficiaries (most of whom were living outside of Venezuela), 29% of respondents reported having received health services and medicines.

²⁶ KIIs (DG ECHO partners: 2).

Sector	Main activities implemented
	<p>activities targeting GBV survivors in Venezuela is comparatively more limited than in Colombia and Ecuador, given the different thematic focus of the field mission in the country). GBV prevention was embedded in Protection and Health activities observed during the field missions, and FGDs with beneficiaries and DG ECHO partners consulted in the field confirmed that DG ECHO's funding had supported the provision of immediate and integral response for GBV survivors (including provision of information, psychological support, legal aid, case management, etc.). The evidence on activities seeking to respond to other kinds of violence (human trafficking and exploitation) is more limited and does not allow to fully assess the extent to which these were effectively implemented.</p> <ul style="list-style-type: none"> • Psychosocial support: psychosocial support to people affected by the crisis was identified as an important need in the context of this crisis. As such, dashboard data mentions the provision of psychosocial support as part of the response. This was confirmed by KIIs and field missions in Colombia and Ecuador, which showed that many of the Protection activities implemented incorporated a psychosocial support element in the form, for instance, of group or individual sessions with adult or children beneficiaries receiving support along the migratory route (see further details in the Protection case study). • Another important focus of DG ECHO's Protection response concerned the strengthening of national protection responses through the strengthening of capacities (e.g. trainings and capacity-building activities targeting national authorities and other key responders, creation of protective spaces in, for example, police stations and hospitals, and the provision of material equipment). • In the region, DG ECHO strongly supported humanitarian transport activities. This was particularly the case in Colombia, where DG ECHO provided financial and advocacy support to three partners carrying out these types of activities. <p>Other activities were identified, although the evidence collected suggests that they were less central. This is the case, for instance, of the reestablishment of family links, which was often embedded in other activities such as humanitarian transport or case management, but was less frequently implemented outside of these contexts, as suggested by field observations and consultations with DG ECHO partners in Colombia and Ecuador.</p>
EiE	<p>Prioritised sector outside of Venezuela but not in Venezuela, with 18% of beneficiaries responding to the mini-mobile survey indicated they had received education support. The actions identified in documentation reviewed (DG ECHO and project documentation) covered the entire range of interventions listed in the Theory of Change, primarily: school feeding programmes in Venezuela, school basic services (e.g. improvement of WASH services in schools), psychosocial support (to children in Venezuela and in other countries in the region), the endowment and improvement of playful and pedagogical spaces to schools (school as protective spaces). In countries in the region, activities to promote the integration of Venezuelan children in host country systems were also adopted, including during the COVID-19 pandemic (e.g. promoting and facilitating access to remote education).</p>
WASH	<p>WASH was one of the priority sectors in Venezuela, particularly linked to Health and EiE activities. Outside of Venezuela, WASH activities were not prioritised but often complemented Health and Protection interventions. According to Dashboard documentation, the three activities listed in the ToC were implemented during the evaluation period, namely hygiene promotion and kits, rehabilitation of facilities and distribution of filters. The detailed review of 40 projects, stakeholder consultations and field evidence, hygiene promotion/kit distribution was the WASH activity most often implemented inside and outside Venezuela, often linked to Health and Protection activities. This was followed by rehabilitation of facilities (schools and hospitals), especially in Venezuela. Outside Venezuela, some smaller-scale WASH infrastructures were also established in host villages. Beyond Dashboard data, no evidence that distribution of filters took place was found.</p>
Nutrition	<p>Nutrition activities were only prioritised and implemented in Venezuela (some multi-country actions included Nutrition activities but the review of 40 actions and stakeholder consultations suggest these were only implemented in Venezuela). Evidence that all activities listed in the ToC were implemented were found, primarily GAM and SAM monitoring and treatment of undernourished children under five and pregnant women, but also distribution of supplementary feeding. The review of 40 actions also showed that Nutrition actions incorporated capacity-building and communication activities as well.</p>
Food assistance and livelihoods	<p>Prioritised in Venezuela and other countries in the region. In the mini-mobile survey, 52% of respondents indicated having received food assistance, and the review of DG ECHO and project documentation demonstrated that the activities implemented included: cash, vouchers and in-kind distribution of food items (Venezuela and other countries), support to diners and community meals. Although the project review provided one example of one action implementing activities to support early livelihoods, stakeholders and beneficiaries consulted explained that these activities remained very limited.</p>

Sector	Main activities implemented
Shelter	Prioritised sector in neighbouring countries, but not in Venezuela. DG ECHO documentation (Dashboard data) and field consultations in Colombia and Ecuador revealed that some Shelter activities focusing on vulnerable forced migrants and people in need of international protection were implemented (e.g. support to temporary shelters in Colombia, specifically in some areas close to the border with Venezuela such as la Guajira), but these remained limited. This was also reflected in the mini-mobile for beneficiaries, where only 13% reported having received support with shelter and accommodation.
Horizontal	
Coordination	Although the funding for this sector was limited, according to DG ECHO and project documentation reviewed, activities supporting national and regional coordination platforms (e.g. actions implemented by UNHCR and OCHA), information management and monitoring of the response were implemented. The field missions and KIIs confirmed that this was a key focus of DG ECHO-funded interventions in Venezuela and outside, with DG ECHO partners referring to the generation of information, participation in coordination structures and regular monitoring as a key feature of their actions.
Support to operations	Funding for the support to operations remained limited, but DG ECHO, project documentation and stakeholder feedback suggested that DG ECHO partners also implemented activities to strengthen local response (including through the provision of training and equipment).

Table 43. Health and Nutrition: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Summary	<p>Health interventions were overall successful in achieving intended results and outcomes, although to various degrees depending on the activities. The short-term impact (results) of these interventions was overall successful and, in the medium term (outcomes), they were deemed to have improved the well-being of beneficiaries. Nonetheless, their long-term impact on mortality/morbidity among affected populations was limited.</p> <p>Nutrition activities were comparatively less successful despite the high degree of coverage of nutrition programmes. The long-term impact on the well-being of the affected population was limited (notably due to the inability to meet all health needs), and the KOI target regarding crude mortality rate were not achieved. Nonetheless, feedback from DG ECHO staff and DG ECHO partners pointed to a perceived positive impact in the areas covered.</p>
Results	<p>In the area of Health, the portfolio analysis and stakeholder feedback demonstrated that the actions primarily resulted in:</p> <ul style="list-style-type: none"> • Increased community health awareness: reported by 78% of survey respondents (18 out of 23 responses). • Improved access to quality healthcare and SRH services, reported by a majority of DG ECHO partners responding to the survey (respective 74% or 17 out of 23 responses, and 65% or 15 out of 23 responses). According to results identified in via the portfolio analysis (1.7 million primary healthcare consultations, over 12,000 live births attend by skill personnel and almost 100 health facilities rehabilitated). DG ECHO partners consulted through KIIs and field interviews also reported that their Health interventions had contributed to increased access to quality healthcare (and SRH) services, especially for women in reproductive age and pregnant and lactating women in the areas covered in Venezuela and Colombia.²⁷ One DG ECHO partner consulted also clarified that improved access to quality healthcare also covered patients with chronic diseases. • Better preparation for, and response to, epidemic outbreaks: the portfolio analysis showed that 14,420 outbreak alerts were responded to, and field interviews in Venezuela confirmed that the activities implemented in the country led to a strengthened response to epidemics. • In Venezuela, increased availability of medical staff and increased access to essential drugs: respectively, reported by 48% and 52% of survey respondents (n=23). This was also reflected in feedback provided by DG ECHO consulted for this evaluation as well as by DG ECHO partners consulted during the field missions in Venezuela.²⁸ <p>As regards Nutrition, the portfolio analysis pointed to a reduction in the number of malnourished children (14,000 children under five) – a result that was also reported by a DG ECHO partner interviewed - and</p>

²⁷ KII (DG ECHO partners: 1); Case study 1 (Health interventions in Venezuela); Field interviews in Colombia (DG ECHO partners: 4).

²⁸ Scoping interviews (DG ECHO: 1); Case study 1 (health interventions in Venezuela).

Item	Degree of success and main results/outcomes/impacts
	improved access to nutrition data (more than 10 nutrition surveys implemented). However, survey responses suggest that the degree of success in achieving the desired results was generally lower, with 22% of respondents (5 out of 23 responses) indicating that their actions had led to a reduced number of malnourished children. Other results were reported also reported only by a minority of survey respondents answering to this question in the survey (Q24), with 26% of respondents stating that the actions had led to the production of accurate malnutrition data (6 out of 23 responses) and 30% of respondents, that they had resulted in nutritional support provided to children and PLW, and other vulnerable populations (7 out of 23 responses).
Outcomes	<p>In the area of Health, the main outcome reported by DG ECHO partners answering to the survey (n=29) concerned improved well-being of beneficiaries (74%). This was followed, by far, by reinforced prevention, surveillance, and response to outbreaks (44%), improved quality of care and continuity of treatment in the country (43%) and lower incidence of diseases (30%). KOI targets regarding crude mortality rate were not achieved (8% KOI achieved compared to 3% KOI target).</p> <p>In the area of Nutrition, the portfolio analysis showed that the coverage of nutrition programmes was the KOI with the highest level of performance (105% against a 100% target). DG ECHO-funded actions were comparatively less successful in leading to an improved nutritional status among people affected by the crisis: the level of performance of the pre-defined KOI relating to SAM recovery rate was 76% (surpassing the 69% target), but only around one fourth of DG ECHO partners responding to this question in the survey reported improved nutritional status among people affected by the crisis (26% or 6 out of 23 responses) and improved access to nutrition data (22% or 5 out of 23 responses).</p>
Impact	In the areas of Health and Nutrition , 39% and 35% of survey respondents believed that their Health (n=29) and Nutrition (n=23) actions, respectively, led to a lower risk of mortality/morbidity among persons of interest/Venezuelan migrants and refugees (and better living conditions in the case of Nutrition actions). Nonetheless, feedback provided by DG ECHO staff and DG ECHO partners implementing Health actions considered that the DG ECHO-funded actions had a positive impact in the zones covered and, ultimately, had allowed to save lives. ²⁹ The discrepancy can be explained by the fact that, as further explained in Case study 1 (Health interventions in Venezuela), the funding was not sufficient to meet the high level of Health needs in Venezuela.

Table 44. Protection: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Summary	In the area of Protection, activities were generally found to have been successful in achieving their main intended results and outcomes, mostly leading to a reduced exposure to risks, increased access to information and regularisation, strengthened GBV prevention and response. These led to reduced effects of the crisis on the physical, social and emotional state of beneficiaries and ultimately, an increased level of protection of beneficiaries. However, the long-term impact of these actions in the development of durable solutions was found to be limited.
Results	<p>In the area of Protection, the portfolio analysis and stakeholder feedback suggested that the actions primarily resulted in:</p> <ul style="list-style-type: none"> • Beneficiaries were better informed on the risks they faced, their rights and services available along the migratory route and upon arrival at their destination: according to evidence stemming from the project mapping, Protection interventions led to over a million beneficiaries with increased/appropriate information on relevant rights and/or entitlements. This was confirmed by the field evidence collected in Colombia and Ecuador, which referred to the increased level of awareness as one of the key results (see further details in Case study 2). • Beneficiaries were able to access documentation and regularise their situation in the country, which was also reported as one of the key results of Protection interventions in Colombia and Ecuador (see further details in Case study 2). According to the project mapping, almost 300,000 individuals were able to obtain appropriate documentation, and over 600,000 received an appropriate response. • Beneficiaries were less exposed to risks and many were able to reunite with family members: as explained in Case study 2, humanitarian transport and case management interventions resulted in less exposure to risks along the way and facilitated family reunification. The project mapping showed that over 86,000 individuals were able to restore and maintain contacts and/or reunite with their families. Despite this, beneficiaries being able to trace/reunite with their families was the result less commonly reported by DG ECHO partners answering to the survey; only 24% of survey respondents (7

²⁹ KIIs (DG ECHO: 2 – Roman and Joelle; DG ECHO partners: 2); Case study 1 (Health interventions in Venezuela)

Item	Degree of success and main results/outcomes/impacts
	<p>out of 29 responses) reported that this had been the case fully or to a large extent. When looking at unaccompanied and separated children, the numbers are much lower (around 3,000), which is in line with limitations reported by DG ECHO partners in Colombia and Ecuador to work with this group of population.</p> <ul style="list-style-type: none"> Improved prevention and response to violence (overall) and to specific types of violence (GBV, human trafficking, exploitation): this was reported, respectively, by 62% (18 out of 29) and 66% (19 out of 29) of survey responses. The project mapping and the case study on Protection suggest that the result concerned a strengthened GBV response (i.e. over 16,000 potential victims accessed prevention measures and over 13,000 GBV survivors received an appropriate response). This is in line with field evidence collected in Colombia and Ecuador, where DG ECHO partners referred to a strengthened GBV response allowing survivors to exercise their rights as one of the key results of the DG ECHO-funded actions explored. <p>Other results identified in the project mapping and stakeholder consultations concerned better evidence-based protection response (i.e. 251 protection information management products enabling evidence-informed action for quality protection outcomes produced, and 52% of survey respondents, i.e. 15 out of 29 responses, stated that their Protection actions had led to strengthened Protection Information Management) and increased advocacy and capacity to address protection needs (over 35,000 participants showing an increased knowledge on the protection subject in focus). Further details can be found in Case study 2, which argues that although significant improvements were made over the evaluation period, there is still room for further improvement.</p>
Outcomes	<p>The main outcomes identified included:</p> <ul style="list-style-type: none"> Reduced effect of the crisis on physical, social and emotional state of persons of interest in Venezuela and Venezuelan migrants and refugees, reported by 86% of survey respondents (25 out of 29 responses) and confirmed by consultations with DG ECHO partners and beneficiaries consulted during the field missions in Colombia and Ecuador (see further details in the Protection case study). Regularised beneficiaries could access basic services offered by the State, as well as the labour market, as a result of the regularisation of their status in the country (see further details in Case study 2). Despite this, as reported in the case studies, many beneficiaries continued to face obstacles to access such services despite their regularised status.
Impact	<p>In the long term, the main impact of protection interventions consisted of an increased level of protection of vulnerable populations in Venezuela, and of Venezuelan migrants/refugees in other countries (79% of survey respondents indicated this). The case study on Protection also found that protection interventions led to empowered beneficiaries with a restored sense of dignity, with GBV interventions deemed to have saved lives and helped victims regain control of their life.</p> <p>The main limitation relates to the development of durable solutions (for IDPs in Venezuela and Venezuelan refugees/migrants), which was reported by only 27% of survey respondents (8 out of 29 responses). This was also confirmed by the case study on Protection, which found that the sustainability of the results was limited, despite some improvements in national protection capacities.</p>

Table 45. WASH: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Summary	<p>In the area of WASH, interventions were generally successful in achieving their intended results, particularly increased hygiene practices of persons of interest/Venezuelan migrants and refugees and to improve access to dignified, safe, clean and functional excreta disposal facilities. In the medium-term (outcome), they led to an increased percentage of population with adequate access to WASH services and hygiene practices but were less successful in increasing the availability of basic WASH services in facilities targeted and improving the control of infectious diseases. In the long term, these interventions were found to have yielded a limited impact on improved living conditions and quality of life as well as on the risk of mortality and morbidity of affected populations.</p>
Results	<p>The main result of WASH interventions reported by survey respondents consisted of increased hygiene practices of persons of interest/Venezuelan migrants and refugees (84%). In the project mapping, the increase in the quality of the provision of water and hygiene practices of persons of interest was reported at 1,8 million people with sufficient and safe water for domestic use, and 760,000 people with regular access to soap to meet hygienic needs. KRI data reported that WASH actions led to 74,000 persons with access to dignified, safe, clean and functional excreta disposal facilities.</p>
Outcomes	<p>The project mapping showed that WASH interventions led to an increased percentage of population with adequate access to WASH services and hygiene practices, with the average KOI achieved (83%) surpassing</p>

Item	Degree of success and main results/outcomes/impacts
	the average KOI target (71%). Some progress was also made towards the availability of basic WASH services in facilities targeted (e.g. schools), although the average KOI achieved was slightly lower (91%) than the average KOI target (92%). Limited progress was also reported by DG ECHO partners responding to the survey, as only 37% of respondents (n=19) indicated that WASH interventions had led to improved control of infectious diseases.
Impact	Based on survey results, the impact of WASH interventions on improved living conditions and quality of life among persons of interest/Venezuelan migrants and refugees, and on the risk of mortality and morbidity was limited (respectively, 47% and 37% of survey respondents indicated that their WASH interventions had yielded these long-term results). According to one respondent, the limited impact was due to lack of funding, especially for indigenous populations in remote areas.

Table 46. Education in Emergencies: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Summary	In the area of Education in Emergencies (EiE), interventions were also generally successful even if less frequently implemented than activities in other sectors. In the short term, they generated advances in all key areas, with key results with respect to enrolment of children in non-formal education, the provision of teaching materials for teachers as well as children and capacity building provided to education personnel. In the medium term, the survey and KOI targets also found a relatively high degree of success in achieving planned outcomes, notably improved access to safe and accessible learning spaces, increased knowledge and teaching skills among education personnel and improved access to formal and non-formal education. In the long term, EiE interventions were deemed by a majority of DG ECHO partners responding to this question in the survey to have led to better quality of education provided to children affected by the crisis.
Results	Regarding EiE interventions, the project mapping and the survey provided complementary evidence. The project mapping found that although some progress was observed in all key areas concerned, the highest numbers reported related to the number of girls and boys enrolled in non-formal education services (71,090, compared to 35,544 enrolled in formal education). In the survey, however, the output most reported by survey respondents (n=8) related to teachers being provided with teaching materials (88% of respondents), for which the project mapping did not provide any data. In the survey, children provided with learning materials (2,637 according to KRI data reported) and teachers and education personnel provided with relevant capacity building according to the risks and needs identified were selected as key results of EiE interventions by 75% of respondents. The result less commonly reported by survey respondents concerned the referral of children in need to specialised protection services (50% of survey respondents), which according to KRI data reported, amounted to 197 children.
Outcomes	According to survey respondents, EiE interventions led to improved access to safe and accessible learning spaces (88% of respondents), increased knowledge and teaching skills among educational personnel (75% of respondents), improved access to formal education (63% of respondents) and improved access to NFE (63%). The project mapping also indicated all pre-defined KOI targets were achieved, leading to a higher percentage of children with access to quality and protective learning opportunities as well as those retained in education at the end of the action (respectively, average 91% and 99% KOI achieved, compared to the average 78% KOI target). Targets were also surpassed with respect to eh transition from NFE to formal education, the next level of NFE or the next academic year of formal education (average 121% KOI achieved, compared to average 80% KOI target). Despite this, anecdotal evidence emerging from field consultations in Colombia suggested that some of the results regarding access to (remote) formal and non-formal education during the COVID-19 pandemic were lost once in-person education resumed, due to limited school capacity to accommodate all migrant children. ³⁰
Impact	In the long term, a majority of survey respondents (n=8) indicated that EiE interventions had led to better quality of education provided to children affected by the crisis (63% of survey respondents), suggesting a fairly positive impact despite the comparatively smaller number of actions incorporating EiE actions.

Table 47. Food security and livelihoods: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Summary	With respect to food security and livelihoods, the portfolio analysis and stakeholder feedback suggest that these interventions mostly generated results and outcomes related to food consumption, i.e. improved

³⁰ Field interviews in Colombia (DG ECHO partners: 1).

Item	Degree of success and main results/outcomes/impacts
	ability of crisis-affected population to meet their basic food needs (result) and improvement in the percentage of target population with acceptable food consumption score and 6-23 months old children targeted receiving minimum acceptable diet. In contrast, results and outcomes related to livelihood support were limited. The main impact reported related to increased quality of life for crisis-affected population.
Results	The survey and portfolio analysis showed that the main result achieved was the ability of crisis-affected populations to meet their basic food needs (67% or 8 out of 12 survey responses), which according to KRI data reported, amounted to over 210,000 additional people being able to meet their basic food needs. Results related to people provided with resources to protect and start building livelihood assets were more limited (50% or 6 out of 12 survey responses), which according to KRIs amounted to over 14,000 people. This is in line with KII and field evidence collected, which pointed to very limited livelihood support results.
Outcomes	A majority of survey respondents (70% or 8 out of 12 responses) reported that their Food Security and Livelihood activities had led to an increased ability of crisis-affected population to meet their basic food needs, while only half (50% or 6 out of 12 responses) reported that they had resulted in increased financial and social independence of crisis-affected population. According to KOI reported, food assistance related KOIs were surpassed, i.e. % of the target population with acceptable food consumption score (87% average KOI achieved compared to 78% KOI target) and % of 6-23 months old children in target population receiving minimum acceptable diet (70% average KOI achieved compared to 57% target). However, KOI targets related to livelihood support (average coping strategy index score for target population) were not achieved (69 achieved compared to 60 target).
Impact	In the long term, survey respondents indicated that the actions in these sectors had led to increased overall quality of life for crisis affected populations (75% or 9 out of 12 respondents). Only a minority (25% or 3 out of 12 respondents) indicated they generated sustainable solutions to crisis found, contributing to preventing future crises .

Table 48. Shelter and settlements: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Summary	Shelter interventions were reportedly successful in achieving intended results (increased ability of crisis affected populations to meet their needs) and, albeit to a lesser extent, outcomes (improved living conditions among affected populations). No quantitative evidence on the long-term impact was collected, but anecdotal evidence from the field suggests that the impact of purely Shelter interventions was more limited than when provided in the context of comprehensive response (e.g. to GBV victims).
Results	A majority of survey respondents indicated that their Shelter activities had resulted in a higher number of crisis-affected population with access to basic, safe and dignified shelter solutions (71% or 5 out of 7 responses) and, to a lesser extent, a higher number of displacement sites with functional coordination and management mechanisms (57% or 4 out of 7 responses). However, funding data and feedback from DG ECHO partners collected in the field show that DG ECHO did not provide extensive support to Shelter activities, except in specific areas where the needs were there were significant Shelter needs.
Outcomes	A majority of survey respondents indicated that Shelter activities had increased the ability of crisis affected populations to meet their basic needs (85% or 6 out of 7 responses). An example of this was provided by a DG ECHO partner consulted in the field, which referred to the <i>Centro de Atención Integral (CAI)</i> in La Guajira (Colombia) as an activity that had been (partially) funded by DG ECHO which had contributed, to some extent, to a reduction in the number of people living on the street. ³¹
Impact	Evidence on the long-term impact of Shelter activities is limited. In the survey for DG ECHO partners, a majority (71% or 5 out of 7 responses) stated that their Shelter activities had led to improved living conditions among crisis-affected population. Anecdotal evidence from other stakeholder consultation activities provides a more mixed picture, with one KII who commented on the impact of the support provided to the CAI indicated that there were both successful stories (i.e. migrants/refugees leaving the camp to a more stable accommodation) as well as unsuccessful cases (i.e. migrants/refugees who were back on the street after leaving the shelter). FGDs with beneficiaries who were GBV survivors suggest that when provided as part of an integral GBV response, the provision of shelter had a long-lasting impact on the beneficiaries' ability to regain control of their life.

³¹ Field interviews in Colombia (DG ECHO partners: 1). This change was also attributed to the increase in the number of people arriving with a place to which they could go.

The evaluation also gathered evidence on the results, outcomes and impact of Coordination and DRR/DP and Coordination interventions despite the comparatively lower number of activities funded in these sectors (Table 49).

Table 49. Coordination and DRR/DP: results, outcomes and impacts

Item	Degree of success and main results/outcomes/impacts
Coordination	Feedback collected (survey, KIIs and field interviews) suggests that DG ECHO-funded actions contributed to the establishment of formal coordination mechanisms, especially in Venezuela. In the mid-term, the most reported outcomes concerned improved coordination with humanitarian actors in the context of the response to the crisis as well as to respond to other crises. The impact of these actions on the level of alignment of frameworks for humanitarian assistance and development across crisis-affected countries was more limited.
DRR	Survey respondents found that DRR interventions were found to have been successful in leading to strengthened disaster-prevention/disaster-risk reduction systems (result) and increased resilience of crisis-affected populations to shocks and stresses (outcome). The average KOI target set was also significantly surpassed (% reduction in the number of affected people). Regarding the impact, although survey respondents assessed positively the effects of the activities in the finding of sustainable solutions to crisis found, contributing to preventing future crisis, one respondent noted that the impact was limited due to lack of funding.

A7.2 DG ECHO'S PARTNERSHIP WITH UNHCR

Table 50. Examples of UNHCR's advocacy activities financially supported by DG ECHO between 2017-2021

Colombia	Advocacy activities with the government to: <ul style="list-style-type: none"> • Ensure that IDP's rights remained central in the post-agreement context • For the approval of specific budgets to respond to the needs of Venezuelan refugees
Venezuela	Advocacy efforts: <ul style="list-style-type: none"> • Towards government officials, immigration authorities, police, and armed forces to receive asylum applications • On documentation, granting of legal status and registration
Brazil	Advocacy efforts to: <ul style="list-style-type: none"> • Reduce xenophobia and promote a favourable protection environment • Increase Federal Police's capacity for documentation procedures
Ecuador	Advocacy for a fair refugee status determination process and access to the asylum system
Peru	<ul style="list-style-type: none"> • Advocacy for PoCs to be able to access rights and public services • Targeted advocacy interventions for regularisation measures; increase alignment of the asylum and migration systems; and for the development of a protocol on protection responses for refugee and migrant children
Chad	Advocacy efforts for: <ul style="list-style-type: none"> • The adoption of an asylum law to address access to land and right to work issues • The adoption of a legislative framework on asylum and internal displacement • The inclusion of refugees in the Chadian development plan at the national and local level so as to increase their resilience and self-sufficiency

Türkiye	<ul style="list-style-type: none"> • Awareness-raising efforts with the local authorities towards the rights of refugees and asylum seekers, and the challenges they face • Advocacy efforts to enhance access to registration
Lebanon	<p>Advocacy efforts to:</p> <ul style="list-style-type: none"> • Secure the engagement of the government on the continued protection of refugees, on the rule of law for the settlement of issues (e.g. evictions) and the development of safety nets and a social protection system for both refugees and Lebanese populations • Ensure birth registration
Jordan	<p>Advocacy efforts to:</p> <ul style="list-style-type: none"> • Halt returns • Ensure that refugees have access to basic services and that they are included in national social protection systems • Ensure the registration of refugees
Bangladesh	<p>Advocacy activities:</p> <ul style="list-style-type: none"> • Against discrimination • Towards border guards and army officials for access to safety and assistance in border areas • To enhance cooperation with police and the judiciary to ensure access to justice for refugees • Towards camp administration officials to reinforce refugees' access to legal assistance and to advocate for appropriate and timely intervention by law enforcement agencies in serious crimes and human rights violations
Uganda	<p>Advocacy for:</p> <ul style="list-style-type: none"> • Non-discriminatory access to services for refugee children (particularly girls and young women), • Promotion of children's rights through information / education / materials / outreach • For the re-opening of the borders for asylum seekers and to guarantee refugee rights

Source: ICF. 2023. Project mapping (40 actions).

Table 51. Examples of UNHCR's advocacy activities financially supported by DG ECHO between 2017-2021

World Refugee Day	<ul style="list-style-type: none"> • 2020: Five DG ECHO-related human stories were published in social media (from Colombia, Ethiopia, Lebanon, DRC, and Ukraine); the WRD Art Exhibition featured EU and DG ECHO funded content from 14 operations in an explorable space, offering a guided tour around the exhibition. • 2021: A content deck was prepared by UNHCR HQ in collaboration with DG ECHO for dissemination on their respective media channels.
Europe Day	<ul style="list-style-type: none"> • 2020: UNHCR highlighted in social media the stories of PoCs who had directly benefitted from EU support. REUA coordinated an organisation-wide approach which included a selection of posts for UNHCR staff to share across their social media platforms. • 2021: UNHCR created a short animation on the DG ECHO-UNHCR partnership during the pandemic

<p>World Refugee Day</p>	<ul style="list-style-type: none"> • 2020: Five DG ECHO-related human stories were published in social media (from Colombia, Ethiopia, Lebanon, DRC, and Ukraine); the WRD Art Exhibition featured EU and DG ECHO funded content from 14 operations in an explorable space, offering a guided tour around the exhibition. • 2021: A content deck was prepared by UNHCR HQ in collaboration with DG ECHO for dissemination on their respective media channels.
<p>World Humanitarian Day</p>	<ul style="list-style-type: none"> • 2020: UNHCR produced a video highlighting DG ECHO contributions to the Americas. The video specifically noted the importance of DG ECHO funding to refugee livelihood programmes.
<p>Brussels III and IV Syria Conferences</p>	<ul style="list-style-type: none"> • 2019: In close collaboration with DG ECHO, UNHCR organised a metro campaign to raise awareness about the conference. The campaign focused on the voices of Syrian children displaced by the conflict. • 2020: The EU Visibility Team gathered DG ECHO funded content and shared this with the social media team for its channels.
<p>International Solidarity Conference on the Venezuelan Refugee and Migrant Crisis</p>	<ul style="list-style-type: none"> • UNHCR, IOM and the EU (including DG ECHO) jointly created a number of communication materials that included: <ul style="list-style-type: none"> • A Metro campaign along key EU quarter metro stops to promote the Conference • A social media deck that was a Metro campaign along key EU quarter metro • Photo exhibition • The hashtags #Together4Venezuelans and #JuntosxLosVenezolanos were created and used in all social media communications

Source: UNHCR-DG ECHO Communication and visibility reports 2019-2021.

ANNEX 8 CASE STUDIES

A8.1 CASE STUDY 1: HEALTH INTERVENTIONS IN VENEZUELA

A8.1.1 Objective and scope of the case study

This case study explores the extent to which DG ECHO's strategy (including its programming, coordination and advocacy activities and funded actions) in the health sector was adequate to address the most acute health-related needs in Venezuela and tailored to the specific national context. The case study also explores the intended and unintended effects of DG ECHO funded actions, analysing the extent to which they:

- achieved their intended results of facilitating access to quality healthcare and medicines for the most vulnerable population (through the provision of primary healthcare as well as the strengthening the operational capacity of local and national health structures and increased availability of medical staff) and increasing community health awareness and better preparation and response to outbreaks, and
- were effective in identifying and mitigating the negative (unintended) effects resulting from the intervention or from external factors.

The case study considers the specific context and challenges that affected the design and implementation of health-related actions in Venezuela, and the extent to which DG ECHO and its partners successfully identified and mitigated their impact. The case study specifically answers the following research questions:

Table 52. Case study 1: Research questions

Criteria	Research questions	EQ
Relevance	To what extent was DG ECHO's health strategy in Venezuela (including the shift to multi-sectoral approach) appropriate to address the most acute health-related needs in the country? Did it adequately support framework partners' programming and implementation?	1
	To what extent were DG ECHO funded actions in the area of health well designed, tailored to the Venezuela context and focused on the most acute health needs in the country?	1
	How and to what extent did the framework partners target the most vulnerable groups? Did they have a good understanding of the effects of the crisis on different vulnerable groups? Did they encounter any challenges to identify and target the most vulnerable population?	2
Effectiveness	To what extent were DG ECHO's funded actions in the area of health successful in reaching the most vulnerable people and achieving the intended results (i.e. ensuring increased access to quality healthcare and essential drugs, increased availability of medical staff, increased community health awareness and better preparation and response to outbreaks)?	6
	To what extent were DG ECHO and its partners implementing DG ECHO-funded actions in the area of health, successful in identifying and mitigating unintended effects resulting from the interventions as well as from relevant internal or external factors?	6

The case study covers DG ECHO's Health response in Venezuela. As such, it primarily relies on evidence collected through the field mission in **Venezuela**, although it also considers key information collected by the evaluation team as part of the documentation review and project review (see further details in Section A8.1.2).

A8.1.2 Methodological approach

This case study was developed based on primary data collected through the field visit in Venezuela, which took place in February 2023. Secondary data was also used to provide context and fill in specific gaps.

A8.1.2.1 Primary data

During the field mission in Venezuela, field researchers conducted:

- **Project visits** to three DG-ECHO funded actions incorporating Health activities. The project visits took place at various locations in the Venezuelan regions of Zulia and Táchira (close to the border with Colombia) and provided an opportunity to speak with local staff, implementing partners and representatives from healthcare institutions receiving the support funded by DG ECHO.
- **Remote and face-to-face consultations outside of the project visits** with DG ECHO Field Officers, other EU institutions, DG ECHO partners, coordination mechanisms (including cluster leads), etc.

A8.1.2.2 Secondary data

The case study also considered relevant secondary data provided by stakeholders consulted in Venezuela as well as other documentation consulted in preparation for the field mission and to fill in specific information gaps. This mostly included **project documentation** (Single Forms and FichOp) for the DG ECHO-funded actions visited, but also **information and data publicly available** to support the analysis of the context. Relevant information presented in the **Desk Report** was also incorporated, where relevant.

A8.1.2.3 Data limitations and methodological challenges

The team conducting the field mission in Venezuela encountered the following key challenges affecting the data collection activities:

- The project visits focused on activities implemented in Caracas and in bordering regions with Colombia. Despite the fact that some of the DG ECHO-funded actions included relevant activities in other regions in the country, the logistical difficulties to reach these locations forced field researchers to focus on easier-to-reach areas where the three selected partners were operating (Zulia, Táchira and Caracas). As a result of this, certain aspects of DG ECHO-funded interventions (e.g. support to increase the level of preparedness and response to contagious diseases) could not be observed first-hand.
- National authorities could not be consulted due to political sensitivities. As a result, the view of the Venezuelan government on the needs in the country, the challenges during the evaluation period, and the impact of DG ECHO-funded actions, is missing from the analysis presented in this case study.
- The ultimate beneficiaries of DG ECHO-funded actions (i.e. patients of the medical services provided) were not consulted due to the sensitivity of health data and the strict rules concerning its use.
- High staff turnover among international humanitarian organisations implementing DG ECHO-funded actions. As a result, many of the interviewees had only a partial overview of the interventions during the evaluation period.

A8.1.3 Context

A8.1.3.1 National context and humanitarian needs in the Health sector

Venezuela's healthcare system has experienced a progressive loss of operative capacity since 2012, a situation that intensified in 2017 and worsened further because of the COVID-19 pandemic. When Hugo Chavez took office as president in 1998, he promised to provide free health care for all, and for more than a decade, high oil prices allowed the Venezuelan government to allocate sufficient funds for health care spending, which reflected very positively on health indicators.

The fall in oil prices that began in 2008 plunged Venezuela into a deep socioeconomic crisis that forced the Government to reduce health spending (e.g., from 9.1% in 2010 to 5.8% in 2014). Together with the exchange rate controls imposed by the Government, which led to a shortage of foreign currency to import medical equipment and medicines, the situation resulted in the collapse of the national health system. The last official figures published by the Venezuelan Government (in 2016) already showed the effects of the crisis on several health indicators, with a 65% increase in maternal mortality and a 30% increase in infant mortality, with 11,466 infants dying in 2016.

Given that as of 2016 the Venezuelan government does not have official figures, healthcare system information available is generally collected by the staff of each centre or produced by private organisations, which means that it is not collected in a systematic and standardised way, making it increasingly difficult to understand the magnitude of the crisis³².

During the evaluation period, the situation continued to deteriorate, exacerbated by the outflow of health personnel, disruptions in the primary health care system, lack of infrastructure maintenance, water and electricity shortages, and difficulties importing medicines and medical supplies. In 2019, the country ranked 176 out of 195 in the 2019 Global Health Security Index³³ and the latest World Bank figures show that in 2017 there were only 0.9 hospital beds per 1,000 people³⁴.

Currently, health centres depend on the Ministry of Popular Power for Health, which created the figures of Popular Clinics, Integral Diagnostic Centre (CDI) and Barrio Adentro Mission around 2003. In recent years, the system has been modified through the creation of the "Specialised Popular Clinics", and by unifying the Popular Clinics and the CDIs in a new figure called ASIC (Integrated Community Health Areas - 2016).

According to one of DG ECHO's partners³⁵ operating in Venezuela, the loss of health personnel began to be felt from 2002 onwards. Subsequently, the oil crisis led the government to take resources away from the system and concentrate them on "Barrio Adentro". In his opinion, this programme was a fragile and politicised system. The interviewee also explained that the government stripped the system of the decision-making capacity to implement public health policies, giving way to a process of destructuring, in which programmes were closed. The lack of trained personnel, due in part to migration to other countries or to the private sector, led to the hiring of people without technical capacity, deepening the crisis of the system.³⁶

As stated by some actors interviewed,³⁷ the structural collapse of the health system has been going on for at least 15 years, due to factors such as the defunding of the system, the migration of health personnel to other countries or to the private health system, the shortage of medicines and

³² Combined evaluation of the EU's response to the Venezuelan regional crisis, and DG ECHO's partnership with the UNHCR (2017 - 2021). Revised desk report

³³ Jessica A. Bell and Jennifer B. Nuzzo (2021) 'Global Health Security Index: Advancing Collective Action and Accountability Amid Global Crisis'. Available at: https://www.ghsindex.org/wp-content/uploads/2021/12/2021_GHSindexFullReport_Final.pdf

³⁴ World Bank (2022) 'World Development Indicators - Number of beds per 1,000 people'. Available at: <https://data.worldbank.org/indicator/SH.MED.BEDS.ZS?locations=VE> (Accessed 21/10/2022)

³⁵ Field interviews in Venezuela (DG ECHO partners: 1).

³⁶ Field interviews in Venezuela (DG ECHO partners: 1)

³⁷ Field interviews in Venezuela (DG ECHO partners: 1)

medical supplies,³⁸ and the lack of incorporation of new diagnostic and surgical technologies, and the lack of incorporation of new diagnostic and surgical technologies, resulting in the resurgence of historically controlled infectious diseases, with outbreaks of diphtheria, malaria and yellow fever affecting the country during the evaluation period.

Health problems such as cancer and chronic non-communicable diseases are not being addressed due to a lack of specialists and supplies for their treatment, and as a consequence of the collapse of the health system, sexually transmitted diseases such as AIDS have increased due, in part, to a lack of supplies such as condoms, but also because migratory flows generate problems such as human trafficking and survival sex. Teenage pregnancy has also increased, with all the economic, social, emotional and health consequences for mothers and their children.³⁹

Lack of access to basic services and medicines also became one of the main reasons why Venezuelans left the country, along with lack of food, political repression, insecurity, violence, loss of income and hyperinflation. This migration, in many cases, is not done by entire families, leaving older adults and minors in Venezuela, often without the necessary resources to buy food or be attended to by the health system, which has led to an increase in malnutrition (both children and older adults), hypertension, diabetes and mental health problems (both in those "left behind" and in the "caminantes"), which was exacerbated by the emergency produced by COVID-19.

As described above, by 2017 the Venezuelan health system was already struggling with shortages of medicines, equipment and health personnel. It is in this context that the country faced the emergency produced by COVID-19, which further deteriorated the situation, even pushing the government headed by Maduro to request humanitarian assistance from the international community for the first time.⁴⁰ The Humanitarian Response Plan for Venezuela 2021 (the last plan published during the evaluation period) proposed to provide health assistance to 4.4 million people (15% of Venezuela's total population).⁴¹ The latest HIP for Latin America noted that there was an urgent need to support the emergency services of local health structures and to retain qualified health personnel.⁴²

A8.1.3.2 DG ECHO's Health response in Venezuela

Health was one of the priority sectors for DG ECHO's intervention in Venezuela and received the largest share of funding between 2017 and 2021: 73.1 million (30%).⁴³

Several stakeholders consulted during the field mission in Venezuela considered that DG-ECHO was one of the first actors to recognise the humanitarian situation and to offer an aid strategy to the country.⁴⁴ The main target population groups were: children under five, pregnant and lactating women (PLW), the elderly (many of whom have been "left behind"), indigenous population, people with disabilities, LGBTIQ+ community and adolescent women.⁴⁵ In terms of geographical coverage, since 2021 DG ECHO has prioritised border regions (along the border with Colombia and Brazil), where the most acute health-related needs were identified.

In Venezuela, as in countries receiving Venezuelan refugees and migrants, DG ECHO prioritised life-saving operations. It supported interventions providing primary and reproductive health (SRH) services, as well as mental and psychosocial support for vulnerable groups. It also funded actions aimed at epidemic prevention and response, and community outreach and awareness-raising

³⁸ This shortage has been caused by a drop in oil prices, trade blockades resulting from sanctions against Venezuela, and the hyperinflation that has been occurring in recent years. Sources: DG ECHO (2020) '2020 Latin America and the Caribbean Humanitarian Implementation Plan'; ICF (2023) Desk report.

³⁹ Scoping interviews (DG ECHO: 1); UNICEF (2022) 'Health'. Available at: <https://www.unicef.org/venezuela/en/health>.

⁴⁰ Scoping interviews (DG ECHO: 1)

⁴¹ UN OCHA (2021) 'Humanitarian Response Plan (Update) - Venezuela'.

⁴² DG ECHO (2021) '2021 Latin America and the Caribbean Humanitarian Implementation Plan'.

⁴³ Portfolio analysis (80 actions).

⁴⁴ Most stakeholders consulted (41 out of 42) made reference to this, arguing that DG ECHO had been able to successfully adapt to changing circumstances in Venezuela, especially during the COVID-19 pandemic.

⁴⁵ Scoping interviews (DG ECHO: 1). Teenage pregnancies were a key issue in the country, with many of them originating from prostitution or gender-based violence.

activities. Along with this, a distinct approach in Venezuela, compared to interventions in other countries in the region, was the strengthening of operational capacities through the retention of medical personnel, the provision of medical supplies, equipment and drugs, and the rehabilitation of health centres and physical refurbishment of prioritised hospital facilities (particularly emergency rooms). Many interventions also included training/capacity building elements.⁴⁶

This response takes place in a context of limited international donor presence and fragile legal security for NGOs providing emergency assistance. In addition to health, WASH, education, nutrition and protection strategies were also implemented in vulnerable border and peri-urban areas,⁴⁷ adapting the strategies to the needs identified before and during the intervention. In the case of health, this intervention is especially present in emergency medical services,⁴⁸ where it can "limit preventable excess mortality, permanent disability and illness associated with the humanitarian crisis",⁴⁹ including medical and psychosocial assistance to victims of violence. The response also takes place in an environment of political polarisation, which makes humanitarian aid strategies even more difficult, in addition to the lack of official statistics that would allow for an objective evaluation of the country's health situation and the development of an evidence-based aid strategy.⁵⁰

In order to be able to provide the necessary health assistance in this emergency context, DG ECHO expected its partners to be able to implement the different activities of the strategies in compliance with the following principles:⁵¹

- High-quality care should be provided to those who need it most. A quantitative health needs assessment should be conducted as early as possible and repeated frequently due to changes in changing circumstances;
- Health interventions should be based on the best possible evidence of their effectiveness, to potentially save more lives in a timely manner. Other factors such as feasibility and cost should also be criteria for intervention choice;
- Health assistance may be provided as support to a weakened or disrupted existing health system or in the form of an additional parallel health care provider, as required by the specific circumstances of the emergency or crisis;
- Health services must be provided to all people affected by crisis without discrimination and to all segments of the population (including refugees, internally displaced persons, migrants and third-country nationals). All barriers to accessibility (such as geographical, economic and socio-cultural) must be addressed.

⁴⁶ ICF (2023) Desk report

⁴⁷ DG ECHO (2020) '2020 Latin America and the Caribbean Humanitarian Implementation Plan'

⁴⁸ DG ECHO (2020) '2020 Latin America and the Caribbean Humanitarian Implementation Plan'

⁴⁹ DG ECHO (2021) '2021 Latin America and the Caribbean Humanitarian Implementation Plan - THEMATIC POLICIES ANNEX. GENERAL PRINCIPLES, POLICIES AND GUIDELINES'

⁵⁰ Project mapping (40 actions).

⁵¹ DG ECHO (2021) '2021 Latin America and the Caribbean Humanitarian Implementation Plan'

A8.1.4 Case study findings

A8.1.4.1 Relevance

Key findings:

Based on the field evidence collected in Venezuela, it can be concluded that the strategy implemented by DG ECHO and its partners was able to address the health needs of the priority population. However, given budgetary constraints and the needs of the population, not all of the population in need could be reached. Other key findings can be summarised as follows:

- The absence of official statistics did not allow for an objective assessment of the country's situation, hampering the planning and implementation of the strategy.
- The strategy implemented by DG-ECHO and its partners was able to address the health needs of the prioritised population, although some prioritisation issues were encountered. Various problems have also arisen in the definition, among which the lack of official statistics that do not allow clarity on the program and the proposed proposals and distance from the populations, the presence of armed actors, and the constant mobility of the beneficiaries. The difficulties for humanitarian organisations to enter and operate in the country (which also made the implementation of the strategy difficult), added to these problems.

RQ1: To what extent was DG ECHO's health strategy in Venezuela (including the shift to multi-sectoral approach) appropriate to address the most acute health-related needs in the country? Did it adequately support framework partners' programming and implementation?

Information gathered through interviews, focus groups and field visits suggests that the health strategy implemented by DG-ECHO in Venezuela was in line with the country's needs. During the evaluation period, Venezuela saw an increase in mortality from preventable causes, an increase and complications of chronic diseases (e.g. cancer, AIDS), and, most notably, the resurgence of tropical diseases already eradicated, such as malaria and yellow fever. This was a result of the lack of government funding for the health system, the migration of health personnel to other countries or to the private sector, the shortage of medicines and medical supplies and the failure to incorporate new diagnostic and surgical technologies. The period 2017-2021 was also characterised by a lack of official epidemiological information that did not allow for an objective picture of the country's health situation,⁵² as well as a complex context of economic sanctions, hyperinflation, tension between the government and various foreign humanitarian organisations, and a lack of experience of local partners.

In this context, DG ECHO partners consulted referred to the difficulties of assessing the needs in the country and providing humanitarian assistance in these conditions, as organisations could not cover all the needs of the population, nor reach all the places requiring assistance, either due to a lack of resources, the cost of supplies or conflicts with armed actors which prevented access to certain populations.⁵³ In their view, however, DG ECHO's funding enabled them to alleviate the health needs of the population in the areas covered by the projects.⁵⁴ Humanitarian organisations interviewed also highlighted that the analysis and prioritisation of humanitarian needs carried out by DG-ECHO in Venezuela helped its partners to have a clear guide for action and allowed them to "scale up what is needed".⁵⁵

Another positive aspect of DG ECHO's response in the country was the flexibility it showed, which was considered very necessary given the complexity of the country. In this sense, several stakeholders consulted highlighted, DG ECHO's ability to adapt to the situation was key in a country

⁵² The lack of data does not only concern the health situation, but also of the country's social situation in general.

⁵³ Field interviews in Venezuela (DG ECHO partners: 4).

⁵⁴ Field interviews in Venezuela (DG ECHO partners: 4)

⁵⁵ Field interviews in Venezuela (Coordination mechanisms: 1)

with economic sanctions (which made it difficult to transfer financial resources to implementing partners) and hyperinflation (which required changes in the resources allocated to specific activities).⁵⁶

Despite the overall positive assessment, the response was limited in its ability to address all Health-related needs, partly due to budgetary constraints.

DG ECHO's response did not cover all identified regions. Although until 2021, DG ECHO did not prioritise any specific regions within Venezuela (i.e. on principle, all regions were eligible), field interviews suggest that the response did not cover all regions presenting important needs.⁵⁷ While recognising that it was not possible to address all the needs of the country due to budgetary restriction,⁵⁸ interviewees in Venezuela considered that regions such as Amazonas, Apure and the central areas of the country should have received more attention.⁵⁹

In the areas covered, DG ECHO's response focused on the most vulnerable populations (e.g., indigenous people, women of reproductive age, pregnant and lactating women, people over 70 years of age, many of whom were who were in charge of minors), which was considered pertinent.⁶⁰

On the other hand, DG ECHO's strategy focused on emergency care, i.e. providing primary emergency care and adapting emergency rooms in hospital centres, although some DG ECHO partners consulted (Doctors of the World and the Venezuelan Red Cross) reported having provided medicines to treat chronic diseases (e.g. hypertension and diabetes).⁶¹ While this is in line with DG ECHO's mandate and its Health policy, some of the stakeholders consulted considered that other health conditions such as cancer, AIDS and chronic diseases that have worsened due to the humanitarian situation in the country should have been addressed.⁶²

RQ2: To what extent were DG ECHO funded actions in the area of health well designed, tailored to the Venezuela context and focused on the most acute health needs in the country?

Based on the feedback gathered through the field consultations, as well as the project visits carried out, it can be said that the DG ECHO-funded actions in the Health sector were focused on the health needs of the country. Thanks to DG ECHO's flexibility, its partners were able to adapt to the changing conditions in the country.

In order to identify the most pressing health needs of the Venezuelan population, DG ECHO carried out different activities with the community, including direct interviews with programme managers, interviews and focus groups with the community, surveys, visits to the sites where the programmes would be implemented, among other actions. This allowed DG ECHO partners to have a broad vision of the needs of the population to be intervened and to build programming based on evidence of those needs. However, as the intervention was carried out, other needs became evident and were reflected into the response. This was the case for mental health issues, which exacerbated by the COVID-19 emergency and was subsequently introduced in the strategy.⁶³

Several DG ECHO partners interviewed argued that they could adapt to the country's changing situation, especially during the COVID-19 emergency, which helped them mitigate the impact of the

⁵⁶ Field interviews in Venezuela (DG ECHO partners: 2; Coordination mechanisms: 1)

⁵⁷ DG ECHO set geographical priorities in Venezuela in the 2021 HIP for the first time, prioritising large urban areas and border regions (and when needs were identified in other areas such as Sucre, they also became part of the plan). Source: Analysis of LAC HIPs and HIPTAs (2017-2021) 2021 HIP was the first

⁵⁸ Scoping interviews (DG ECHO: 1)

⁵⁹ Field interviews in Venezuela (DG ECHO partners: 10). States like Amazonas and Apure were identified as priorities areas in DG ECHO's plans. However, the field mission revealed that the emergency produced by COVID-19 did not allow these areas to be adequately attended to.

⁶⁰ Scoping interviews (DG ECHO: 1; DG ECHO partners 1)

⁶¹ Field interviews in Venezuela (DG ECHO partners: 2 and Local authorities: 1).

⁶² Field interviews in Venezuela (DG ECHO partners: 2).

⁶³ Field interviews in Venezuela (DG ECHO partners: 2)

pandemic in terms of engagement with beneficiary communities and local authorities.⁶⁴ Constant communication between DG ECHO and its partners was considered to have facilitated the identification of gaps in their initial response and correct their subsequent correction, for example by providing mental health care, importing medicines, or using resources to purchase medical supplies.⁶⁵

RQ3: How and to what extent did the framework partners target the most vulnerable groups? Did they have a good understanding of the effects of the crisis on different vulnerable groups? Did they encounter any challenges to identify and target the most vulnerable population?

The DG ECHO-funded actions implemented targeted different population groups, following the priorities identified in the HIPs (see RQ3). In the case of the activities implemented by Mercy Corps, the direct beneficiaries were the workers of the mother and child hospital and, indirectly, their patients (i.e. women in labour, postpartum, and their new-borns). In the cases of the actions implemented by the Venezuelan Red Cross and Doctors of the World, the groups that received priority attention were adolescents and pregnant women, older adults and children "left behind", as well as groups of "caminantes" (especially those travelling with children), LGBTIQ+ population and indigenous population. According to their needs, these groups were targeted by activities such as sexual and reproductive health, mental health and nutrition programmes, parasite treatment, delivery of medicines, in care centres and in health brigades in remote populations.

The FGDs with the beneficiary communities suggested that one of the ways in which DG ECHO partners reached out to the communities served was through meetings held in the health centres, where training activities were conducted on different related topics, as well as by providing outpatient care, which was often in beneficiaries' homes according to their needs.

Among the problems encountered to identify and target communities, DG ECHO partners highlighted the following challenges:

- Difficulties in reaching the most remote areas for a variety of reasons. Firstly, the state of the roads, the remoteness of some areas (which can only be reached by boat) and the cost of fuel, among other logistical issues, delayed and in many cases forced partners to shift their priority activities and locations to others where they were easier to reach.⁶⁶ The COVID-19 emergency created further difficulties and did not allow these areas to be adequately addressed;⁶⁷
- Presence of armed actors, as they sometimes did not allow aid to reach the population.⁶⁸ Their presence also required DG ECHO partners to use humanitarian diplomacy to gain access to them.⁶⁹
- Mobility of beneficiaries (i.e. beneficiaries were one day in one place and the next day in another, or even in another country), which made it difficult to accompany the population and provide adequate and timely follow-up;⁷⁰ and
- Change of local authorities⁷¹ and the shortage of specialised personnel, not only in the health and social areas, but in general, also due to mixed migration or better conditions in the private sector. This was one of the greatest difficulties in implementing the

⁶⁴ Field interviews in Venezuela (DG ECHO partners: 3, and Local authorities: 2)

⁶⁵ Field interviews in Venezuela (Coordination mechanisms: 1); Scoping interviews (DG ECHO: 1).

⁶⁶ Field interviews in Venezuela (DG ECHO partners: 1).

⁶⁷ Field interviews in Venezuela (DG ECHO partners: 2).

⁶⁸ Field interviews in Venezuela (DG ECHO partners: 1).

⁶⁹ Field interviews in Venezuela (DG ECHO partners: 1).

⁷⁰ Field interviews in Venezuela (DG ECHO Framework partner: 1).

⁷¹ This permanent change of local authorities is found in most of Latin America and is not exclusive to Venezuela.

strategy and required maintaining a permanent dialogue with local authorities and providing incentives (not necessarily economic) to attract professionals.

- The reluctance of Venezuelan government to admit that there was a humanitarian crisis in the country and to collect data on the needs and make any assessment of them public, which made it difficult for DG ECHO and its partners to properly assess needs based on reliable evidence.⁷²
- The lack of experience of national organisations in humanitarian response, coupled with the difficulties for international NGOs to establish themselves and operate in the country⁷³
- The politicisation of humanitarian aid, so DG ECHO had to remain remarkably neutral and apolitical and defend compliance with international standards⁷⁴

A8.1.4.2 Effectiveness

Key findings

Overall, the strategy was effective as that it was possible to meet the intervention goals and reach the regions and people prioritised to receive these benefits, despite difficulties and unexpected negative effects reported. Key findings can be summarised as follows:

- With the strategy, it was possible to strengthen the health of the communities served, achieving through the actions implemented, such as the health days, to leave capacities to form good health habits and thus improve the conditions of the communities.
- Another way to strengthen the health status of the population was through improvements in hospitals and outpatient clinics, as well as the purchase of equipment and the training of health personnel in its use.
- DG ECHO and its partners faced many operational difficulties, namely the legal uncertainty around the legal framework applicable to international NGOs, obstacles encountered to transfer money due to state restrictions and economic sanctions, the effects of hyperinflation and the difficult relationship with the central government, which made it difficult for humanitarian aid organisations and workers to establish themselves, and operate, in the country.
- DG-ECHO's dialogue, flexibility and support facilitated the successful implementation of the strategy.

RQ4: To what extent were DG ECHO's funded actions in the area of health successful in reaching the most vulnerable people and achieving the intended results (i.e. ensuring increased access to quality healthcare and essential drugs, increased availability of medical staff, increased community health awareness and better preparation and response to outbreaks)?

Overall, DG ECHO-funded actions in the area of Health were successful in reaching the most vulnerable people. However, the level of success in achieving the expected results varied across actions. While some partners (Venezuelan Red Cross and Mercy Corps) stated that they were able to meet and, in some cases, exceed the expected objectives,⁷⁵ others (Médicins du Monde) reported that they have not yet completed the intervention and are therefore still working towards achieving the objectives set.⁷⁶

Project visits and field consultations with DG ECHO partners in Venezuela highlighted the following results:

⁷² Scoping interviews (DG ECHO: 2); ⁷² Field interviews in Venezuela (DG ECHO Implementing partner: 2)

⁷³ Scoping interviews (DG ECHO: 2)

⁷⁴ Scoping interviews (DG ECHO: 1); Field interviews in Venezuela (DG ECHO partners: 1).

⁷⁵ Field interviews in Venezuela (DG ECHO partners: 2).

⁷⁶ Field interviews in Venezuela (DG ECHO partners: 1).

- The most significant achievements reported by Mercy Corps (OXFAM's implementing partner)⁷⁷ included the availability of equipment and technology necessary for the replacement of obsolete equipment, as well as training in the use of this equipment, thereby sustaining staff not only with the monetary incentive provided, but also with specialised equipment. Regarding the results exceeding the targets, Mercy Corps referred to the larger group of hospital workers who benefited from the cash incentive programme, while noting that this had not been sufficient.⁷⁸
- In the case of the Venezuelan Red Cross (IFRC's implementing partner), the main results highlighted were the strengthening of the communities through health and educational workshops, as well as the delivery of medicines, including medicines that were not foreseen at the beginning of the intervention (which represent the objectives exceeded).⁷⁹
- Interviewees from Médicins du Monde interviewees highlighted how their intervention increased health coverage, improving the quality of outpatient clinics and their infrastructure, which allowed the target population to regain confidence in the system.⁸⁰ Interviewees stated that they were still working to achieve the proposed goals, as at the time of the evaluation they were 65% of the way to implementation.⁸¹ In their view, planned activities are proceeding satisfactorily, especially the cytology and contraception programmes.⁸²

Médicins du Monde interviewed also pointed to actions which, in their opinion, worked particularly well, namely the health workshops and the supply of medicines in remote areas in Río Chiquito and Capacho (two towns in Zulia with indigenous populations).⁸³ Attention was also drawn to the activities carried out at the San Cristóbal Hospital, where training activities for hospital staff enabled the reestablishment of the production of epidemiological reports (an activity that had been halted due to the crisis).⁸⁴ Improvements made to hospital facilities,⁸⁵ and the acquisition of medicines for the treatment of illnesses were also key to improving people's living conditions.

In addition, members of the beneficiary community consulted during the field mission, highlighted the "good treatment" they received at the health days where they were given medicines and talks about family planning.⁸⁶ In their feedback, they referred to the kindness of the health professionals towards the beneficiary population, to finding the specialist they need to attend to their health problem, to adapting to the needs of the populations being attended to (older adults, children, indigenous people), in terms of space, number of people to attend to, which produces greater user satisfaction.

However, the sustainability of the results was limited. Stakeholders pointed out that at the end of the projects, health workers no longer had sufficient incentive to stay in the hospitals, and medicines became scarce again.⁸⁷ Stakeholders interviewed⁸⁸ recognised that the sustainability of the programmes is limited as the government does not continue with these activities, and NGOs in the territory do not always have the capacity to do so.

⁷⁷ Field interviews in Venezuela (DG ECHO partners: 1).

⁷⁸ Field interviews in Venezuela (DG ECHO partners: 1).

⁷⁹ Field interviews in Venezuela (DG ECHO partners: 1).

⁸⁰ Field interviews in Venezuela (DG ECHO partners: 1).

⁸¹ Field interviews in Venezuela (DG ECHO partners: 1).

⁸² Field interviews in Venezuela (DG ECHO partners: 1).

⁸³ Field interviews in Venezuela (DG ECHO partners: 1).

⁸⁴ Field interviews in Venezuela (DG ECHO partners: 1).

⁸⁵ Field interviews in Venezuela (DG ECHO partners: 1).

⁸⁶ FGDs with affected communities in Venezuela.

⁸⁷ Field interviews in Venezuela (DG ECHO partners: 2).

⁸⁸ Field interviews in Venezuela (DG ECHO partners: 3); Scoping interviews (DG ECHO: 1).

In the implementation of the strategy, there were also different challenges that DG ECHO partners mentioned. These were related to:

- The legal uncertainty around the legal framework of international NGOs⁸⁹, which forced them to act "under the table"⁹⁰ in order to be able to provide this assistance.
- The difficulty in transferring money to DG ECHO's implementing partners due to state restrictions and economic sanctions led to delays in funding and forced many implementing partners had to use their own resources or delay actions⁹¹.
- Hyperinflation was also a key challenge as it complicated the purchase of goods and the payment of salaries.⁹² In this sense, One DG ECHO partner reported that they were able to mitigate its effect by keeping budgets in dollars and changing them only when necessary, a condition that, according to the actors interviewed, other donors did not accept.⁹³
- The difficult relationship with the central government, which made it difficult for humanitarian aid to enter the country, for which reason partners without experience in this field had to be hired.⁹⁴ Adding to this, the type of visa that the government granted to humanitarian workers (a tourist visa) required staff rotation every three months. Ongoing migration presented another difficulty as many of the beneficiaries of the different programmes did not stay for long.

In addition to the obstacles described above (see RQ3), partners also recognised the following problems:

- The children's hospital dissatisfaction with the Mercy Corps process, where monetary incentives only went to a portion of the hospital's employees, leading to tense moments where non-beneficiary employees posted a list of beneficiaries.⁹⁵ This impasse was resolved through dialogue between Mercy Corps, the hospital and its employees.⁹⁶ The publication of the hospital staff receiving incentives also generated difficulties for the implementation of Mercy Corps strategy, as hospital staff believed that working with them would pose a risk to their safety.⁹⁷ This was mitigated through awareness-raising workshops and dialogue with employees, which allowed them to realise that their safety was not at risk.
- For Médicines du Monde, the main problem was the shortage of health staff, caused by the economic situation, which led professionals to migrate or work in more profitable areas.⁹⁸ To mitigate this situation, Médicins du Monde relied on other nearby centres with more staff to help implement the strategy.
- For the Venezuelan Red Cross, the most visible obstacles were the cost of fuel and the lack of financial resources, which forced them to change some of the locations of the interventions.⁹⁹ In this context, the support received by IFRC allowed them to access some necessary resources to overcome these obstacles.

⁸⁹ Field interviews in Venezuela (DG ECHO partners: 3), Scoping interviews (DG ECHO: 1)

⁹⁰ Field interviews in Venezuela (DG ECHO partners: 1); Scoping interviews (DG ECHO: 1)

⁹¹ Field interviews in Venezuela (DG ECHO partners: 1); Scoping interviews (DG ECHO: 1)

⁹² DG ECHO adopted Special Operating Conditions for Venezuela in 2019, establishing alternative measures to make salary payments. Source: Scoping interviews (DG ECHO: 1); Field interviews in Venezuela (DG ECHO partners: 1)

⁹³ Field interviews in Venezuela (DG ECHO partners: 1)

⁹⁴ Scoping interviews (DG ECHO 3).

⁹⁵ Field interviews in Venezuela (FGDs with beneficiaries (hospitals): 3).

⁹⁶ Field interviews in Venezuela (DG ECHO partners: 2)

⁹⁷ Field interviews in Venezuela (DG ECHO beneficiaries (hospitals): 2)

⁹⁸ Field interviews in Venezuela (DG ECHO partners: 1)

⁹⁹ Field interviews in Venezuela (DG ECHO partners: 1)

The different actors interviewed stated that one of the facilitating factors for implementing the strategy was the relationship they were able to develop with local authorities, together with the permanent support received from DG ECHO.¹⁰⁰ In addition to the financial support received, DG ECHO partners referred to the accompaniment, follow-up and training provided by DG ECHO, aimed at meeting the objectives proposed in the programme. Partners also highlighted the DG ECHO's openness to adapt to changing situations in the country as a factor that helped the aid reach the target population.¹⁰¹ These adjustments allowed them to:

- Improve hospital wards, reopen a labour ward that was no longer functioning and provide incentives to the health staff of the mother and child hospital (especially anaesthesiologists) (Mercy Corps);
- Improving health facilities, providing medication for anxiety, hypertension and diabetes, and providing oral and contraceptives and injectables, among other actions (Red Cross and Médecins du Monde).

RQ5: To what extent were DG ECHO and its partners implementing DG ECHO-funded actions in the area of health, successful in identifying and mitigating unintended effects resulting from the interventions as well as from relevant internal or external factors?

Only one DG ECHO partner consulted (Mercy Corps) acknowledged that the DG ECHO-funded action had generated some unintended negative effects stemming from the fact that the incentive scheme was not generalised to all professionals in the hospital. As a result, the partner noted, complaints had been filed, and the list of professionals who received the incentives had been disseminated on social networks, putting not only the professional, but also the project at risk.¹⁰² To overcome this situation, various meetings were held with the hospital's workers and management, where the scope and results of the interventions were explained to them. These meetings enabled the programme to be completed.

In contrast, interviewees from both the Red Cross¹⁰³ and Médecins du Monde¹⁰⁴ felt that there were no negative effects as a result of the intervention. Despite this, Médecins du Monde interviewees¹⁰⁵ noted that they were generally perceived as the "largest implementing organisation in access to health", which led other organisations to seek partnerships with them or request support from them.

While Médecins du Monde interviewees believed that this had been a positive effect of their intervention, they feared that a possible false perception of the number of interventions the organisation has in the country could work against them.¹⁰⁶ They explained that this could draw the attention of people in need – who would come to ask for help that they may not be able to provide – as well as of authorities, breaking the fragile balance they currently have with the government.

¹⁰⁰ Field interviews in Venezuela (DG ECHO partners: 5)

¹⁰¹ Field interviews in Venezuela (DG ECHO partners: 3)

¹⁰² Field interviews in Venezuela (DG ECHO partners: 2; beneficiaries (hospitals): 3)

¹⁰³ Field interviews in Venezuela (DG ECHO partners: 1)

¹⁰⁴ Field interviews in Venezuela (DG ECHO partners: 1)

¹⁰⁵ Field interviews in Venezuela (DG ECHO partners: 1)

¹⁰⁶ Field interviews in Venezuela (DG ECHO partners: 1)

A8.2 CASE STUDY 2: PROTECTION INTERVENTIONS OUTSIDE OF VENEZUELA

A8.2.1 Objective and scope of the case study

This case study explores the extent to which DG ECHO and its partners successfully considered and addressed the specific protection needs, vulnerabilities and risks faced by the various population groups (e.g. children and vulnerable groups “left behind”; (potential) victims of gender-based violence, including human trafficking and / or labour or sexual exploitation; indigenous people), considering the specificities of the different national contexts. The case study specifically answers the following research questions:

Table 53. Case study 2: Research questions

Criteria	Research questions	EQ
Relevance	To what extent was the approach taken by DG ECHO and its partners to identifying protection needs well defined, appropriate and tailored to the specific context and groups?	1
	To what extent did DG ECHO funded actions focus their efforts on the most vulnerable groups and on the most pressing protection needs and trade-offs between various needs of the different groups were understood and accounted for in the design of the actions?	2
Effectiveness	To what extent did DG ECHO funded actions in the area of protection manage to effectively reach the most vulnerable people and achieve their intended results?	6
Sustainability	To what extent did DG ECHO and framework partners contribute to finding durable solutions to address protection needs through programming, advocacy, and coordination?	10

This case study covers DG ECHO's targeted protection response in **Colombia** and **Ecuador** during the evaluation period, including DG ECHO's programming, advocacy and funding decisions as well as the DG ECHO-funded actions incorporating a specific protection element implemented by its partners between 2017 and 2021 (42 in Colombia and 23 in Ecuador). More specifically, it focuses on the following five DG ECHO-funded actions visited during the field missions in Colombia and Ecuador:

- Emergency interventions to ensure protection and lifesaving humanitarian assistance to vulnerable populations affected by the crisis in Venezuela in the context of the COVID-19 outbreak and its aftermath (ECHO/-AM/BUD/2021/91062) (**UNHCR**), visited in Colombia and Ecuador;
- Multisectorial humanitarian response to Venezuela's crisis in country and in Colombia (ECHO/-AM/BUD/2021/91032) (**OXFAM**), visited in Colombia.
- Without Border 2021 – Improving access to sexual and reproductive health and protection services for people affected by the Venezuelan crisis in Colombia, Ecuador and Venezuela (ECHO/-AM/BUD/2021/91065) (**CARE**), visited in Colombia;
- EuroPana-Promoting assistance and protection for vulnerable persons in Venezuela as well as migrants, asylum seekers and local vulnerable persons in Colombia, Brazil, Bolivia, Ecuador and Peru (ECHO/-AM/BUD/2021/91058) (**CARITAS**), visited in Ecuador; and
- Comprehensive humanitarian response for the Protection, Education and Health of Venezuelan refugee and migrant children in Brazil, Colombia, Dominican Republic, Ecuador, Peru and Trinidad & Tobago (ECHO/-AM/BUD/2021/91047) (**UNICEF**), visited in Ecuador.

A8.2.2 Methodological approach

This case study was developed based on primary data collected through the field visits in Colombia and Ecuador, which took place in February and March 2023. Secondary data was also used to provide context and fill in specific gaps.

A8.2.2.1 Primary data

During the field mission in Colombia and Ecuador, field researchers conducted:

- **Project visits** to five DG-ECHO funded actions incorporating (targeted) Protection activities. The project visits took place at various locations in the Colombian regions of Norte de Santander, Santander and Nariño, and the Ecuadorian regions of Sucumbíos, Carchi, Quito and Imbabura. They provided an opportunity to speak with local staff and implementing partners of DG ECHO-funded actions as well as with local authorities and coordination mechanisms.
- **Focus group discussions** (FGDs) with beneficiaries of DG ECHO-funded actions.
- **Remote and face-to-face consultations outside of the project visits** with DG ECHO Field Officers, other EU institutions, DG ECHO partners, coordination mechanisms (including cluster/sector leads), other donors, etc.

Additionally, the case study considered relevant responses to the **mini-mobile survey of beneficiaries** (namely responses submitted by the 126 individuals located in Colombia and Ecuador, to selected questions on their needs and protection assistance they received) and two **KIIs** conducted with Protection experts.

A8.2.2.2 Secondary data

The case study also considered relevant secondary data provided by stakeholders consulted as well as other documentation consulted in preparation for the field mission and to fill in specific information gaps. This mostly included **project documentation** (Single Forms and FichOp) for the DG ECHO-funded actions visited, but also **information and data publicly available** to support the analysis of the context. Relevant information presented in the **Desk Report** was also incorporated, where relevant.

A8.2.2.3 Data limitations and methodological challenges

The team conducting the field missions in Colombia and Ecuador encountered the following key challenges affecting the data collection activities:

- Logistical difficulties linked to demonstrations and transport disruptions during the field mission in Ecuador. As a result of this, the itinerary was modified and consultations that were initially planned face-to-face were carried out remotely, limiting the ability of field researchers to collect observable evidence.
- Change in the national government in Colombia following the 2022 elections. The last national elections in Colombia led to the election of the first left-wing government in over two centuries, prompting significant changes in government structures and staff. Field researchers were not able to consult any national authorities involved in the response during the evaluation period.
- In both countries, some of the activities implemented by DG ECHO partners were multi-donor and beneficiaries were not aware of which activities had received EU funding, which limited our ability to attribute observable/reported results to DG ECHO.
- In both countries, high staff turnover among international humanitarian organisations implementing DG ECHO-funded actions, which led to some interviewees only having a partial overview of the interventions during the evaluation period.

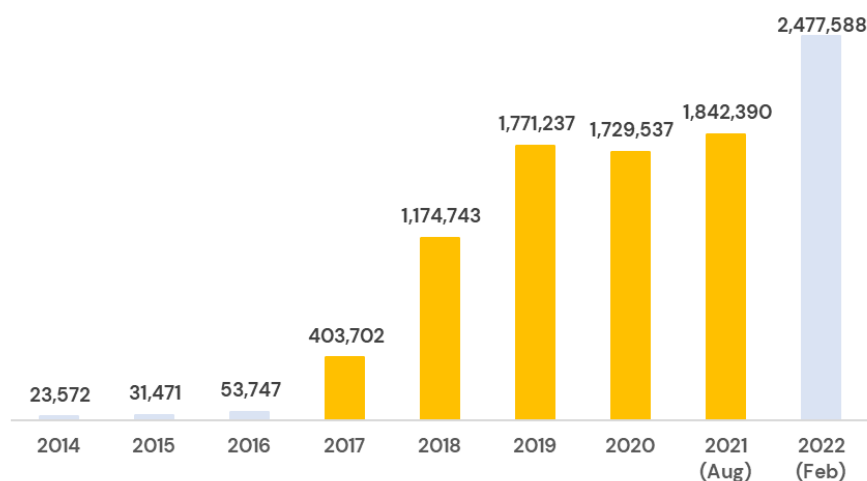
A8.2.3 Context

A8.2.3.1 Colombia: Venezuelan migration and national context

Since 2014, the number of Venezuelans residing in Colombia has increased significantly.

Figure 120 shows the figures for the period 2014 to 2022, based on 2022 data from Migración Colombia.¹⁰⁷ As reflected in the numbers, 2017 was a turning point for the Venezuelan humanitarian crisis, which pushed hundreds of thousands of Venezuelans to migrate to different countries, with Colombia being the country that received, by far, the largest numbers.

Figure 120. Number of Venezuelans residing in Colombia



Source: ICF elaboration (2023) based on Migración Colombia (2022). Note: Other sources suggest that the number of Venezuelans in Colombia is slightly higher (2.8 million by the end of February 2022).

Besides being the main destination country for Venezuelans, Colombia also received many Venezuelans in transit to other countries in the region (and more recently, the United States) as well as the so-called pendular migrants. Figure 120 shows that the growth in the number of Venezuelans living in Colombia slowed down in 2020 and 2021, compared to previous years, mostly as a result of COVID-19.¹⁰⁸ From mid-2021 onwards, Venezuelan migration intensified again, possibly partly due to the entry into force of the Temporary Protection Statue for Venezuelan Migrants (ETPV) (see more details below).

The profile of Venezuelans crossing the border varies slightly across the three main regions that serve as their entry into the country. Norte de Santander and Arauca (eastern border) are at the start of the *caminantes route* and received many Venezuelans walking on foot to other regions in Colombia or other countries.¹⁰⁹ In contrast, La Guajira (northern border) most of the (bi-national) indigenous population (Wayúu), whose territory spans across the Maicao region in La Guajira and the state of Zulia (Venezuela). Venezuelan population arriving to La Guajira also tended to have the intention to stay in the region.¹¹⁰ The three regions also received many pendular

¹⁰⁷ Migración Colombia (2022). Distribución de Venezolanos en Colombia - Corte 28 de febrero de 2022. Available at: <https://www.migracioncolombia.gov.co/infografias/distribucion-de-venezolanos-en-colombia-corte28-de-febrero-de-2022>

¹⁰⁸ According to data from Migración Colombia and the national GIFMM, around 40,000 Venezuelans returned to their country due to the difficult conditions in which they were living and the need to take care of family members who were still in Venezuela (Migración Colombia. (2022). Pre- Registros Estatuto Temporal de Protección; GIFMM. (2021). Joint needs assessment.)

¹⁰⁹ Infographics prepared by the R4V platform depicting the two *caminantes routes* can be accessed at: <https://www.r4v.info/es/document/gifmm-colombia-infografia-de-respuesta-para-caminantes-de-cucuta-norte-de-santander-bogota> and <https://www.r4v.info/sites/default/files/2021-08/Caminantes%20ruta%20Arauca%20-%20Casanare%20%20GIFMM%20V2%20FINAL.pdf>

¹¹⁰ Field interviews in Colombia (DG ECHO partners: 1).

migrants, i.e. people who live in Venezuela but cross the border to Colombia to work, access services/medicines that are not available in Venezuela, etc.¹¹¹

Closure of the Venezuelan-Colombian border

Between 2015 and June 2021, the border between Colombia and Venezuela was closed. However, since most of it is open (there are only eight land border crossing points across the 2,300 km it spans), people could still **cross it irregularly**, through the so-called *trochas*.¹¹²

In terms of their demographic profile, by February 2022, 51% of Venezuelans in Colombia identified as women, 49% as men, with 0.02% identifying as neither. More than half (53%) were between the ages of 18–39, and 24% were children and adolescents. Most were concentrated in the most populated cities of the country (e.g. Bogotá DC, Medellín, Cali and Barranquilla), as well as in Cúcuta (in Norte de Santander).¹¹³

Over the evaluation period, the response of the Colombian government to the migration crisis mostly focused on allowing for/facilitating the regularisation of the status of Venezuelan migrants who wish to stay in the country and expediting border procedures for Venezuelans crossing the border regularly. The first such measure was the introduction of the Special Permit of Permanence (PEP) in 2017 (modified in 2018 and 2019) which sought to facilitate the registration and migratory status of Venezuelan citizens with an intention to stay in Colombia.¹¹⁴ The Temporary Protection Statute for Venezuelan Migrants (ETPV)¹¹⁵ was then introduced in response to the crisis, granting a temporary protection status for Venezuelan migrants¹¹⁶ which would allow them to remain in the country for up to 10 years and ensuring access to benefits such as education, health, pension and the financial system.¹¹⁷ While the ETPV (granted *Migración Colombia*) offers less protection than the refugee status (granted by the Ministry of Foreign Affairs), its main advantage is that the process to obtain it is much faster. The process consists of three phases:¹¹⁸ pre-registration (which can be done anywhere as it is done virtually), biometric registration (done in person, by Colombian authorities), and the hand-over of Temporary Protection Permit (PPT).¹¹⁹

Along with the ETPV, the Government in Colombia also adopted measures seeking labour inclusion by facilitating the recognition of skills and certifications of Venezuelan migrants. SENA (National Learning Service), a public entity in charge of developing technical and technological skills for Colombians, has developed skills assessment and certification programmes.¹²⁰

¹¹¹ According to 2017 figures from the Colombian Foreign Ministry, 69% of people entering the country indicated they would return to Venezuela on the same day, with the main reasons for crossing being: shopping 52% (family basket 81%, cleaning products 19%, medicines 16%), visiting relatives 17% and 14% for work. During the evaluation period, the city of Cúcuta (in Norte de Santander) received a million of pendular migrants per month (Source: Field interviews in Colombia (DG ECHO: 1); Cancillería de Colombia. (2017). *Matriz de monitoreo de desplazamiento en la frontera colombo venezolana*)

¹¹² Illegal passages, often controlled by armed or illegal groups. Since the border re-opened, the number of people using the *trochas* has decreased, but many Venezuelans are still forced to cross irregularly for a myriad of reasons, including the lack of documentation (Source: Field interviews in Colombia; FGDs with beneficiaries in Colombia).

¹¹³ *Migración Colombia* (2022). Distribución de Venezolanos en Colombia - Corte 28 de febrero de 2022.

¹¹⁴ In 2017, more than 68,000 Venezuelan migrants were registered with the PEP.

¹¹⁵ UNHCR, <https://help.unhcr.org/colombia/otros-derechos/estatuto-temporal-de-proteccion-para-migrantes-venezolanos/>

¹¹⁶ In the beginning, all Venezuelan migrants were eligible but as of 31 January 2021, it only applies to migrants who entered Colombia regularly. Source: GIFMM (2021) Estatuto Temporal de Protección para Venezolanos (ETPV) – Preguntas y respuestas.

¹¹⁷ Cancillería de Colombia (2021). Abecé del Estatuto Temporal de Protección para Migrantes Venezolanos.

¹¹⁸ See more info: <https://www.r4v.info/sites/default/files/2021-08/Actualizacio%CC%81n%20preguntas%20y%20respuestas%20ETPV.pdf>

¹¹⁹ According to data from *Migración Colombia*, to date 1,748,945 PPTs have been approved. However, the number of migrants who have begun to carry out the process to obtain the ETPV with pre-registration has been decreasing in recent months (See: <https://www.migracioncolombia.gov.co/visibles>).

¹²⁰ Ramirez, L., & Arroyave, L. (2021). Un largo camino hacia la inclusión laboral de las personas migrantes venezolanas en Colombia. En L. Ramirez, & J. Corredor, *Migración y trabajo decente*.

As regards pendular migrants, the Colombian government also issued a Border Transit Migration Card (TMF), a document that expedites border procedures for Venezuelans crossing the border regularly. This measure was taken to acknowledge the effects of the humanitarian crisis on the shortage of basic products (food and hygiene products) in Venezuela, but it also reflected the diplomatic tensions between the two governments.

The Colombian Government took specific actions to alleviate the needs of migrant children.¹²¹ In 2019, they adopted the decision to grant nationality to children of Venezuelan parents who had been born in the country, many of whom were at risk of statelessness.¹²² The government also worked towards increasing the number of places for Venezuelan students in educational institutions, leading to an increase in the number of places for from 34,000 in 2018 to 489,178 in 2021 and more than half a million places in 2022.¹²³ School corridors were also set up so that children and adolescents who live on the other side of the border (in the border state of Táchira, Venezuela) can enter Colombia to study (Cúcuta and Villa del Rosario, Norte de Santander).¹²⁴

A8.2.3.2 Ecuador: Venezuelan migration and national context

As depicted in Figure 121, the number of Venezuelans entering Ecuador fluctuated during the evaluation period, showing an exponential increase in 2018 which then decreased considerably in 2019 and further in 2020 and 2021.¹²⁵ In. The low numbers in 2020 and 2021 can be explained by the effects of the closure of land borders and imposition of lockdowns in response to the COVID-19 pandemic, which affected migratory patterns¹²⁶ and forced migrants to cross through irregular border crossing points.

Towards the beginning of the evaluation period, Ecuador was primarily a transit country for those wanting to reach other countries like Peru or Chile.¹²⁷ In the last couple of years, however, it increasingly became the destination country for Venezuelans. In a 2021 monitoring survey carried out by IOM, 95.8% of the migrants who responded expressed their intention to stay in Ecuador.¹²⁸ By 2022, Ecuador came just after Colombia and Peru in terms of Venezuelans living in the country, with a total of 502,214 Venezuelan refugees and migrants. The R4V platform (*Plataforma de Coordinación Interagencial para Refugiados y Migrantes*) estimates that approximately 519,000 refugees and migrants from Venezuela will be living in Ecuador by December 2023 and 368,000 more will be in transit.¹²⁹

¹²¹ The protection of children (including migrant children) is the sole responsibility of the *Instituto Colombiano de Bienestar Familiar*. According to stakeholders consulted in Colombia, at the moment more than 90% of children who are at the care are Venezuelan.

¹²² See: <https://reliefweb.int/report/colombia/iom-welcomes-colombia-s-decision-recognize-nationality-birth-children-born-country>

¹²³ Secretaría de educación de Norte de Santander. (2022). Colombia ya les brindó cupos escolares a 573 mil estudiantes venezolanos. Proyecto Migración Venezuela.

¹²⁴ Palomares, M. (2023). Corredores escolares ya están habilitados en la frontera de Norte de Santander. *Proyecto Migración Venezuela*.

¹²⁵ Data from IOM, R4V y Government Ministry.

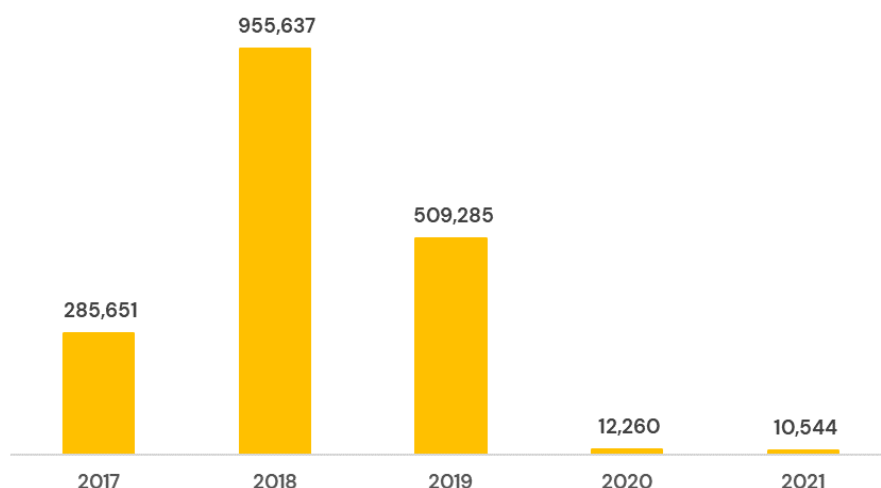
¹²⁶ The pandemic impacted heavily the livelihood of many Venezuelan migrants and refugees in Colombia and Ecuador, forcing many to go back to Venezuela. Field interview (DG ECHO partners: 1).

¹²⁷ Field interviews in Ecuador (DG ECHO: 1; DG ECHO Partners: 1).

¹²⁸ For those who indicated that Ecuador is a transit country, 2.3% intended to go to Peru, 1.1% to Chile, 0.2% to Argentina, 0.4% to other destinations and 0.4% returned to Venezuela.

¹²⁹ R4V (dic 2022). Ecuador Chapter RMRP 2023-2024.

Figure 121. Influx of Venezuelans entering Ecuador (2017-2021)



Source: ICF elaboration (2023) based on data from IOM, R4V y Government Ministry.

Between 2015 and 2021, the **main routes of entry** into Ecuador for the Venezuelan population were by land (85.1%), followed by air (14.7%). Among the land routes most used by Venezuelans are the Rumichaca National Border Assistance Center and the San Miguel Border Binational Assistance Center (Ecuador-Colombia border in the provinces of Carchi and Sucumbíos respectively).¹³⁰ Prior to 2017, these routes had been used by Colombian asylum seekers and refugees fleeing to Ecuador.¹³¹ According to IOM's monitoring (2021),¹³² 43.4% of the Venezuelan respondents entered the country through an official crossing and 56.1% did so through informal crossings.

Like in other countries, the demographic profile of Venezuelan migrants in Ecuador evolved during the evaluation period. The first large flow (2016) consisted mostly of single adults with a high level of education and good economic means, who arrived by plane or bus. In 2018, when the influx of Venezuelans increased exponentially, the profile of migrants changed in line with the developments observed in other countries. Venezuelan migrants were arriving on foot (and they were “closed to the definition of refugees”).¹³³ Approximately 11,000 of the over 500,000 Venezuelans living in the country have applied for international protection.¹³⁴

According to data collected in 2022 by IOM and the Ministry of the Interior,¹³⁵ of the total of 134,400 Venezuelans who completed the immigration registration interview, 51% were women and 63% of those registered self-identify as *mestizos*. In addition, 44% were between 25 and 35 years old and 32% are between 36-55 years old. In terms of educational level, 45% have secondary education and 37% have higher education (university).

In terms of **geographical distribution**, the IOM and Ministry of Interior data showed that 58% live in the Highland region, with Pichincha being the province that concentrates 44% of registered Venezuelan migrants. In addition, the provinces of Esmeraldas and Imbabura are important transit provinces. In the last few years there has been a tendency to move to Quito from cities that became more dangerous (Guayaquil and Esmeraldas).¹³⁶

¹³⁰ IOM and The Ministry of the Interior (2022). Results of the Migration Registry of Venezuelan citizens in Ecuador - 2019-2020 - characteristics, conditions, dynamics and factors with a geographic perspective of the target population.

¹³¹ Field interviews in Ecuador (DG ECHO partners: 1)

¹³² IOM (2021). Monitoring the flow of the Venezuelan population Round 12.

¹³³ Field interviews in Ecuador (DG ECHO partners: 2).

¹³⁴ Field interviews in Ecuador (DG ECHO partners: 1).

¹³⁵ IOM and The Ministry of the Interior (2022). Results of the Migration Registry of Venezuelan citizens in Ecuador - 2019-2020 - characteristics, conditions, dynamics and factors with a geographic perspective of the target population.

¹³⁶ Field interviews in Ecuador (DG ECHO partners: 1).

Ecuador is one of the Latin American countries with the highest number of refugees.¹³⁷ Therefore, the country already had a well-developed migration and asylum regulatory framework before Venezuelan migrants started to arrive, with rules and norms on asylum scattered in different legislative documents.¹³⁸ During the evaluation period, the framework was turned into an Organic Law.¹³⁹

The International Protection Department (DPIN) – which belongs to the Ministry of Foreign Affairs – is the main body responsible for the assessment of international protection applications. The registration and interviews are carried out in one of their six technical offices (Tulcán, Esmeraldas, Ibarra, Azogues, Guayaquil and Quito) or by the registration brigades.¹⁴⁰ The figure of the Defensores Públicos (Ombudsmen, which exist at national and local level) also play a key role as they provide information and assistance to migrants.¹⁴¹

Despite its experience with Colombian refugees and the established system, the country was not prepared for the scale of the influx of Venezuelans that started to arrive in 2018. This was particularly the case in some bordering areas where the presence of the State was weak, such as Tulcán and, to some extent, Lago Agrio.¹⁴² Field interviews also demonstrated that the number of Venezuelans who were granted refugee status remained low during the evaluation period (see more details in Section A8.2.3.3).

Some of the measures that Ecuador adopted during the evaluation period also translated in obstacles for Venezuelans wishing to enter the country. In 2019, the Government established the Exception Visa for Humanitarian Reasons (VERHU) – granted by the Ministry of Foreign Affairs and Human Mobility. Although the measure sought to facilitate the migratory regularisation process of Venezuelans in the country, it had a perverse effect as it pushed many Venezuelans to cross the border irregularly (through *trochas*). This is because Venezuelans – who were previously allowed to enter the country simply presenting their ID – were now asked to request the visa, which was costly and difficult to get for many of them.¹⁴³

As regards migrant children, Ecuador also adopted in decision to allow for the registration of children born in Ecuador (which reduced the risk of statelessness among children of Venezuelan migrants in the country) during the evaluation period.¹⁴⁴

A8.2.3.3 Colombia and Ecuador: Protection needs of Venezuelans

The protection needs of Venezuelans in Colombia and Ecuador evolved during the evaluation period and differed across population groups, although some were common to all groups. The field missions also revealed that while the protection needs were similar in the two countries, some risks were unique to, or heightened in, one of them. For instance, the internal armed conflicts in Colombia generated additional protection risks for Venezuelans in the country, as compared to most regions in Ecuador.¹⁴⁵ In contrast, the level of discrimination and xenophobia against Venezuelans was significantly higher in Ecuador than in Colombia, constituting one of the main protection risks

¹³⁷ According to UNHCR figures, it hosts approximately 74,000 refugees, most of them Colombians who fled from the internal conflict in their country (Source: Field interviews in Ecuador (DG ECHO partners: 1); UNHCR (2022). Strategy 2022. Available at: <https://reporting.unhcr.org/ecuador>)

¹³⁸ Field interviews in Ecuador (Public authorities: 1)

¹³⁹ Field interviews in Ecuador.

¹⁴⁰ Field interviews in Ecuador (Public authorities: 1)

¹⁴¹ They organise talks, workshops and fairs every three months, but they also have mobile units to reach hard-to-reach areas. During the evaluation period, they also supported Venezuelan migrants in the context of forced eviction cases (Source: Field interviews in Ecuador (Public authorities: 1)).

¹⁴² According to national authorities interviewed, in Tulcán – one of the first cities after the Rumichaca bridge – the situation in immigration offices was precarious as there were only three help desks to serve approximately 5,000 people, which resulted in people being blocked at the border and being forced to sleep on the street in Tulcán.

¹⁴³ Field interviews in Ecuador (DG ECHO partners: 2).

¹⁴⁴ Field interviews in Ecuador (Public authorities: 1).

¹⁴⁵ Field interviews in Colombia (DG ECHO partners: 4).

highlighted by stakeholders consulted in the country.¹⁴⁶ Access to documentation and regularisation (and therefore, access to the labour market, education, health and other basic services) was also comparatively more difficult in Ecuador than in Colombia.

Key protection needs of Venezuelan migrants and refugees in the region (R4V, 2021)¹⁴⁷

- Exposure to serious protection risks - including trafficking, disappearances, kidnappings, family separation and gender-based violence (GBV) – while crossing the borders, especially irregularly, but also regularly. A reference to the armed groups in Colombia is necessary here.
- Increase in the number of detentions, interceptions at sea and deportation of Venezuelan refugees and migrants, and restricted access to territories in multiple countries.
- Increase in the number of Venezuelan migrants and refugees in Peru, Ecuador and Colombia travelling towards Mexico and the United States, with many of them deciding to cross the Darién Gap on foot.
- Limited access to rights and basic services for Venezuelans in an irregular situation, compounded by the backlog of asylum claims in many countries (721,946 asylum claims from Venezuelans were pending as of June 2021). This is despite the different alternative regularisation initiatives that many governments have announced such as the Temporary Protection Status for Venezuelans in Colombia (*Estatuto de Protección Temporal para Venezolanos* or EPTV).
- Discrimination and acts of xenophobic violence, which saw an increase in 2021.

The remainder of this section summarises the main protection needs identified in Colombia and Ecuador, consisting of: i) protection needs that Venezuelan migrants and refugees faced in Venezuela, which continued or worsened during their journey, ii) protection risks and needs along the migratory route, iii) protection needs and risks that they faced upon arrival to their destination, and iv) other needs in the field of protection.

Some of the protection needs identified existed before the migration journey, although they often exacerbated in the migration context. These included:

- **Gender-based violence (GBV):** SGBV prevention and response was highlighted by many DG ECHO partners as one of the main needs which persisted throughout the evaluation period, with some observing an increase in cases in the last years.¹⁴⁸ Women were the main group affected, although the LGBTIQ+ community and indigenous communities were deemed to be highly vulnerable groups as well.¹⁴⁹ Focus groups (FGDs) with beneficiaries who suffered GBV revealed that while for many, the violence started during the journey or upon settling down in the country, many others had already suffered this type of violence in Venezuela, with some not even being aware of it.¹⁵⁰ Besides an overall need for increased awareness and information (on what constitutes GBV, victims' rights, protocols and remedies, etc.), DG ECHO partners reported specific aspects that GBV survivors generally required support with, including assistance to file a complaint or receive mental health and psychosocial support. Integral support was also deemed necessary since refugee and migrant GBV survivors (especially those in an irregular situation) usually lacked a support network and their ability to cover their basic needs were slimmed.
- **Child protection:**¹⁵¹ children of Venezuelan refugees and migrants had specific protection needs linked to family separation, limited access to education and

¹⁴⁶ Field interviews in Colombia (DG ECHO partners: 1).

¹⁴⁷ R4V (2021). End-of-year Report. Refugee and Migrant Response Plan (RMRP).

¹⁴⁸ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 11; Coordination mechanisms: 1).

¹⁴⁹ Field interviews in Colombia (DG ECHO partners: 1 [indigenous communities]; 1 [LGBTQI+]).

¹⁵⁰ FGDs in Colombia and Ecuador.

¹⁵¹ Field interviews in Ecuador (DG ECHO partners: 2).

documentation,¹⁵² with unaccompanied and separated children facing additional protection risks due to the deficiencies in the child protection system in the various countries. Although many families separated along the migratory journey, in many cases the separation pre-dated the migration process as the parents usually left first to earn money to send back to Venezuela. This resulted in many children being separated from their primary caregivers, with many of them eventually travelling unaccompanied to reunite with their families in other countries, exposing them to exacerbated risks and to violence, abuse, exploitation and forced recruitment. Along with this, Venezuelan children in Colombia and Ecuador presented the following protection needs:¹⁵³

- Venezuelan children were also used for begging or “lent” by their families to other refugees and migrants to help them access assistance services,¹⁵⁴ exposing them to significant protection risks.
- Obstacles to cross the border and/or access documentation: children who were not travelling with their parents faced additional obstacles to access documentation or cross the border because authorities would require an authorisation from their parents or documents that were difficult to obtain. Along with exacerbating other needs that Venezuelan migrant/refugee children faced (e.g. limited access to basic services and education), it generated significant protection risks. In Ecuador, for instance, this led to a situation in which children would be blocked at the border for 15 days, during which they were exposed to significant protection risks.¹⁵⁵ Children of Venezuelan refugees and migrants born in Ecuador and Colombia were also at risk of statelessness during most of the evaluation period, as neither of these countries automatically granted citizenship to children born in the country, and accessing Venezuelan citizenship was difficult given the difficulties to formally register them at one of the Venezuelan consulates.¹⁵⁶ This situation changed towards the end of the evaluation period, when the legislation in both countries was amended to formally recognise the *ius soli* principle.

The fieldwork also found protection actions responding to the needs faced by Venezuelan refugees and migrants and refugees during their journey. Key protection needs identified included:

- **Lack of/limited information on the migratory route, the national context, risks and services available along the route:** many Venezuelan refugees and migrants started their journey with very limited knowledge of the country/ies they would be travelling through/arriving at (including their geography and political context), and a limited understanding of the risks that the travel posed or the assistance they could access along the way.¹⁵⁷ This placed them in a vulnerable situation as many underestimated the distance they would have to walk or were not adequately prepared

¹⁵² Mini-mobile survey (40 of 126 respondents located in Colombia/Ecuador indicated having Child-related needs, i.e. protection, assistance, registration).

¹⁵³ Field interviews in Colombia and Ecuador; FGDs in Colombia and Ecuador.

¹⁵⁴ Several DG ECHO partners consulted in the field observed that the prioritisation of families for the delivery of humanitarian assistance had sometimes led to Venezuelan migrants/refugees with multiple children leaving some in the care of relatives or friends traveling with them or other migrants/refugees they met along the way, allowing them to benefit from the assistance provided to families.

¹⁵⁵ Field interviews in Ecuador.

¹⁵⁶ In some countries, including Colombia, the Venezuelan Consulate was managed by the Guaidó-led government which, in contrast, did not have access to the civil registry in Venezuela. Source: El Estímulo (2020) Niños que no son de aquí ni de allá: la apatridia, otro problema de la migración forzada.

¹⁵⁷ This need was identified in both countries, especially among refugees and migrants who had just arrived in the country. In Colombia, for instance, a DG ECHO partner consulted explained that Venezuelans who had just arrived often ignored, or were misinformed about, the political context (armed conflict) or the geography in Colombia. The lack of knowledge was also directly observed by field researchers through their exchanges with beneficiaries (Source: Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO partners: 1); Field observations from project visits and FGDs in Colombia and Ecuador). In the mini-mobile survey, 15 out of 126 respondents located in Colombia/Ecuador indicated having required information about rights and services.

to walk in the low temperatures/high altitude at certain stages of the trip, such as the *Páramo de Berlín* in Colombia.¹⁵⁸ Several DG ECHO partners also noted that many Venezuelan refugees and migrants who had just arrived tended to believe that because they entered the country irregularly, they did not have any rights and could not (or did not know they could) apply for asylum.¹⁵⁹ As refugees and migrants advanced in their journey within the country, their level of awareness and knowledge increased, but every time they crossed the border into a new country, they required new information.¹⁶⁰

- **Exposure to violence (human trafficking, smuggling, torture, sexual exploitation, extortion, forced recruitment by armed groups).**¹⁶¹ This was especially problematic for refugees and migrants who had to cross the border irregularly, as *trochas* were generally controlled by armed groups, both in the Venezuela-Colombia and the Colombia-Ecuador border.¹⁶²
- **Need for transport/transit support:** many Venezuelan migrants and refugees were *caminantes*. As such, they walked long distances to their destination (for reference, walking from Cúcuta to Bogotá takes approximately three weeks), becoming exposed to safety and security risks. They were also often in a rush to reach their destination, which exacerbated the risks as they were more likely to walk for long hours, travel at night, accept rides from people they did not know, etc.¹⁶³
- **Mental Health and Psychological support:** several stakeholders consulted highlighted that Venezuelan migrants and refugees arriving in Colombia and Ecuador often required psychological support, as many presented signs of trauma due to the extreme hardship they had experienced before and during their migration journey.¹⁶⁴

Beyond strictly protection risks, stakeholders consulted in the field referred to the need to support Venezuelan refugees and migrants cover basic needs during their journey or upon their arrival, especially shelter,¹⁶⁵ food¹⁶⁶ and basic health needs,¹⁶⁷ given the limitations in the national response.

Once they arrived at their destination, the main protection risks were related to access to documentation, regularisation and basic services. In Ecuador, and to some extent in Colombia, xenophobia and discrimination was also an issue. The feedback provided by stakeholders and beneficiaries consulted during the field missions indicates that Venezuelans continued facing protection needs upon settling down, namely:

¹⁵⁸ The level of awareness among refugees and migrants arriving towards the end of the evaluation period reportedly improved compared to 2017-2019, but the exchanges with beneficiaries during the field missions demonstrated that this remains an issue to this day (Source: DG ECHO partners: 1; FGDs with beneficiaries in Colombia and Ecuador).

¹⁵⁹ Field interviews in Colombia (DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO partners: 2).

¹⁶⁰ Field observations from project visits in Colombia and Ecuador; FGDs with beneficiaries in Colombia and Ecuador.

¹⁶¹ Field interviews in Colombia (DG ECHO partners: 14); KII (DG ECHO: 1). In the mini-mobile survey for beneficiaries, 15 of 126 respondents located in Colombia/Ecuador declared having required security assistance.

¹⁶² During the exchanges with beneficiaries, one reported having been recruited to work at a coca plantation and pushed into sexual exploitation when she first entered the country several years prior, and several others reported having been victims of extortion.

¹⁶³ This was noted by three DG ECHO partners consulted in Colombia, but also observed during the project visits and during the exchanges with beneficiaries in transit, many of whom expressed their desire to reach their destination as soon as possible. In the mini-mobile for beneficiaries, 18 of 126 respondents in Colombia/Ecuador reported having had transport/transit needs (for departure or return).

¹⁶⁴ Field interviews in Colombia and Ecuador. A DG ECHO Field officer consulted highlighted the need for psychological support, pointing out that many Venezuelans arrived traumatised. In the mini-mobile survey, 58 of 126 respondents in Colombia/Ecuador reporting medical (physical and mental) needs.

¹⁶⁵ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 7; National and local authorities: 2).

¹⁶⁶ Field interviews in Ecuador (DG ECHO partners: 1)

¹⁶⁷ Field interviews in Colombia (DG ECHO partners: 4). The collapse of the healthcare system in Venezuela meant that many refugees and migrants had not accessed medical services or treatment for years.

- **Regularisation and access to documentation:** many Venezuelans do not have a valid passport or ID, either because they left Venezuela without it (in many cases, due to the difficulties to obtain/renew them prior to the trip due to lengthy and complex bureaucratic processes)¹⁶⁸ or because it was stolen during the trip.¹⁶⁹ The lack of documentation was an issue for people in transit (as it forced them to cross the border illegally), but also for refugees and migrants with an intention to stay in the country, as it prevented them from regularising their situation.¹⁷⁰ Beyond the issues around the lack of documentation, the field missions showed that Venezuelans faced significant obstacles to regularise their situation in the country, especially in Ecuador, but also in Colombia despite the introduction of the ETPV.
- As access to basic services in Colombia and Peru is only guaranteed to individuals with a regular migration status, the obstacles to regularise their situation in the country resulted in significant obstacles for a large part of the Venezuelan population in these countries to access basic services such as healthcare, education, banking, etc.¹⁷¹ Even in Colombia, where many migrants were able to regularise their situation through the ETPV schemes, DG ECHO partners and beneficiaries consulted during the field mission reported that some of the obstacles remain to this day, including for those who have obtained their Temporary Protection Permit (PPT).

Application of the Cartagena Declaration in Colombia and the region

In 1984, Latin American countries adopted the Cartagena Declaration, which expanded the definition of 'refugee' compared to the 1951 Refugee Convention and its 1967 Protocol as it includes victims of generalised violence, international aggression, internal conflicts, human rights violations, or other circumstances affecting public order. The Declaration – a non-binding instrument – was ratified and transposed into the legislation of 16 countries, including Colombia and Ecuador. In practice, however, its implementation has been not systematic, with many countries not following their own asylum rules, with Venezuelans suffering the consequences of this. In the context of the Venezuelan migration crisis, the definition was only fully used by Brazil to mass recognise Venezuelan refugees in 2017 and, to some extent, Mexico, which applied it to some. As a result, many forcibly displaced Venezuelans were not able to effectively enjoy the protection guaranteed by the Declaration, with many of them being deported or removed from receiving countries.

- **Xenophobia and discrimination:** one of the risks most commonly reported by stakeholders and beneficiaries in Ecuador concerned the high levels of xenophobia and discrimination against the Venezuelan population,¹⁷² which led to important tensions with the local population but also unwillingness on the part of national and local authorities to provide support or services to Venezuelans, including children and GBV survivors.¹⁷³ Xenophobia was also the root cause of the wave of forced evictions of Venezuelans that Ecuador saw during the evaluation period, which triggered a need for legal support for these cases. In Colombia, where Venezuelans were initially received very well, issues or incidents linked with xenophobia were also reported by several

¹⁶⁸ Global Comment (2023) The long, complex and frustrating process of getting a Venezuelan ID and passport.

¹⁶⁹ The process to get these documents is lengthy, so many Venezuelans travel with expired documents or with birth certificates, some of which are illegible. This was highlighted by DG ECHO partners consulted in Colombia and Ecuador, as well as observed during several project visits, when most Venezuelans who were asked to show their documentation presented photocopies of birth certificates or screenshots of the civil registry website.

¹⁷⁰ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 5); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 14; Coordination mechanisms: 1). In the mini-mobile survey, 64 and 23 respondents in Colombia/Ecuador reported requiring, respectively, assistance with documentation, status and protection, and legal assistance in general.

¹⁷¹ Field interviews in Colombia (DG ECHO partners: 7); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 4).

¹⁷² Field interviews in Ecuador (DG ECHO partners: 8); FGDs with beneficiaries in Ecuador.

¹⁷³ Amnesty International (2022). Ecuador: Another state following the regional trend of discrimination and lack of protection for Venezuelan survivors of gender-based violence.

partners and beneficiaries consulted, although they were restricted to specific areas and generally, less violent.¹⁷⁴

Obstacles encountered by Venezuelan migrants and refugees to cover their basic needs were also deemed to generate significant protection risks that Venezuelan migrants and refugees face in Colombia and Ecuador (e.g. situation of homelessness, prostitution, labour exploitation and recruitment by illegal groups).¹⁷⁵ Several partners pointed out that many Venezuelans had to live in extreme poverty and in poor areas, where livelihood opportunities were limited, perpetuating their state of vulnerability and exposing them to **negative coping strategies and risks of violence, sexual exploitation, labour exploitation, human trafficking, etc.**¹⁷⁶ The limited livelihood opportunities also resulted in secondary movements, with many Venezuelans being forced to move to other areas in the country or other countries seeking opportunities.¹⁷⁷

The last group of protection risks during the evaluation period related to the strengthening of the international and national protection response. Despite the existing humanitarian structure in both Colombia and Ecuador, stakeholder feedback pointed to significant limitations in the international protection response to the crisis at the beginning of the evaluation period. This was due, on the one hand, to the limited presence of international NGOs and UN agencies in some of the areas that received most Venezuelans. On the other hand, there was a need to strengthen protection expertise among organisations operating in the field and improve protection information and monitoring systems.¹⁷⁸ The strengthening of the national and local protection response was also one of the main needs reported by DG ECHO partners and national/local authorities consulted in both countries.

Main vulnerable groups and their specific protection needs:

Through the field missions in Ecuador and Colombia, the following population groups were identified as the most vulnerable:¹⁷⁹

- *Caminantes* (many of whom are pendular migrants): this groups of refugees and migrants is the most affected by the protection risks that migrants and refugees face during their journey presented above, especially exposure to violence and safety and security risks along the way.
- Unaccompanied and separated children: although Ecuador and Colombia both have a child protection system in place, stakeholders in both countries indicated that children were not sufficiently protected, pointing to gaps and deficiencies in the national system.¹⁸⁰
- Pregnant and lactating women (and adolescents): the limited access to healthcare services poses a significant risk for pregnant and lactating women and pushed many Venezuelan women to travel to

¹⁷⁴ Field interviews in Colombia (DG ECHO partners: 3); FGDs with beneficiaries in Colombia. Some areas (Santander) were reportedly less open to immigrants, which constituted an important limitation in the beginning as the local government was not willing to take charge of Venezuelan refugees and migrants arriving. When asked about their experience with xenophobia since they arrived in the country, beneficiaries generally reported verbal incidents and acknowledged that most of the population was welcoming.

¹⁷⁵ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 5).

¹⁷⁶ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 4). The need for livelihood support was also observed during the field missions, during which field researchers could observe that many Venezuelan families are currently living on the street (especially in big cities).

¹⁷⁷ As reported by a DG ECHO partner in Ecuador, the lack of livelihood opportunities pushed many Venezuelans to move back to other countries (including Venezuela), with some risking everything to head towards the US through Colombia (crossing the Darién Gap).

¹⁷⁸ According to feedback provided by DG ECHO officers and DG ECHO partners, the situation improved during the evaluation period (see RQ3).

¹⁷⁹ Field interviews in Colombia and Ecuador; Field observations from project visits in Colombia and Ecuador, FGDs with beneficiaries in Colombia and Ecuador.

¹⁸⁰ Field interviews in Ecuador (DG ECHO:1; DG ECHO partners: 10; Coordination mechanisms: 1); Field interviews in Colombia (DG ECHO partners: 2). DG ECHO partners in Ecuador argued that the system was weak, while in Colombia the main concern was the length of the processes and the little room that national legislation leaves for international organisations to cover their needs.

Colombia to receive this kind of assistance. This exposed them to the risks mentioned above, to which they were more vulnerable due to their state.¹⁸¹

- Single parents/caregivers, especially women single head of household: during the evaluation period, there was an increase in the number of single parents (especially women) travelling alone with their children (sometimes with three or more children). As refugees and migrants generally walked for long hours along the road, children were exposed to significant safety and security risks during the journey. Their parents and caregivers, in turn, were at a comparatively higher risk for psychological stress.
- GBV survivors: this group faced additional risks since they often travelled or lived with perpetrator, which also prevented them from seeking assistance.
- Single women, especially young women: this group was particularly vulnerable to becoming victims of sexual exploitation and abuse, and of being used by single men to access assistance services.
- LGBTIQ+ community: several DG ECHO partners referred to the LGBTIQ+ community as a group that was especially vulnerable, and which faced specific protection risks due to the low level of acceptance of homosexuality in many Latin American countries. Trans women were considered particularly vulnerable and at higher risk.
- Indigenous communities: aside from facing significant malnutrition and food insecurity, indigenous populations (particularly transnational communities) presented specific protection risks, with high levels of GBV in the (closed) communities, and a risk of statelessness in Ecuador as many of them do not have a birth certificate.
- The elderly, due to their age and often untreated medical conditions.
- People with disabilities, who required special attention.

Finally, although men were not amongst the most vulnerable groups, stakeholders consulted generally agreed that they became increasingly vulnerable during the evaluation period as they were excluded from most of the assistance provided,¹⁸² while they were the main group at risk of forced recruitment by armed groups.

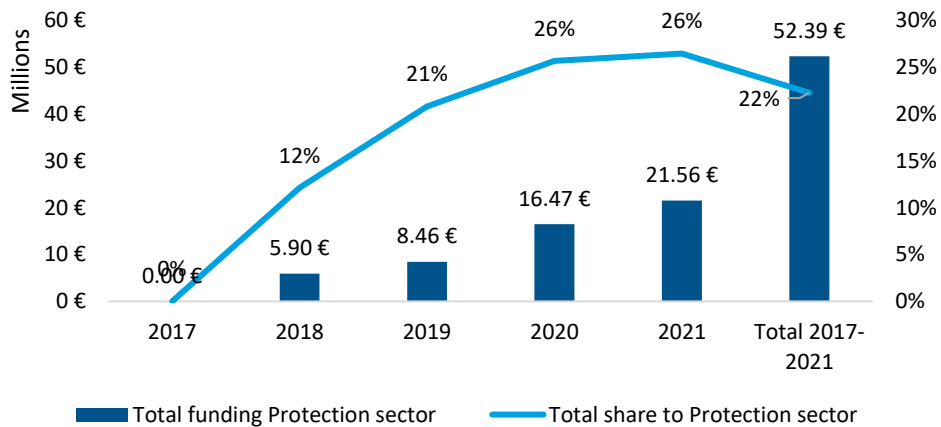
¹⁸¹ Field interviews in Colombia (DG ECHO partners: 2). FGDs with beneficiaries in Colombia.

¹⁸² According to a DG ECHO partner consulted in Colombia, 90% of *caminantes* nowadays are men travelling alone (or in groups). This could also be observed during the field mission in Colombia.

A8234 DG ECHO's Protection response in the context of the Venezuela regional crisis

In the region, DG ECHO's Protection response focused on the most vulnerable Venezuelan migrants and refugees, with an increasing focus on "people on the move, at transit points and during the first phase of arrival in destination countries" (HIP 2021). Protection was one of the two main sectors prioritised by DG ECHO to respond to the crisis, both within and outside Venezuela. The HIPs show a progressive refinement of the protection response, with an overall focus on protection against gender-based violence and human trafficking, the provision of information and legal support, case management of most critical cases and psychosocial support for violence survivors.

Figure 122. DG ECHO funding to Protection sector in the context of the Venezuelan crisis between 2017-2021 (total in million and share of total funding to protection sector)



Source: VENSIT data, DG ECHO

A8.2.4 Case study findings

A8.2.4.1 Relevance

Key findings

- The identification and prioritisation of protection needs in Colombia and Ecuador relied heavily on primary information collected by DG ECHO partners in the field, usually by collecting information from beneficiaries themselves. This allowed DG ECHO partners (and subsequently DG ECHO) to gain a good understanding of the needs of Venezuelan migrants and refugees and to identify the national context and adapt their response to changing needs. Although room for further systematisation and comparability of the data collected was identified, the quality of the risk analysis improved during the evaluation period.
- Overall, DG ECHO's priorities and response in Colombia and Ecuador covered the main protection needs of the most vulnerable Venezuelan migrants and refugees. However, its focus on lifesaving activities and refugees and migrants in transit or who just arrived in the country – while justified by the limited funding and DG ECHO's specific humanitarian mandate – was considered by some stakeholders to have limited the relevance of the response.

RQ1: To what extent was the approach taken by DG ECHO and its partners to identifying protection needs well defined, appropriate and tailored to the specific context and groups? (EQ1)

In Colombia and Ecuador, DG ECHO mostly relied on information collected by its partners in the field to identify and prioritise needs.¹⁸³ Protection risk analysis and needs assessments carried out by DG ECHO partners generally involved the collection of primary data, often complemented with information gathered by other organisations or official data.

DG ECHO paid significant attention to the approach taken by framework partners to identify risks and select beneficiaries, requiring them to include detailed information on these in their funding proposals.¹⁸⁴ In Colombia, where the DG ECHO team is comparatively bigger than in Ecuador, DG ECHO Field staff also collected information on the context and the needs through (multiple) monitoring missions to key areas¹⁸⁵ and yearly meetings with its framework partners which covered specific sectors such as protection, DPs, etc.¹⁸⁶

DG ECHO partners mostly collected primary data through participatory approaches, often on a continued basis.¹⁸⁷ A common source of information was the **first contact with beneficiaries**, with DG ECHO partners generally using the intake interview or the first conversation with beneficiaries to identify protection risks.¹⁸⁸ To support this process, some partners reported using specific methodological tools, for instance a vulnerability matrix (e.g. CARITAS) or a didactical guidance document indicating how the assessment needs to be conducted (e.g. OXFAM). Specific practices to facilitate the identification of GBV cases were also reported by several partners, including separate interviews for men and women, GBV training for staff and the use of a specific

¹⁸³ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO: 1)

¹⁸⁴ Field interviews in Colombia (DG ECHO partners: 1). The (Framework) partner indicated that DG ECHO tends to ask many detailed questions on the approach taken to assess the needs and identify and target beneficiaries.

¹⁸⁵ Field interviews in Colombia. DG ECHO Field office's staff reported having followed the *caminantes* route several times, and several DG ECHO partners highlighted the active monitoring role of DG ECHO Field staff.

¹⁸⁶ Field interviews in Colombia (DG ECHO partners: 2)

¹⁸⁷ Field interviews in Colombia (DG ECHO partners: 5)

¹⁸⁸ Field interviews in Ecuador (DG ECHO partners: 10; Coordination mechanisms: 1); Field interviews in Colombia (DG ECHO partners: 2); Field observations from project visits in Colombia and Ecuador.

methodology for GBV cases.¹⁸⁹ A share of the DG ECHO partners reported using the registration process to identify the most urgent protection needs.¹⁹⁰

Practices employed by partners: identification of needs through the registration process

In Ecuador, several partners referred to the ProGres system, a database of beneficiaries that UNHCR and its partners used for registration and case management which was highly focused on identifying protection needs. The system incorporated a score card functionality which helped partners identify families who could apply to the cash transfer programme.¹⁹¹ It also allowed to monitor beneficiaries and identify referral cases. Despite its functionalities, one DG ECHO official consulted pointed out several limitations of the system, notably the limited comparability of data across countries because the last version was not rolled out in all countries, the limited interoperability with other agencies' case management systems.

Beyond the first moment of contact, partners in Colombia and Ecuador also collected information and feedback through beneficiary (in-person and remote) surveys¹⁹² and semi-structured interviews.¹⁹³ Other participatory methods commonly used were focus groups with beneficiaries and affected population,¹⁹⁴ feedback from beneficiaries¹⁹⁵ and helplines.¹⁹⁶ For instance, UNHCR conducted several focus groups with Venezuelan refugee and migrants inside and outside the reception centre (*Centro de Atención Integral* or *CAI*) in La Guajira (northern region in Colombia bordering with Venezuela) to identify the issues they faced, while the CARE team in Colombia organised several focus groups with women to (re-)define the content of the dignity kits that would be delivered among beneficiaries.¹⁹⁷

The identification and prioritisation of protection risks was also based on information gathered by DG ECHO partners through the **assistance they provided**, which allowed them to gather information on the needs of beneficiaries, refugees and migrants. Some interventions were particularly suitable for this, namely:

- Psychological First Aid/Psychosocial support interventions.¹⁹⁸ In some cases, trained professionals like psychologists or psychotherapists identified specific protection risks when conducting sessions beneficiaries. Group and individual psycho-social activities also provided an opportunity to understand the background and potential protection needs of beneficiaries.
- Information dissemination and prevention activities were also a good entry point for many partners and public authorities. The topics covered by these activities varied, ranging from health, sexual and reproductive health, documentation and registration, GBV, etc.¹⁹⁹
- Health and sexual and reproductive health (SRH) services were also a useful way to identify protection risks, especially as regards GBV cases.²⁰⁰

¹⁸⁹ Field interviews in Ecuador (DG ECHO partners: 2); Field interviews in Colombia (DG ECHO partners: 1)

¹⁹⁰ Field interviews in Ecuador (DG ECHO partners: 6)

¹⁹¹ Field interviews (DG ECHO partners: 4)

¹⁹² Field interviews in Ecuador (DG ECHO partners: 1); Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 4). Some partners used specific survey tools to support the process such as Kobo (UNICEF, UNHCR) or the CTO survey platform (OXFAM).

¹⁹³ Field interviews in Colombia (DG ECHO partners: 4); Field interviews in Ecuador (DG ECHO partners: 1). Interviews were conducted primarily with beneficiaries, although some partners (e.g. CARE) also reported conducting interviews with other key stakeholders.

¹⁹⁴ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 1).

¹⁹⁵ Field interviews in Colombia (DG ECHO partners: 4).

¹⁹⁶ Field interviews in Ecuador (DG ECHO partners: 2); Field interviews in Colombia (DG ECHO partners: 1).

¹⁹⁷ Field interviews in Colombia (DG ECHO partners: 3).

¹⁹⁸ Field interviews in Ecuador (DG ECHO partners: 7); Field interviews in Colombia (DG ECHO partners: 4); Field observations from project visits in Colombia and Ecuador.

¹⁹⁹ Field interviews (DG ECHO partners: 4).

²⁰⁰ Field interviews in Colombia (DG ECHO partners: 3); Field observations from project visits in Colombia.

Shelters or comprehensive assistance spaces proved to be particularly suitable contexts to identify protection needs, as they allowed for exchanges between the partners and beneficiaries in a calmer environment compared to the assistance provided at information points along the road.²⁰¹

DG ECHO partners also carried out specific **protection monitoring** activities, that fed into their assessment and prioritisation of needs. In Colombia, only one organisation (DRC) carried out protection monitoring, gathering data from refugees and migrants on the issues they faced, their plans, etc. and sharing the analysis with the humanitarian community.²⁰² In Ecuador, DG ECHO partners consulted explained they took turns at the border to conduct observations at border areas (under the umbrella of the local R4V platforms).²⁰³ Other methods employed by DG ECHO partners consulted included rapid needs assessments (e.g. CARE and Fundación Mujer y Futuro) or capacity and gaps analyses (e.g. NRC, UNHCR and CARE).

Concerning secondary information, most DG ECHO partners referred to the information collected by other humanitarian organisations operating in the area and, to a lesser extent, official data. DG ECHO partners exchanged information through formal coordination mechanisms (such as R4V sectoral platforms at national and local level) and informally.²⁰⁴ A small group of partners also reported obtaining information from the local community (local committees or the local population) or local authorities.²⁰⁵ For instance, in Ecuador, CARITAS worked with the Ministry of Education and local authorities in Tulcán to identify the needs of the Awá community.

Some DG ECHO officials and DG ECHO partners pointed at several challenges that affected their ability to carry out assessments. Some of the challenges were overcome or mitigated,²⁰⁶ but others prevented a proper analysis of the specific needs of certain vulnerable groups, specifically:

- LGBTIQ+: several organisations reported difficulties to identify the needs of this community, which was often invisible as they were afraid to disclose their sexuality/gender identity.²⁰⁷
- (Transnational) indigenous populations: in addition to the language barrier, the Wayúu (Colombia-Venezuela) and the Awá (Colombia-Ecuador) are highly patriarchal societies, which made identifying their needs difficult since organisations could often only speak directly with (male) community leaders.²⁰⁸
- GBV survivors, who were difficult to reach individually because they often travelled with, or depended on, the perpetrators.²⁰⁹ To overcome this challenge, several DG ECHO partners highlighted the need to separate women and men during the interviews and, in some cases, psycho-social and awareness-raising activities.²¹⁰

²⁰¹ Field interviews in Ecuador (DG ECHO partners: 1); Field interviews in Colombia (DG ECHO partners: 2); Field observations from project visits in Colombia.

²⁰² Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 2).

²⁰³ Field interviews in Ecuador (DG ECHO partners: 2).

²⁰⁴ Field interviews in Ecuador (DG ECHO partners: 5); Field interviews in Colombia (DG ECHO partners: 8).

²⁰⁵ Field interviews in Ecuador (DG ECHO partners: 3); Field interviews in Colombia (DG ECHO partners: 3).

²⁰⁶ For instance, data gaps and limitations were mitigated by DG ECHO and its partners by using multiple sources and used to support advocacy efforts. Other partners reported initial challenges linked to the limited knowledge of the national context or the lack of experience with protection practices, which they managed to overcome through experience.

²⁰⁷ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 2).

²⁰⁸ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 1).

²⁰⁹ Field interviews in Ecuador (DG ECHO partners).

²¹⁰ A DG ECHO partner in Colombia explained that in the beginning, they did not separate women from men during the information sessions on protection risks and violence, and they noticed that women were less likely to speak up when the men were present.

- *Caminantes*/people on the move: several partners referred to difficulties when monitoring and following up with *caminantes* and other migrants who were still on the move, especially because many of them were not reachable by phone.²¹¹
- Settled refugee and migrants: they tended to live in urban areas throughout the entire national territory, which made it difficult to reach them and identify their needs.²¹²

Other challenges that applied to all groups related to the closure of borders and irregular crossings,²¹³ logistical challenges to conduct protection monitoring in specific contexts (e.g. bus terminals),²¹⁴ constant changes in migration patterns,²¹⁵ institutional weaknesses (lack or limited official information, limited presence in certain territories in Ecuador),²¹⁶ and security issues (particularly in Ecuador, where the security situation has worsened in the last years).²¹⁷ A DG ECHO Field officer consulted also explained that in the first years of the evaluation period, the large number of Venezuelans arriving daily to Colombia made it almost impossible to identify specific protection risks.²¹⁸

By relying on primary data collected directly from the field and regularly exchanging information with other organisations operating in the area, DG ECHO partners gained a good understanding of the needs of Venezuelan migrants and refugees arriving in the country, identifying changes and adapting their response almost on the spot.²¹⁹ They were also able to reflect, to a large extent, the rapidly changing context in their needs.²²⁰ The assessments, however, presented several limitations during the evaluation period, primarily:

- Limited systematisation of the information collected: DG ECHO partners collected a wealth of information on protection risks, but the data was not always systematised and used to prepare documents or reports that can be easily shared with DG ECHO, DG ECHO partners and broader humanitarian community, which limited its usability to build evidence-based programmes.²²¹ While there was an improvement in this area during the evaluation period, DG ECHO Field officers consulted indicated that there is still room for further systematisation.²²²
- Limited comparability of some indicators collected: despite the long humanitarian tradition in Ecuador and Colombia, humanitarian organisations operating in the country did not always make use of international indicators, which rendered the comparison with other humanitarian crises difficult.²²³ This occurred especially during the first years of the evaluation period, which prompted DG ECHO to place particular emphasis on strengthening protection information management.

²¹¹ Field interviews in Colombia (DG ECHO partners: 3). They often lose/sell their cell phones or are in areas with low connectivity.

²¹² Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 1).

²¹³ Field interviews in Ecuador (DG ECHO partners: 2).

²¹⁴ Field interviews in Colombia (DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO partners: 1).

²¹⁵ Field interviews in Ecuador (DG ECHO partners: 1).

²¹⁶ Field interviews in Ecuador (DG ECHO partners: 2).

²¹⁷ Field interviews in Ecuador (DG ECHO partners: 3).

²¹⁸ KII (DG ECHO: 1).

²¹⁹ The needs identified by DG ECHO partners consulted were largely in line with the ones mentioned by beneficiaries who participated in the FGDs. Another indication of this is that, as mentioned under RQ2, most stakeholders consulted who were not DG ECHO or DG ECHO partners believed that DG ECHO's priorities (informed by its partners' assessments) were in line with the needs on the field.

²²⁰ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 2).

²²¹ Field interviews in Colombia (DG ECHO: 1); KII (DG ECHO: 1).

²²² One implementing partner consulted in Colombia admitted that for them, this had been a learning curve, as they were not used to produce this type of materials.

²²³ Field interviews in Colombia (DG ECHO: 1); KII (DG ECHO: 1). For instance, to understand violence, they used homicide rates, which is not used in other crises.

- Reliance on outdated or unreliable secondary information: the secondary data that DG ECHO partners used in their assessments was not always accurate or updated. In Colombia, this became evident when the ETPV was introduced, which revealed that there were at least 2.8 million Venezuelans residing in the country, as opposed to the official figures (1.8 million) on which all organisations had relied until then.²²⁴

RQ2: To what extent did DG ECHO funded actions focus their efforts on the most vulnerable groups and on the most pressing protection needs and trade-offs between various needs of the different groups were understood and accounted for in the design of the actions? (EQ2)

DG ECHO's protection response in Colombia and Ecuador focused on providing lifesaving assistance and facilitating access to information, documentation and regularisation.

Activities to strengthen the national and international protection response were also funded. To respond to the specific risks of survivors of violence (mainly GBV) and children, a comprehensive response for these two groups was also supported (see RQ3).

The field evidence suggests DG ECHO's response in Colombia and Ecuador covered the main protection risks of Venezuelan migrants and refugees, with some exceptions (see more details below). Most stakeholders who commented on the priorities set at programming level agreed that overall, the priorities identified by DG ECHO reflected the most pressing needs and vulnerable groups throughout the evaluation period.²²⁵ Similarly, most needs identified during the field missions were considered in DG ECHO's response as well. The following key features contributed to the high degree of alignment with the observed needs:

- DG ECHO was able to adapt the specific response to the national – and even local – context. For instance, in Colombia, DG ECHO put a lot of emphasis on humanitarian transport, provision of information on the migratory route, (emergency) mental health and psychosocial support, covering the needs of pendular migrants, etc. In Ecuador, where the child protection system is comparatively weaker, more attention was paid to child protection assistance.²²⁶
- DG ECHO's flexibility as donor. DG ECHO was able to adapt their response throughout the evaluation period, in line the changing needs and context (e.g. increasing focus on bordering areas). In Colombia, DG ECHO's flexibility also allowed its partners to address cases of the so-called "*doble or triple afectación*" in a way that other donors did not allow.²²⁷ The emphasis that DG ECHO puts on gathering information from the field (through its partners and monitoring missions) was a key enabler for this.²²⁸
- The priorities not only reflected the risks, but also identified funding gaps. In Colombia, for instance, DG ECHO focused on humanitarian transport and the *doble afectación* issue, which was not easily covered by other donors, while it dedicated less funding to other needs covered by other donors (e.g. MPCT, the integration needs of settled refugees and migrants).²²⁹

²²⁴ Field interviews in Colombia (DG ECHO: 1).

²²⁵ Field interviews in Colombia (DG ECHO partners: 7; Other donors: 2); Field interviews in Ecuador (DG ECHO partners: 8). Not all stakeholders were aware of the content of the HIPs, but they commented on the priorities that they saw reflected on the activities funded.

²²⁶ Field interviews in Ecuador (DG ECHO: 1); Field observations from project visits in Ecuador.

²²⁷ Field interviews in Colombia (DG ECHO partners: 3). The term "*Doble/triple afectación*" (translated as dual or triple affectation) refers to situations in which Venezuelan refugees and migrants were affected by the internal conflict or natural disasters in Colombia.

²²⁸ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO: 1).

²²⁹ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 1; Other donors: 2); Field observations from project visits in Colombia.

In line with the above, DG ECHO's funding allowed its partners to implement activities that covered the main – though not all – protection risks observed. Some of the activities funded by DG ECHO were identified as particularly relevant:

- GBV prevention and assistance provided to GBV survivors, given the high prevalence of GBV among refugees and migrants, the situation of vulnerability in which survivors were (they travelled with, or depended on, their perpetrator, often lacked a support network, and were reluctant to go to the authorities) and the weaknesses in the national GBV response system.²³⁰
- Legal assistance and support to access documentation: the need to inform and provide support to refugees and migrants wishing to access documentation and regularise their situation in the country was deemed key by several partners consulted and was one of the main needs observed during the field missions.²³¹
- Humanitarian transport: this was highlighted as a key added value of DG ECHO's response in the region, especially by stakeholders in Colombia.²³² By providing a safe mode of transportation until their destination (or the closest point to the border), these interventions limited the exposure to protection (and health) risks that refugees and migrants faced during their journey, but it also improved their overall mental state, allowing them to make better informed decisions.²³³
- Protection information dissemination to continue their trip safely, given the misinformation and low level of awareness of protection risks observed especially among refugees and migrants who have just entered the country.²³⁴

The provision of psycho-social support²³⁵ and the strengthening of existing protection systems (including through the strengthening of safe spaces)²³⁶ were also identified as important components of the protection response in the region, given the mental state in which many Venezuelans arrived and the weaknesses in the protection systems in both countries.

Although not purely protection related, the coverage of basic needs of Venezuelans in transit – such as shelter and food – was also considered an important complement to DG ECHO's protection response in the region because it reduced their level of vulnerability.²³⁷ Ensuring access to healthcare and SRH services (including family planning but also the voluntary termination of pregnancy) was also key to ensure a full integrated protection response.²³⁸

Despite the overall positive assessment, field evidence revealed that the relevance of DG ECHO's protection response in Colombia and Ecuador was limited for various reasons, the

²³⁰ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 4); FGDs with beneficiaries in Colombia and Ecuador; Field observations from project visits in Colombia and Ecuador.

²³¹ Field interviews in Ecuador (DG ECHO partners: 3); Field interviews in Colombia (DG ECHO partners: 1); Field observations from project visits in Colombia and Ecuador; FGDs with beneficiaries in Colombia and Ecuador. This was widely mentioned by beneficiaries participating in the FGDs during the field missions. The lack of documentation was also observed, first-hand, during the project visits. For instance, a great majority of refugees and migrants who were provided humanitarian transport in la Don Juana did not have their ID and could only show a copy of their civil registry entry, which some were also missing.

²³² Field interviews in Colombia (DG ECHO partners: 3; Other donors: 2).

²³³ *Caminantes* are often in a rush to reach their destination, which pushes them to walk long hours (sometimes in the dark, thereby increasing the safety and security risks to which they were exposed) and rendering them highly vulnerable to extortion, forced labour, sexual exploitation, etc (Source: Field observations from project visits in Colombia; FGDs with beneficiaries in Norte de Santander and Santander).

²³⁴ Field interviews in Colombia (DG ECHO partners: 2); Field observations from project visits in Colombia and Ecuador; FGDs with beneficiaries in Colombia and Ecuador.

²³⁵ Field interviews in Colombia (DG ECHO partners: 4).

²³⁶ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 2).

²³⁷ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 3).

²³⁸ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 1). DG ECHO partners who discussed the need to combine protection interventions and SRH services argued that the impact that access to these services have on the life of women should not be underestimated.

main one being its restricted scope. Given the limited funding and DG ECHO's purely humanitarian mandate, the focus of the response in the region was on lifesaving protection interventions, which some stakeholders deemed too restrictive and not suitable to cover relevant needs beyond protection identified in the field,²³⁹ the main ones being:

- Livelihoods and socio-economic integration: DG ECHO staff and partners agreed that livelihood support was not (sufficiently) covered in the response, perpetuating Venezuelan migrants' exposure to risks (e.g. sexual exploitation, human trafficking, GBV) and preventing them from avoiding negative coping strategies.²⁴⁰ This gap became increasingly evident during the evaluation period, as the number of Venezuelans on the move reduced, while those settling in the different countries increased.
- CASH: while some actions funded by DG ECHO incorporated a small CASH component – generally linked to the management of cases of extreme vulnerability – CASH was not one of DG ECHO's priorities in the region.²⁴¹ In the view of some DG ECHO partners consulted, stronger support for CASH interventions would have been beneficial to ensure a response which was better adapted to the specific needs of individuals.²⁴²
- Evictions: in Ecuador, forced evictions of Venezuelans became a significant problem during the evaluation period. Although evictions were considered in DG ECHO's response as part of the response to vulnerable cases – and as such some DG ECHO partners consulted in Ecuador reported having provided (financial or legal) support to Venezuelans in the context of cases of forced evictions – one stakeholder consulted believed that it should have been explicitly recognised by DG ECHO's as one of the aspects covered by the protection response in the country.²⁴³

Room for further relevance was also identified by DG ECHO partners consulted in relation to the following aspects:

- Need to better address the implications of the *doble/triple afectación* phenomenon in Colombia. Despite the increased flexibility that DG ECHO showed in relation to the distinction between the funding towards the “Colombian situation” (COLSIT) and the “Venezuela situation” (VENSIT), some partners argued that the distinction between the two funding streams should be eliminated, because it generated gaps in the response and was not conducive to a needs-based approach.²⁴⁴
- Need to consider some forms of violence as a specific protection need, rather than including them in a transversal way, such as xenophobia).²⁴⁵

Some DG ECHO partners also identified room for further localisation²⁴⁶ and better coverage of specific (non-protection) needs (health, shelter, access to education and mental health).²⁴⁷

²³⁹ Field interviews in Colombia (DG ECHO partners: 3); KIIs (Cluster/sector leads: 1)

²⁴⁰ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 8). Although some livelihood support interventions were funded (mostly in the context of the response to GBV), the limited funding did not allow for a stronger response in this area.

²⁴¹ According to DG ECHO officials consulted, this was a strategic decision that considered the significant funding that the United States were providing to MPCT projects in the region. For instance, in Colombia, US funding for MPCT projects was larger than DG ECHO's funding for the crisis).

²⁴² Field interviews in Ecuador (DG ECHO partners: 2)

²⁴³ KIIs (Cluster/Sector leads: 1)

²⁴⁴ Field interviews in Colombia (DG ECHO partners: 3). Note that to address these issues, DG ECHO recently started allowing DG ECHO partners to submit one proposal covering COLSIT and VENSIT.

²⁴⁵ Field interviews in Ecuador (DG ECHO partners: 1). Another DG ECHO partner consulted in Colombia referred to the need to better consider GBV in a less transversal way as well, but wider evidence and feedback collected in the field suggests that this was already the case.

²⁴⁶ Field interviews in Colombia (DG ECHO partners: 1).

²⁴⁷ It is worth noting that some of the sectors mentioned (primarily health – including mental health – and education were prioritised sectors under DG ECHO's response).

In both countries, DG ECHO prioritised the needs of vulnerable refugees and migrants on the move (especially *caminantes* and *pendular migrants*) or who had arrived recently to the country.²⁴⁸ In line with DG ECHO's strategy, the DG ECHO-funded actions explored during the field missions mostly focused on assisting people in transit, with most services being provided along the different migratory routes in Colombia and Ecuador.²⁴⁹ The main vulnerable groups prioritised by DG ECHO partners in both countries were:²⁵⁰ families, pregnant and lactating women, single parents/caregivers (especially women heads of households), GBV survivors. Several DG ECHO partners consulted in Ecuador also prioritised unaccompanied and separated children. Other vulnerable groups were often part of the target population, albeit not always reached (see RQ3) namely LGBTIQ+ community, indigenous communities (particularly bi-national indigenous communities),²⁵¹ people with disabilities, elderly people and women travelling alone. Considering the main vulnerable groups identified during the field consultations, it can be concluded that there was some degree of alignment between the groups identified as most vulnerable and the response funded by DG ECHO in the two countries, although with some limitations.

The main limitations identified by stakeholders in the field were identified:

- Certain vulnerable groups were targeted (at programming and/or project level) but their needs were not adequately considered by donors and/or humanitarian organisations. Most weaknesses were identified with respect to the specific protection needs of transnational indigenous populations and the LGBTIQ+ community.²⁵² In the view of some DG ECHO partners, the specific needs of young migrants were not adequately considered at programming stage either.²⁵³
- Insufficient coverage of protection needs of Venezuelan migrants who have been in the country for a longer period of time: in the view of some DG ECHO partners, the strong focus on people in transit or who had just arrived²⁵⁴ was problematic, because it disregarded the fact that Venezuelan migrants and refugees already residing in the country continued to be highly vulnerable and exposed to protection risks.²⁵⁵
- Limited coverage of the protection needs of men travelling alone: this was identified as one of the main gaps in the response in the two countries.²⁵⁶ While recognising that this had been a necessary trade-off during the evaluation period (as they were not amongst the most vulnerable), stakeholders pointed out that they constituted the main group at risk of being recruited by armed or illegal groups.

²⁴⁸ DG ECHO (2021) HIP LAC; Field interviews in Colombia (DG ECHO: 1); Field interviews in Ecuador (DG ECHO: 1).

²⁴⁹ Field observations from project visits in Colombia and Ecuador. A small number of actions in capital cities were also financed by DG ECHO during the evaluation period. The funding for these interventions drastically decreased or stopped as DG ECHO focused on border areas and the migratory route.

²⁵⁰ Field interviews in Ecuador and Colombia; Field observations from project visits in Ecuador and Colombia.

²⁵¹ As opposed to the Wayúu community (Colombo-Venezuelan indigenous community), the Awá community (whose territory spans areas in Colombia and Ecuador) were not initially targeted but were later incorporated by some partners consulted (e.g. CARITAS).

²⁵² Field interviews in Ecuador (DG ECHO partners: 2 [indigenous people], 5 [LGBTQI+]); Field interviews in Colombia (DG ECHO partners: 3 [indigenous people], 3 [LGBTIQ+]). For both groups, the difficulties to identify their needs may have prevented donors and/or humanitarian organisations from adequately reflecting their specific needs in their programming documents. For instance, DG ECHO partners explained that despite being identified as priority groups by DG ECHO and DG ECHO partners, the LGBTIQ+ community and indigenous populations, the difficulties that partners faced to identify them and/or reach out to them prevented them from properly assessing and understanding their specific protection needs and thereby ensure an appropriate protection response.

²⁵³ Field interviews in Colombia (DG ECHO partners: 2).

²⁵⁴ DG ECHO's decision to prioritise this group responded to DG ECHO's strict humanitarian mandate and the need to ensure a high level of prioritisation given the limited funding. In this sense, a DG ECHO official consulted explained that the decision was taken considering several vulnerability assessments done, which showed that the level of vulnerability decreased over time.

²⁵⁵ Field interviews in Ecuador (DG ECHO partners: 1); Field interviews in Colombia (DG ECHO partners: 2).

²⁵⁶ Field interviews (DG ECHO: 1; DG ECHO partners: 9; Other donors: 1).

A8.2.4.2 Effectiveness

Key findings

- Overall, overall, DG ECHO partners successfully reached the vulnerable groups targeted, although certain groups, while targeted, were less effectively supported (LGBTIQ+ community, indigenous population, unaccompanied and separated children and, in a small number of cases people with disabilities and the elderly).
- Protection actions funded by DG ECHO in Colombia and Ecuador during the evaluation period were mostly successful in generating the expected outputs and results. Key results observed or reported during the field missions included the reduction of exposure to risks for *caminantes* on the move (by providing information on risks, services and rights as well as by facilitating transport/transit), facilitated access to documents and regularisation, and a comprehensive response for GBV survivors. Enhanced protection expertise among DG ECHO partners and improved protection information management was also observed during the evaluation period. The national protection response in Colombia and Ecuador was also strengthened, although only to some extent.
- Several challenges affected the implementation or results of DG ECHO-funded actions. While some of them were overcome or mitigated over the evaluation period (e.g. COVID-19, limited international capacity and protection expertise during the first years of the evaluation period) others persisted (e.g. deficiencies of the national protection response, xenophobia and discrimination against Venezuelan refugees and migrants).

RQ3: To what extent did DG ECHO funded actions in the area of protection manage to effectively reach the most vulnerable people and achieve their intended results? (EQ6)

The field missions revealed that overall, DG ECHO partners successfully reached the vulnerable groups targeted, although there were some exceptions and limitations. The following profiles of beneficiaries were the most commonly assisted: families, single parents (especially women heads of household), pregnant and lactating women and GBV survivors.²⁵⁷

DG ECHO partners were less successful in reaching a few other vulnerable groups originally targeted in Colombia and Ecuador, namely:

- **LGBTIQ+ community:** several partners consulted reported limitations that affected the provision of assistance to this group, especially trans women.²⁵⁸ While this could be partly attributed to the difficulties to identify and assess their needs (see RQ1), one DG ECHO partner identified room for improvement in the way that humanitarian organisations approached this group, explaining that they could communicate more explicitly the assistance available specifically for the LGBTIQ+ community.²⁵⁹
- **Indigenous communities:** several protection actions funded by DG ECHO targeted transnational population groups in Colombia (Wayúu) and, to some extent, Ecuador (Awá).²⁶⁰ However, partners reported significant limitations in the response, partly as a result the difficulties encountered to identify their specific protection needs (see RQ1).²⁶¹
- **Unaccompanied and separated children:** while all the DG ECHO-funded actions visited in Ecuador covered unaccompanied and separated children,²⁶² some DG ECHO partners in

²⁵⁷ Field interviews in Ecuador and Colombia, FGDs with beneficiaries in Ecuador and Colombia; Field observations from project visits in Ecuador and Colombia.

²⁵⁸ Field interviews in Colombia (DG ECHO partners: 3).

²⁵⁹ Field interviews in Colombia (DG ECHO partners: 1).

²⁶⁰ Field interviews in Colombia (DG ECHO partners: 1; Local authorities: 1); Field interviews in Ecuador (DG ECHO partners: 2).

²⁶¹ Field interviews in Colombia (DG ECHO partners: 1)

²⁶² Field observations from project visits in Ecuador.

Colombia referred to obstacles that international organisations faced to address the needs of unaccompanied and separated children.²⁶³

With respect to elderly people and people with disabilities, while several DG ECHO partners consulted indicated they had been targeted – and effectively reached – by their actions, a small number of DG ECHO partners reported difficulties to effectively reach people with disabilities and elderly people due to physical barriers.²⁶⁴

Protection assistance provided to (less) vulnerable groups: men travelling alone and migrants of other nationalities or vulnerable local population

The protection actions funded by DG ECHO in Colombia and Ecuador also reached, although to a very limited extent **men travelling alone** with no identified vulnerabilities. As mentioned under RQ2, this group was left out of most of the humanitarian assistance available in the region as they were not generally considered to be among the *most* vulnerable,²⁶⁵ but there were some exceptions, the main one being the support to access documentation and regularisation, which targeted all migrants.

DG ECHO's response also left some space to address the needs of **(vulnerable) migrants of other nationalities and the host population**.²⁶⁶ Despite this, some DG ECHO partners – especially in Ecuador – found that the response had focused excessively on the needs of the Venezuelan population, which had contributed to heightened tensions between Venezuelan migrants, and Colombians and the local population in Ecuador and increased the level of xenophobia against Venezuelans.²⁶⁷

Protection actions funded by DG ECHO in Colombia and Ecuador during the evaluation period were mostly successful in generating the expected outputs and results. Key results observed or reported during the field missions included the reduction of exposure to risks for *caminantes* on the move and facilitated access to documents and regularisation and a comprehensive response for GBV survivors. Enhanced protection expertise among DG ECHO partners and improved protection information management was also observed during the evaluation period. The national protection response in Colombia and Ecuador was also strengthened, although only to some extent.

The mini-mobile survey for beneficiaries revealed that 48% of 126 respondents (located in Colombia or Ecuador) who received humanitarian assistance during the evaluation period, benefitted from protection interventions.²⁶⁸ The remainder of this section summarises the main activities, results and impacts, and limitations, of the response in each of these areas.

I. Support to access information on rights and risks, documents and regularisation:

²⁶³ Field interviews in Colombia (DG ECHO partners: 2). DG ECHO partners referred to the little room for manoeuvre that the current system leaves for international organisations to work directly with unaccompanied and separated children, despite weaknesses in the support provided by the ICBF.

²⁶⁴ Field interviews (DG ECHO partners: 2). With respect to people with disabilities, the project visits showed that while some of the centres where assistance is provided are easily accessible for refugees and migrants, others are not. DG ECHO partners who referred to this limitation also explained that people with disabilities are especially difficult to reach when there are large groups of refugees and migrants that require assistance.

²⁶⁵ For instance, among the 40 actions reviewed in detail for this evaluation, only one action explicitly included the category “men travelling alone” as part of the target group. The field evidence confirmed that unless they fulfilled other specific vulnerability criteria, men travelling alone were not generally covered by the assistance provided by DG ECHO partners and other humanitarian organisations operating in the field.

²⁶⁶ Field interviews (DG ECHO partners: 2). Although the focus was on the needs of Venezuelan refugees and migrants, 5-10% of beneficiaries of some activities were local population.

²⁶⁷ Field interviews in Ecuador (DG ECHO partners: 5).

²⁶⁸ Mini-mobile survey for beneficiaries (Q7 – And, more specifically, did you receive support with the following protection related activities?). Note that only 5% (of 126 respondents in Colombia and Ecuador) indicated having received protection assistance in the country where they are currently located (Q6 – What type of support have you received since your arrival in the current country you are located?). The difference between the two percentages could indicate a lack of awareness of what “protection assistance” means among survey respondents, but also that they received protection assistance before reaching their country of destination.

The first pillar of activities sought to mitigate protection risks by helping beneficiaries exercise their rights, access basic services and regularise their situation, with the objective of reducing their level of vulnerability. Some of the key activities that DG ECHO funded in Colombia and Ecuador revolved around the **provision of information on protection risks, rights and services available**, to Venezuelan migrants and refugees. While only 7% of the beneficiaries in Colombia/Ecuador who answered to the mini-mobile survey indicated having received such information (through websites, databases, in-person sessions, etc.),²⁶⁹ this was a key element of the DG ECHO-funded actions implemented by the partners consulted.²⁷⁰ The field missions also showed that the information provided was adapted along the route. For instance, partners operating in bordering areas that generally constituted the entry point for Venezuelan refugees and migrants (e.g. (Norte de) Santander in Colombia and Tulcán/Lago Agrio in Ecuador) placed more focus on providing information on protection risks than in other parts of the countries, as the level of awareness of specific protection risks was generally lower.²⁷¹

Provision of information on protection risks: DG ECHO partners' practices observed

The project visits provided an opportunity to observe how the information sessions were run by several DG ECHO partners operating close to the border with Venezuela. One partner made use of several group exercises to prompt participants to share the problems they faced during their journey and identify, as a group, any protection risks that they could potentially find along the way. Another partner spent approximately three hours with humanitarian transport beneficiaries, testing their knowledge and subsequently providing information on protection risks, violence (including GBV) and their rights. Following the information sessions, beneficiaries were given an agenda that summarise key messages and were asked to prepare a "journey plan" that considered the information provided and includes self-protection commitments (i.e. what they will do to reduce the risks that they identify).

The other key activity funded by DG ECHO in this area was the **support provided to Venezuelan refugees and migrants to access documentation and regularisation**. In the mini-mobile survey for beneficiaries, 22% of respondents in Colombia and Ecuador indicated that they received assistance with documentation, status and protection, and 15% indicated having benefitted from legal assistance in general.²⁷² Although not the only DG ECHO partner providing this type of support, UNHCR had a prominent role in this area. Through the (no longer supported by DG ECHO) Information and Orientation Points (*Puntos de Atención y Orientación* or PAOs),²⁷³ UNHCR not only provided legal orientation but was also able to start the registration process for Venezuelan refugees and migrants in both countries.²⁷⁴ Along with regularisation and documentation, some of the topics for which refugees and migrants often required legal support were access to health services, education, ID for children (see more details below), GBV response protocols (see more details below), etc. In Ecuador, UNHCR (through Misión Scalabriniana) also provided support in cases of forced evictions.²⁷⁵

In the short and medium term, these activities yielded the following results:

²⁶⁹ Mini-mobile survey for beneficiaries (Q7)

²⁷⁰ Three of the actions visited in Colombia and Ecuador (OXFAM and CARE in Colombia and CARITAS in Ecuador) included the provision of information on protection risks and rights, while UNHCR provided information on rights and regularisation processes in both countries. Other DG ECHO partners consulted in Colombia also indicated that their DG ECHO-funded actions incorporated the provision of information on services available along the route or on rights.

²⁷¹ Field observations from project visits in Colombia and Ecuador.

²⁷² Mini-mobile survey for beneficiaries (Q7).

²⁷³ To reach far-away communities, some of the PAOs were mobile.

²⁷⁴ Field interviews in Colombia (DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 1). In Colombia, where the process to obtain the Temporary Protection Status (ETPV) included three phases, UNHCR was able to cover the first phase (pre-registration). Based on information provided by UNHCR during the field mission, as of January 2023, UNHCR carried out over 269,000 pre-registrations in Norte de Santander, over 113,000 in Santander and over 72,000 in Arauca. In Ecuador, UNHCR worked with NRC, and with HIAS at the beginning of the evaluation period, on registration processes. Note, however, that DG ECHO funding for this activity was discontinued from 2021 onwards, as they were not found to be sufficiently effective or efficient.

²⁷⁵ Field interviews in Ecuador (DG ECHO partners: 1).

- Beneficiaries were better informed on the risks they faced, their rights and the services available along the migratory route and upon arrival to their destination, which allowed them to plan their journey in a safer manner. The field missions provided evidence of this, revealing the difference between the level of awareness among Venezuelan refugees and migrants who had just arrived in the country (in Norte de Santander and Santander, for instance) and those at a more advanced stage of their journey (in the border between Colombia and Ecuador).²⁷⁶ Despite this, the focus groups with beneficiaries also revealed a high level of confusion among participants as regards the services they could access, and their specific requirements.²⁷⁷
- Beneficiaries were able to access documentation and regularise their situation in the country. This was identified as a key result of the legal assistance and regularisation support in Colombia and Ecuador, with DG ECHO partners referring to it as one of the long-term impacts of their actions, as it constituted the entry point to access the various services offered by the State (education, healthcare, socio-economic support) and the labour market.²⁷⁸ However, the feedback gathered from beneficiaries and key informants in the field revealed that many faced obstacles to access basic services after status regularisation. In Colombia, for instance, most key informants and beneficiaries consulted acknowledged that Venezuelans who obtained their Temporary Protection Permit were still being denied access to basic services provided by the State, especially socio-economic support, but also healthcare.²⁷⁹

II. Providing (protection) emergency assistance:

Considering the limitations of the national systems in both countries, DG ECHO's main focus in the field of protection was on providing emergency assistance that ensured lifesaving support and an effective protection response in the short term. Two main activities were at the centre of this strategy, the first one being the provision of **transport and transit support** to refugees and migrants on the move.²⁸⁰ Although only 7% of 126 respondents to the mini-mobile survey located in Colombia/Ecuador received assistance for their transport and transit needs (from or to Venezuela),²⁸¹ the field missions demonstrated that this was one of DG ECHO's main areas of focus in the region, particularly in Colombia.²⁸² **Case management and family reunification** was embedded in humanitarian transport interventions,²⁸³ but also implemented outside of this context, both in Colombia and Ecuador. which did not provide humanitarian transport, for instance DRC and IRC in Colombia, and UNICEF in Ecuador.²⁸⁴

One of the main results that these activities achieved was a **reduction in the exposure to protection risks along the migratory route**.²⁸⁵ Thanks to the humanitarian transport provided by various organisations, vulnerable refugees and migrants no longer had to walk long distances following the road, exposing themselves to safety and security risks. Stakeholders consulted expressed that humanitarian transport interventions had played an important role in the reduction of vulnerable refugees and migrants travelling on foot, while acknowledging that the main factor

²⁷⁶ Field interviews in Colombia (DG ECHO partners: 4); Field interviews in Ecuador (DG ECHO partners: 2); Field observations from project visits and FGDs in Colombia and Ecuador.

²⁷⁷ This was mostly observed among beneficiaries who had recently arrived in the country, but not exclusively.

²⁷⁸ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 3).

²⁷⁹ This was acknowledged by most stakeholder groups consulted. It also raised by beneficiaries participating in two FGDs which involved migrants who had been in Colombia for several years.

²⁸⁰ Field interviews in Colombia (DG ECHO: 1); KII (DG ECHO: 1)

²⁸¹ Mini-mobile survey (Q7).

²⁸² Field interviews in Colombia (DG ECHO partners: 4).

²⁸³ Humanitarian transport was generally linked to case management and family reunification efforts, and exclusively provided to individuals with a support network, usually a family member, at the place of destination. CARITAS and CARE – present in Colombia and Ecuador – monitored cross-border cases, while Federación Mujer y Futuro (OXFAM's implementing partner in Norte de Santander and Santander) did so in collaboration with other organisations present in the regions/countries of destination.

²⁸⁴ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 1).

²⁸⁵ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 2).

had been the drastic decrease in the number of refugees and migrants entering Colombia in the last years compared to the period 2017–2019.²⁸⁶

Observable effects of humanitarian transport interventions

The field missions in Norte de Santander and Santander allowed to observe the effects of humanitarian transport interventions in the number of *caminantes* travelling on foot in Norte de Santander and Santander could be observed during the field missions: while there were still groups of *caminantes* arriving to the different points of assistance in the Colombian cities close to the border, few of them cross the Páramo de Berlín on foot. During the field mission, only a few small groups – mostly composed of young men travelling alone or in groups – were spotted beyond Pamplona (the last city before the Páramo).

Another important feature of DG ECHO's protection response to the crisis was the funding of **mental health and psycho-social support activities**.²⁸⁷ In the mini-mobile survey, 24% of 126 respondents located in Colombia and Ecuador reported having received mental and health support.²⁸⁸ The field missions confirmed that this was one of DG ECHO's main areas of focus in the region, as evidenced by the fact that all the DG ECHO-funded visited in Colombia and Ecuador included an element of psychological first aid or psycho-social support.²⁸⁹ The specific type of mental health support provided depended on the context and the profile of refugees and migrants. For instance, individuals in transit (at shelters or at the various points of assistance along the route) could generally access emergency psychological support services and, to some extent, psycho-social support provided through short sessions covering specific topics. Once they arrived at their destination, vulnerable individuals (mostly, but not only, GBV survivors) they had access to longer-term support, either directly from the same organisation or through referrals to other organisations.²⁹⁰

The psychological first aid and psycho-social support led to better emotional balance among beneficiaries. This was mentioned by several partners and beneficiaries consulted and was also observed first-hand during the project visits.²⁹¹ Ultimately, this resulted in empowered beneficiaries with a restored sense of dignity.²⁹²

Pure protection interventions were often accompanied by **emergency assistance to cover basic needs**, including the provision of food,²⁹³ kits with Non-Food Items (NFI) – such as dignity kits, baby kits, *caminantes* kits, educational kits²⁹⁴ – and, in some areas, emergency shelter.²⁹⁵ DG ECHO also funded some activities incorporating a small CASH element. For instance, actions implemented by UNHCR and HIAS in Ecuador incorporated a cash for protection element which changed over the evaluation period: beneficiaries were initially provided with a one-off cash payment to cover specific urgent needs, which was subsequently changed into emergency cash to pay rent in 2018, and into MPCT (for a three-month period) accompanied by top-up for families with higher protection needs

²⁸⁶ Field interviews in Colombia (DG ECHO partners: 2; National and local authorities: 1; Other donors: 1).

²⁸⁷ Field interviews in Colombia (DG ECHO: 1).

²⁸⁸ Mini-mobile survey for beneficiaries (Q7).

²⁸⁹ Field observations from project visits and FGDs in Colombia and Ecuador.

²⁹⁰ Field observations from project visits and FGDs in Colombia and Ecuador.

²⁹¹ Field interviews in Colombia (DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO partners: 3); Field observations from project visits and FGDs in Colombia and Ecuador.

²⁹² Field interviews in Ecuador (DG ECHO partners: 3); Field observations from FGDs with beneficiaries in Colombia and Ecuador. During the FGDs with beneficiaries, one of the positive aspects that was most commonly highlighted was the good treatment they had received, which many beneficiaries said had felt them feel human again. Beneficiaries who had been in the country for a longer period of time (e.g. GBV victims) also referred very often to the feeling of empowerment that the assistance had given them.

²⁹³ Field interviews (DG ECHO partners: 3)

²⁹⁴ Field interviews (DG ECHO partners: 2 [General], 7 [dignity kits]; 5 [baby kits], 1 [caminantes kits]); Field observations from project visits in Colombia and Ecuador. Some dignity kits included safety items like whistles.

²⁹⁵ In the mini-mobile for beneficiaries, 10% of respondents in Colombia/Ecuador indicated that they had received assistance with shelter, property or camp status. However, DG ECHO funding towards Shelter activities was limited, mostly focusing on areas where there were significant shortages. This was the case, for instance, in Tulcán or La Guajira, where there were significant shelter shortages.

in 2019-2020.²⁹⁶ MPCT cash was also part of the activities implemented by several partners consulted in Ecuador (e.g. UNHCR and UNICEF) and Colombia (OXFAM and DRC).

(Potential) unintended consequences and risks of cash interventions

The provision of MPCT – especially in case of large amounts – entailed protection risks. On the one hand, and as observed during the field mission in Colombia, when refugees and migrants became aware that MPCT was provided at specific shelters/points, some rejected assistance provided by humanitarian organisations – such as humanitarian transport – to reach the points where MPCT was being provided, exposing themselves to further safety and security risks that *caminantes* face along the way.²⁹⁷ Similarly, when they received large amounts of cash, many Venezuelans felt obliged to send some back to their family in Venezuela, which perpetuated their state of vulnerability. To mitigate this risk, one of DG ECHO partners in Colombia explained that they provided only low amounts, just sufficient to reach their destination.²⁹⁸

On the other hand, two DG ECHO partners consulted in Colombia identified protection risks that were (potentially) generated by MPCT interventions when these are not sufficiently targeted. For instance, in the context of the *Centro de Atención Integral* in La Guajira, following a change in the process to register beneficiaries, cases for MPCT stopped being filtered, which meant that all beneficiaries being admitted to the centre could access it. This generated protection risks for vulnerable women (including those with children or who were heads of households) who were left out because of the lack of prioritisation.²⁹⁹

By covering basic needs, DG ECHO-funded actions contributed to reducing, in the short term, the need for refugees and migrants to expose themselves to security and safety risks along their trip or when they arrived at their destination. Emergency shelters located along the migratory route, for example, allowed refugees and migrants to spend the night in a safe place.³⁰⁰ In La Guajira (region in Northern Colombia close to the border with Venezuela), where many Venezuelan refugees and migrants arrived with an intention to stay, the provision of shelter in the context of the *Centro de Atención Integral* (CAI) – co-managed by UNHCR and DRC with DG ECHO funds – also contributed to a reduction in the number of people living on the street.³⁰¹

III. Strengthening of the (national and international) protection response

The third group of activities funded by DG ECHO in Colombia and Ecuador sought to address the deficiencies in the protection response provided by national and international stakeholders. Concerning the **national protection response**, DG ECHO partners mostly focused on advocacy,³⁰² capacity-building and material support to strengthen the response.³⁰³ Examples of material support provided included the financing of personnel in the asylum system or the creation or strengthening of safe spaces to assist vulnerable individuals in healthcare centres, police stations and other public organisations.³⁰⁴

According to partners consulted, these activities yielded tangible results in both countries:

- In Ecuador, several organisations referred to improvements in the response from public authorities and the increased awareness among public servants of their responsibilities towards Venezuelan refugees and migrants.³⁰⁵ National authorities added that the

²⁹⁶ Field interviews in Ecuador (DG ECHO partners: 1).

²⁹⁷ Field observations from project visits in Colombia. For instance, several refugees and migrants who met the requirements to benefit from humanitarian transport at the shelter in La Don Juana decided to continue on foot to reach the next shelter (Hermanos Caminantes) as they had learned that one organisation (not funded by DG ECHO) was providing large amounts of MPCT.

²⁹⁸ Field interviews in Colombia (DG ECHO partners: 1)

²⁹⁹ Field interviews in Colombia (DG ECHO partners: 1)

³⁰⁰ Field interviews in Ecuador (DG ECHO partners: 1); Field observations from project visits and FGDs with beneficiaries in Colombia and Ecuador.

³⁰¹ Field interviews in Colombia (DG ECHO partners: 1). This change was also attributed to the increase in the number of people arriving with a place to which they could go.

³⁰² Field interviews in Colombia (DG ECHO partners: 6); Field interviews in Ecuador (DG ECHO partners: 3).

³⁰³ Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 4; National and local authorities: 3).

³⁰⁴ Field interviews in Colombia (DG ECHO: 3); Field observations from project visits in Colombia.

³⁰⁵ Field interviews in Ecuador (DG ECHO partners: 2)

training provided by these organisations were successful, as they allowed them to solve doubts regarding protection processes.³⁰⁶ During the evaluation period, some specific legislative changes were adopted which were partly attributed to advocacy efforts on the part of humanitarian organisations and the Public Defender (which received support from UNHCR), such as the adoption of the Organic Law on Human Mobility or the decision to allow for the registration of children born in Ecuador (which reduced the risk of statelessness among children of Venezuelan refugees and migrants in the country).

- In Colombia, the main results identified were linked to the improvement of cooperation with local authorities, and increased awareness and acknowledgement among local authorities of their responsibilities towards the Venezuelan population, especially in areas where they had been initially reluctant to support them (Pamplona).³⁰⁷ The material support provided to the local Ombudsmen also allowed to mitigate the impact of the underfunding of these local authorities.³⁰⁸

Community-based protection interventions were also implemented by DG ECHO partners consulted in the two countries,³⁰⁹ which mostly led to reinforced community-based protection and the creation of support networks.³¹⁰

As regards the **international response**, the activities funded by DG ECHO revolved mostly around Protection Information Management (PIM) and the strengthening of protection expertise among international and national organisations providing protection assistance. Protection Information Management activities mostly included Border Monitoring (under the context of the local R4V platforms) and Protection Monitoring.³¹¹ DG ECHO Field officers and framework partners also reported efforts to increase the level of protection expertise and humanitarian standards among staff participating in the response.³¹² The feedback provided by DG ECHO staff and some partners, as well as the field observations, pointed to significant improvements in this area over the evaluation period, especially as regards protection expertise.³¹³ Advances concerning information management were also noted by DG ECHO Field staff consulted, while noting that there was still room for further systematisation and standardisation.³¹⁴

Cross-pillar: Comprehensive protection assistance for specific population groups

In both Colombia and Ecuador, DG ECHO funded activities that ensured a comprehensive **GBV prevention and response** approach. GBV prevention interventions mostly consisted of awareness raising activities and workshops on GBV violence.³¹⁵ Assistance to victims covered a wide range of activities, including the activation of protocols and referral mechanisms, creation of safe spaces within international organisations' and public authorities' offices, legal support and accompaniment to GBV survivors, access to medical tests within 72 hours of the incident, psychological support, shelter, livelihood support, skills development activities, etc.³¹⁶ According to DG ECHO partners, these services mitigated the weakness of national GBV response protocols, allowing Venezuelan GBV

³⁰⁶ Field interviews in Ecuador (National and local authorities: 1)

³⁰⁷ Field interviews in Colombia (DG ECHO partners: 4).

³⁰⁸ Field interviews in Colombia (DG ECHO partners: 3)

³⁰⁹ In the mini-mobile survey, 8% of respondents in Colombia/Ecuador that the protection response had addressed community-based needs (policing, community centres, assistance upon arrival). Field consultations also showed that several partners had incorporated community-based protection elements in their actions.

³¹⁰ Field interviews in Colombia (DG ECHO partners: 1); Field interviews in Ecuador (DG ECHO partners: 4).

³¹¹ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 1).

³¹² Field interviews in Colombia (DG ECHO partners: 4); KIIs (DG ECHO: 1).

³¹³ DG ECHO staff and partners in Colombia acknowledged that there had been a steep learning curve as regards their understanding of protection during the evaluation period, with some partners admitting that they tended to have a very wide understanding of protection which was not in line with international standards. During the field missions, DG ECHO partners also showed a good understanding and application of protection standards.

³¹⁴ KII (DG ECHO: 1)

³¹⁵ Field interviews in Ecuador (DG ECHO partners: 4); Field interviews in Colombia (DG ECHO partners: 5); Field observations from project visits and FGDs with beneficiaries in Colombia and Ecuador.

³¹⁶ Field interviews in Ecuador (DG ECHO partners: 4); Field interviews in Colombia (DG ECHO partners: 8).

survivors to exercise their rights.³¹⁷ Ultimately, DG ECHO partners and beneficiaries alike considered that these interventions had saved numerous lives, helped victims regain control of their life and improve their mental health, and led to the creation of support networks between GBV victims.³¹⁸

DG ECHO also funded several **child protection assistance** activities in Colombia and Ecuador. In both countries, parents and tutors received support to ensure access to documents, registration, education, healthcare, psycho-social support, promotion of positive parenting, etc.³¹⁹ DG ECHO partners consulted in Ecuador, where international organisations faced fewer obstacles to work with unaccompanied and separated children, comprehensive assistance was also provided to this group.³²⁰

Psycho-social activities and safe spaces for children were also organised at shelters and points of assistance along the *caminantes* route, either by DG ECHO partners or by other organisations present.³²¹ Along with allowing their parents to focus better on the information/assistance provided to them, these activities distracted children from the hardships of their situation and gave them tools to develop positive coping mechanisms.³²²

Humanitarian organisations (including DG ECHO partners) in both countries also contributed to advocacy efforts to push the government to strengthen the child protection system, although some DG ECHO partners pointed to limitations to do so due to limited funding. While the field consultations did not reveal significant improvements during the evaluation period, both Ecuador and Colombia adopted legislative changes to grant nationality to children of Venezuelan refugees and migrants who were born in the country, thereby reducing the risk of statelessness for children of Venezuelan refugees and migrants.³²³ Specifically in Ecuador, advocacy efforts to facilitate the entry of unaccompanied and separated children (by easing the documentation requirements for this group) reportedly led to a change in government practices, helping reduce the risks to which they were exposed while waiting at the border.

The field missions in Colombia and Ecuador highlighted a wide range of facilitating and hindering factors, some of which were common to both countries while others were unique, or were more prominent, in one of the two countries.

The first group of facilitating/hindering factors related to the **capacity of, and cooperation with, the Governments of Colombia and Ecuador**. In Ecuador, where the national response was comparatively weaker, the limited capacity and deficiencies of the national protection response was one of the main hindering factors.³²⁴ These deficiencies translated into a lack of capacity/awareness from public authorities and difficulties to cooperate with them – especially in the beginning – as they were reluctant to assume their responsibility towards Venezuelan refugees and migrants. Against this background, several DG ECHO partners argued that involving public authorities in the response had been key to ensure the achievement of results.³²⁵ Local committees – which gathered humanitarian organisations and were led by the State – were deemed to have improved coordination with national authorities, and the interventions targeting the Public Defenders Offices

³¹⁷ Field interviews in Ecuador (DG ECHO partners: 1); Field interviews in Colombia (DG ECHO partners: 2).

³¹⁸ Field interviews in Ecuador (DG ECHO partners: 2); FGDs with beneficiaries in Colombia.

³¹⁹ Field interviews in Ecuador (DG ECHO partners: 1); Field interviews in Colombia (DG ECHO partners: 2); Mini-mobile survey (15% of 126 beneficiaries of respondents in Colombia/Ecuador declared having received support to cover children-related needs (protection, assistance, registration)).

³²⁰ Field observations from project visits in Ecuador.

³²¹ Field observations from project visits in Colombia and Ecuador.

³²² Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO partners: 2); Field observations from project visits in Colombia and Ecuador).

³²³ Field interviews in Colombia (DG ECHO partners: 1); Field interviews

³²⁴ Field interviews in Ecuador (DG ECHO partners: 8; National and local authorities: 1). A national authority from Ecuador identified the restrictive immigration policy as a key factor that limited the effectiveness of the protection response in the country. The weakness of the child protection system was also explicitly mentioned by two DG ECHO partners working in the country.

³²⁵ Field interviews in Ecuador (DG ECHO partners: 4).

were considered a key element of the response by UNHCR and its implementing partners in the country.

In Colombia, challenges linked to actions taken by the Government were also reported by several DG ECHO partners consulted.³²⁶ Despite the comparatively more lenient attitude of the national Government towards Venezuelan migrants and refugees, the constant legislative changes and the legal gaps surrounding humanitarian transport generated substantial uncertainty throughout the evaluation period³²⁷ and led to the interruption of humanitarian transport services for several months in 2021. Some regions in Colombia were also less open to receiving Venezuelan migrants and refugees, which forced DG ECHO partners to invest significant efforts into advocating and convincing the local government to provide a response.³²⁸

Good operational coordination with humanitarian organisations active in the country was often identified as a key facilitating factor.³²⁹ Several partners explicitly referred to the role that the local R4V platforms (GTRM in Ecuador and GIFMM in Colombia)³³⁰ and inter-agency coordination spaces³³¹ had on facilitating coordination between humanitarian organisations for specific cases. In Ecuador, some partners mentioned the positive effect of joint advocacy efforts in ensuring access to basic services for Venezuelans in the country (which generated legislative changes)³³² and cross-border coordination with agencies in other countries for family reunification cases.³³³ In Colombia, despite the overall positive assessment of operational coordination, several stakeholders highlighted the difficulties that the double coordination structure had generated considering the widespread *doble/triple afectación* phenomenon in the country.³³⁴

Xenophobia and tensions with local communities constituted a main hindering factor in Ecuador and, to some extent, Colombia (see further details on issues around xenophobia in Section A8.2.3.3).³³⁵ Against this background, DG ECHO partners in Ecuador saw the involvement of the community (by implementing community-based interventions, involving local staff and covering the host community) as a success factor.³³⁶

The **COVID-19** pandemic also constituted one of the main hindering factors during the evaluation period. Most stakeholders consulted in both countries referred to the change in migratory patterns, increase in protection risks that it generated and the obstacles that it posed to provide services and collect data to inform the response, which forced them to adapt their strategies.³³⁷ Despite the challenges, several DG ECHO partners reported that the way in which they adapted to it proved to be successful, and allowed them to extract some lessons learned that they reflected in their post-pandemic response.³³⁸

Regarding **capacity**, DG ECHO partners in Colombia and Ecuador believed that the limited international presence in the beginning of the evaluation period³³⁹ and the (increasingly) limited

³²⁶ Field interviews in Colombia (DG ECHO partners: 6).

³²⁷ DG ECHO partners reported that public officials were often not aware of their own responsibilities.

³²⁸ Field interviews in Colombia (DG ECHO partners: 2).

³²⁹ Field interviews in Ecuador (DG ECHO partners: 10); Field interviews in Colombia (DG ECHO partners: 3). In Ecuador, this was the facilitating factor most mentioned by DG ECHO partners. In Colombia, several partners acknowledged that although it had led to a more effective response, it had initially been challenging due to the high number of organisations that started to operate in the most affected areas as it took them some time to understand how to best work together.

³³⁰ Field interviews in Ecuador (DG ECHO partners: 4); Field interviews (DG ECHO partners: 3; Coordination mechanisms: 3).

³³¹ Field interviews in Ecuador (DG ECHO partners: 2); Field interviews in Colombia (DG ECHO partners: 3).

³³² Field interviews in Ecuador (DG ECHO partners: 1).

³³³ Field interviews in Ecuador (DG ECHO partners: 1).

³³⁴ Field interviews (DG ECHO partners: 3; Coordination mechanisms: 3).

³³⁵ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 3).

³³⁶ Field interviews in Ecuador (DG ECHO partners: 6).

³³⁷ Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 7); Field interviews in Colombia (DG ECHO partners: 4; Other donors: 1; National and local authorities: 2).

³³⁸ Field interviews in Colombia (DG ECHO partners: 1).

³³⁹ Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 1); Field interviews in Colombia (DG ECHO partners: 2); KII (DG ECHO: 1)

staff and high staff turnover³⁴⁰ had hindered a more effective response. Several partners consulted also referred to initial challenges stemming from the need for humanitarian organisations already present in Colombia and Ecuador to adapt their response to a different type of crisis than what they had been focusing on until then, following international humanitarian standards, and for those who were newly arriving in these countries, to understand the specific national context.³⁴¹ This was also noted by DG ECHO staff consulted, who indicated that one of the main challenges during the first years of the response was the lack of protection expertise (in line with humanitarian standards) among (international and national) organisations operating in the country, while acknowledging that this improved considerably during the evaluation period.³⁴²

In contrast, the presence and recognition in the territory was identified as a facilitating factor by UN agencies and NGOs consulted, but also a local implementing actor in Colombia.³⁴³ Finally, mixed views were expressed regarding the level of specialisation of partners; Level of specialisation of partners: while some DG ECHO partners in Ecuador pointed at the low level of specialisation – especially as regards specific protection risks such as GBV or child protection – as a hindering factor,³⁴⁴ another interviewee (also in Ecuador) indicated that the level of specialisation had been a success factor.

Another group of factors discussed during the field missions related to the **assistance provided**. In particular, the provision of a comprehensive response was highlighted by several partners as one of the key success factors to responding effectively to the protection needs of Venezuelan migrants and refugees.³⁴⁵

In terms of **information management**, several hindering and facilitating factors were identified. On the one hand, the results of the border monitoring activities – carried out under the umbrella of R4V platform at local levels, was deemed to have contributed to the success of the activities implemented by providing early warning about migration influx.³⁴⁶ Similarly, several DG ECHO partners in Colombia (FMF and DRC) referred to the constant needs assessments exercises as an important factor that allowed them to adapt the response on the spot.³⁴⁷

Finally, other (hindering) factors identified included:

- Limited funding, with stakeholders expressing concern about the shrinking funding for the crisis.³⁴⁸
- Short-term programming, which one DG ECHO partner argued was not suitable to address the increasingly complex issues faced by Venezuelan migrants and refugees in the region.³⁴⁹
- In Ecuador, the rapidly changing context³⁵⁰ and the increase in the levels of insecurity that the country saw towards the end of the evaluation period,³⁵¹ which forced to continuously adapt the response and continues to generate uncertainty.

³⁴⁰ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 2).

³⁴¹ Field interviews in Colombia (DG ECHO partners: 2); Field interviews in Ecuador (DG ECHO partners: 1).

³⁴² Field interviews in Colombia (DG ECHO: 1); KII (DG ECHO: 1)

³⁴³ Field interviews in Ecuador (DG ECHO partners: 4); Field interviews in Colombia (DG ECHO partners: 1)

³⁴⁴ Field interviews in Ecuador (DG ECHO partners: 3)

³⁴⁵ Field interviews in Ecuador (DG ECHO partners: 5).

³⁴⁶ Field interviews in Ecuador (DG ECHO partners: 1).

³⁴⁷ Field interviews in Colombia (DG ECHO partners: 2).

³⁴⁸ Field interviews in Ecuador (DG ECHO partners: 6; National and local authorities: 1); Field interviews in Colombia (DG ECHO partners: 2).

³⁴⁹ Field interviews in Ecuador (DG ECHO partners: 1); Field interviews in Colombia (Other donors: 1).

³⁵⁰ Field interviews (DG ECHO partners: 2); Other donors: 1).

³⁵¹ Field interviews (DG ECHO partners: 8)

- In Colombia, the effect of natural hazards on the state of roads, which made it difficult access certain areas.³⁵²

³⁵² Field interviews (DG ECHO partners: 2). At the time the field mission was being conducted, the road to Nariño was blocked for several days and humanitarian organisations faced difficulties to access this area.

A8.2.4.3 Sustainability

Key findings

- DG ECHO and its partners were able to ensure the sustainability of their response only to a limited extent, mostly due to the limited funding for non-lifesaving interventions. Despite this, some protection interventions funded by DG ECHO led to long-lasting impacts, ensuring a certain degree of sustainability of the results.

RQ4: To what extent did DG ECHO and framework partners contribute to finding durable solutions to address protection needs through programming, advocacy, and coordination? (EQ10)

DG ECHO and its partners were able to ensure the sustainability of their response only to a limited extent. The prioritisation of lifesaving interventions (as explained under RQ2) did not leave a lot of room to focus on building resilience among beneficiaries and communities targeted. Nonetheless, some of the DG ECHO-funded activities ensured a certain level of sustainability by achieving long-lasting changes in stakeholders' practices. The main sustainability elements identified were:³⁵³

- Strengthened national and international protection processes by, for instance, creating or strengthening safe spaces.
- Changes in legislation or increased involvement of local authorities in the response (see RQ3) as a result of advocacy activities seeking to push national and local authorities to assume their share of responsibility towards refugees and migrants.³⁵⁴
- Enhanced capacity among national and local authorities implementing the national protection response: several partners referred to their efforts to build or strengthen capacities among public authorities to strengthen the national protection response through trainings (e.g. on GBV, international protection, protection risks and needs of the refugees and migrant population) or material support (equipment, additional staff, etc.).³⁵⁵
- Strengthened Protection Information Management processes and capacity among local partners, which contributed to the sustainability of the local response in the long term.³⁵⁶
- Increased resilience of refugees and migrant and local communities and creation of support networks to mitigate and address protection risks, through community-based interventions.³⁵⁷

Key obstacles to achieving more durable results mostly related to the lack of support to livelihood and socio-economic integration,³⁵⁸ the short duration of projects, which hindered the achievement

³⁵³ Additionally, Some DG ECHO partners and beneficiaries consulted argued that certain protection interventions were sustainable by nature, as the results they generated were long-term (Source: Field interviews in Colombia (DG ECHO partners: 3)).

³⁵⁴ Field interviews in Colombia (DG ECHO partners: 3).

³⁵⁵ Field interviews in Colombia (DG ECHO partners: 3); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 1). For instance, during the evaluation period, UNHCR provided material support to local ombudsmen (so-called *Personeros* in Colombia and Ecuador) to support with the registration of Venezuelan migrants/refugees. The support included additional staff (consultants) as well as equipment (mobile registration units, IT equipment). It is worth noting, however, that this type of support was not deemed to be very likely to ensure durable results that would last once the funding stops.

³⁵⁶ Field interviews (DG ECHO partners: 1).

³⁵⁷ Field interviews in Colombia (DG ECHO partners: 2).

³⁵⁸ Field interviews in Colombia (DG ECHO partners: 5)

of longer-term impacts,³⁵⁹ and the continued lack of willingness / ability of national and local governments to ensure an adequate protection response.³⁶⁰

³⁵⁹ Field interviews in Ecuador (DG ECHO partners: 1)

³⁶⁰ Field interviews in Colombia (DG ECHO partners: 2).

A8.3 CASE STUDY 3: COORDINATION AND THE NEXUS IN VENEZUELA AND NEIGHBOURING COUNTRIES

A8.3.1 Objective and scope of the case study

The case study explores the extent to which DG ECHO and its partners were successful in ensuring a coordinated and comprehensive response to the Venezuela crisis, contributing to, and taking advantage of, relevant coordination mechanisms inside Venezuela and in the region. The case study also explores the extent to which progress was made to implement the triple nexus approach, reflecting on the hindering and contributing factors.

The case study specifically answers the following research questions:

Table 54. Case study 3: Research questions

Criteria	Research questions	EQ
Relevance/ Coherence/ Effectiveness	To what extent did DG ECHO (through its programming, advocacy and communication activities, and funded actions) contributed to enhancing coordination of the humanitarian response to the crisis, both in Venezuela and in the region?	1, 4, 7
	How successful were DG ECHO and its partners in ensuring a coordinated and comprehensive response to the Venezuela regional crisis (in Venezuela and the region)?	4
	What were the main challenges and enabling factors affecting cooperation between humanitarian actors in Venezuela and in the region? How did they evolve over the evaluation period?	4, 6
Sustainability	What measures were adopted by DG ECHO and its partners to ensure alignment and complementarity with the development activities and the implementation of the triple nexus approach? What factors facilitated or hindered the progress towards the implementation of the triple nexus approach?	4, 10

The case study covers DG ECHO's direct and indirect contribution to enhancing coordination at regional level (**Panama**) and in the three selected countries where field missions were carried out (**Venezuela, Colombia** and **Ecuador**). As such, it considers all the information collected through the three in-country field missions as well as the remote field mission in Panama.

A8.3.2 Methodological approach

This case study was developed based on primary data primarily collected through the field missions in Panama (remotely) as well as Venezuela, Colombia and Ecuador, which took place in February and March 2023. Secondary data was also used to provide context and fill in specific information gaps.

A8.3.2.1 Primary data

The case study primarily on the coordination of the response to the internal and external dimensions of the crisis, gathered, respectively, during the field mission in Venezuela and Panama. Evidence collected during the field missions in Colombia and Ecuador served as supporting evidence. During the field missions in **Panama**, field researchers conducted **remote consultations** with DG ECHO Field Officers and regional coordination mechanisms. In **Colombia, Ecuador** and **Venezuela**, field researchers collected evidence relevant for this case study through:

- The projects selected to support the case studies on Health and Protection (in Venezuela, Colombia and Ecuador) also incorporated a coordination/nexus element. Therefore, **no additional project visits** were foreseen for this case study. Besides

providing an opportunity to observe the implementation of Protection (Colombia and Ecuador) and Health (Venezuela) activities funded by DG ECHO, the project visits conducted in the context of the other two case studies also allowed to explore how field coordination at local level is carried out, both through observations and through conversations with local staff and implementing partners, as well as with local authorities and coordination mechanisms.

- **Remote and face-to-face consultations outside of the project visits** with DG ECHO Field Officers, other EU institutions, DG ECHO partners, coordination mechanisms (including, but not only, cluster/sector leads), other donors, etc. (see Annex 4 for a detailed overview of stakeholders consulted in the field).

Additionally, the case study also considered **KIIs** with selected stakeholders, with whom coordination was explored at length.

A8.3.2.2 Secondary data

The case study also considered relevant secondary data provided by stakeholders consulted as well as other documentation consulted in preparation for the field mission and to fill in specific information gaps. This mostly included **project documentation** (Single Forms and FichOp) for the DG ECHO-funded actions visited, but also **information and data publicly available** to support the analysis of the context and the explanation of the structure and functioning of the various coordination mechanisms. Relevant information presented in the **Desk Report** was also incorporated, where relevant.

A8.3.2.3 Data limitations and methodological challenges

The team conducting the field missions encountered the following key challenges affecting the data collection activities:

- Field researchers in some countries were able to explore coordination/nexus aspects to a greater extent than in others due to various factors (i.e. knowledge of coordination among stakeholders consulted, time constraints, etc.). As a result, the level of detail of the information presented in this case study varies across countries.
- Difficulties to engage certain stakeholders particularly relevant to explore coordination in all countries, notably other donors and other EU institutions, which limited the ability of the evaluation team to provide a more balanced assessment of certain aspects of the case study. Data collected includes primarily DG ECHO's views on its contribution to donor coordination and the Nexus. Key stakeholders, like EUDEL and USAID, were not consulted.
- Stakeholders consulted were not always able to make a distinction between coordination to the response, information exchange, and DG ECHO's specific role in it. Much of the information provided by stakeholders required evaluators to make informed judgements on whether interviewees were referring to results that could be attributed to DG ECHO, leading to more general findings.
- High staff turnover among international humanitarian organisations implementing DG ECHO-funded actions. As a result, many of the interviewees had only a partial overview of the interventions during the evaluation period.

A8.3.3 Context

A8.3.3.1 Humanitarian aid architecture and coordination mechanisms to respond to the Venezuela crisis

The humanitarian aid architecture and coordination mechanisms to respond to the Venezuela (regional) crisis differed, and also evolved differently, across Latin American

and Caribbean (LAC) countries over the evaluation period.³⁶¹ Specific coordination mechanisms were established inside and outside of Venezuela to coordinate the response to the two main geographic dimensions of the crisis.

Within Venezuela, the coordination of the internal response has been led by OCHA since 2019, which also manages the 3W / 5W platform (i.e. Who does What Where When and for Whom).³⁶² **A cluster structure is also in place, with government representatives present in the clusters.** Humanitarian Response Plans are developed by the Inter-Cluster Coordination Group (ICCG) under the supervision of the Humanitarian Country Team (HCT), in consultation with a range of stakeholders, including the Government of Venezuela and the National Assembly's Special Commission for the Monitoring of Humanitarian Aid. The negotiation of the HRP with the Government of Venezuela has sometimes constituted a challenge due to disagreements over the data that should be considered and / or published or due to lack of trust in the UN system from some partners.³⁶³ As a result of these difficulties, the HRP / HNO are often published with delays, forcing DG ECHO to allocate its funding to project proposals submitted before the publication of the HRP.

Over the evaluation period, other coordination mechanisms were established in Venezuela, namely: a) the Forum of INGOs (Foro ONGi, established in 2020), coordinated by NRC, and b) the National Platform for Humanitarian Action (PANHAL), which gathers Venezuelan civil society organisations involved in the response to the humanitarian crisis in the country.³⁶⁴ Both platforms are supported by DG ECHO.

Before the arrival OCHA and the establishment of the humanitarian architecture in 2019, DG ECHO was informally coordinating the humanitarian response from the South America Office in Colombia. Already in 2016, regular exchanges took place between the DG ECHO Head of Office in Colombia and civil society organisations in Venezuela to monitor the human rights situation in the country. Between 2016-2018, following growing concern, DG ECHO field officers conducted regular monitoring missions to Venezuela. DG ECHO organised informal coordination meetings and information sessions in Caracas to raise awareness about the gravity of the situation in the country and share information from its field missions. Due to the denial of needs of the Venezuelan population by the Government and the UN Resident Coordinator (UNRC), it took a relatively long time for the humanitarian structure to be put in place, which was eventually triggered by DG ECHO funding and advocacy.³⁶⁵

The coordination of the response to the external dimension of the crisis is co-led by UNHCR and IOM from Panama, through a regional coordination platform (R4V), supported by national platforms in the host countries. The UN Secretary-General requested IOM and UNHCR to lead and coordinate the regional response to the crisis in 2018. The Regional Inter-Agency Coordination Platform was meant to serve as forum for coordination of the response across 17 countries of Latin America and the Caribbean.

At national level, the Regional Platform is complemented by local coordination mechanisms, put in place in Brazil, Chile, Colombia, Ecuador and Peru. Similarly, these structures are put in place at sub-regional levels too in the Caribbean, Central America & Mexico and the Southern Cone. The R4V platform leads the preparation of the Refugee and Migrant Response Plan for Venezuela (RMRP), published every year since 2019. The R4V platform works very closely with other regional coordination structures, such as the Quito Process, a technical multilateral forum which was set up

³⁶¹ DG ECHO (2021) '2021 Latin America and the Caribbean Humanitarian Implementation Plan'.

³⁶² See:

https://www.google.com/search?q=5w+OCHA+venezuela&ei=zljNY5e6LJWP8gKYrrHAAG&ved=0ahUKewiX2eHCwdv8AhWVh1wKRRhXDCgQ4dUDCA8&uact=5&oq=5w+OCHA+venezuela&gs_lcp=Cgxnd3Mtd2l6LXNlcuAQAzIFCCEQoAEyBQghEKABOggIABCABBcAwzoiCAAQhgMQsAM6BggAEByQHjofCAAQhgM6BAghEUB6BwghEKABEApkBAhBGAFKBAhGGABQ5wNY1gtgvwxoAXAAeACAAYkBiAHZBpIBAZkuMZgBAKABAcgBBcABAQ&scient=gws-wiz-serp

³⁶³ Scoping interviews (1).

³⁶⁴ See more details: <https://pahnal.org/>

³⁶⁵ ICF. 2022. Scoping interviews (1)

in 2018 by eleven countries (i.e. ten Latin American countries and the United States) to share information and agree on a common approach towards the crisis, the Lima Group (established in 2017) and the LAC RMD Coalition.

The coordination of the national response in each country varies across countries, with more advanced systems in place in certain countries like Colombia where, in addition to the cluster system, other mechanisms exist such as PANHAL, while others have only recently developed formal coordination mechanisms.

Table 55 provides an overview of the parallel coordination structures in place in the selected case study countries.

Table 55. Overview of existing coordination mechanisms in the case study countries between 2017-2021

Country	UN coordination mechanisms	R4V Platforms	Other coordination mechanisms
Panama	OCHA Regional Office for Latin America and the Caribbean	Regional R4V Platform; Sub-regional R4V Platform (for Panama, Costa Rica and Mexico)	LAC RMD Coalition
Venezuela	OCHA Country Office (8 clusters, 1 working group, 4 coordination hubs)	N/A	
Colombia	OCHA Country Office (7 clusters, 3 working groups, 15 local coordination teams)	National R4V Platform (GIFMM) + 11 local GIFMM platforms	UN Office for Disaster Risk Reduction; Humanitarian Donor Group (HDG)
Ecuador	OCHA's Humanitarian Advisory Team	National R4V Platform + 9 local platforms (GTRM)	UN Office for Disaster Risk Reduction

Source: ICF elaboration (2023) based on desk and field evidence

At EU level, the coordination structure for the response to the regional crisis evolved significantly over the evaluation period.

Until 2019, DG ECHO did not have an office in Venezuela, and the programmatic and operational responsibilities with respect to the Venezuela crisis laid with DG ECHO's office in Bogota. This changed in 2019, when the office in Venezuela was established and the management of the response to the crisis was taken on by the Regional Office in Panama. More widely, 2019 also saw the launch of the International Contact Group (ICG) with eight EU Member States – Italy, France, Portugal, the Netherlands, Sweden, Spain, Germany and the UK – and six LAC countries – Uruguay, Bolivia, Costa Rica, Ecuador, Panama and Chile). DG ECHO participates in the ICG meetings and leads the working group on humanitarian assistance (ICG-HA WG), which worked towards the development of the humanitarian architecture in Venezuela.

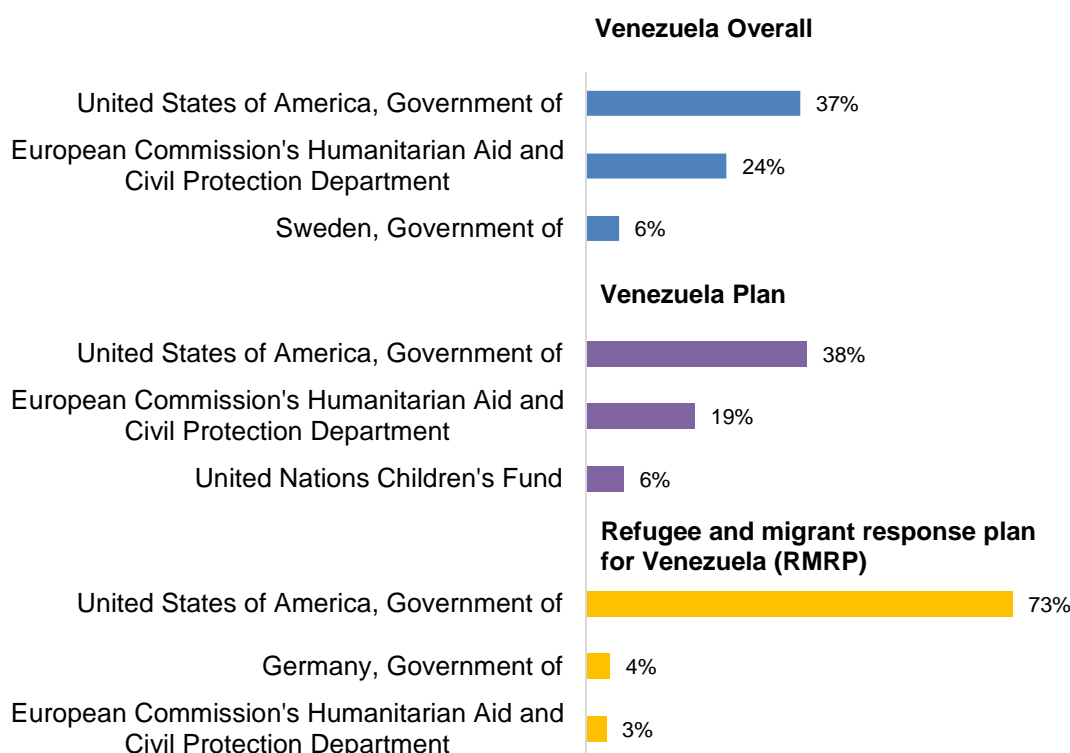
To understand DG ECHO's level of funding compared to other donors, the figure below provides an overview of the top three donors between 2019 and 2021 (where most of the funding happened). The top donor for Venezuela is the United States of America (37%) followed by DG ECHO (24%) and Sweden (6%). Results are similar when looking into the Venezuela and RMRP plans, where the United States of America were still the top donor (38% and 73% respectively). Although DG ECHO was the second highest donor for the Venezuela plan (19%) and the third one for the RMRP (3%), funding remained relatively little compared to the USA and the overall needs. UNICEF was the third highest donor for the Venezuela plan (6%) and Germany was the second highest for the RMRP (4%).

DG ECHO's contributions to coordination and its role in enhancing a coordinated approach to the crisis should be considered in relation to its funding.

Disclaimer regarding the reliability of OCHA Financial Tracking System (FTS) data

This report uses OCHA Financial Tracking System (FTS) data to analyse and compare humanitarian funding at global level, as this is the source that provides the highest level of comparability of such data. However, reporting to OCHA FTS is not mandatory and, as confirmed during the field missions, it is not consistently done by all donors and partners. As a result, data gaps and/or inconsistencies between OCHA FTS data and funding data provided directly by DG ECHO or other donors may exist. The figures reported by FTS on DG ECHO funding tend to be underreported, but still provide an indication.

Figure 123. Total share % of response plan/appeal funding per donor (2019-2021): top 3 donors



Source : UN OCHA FTS. ICF Analysis.³⁶⁶

A8.3.3.2 The nexus in the context of the Venezuela regional crisis

As for the nexus, the 2021 HIP for Latin America highlighted the challenges for achieving sustainable goals in terms of recovery, mostly due to the absence of – or lack of funding for – development actors in Venezuela and the difficulties to build national capacities and to ensure the maintenance and rehabilitation of infrastructure.³⁶⁷ Similarly, for countries in the region hosting Venezuelan migrants, the HIP 2021 highlighted the need to progress on the nexus as the magnitude of the challenges requires action far beyond humanitarian assistance, such as urgent need of support for the overwhelmed public services (e.g. education, health, documentation). The HIP also highlights how the EU cooperation instruments offer possibilities of complementarity with humanitarian assistance promoting the social and economic inclusion of Venezuelan refugees and migrants. Scoping interviews and desk research identified a range of opportunities to enhance

³⁶⁶ Although the evaluation period includes 2017-2018, the figure focuses on the years where humanitarian plans were implemented (2019-2021), ensuring more comparability from a donor perspective.

³⁶⁷ DG ECHO (2021) '2021 Latin America and the Caribbean Humanitarian Implementation Plan'

sustainability and long-term impact of funded actions, such as increasing local capacities, funding early recovery actions, and combining short-term assistance with longer-term programming to strengthen the nexus. Desk research conducted for this evaluation pointed to some cooperation between European Commission services (DG ECHO, DG INTPA and other services), and between them and civil society organisations, seizing some of these opportunities to progress on the nexus together.³⁶⁸

A8.3.4 Case study findings

A8.3.4.1 Relevance, Coherence, Effectiveness

Key findings

- DG ECHO and its partners showed continued efforts to contribute to enhancing coordination of the humanitarian response to the crisis, both in Venezuela and in the region. DG ECHO contributed, directly and indirectly, to enhancing coordination in the humanitarian response to the crisis, although to various degrees across the region. DG ECHO played an important role in advocating towards the humanitarian community to raise awareness and to mobilise support. Inside Venezuela DG ECHO's funding and advocacy triggered the presence of OCHA and the establishment of the Humanitarian Country Team (HCT) in 2019. At regional level, DG ECHO's advocacy efforts helped to mobilise and align donors and contributed to establishing the R4V platform.
- While the R4V platform, supported by DG ECHO, helped to raise awareness and align the international community, it also led to a duplication of coordination structures running in parallel with pre-existing mechanisms at regional and national level such as the OCHA ROLAC, National Humanitarian Network, Sustainable Development Cooperation Framework, and the clusters. This led to some inefficiencies and a lack of clarity amongst those intervening in the region. Especially in Colombia, where coordination mechanisms were well-established, the duplication of structures undermined efficient and effective coordination. This showed to be less problematic in Ecuador because coordination mechanisms were less advanced. Relative improvements were identified in the case study countries, especially inside Venezuela and, to a lesser extent, in Ecuador. Coordination of the migration crisis in Colombia remained fragmented and generally poor despite some improvements as a result of the dual coordination structure in place. DG ECHO and its partners contributed to the simplification of the coordination structures put in place through, for example, advocacy and funding a merged co-lead position to boost comprehensive and joint analysis and strategy
- At regional level, DG ECHO and its partners successfully aligned communication and messaging, aligning the humanitarian community through having adopted a regional approach, covering both its internal (i.e. the humanitarian crisis in Venezuela) and the external dimension (i.e. addressing the humanitarian needs linked to the migratory crisis that originated from the crisis in Venezuela).³⁶⁹
- At national and field level DG ECHO and its partners delivered a coordinated and complimentary response avoiding duplication, despite missed opportunities to actively exploit synergies and bridge gaps since coordination between DG ECHO, its partners and other donors often remained limited to information exchange instead.

RQ1: To what extent did DG ECHO (through its programming, advocacy and communication activities, and funded actions) contributed to enhancing coordination of the humanitarian response to the crisis, both in Venezuela and in the region? (EQ1, 4, 7)

During the evaluation period, DG ECHO showed continued efforts in contributing to enhancing the coordination of the humanitarian response within Venezuela, countries in the region and at regional level. This was especially important at the start of the evaluation

³⁶⁸ ICF. 2023. Desk Report.

³⁶⁹ DG ECHO's regional approach was designed around four main pillars: i. (vulnerable) Venezuelan migrants, ii. indigenous people (inside and outside Venezuela), iii. Venezuelan migrants in the Caribbean islands (where there were some additional protection risks), and iv. vulnerable people (including indigenous groups) in Venezuela. See EQ2 for further details on the regional approach adopted by DG ECHO.

period, when awareness about the crisis was still low and coordination mechanisms were either not yet established (in Venezuela) or not robust enough to respond to the large-scale displacements of Venezuelan migrants and refugees (in Ecuador, Colombia and Panama).

Overall assessment of humanitarian coordination in the context of the Venezuela regional crisis

The lack of preparedness for the unprecedented humanitarian crisis curbed a smooth and coordinated response at the start of the evaluation period. Several factors complicated the situation further, namely a lack of experienced humanitarian organisations across the region as well as initial difficulties to raise the visibility of the crisis and attract donors and humanitarian organisations, and build their capacity. Until 2019, the crisis was still perceived primarily as a regional issue, with limited attention from the international community but the 2019 Solidarity Conference in 2019 managed to shift the crisis into global focus, calling for increased coordination between host countries.³⁷⁰

Once the crisis was put on the international agenda, international humanitarian organisations started to arrive, with many of them establishing offices in Venezuela and/or other countries in the region in 2018-2019. The field missions showed, however, that it took time for the humanitarian organisations to get organised and deliver a coordinated and comprehensive response and that in the beginning, information exchange and awareness about each other's presence remained limited.

Stakeholders in the various countries reported improvements in terms of coordination across the three case study countries, although to various extents. Inside Venezuela, coordination improved with the establishment of the humanitarian architecture, the enhanced capacity of partners, and DG ECHO's constant efforts to bolster the humanitarian space. At regional level, the establishment of the R4V Platform showed valuable in raising awareness and mobilising the international community aligning efforts.. However, the establishment of the R4V platform at regional and national level also led to a duplication of coordination structures running in parallel with pre-existing mechanisms, such as the OCHA ROLAC and LAC RMD (regional level), National Humanitarian Network, Sustainable Development Cooperation Framework, and the clusters (national levels). This led to some inefficiencies, duplication of efforts and a lack of clarity amongst those intervening in Ecuador and especially in Colombia. Whereas in Ecuador, coordination structures were less advanced and not really operational, Colombia had a well-established system in place to coordinate the response to the internal conflict (COLSIT) and DRR. Also at regional level this created inefficiencies due to a lack of information exchange between the coordination mechanisms (i.e. siloed organisations). While the functioning of the R4V platform improved over time, it insufficiently took into account migration flows towards North America nor did it contextualise Venezuelans movements within broader and multi-nationality/status mixed migration movements in the region, reducing its relevance. **DG ECHO and its partners advocated for the simplification of coordination structures. Furthermore, across all case study countries room for improvement remained in terms of exploiting synergies and enhancing collaboration.** Among others, the performance of clusters could still be enhanced across the countries. Furthermore, the establishment of the R4V Platform, which helped to align the international community, also led to a duplication of coordination structures (parallel to pre-existing mechanisms). At field level, this translated in a myriad of meetings and channels for information exchange hindering effective coordination. Simplification of coordination structures was put forward as a priority by stakeholders regional and national level.

Field consultations in Panama, Venezuela, Colombia and Ecuador revealed that DG ECHO contributed, directly and indirectly, to enhanced coordination in the humanitarian response to the crisis, although to various degrees across the region. Whereas DG ECHO played a leading role in Venezuela and at regional level (Panama) in enhancing coordination, their impact in Ecuador and Colombia, as well as other countries in the region, was rather limited. This was especially the case in Ecuador, where DG ECHO had more indirect impact on enhancing coordination.³⁷¹ Several factors explained these differences, primarily the (pre-existing) humanitarian architecture in place across the various countries as well as its functioning and robustness, and available resources compared

³⁷⁰ OCHA. 2019. The Venezuela displacement crisis: A shift from regional to international in scope. Available on <https://reliefweb.int/report/venezuela-bolivarian-republic/venezuela-displacement-crisis-shift-regional-international>

³⁷¹ Field interviews in Colombia (DG ECHO: 1); Field interviews in Ecuador (DG ECHO: 1; Coordination mechanisms: 1); KII (DG ECHO: 1)

to other donors.³⁷² This section firstly presents a high-level overview of the ways in which DG ECHO contributed to coordination across the region to then analyse the specificities of DG ECHO's coordination role at regional level and in each of the countries where field missions were carried out.

DG ECHO contributed to coordination efforts through funding coordination mechanisms at regional (e.g. R4V Platform, OCHA ROLAC, LAC RMD Coalition) and national (e.g. Humanitarian Country Teams, Clusters, GTRM, GIFMM) levels. DG ECHO also funded NGOs acting as cluster co-leads (e.g. nutrition and food security co-leads in Colombia) to strengthen shared and coordinated leadership between UN, NGOs, and/or other key humanitarian actors. Several stakeholders highlighted the importance of DG ECHO's support to these mechanisms. Despite this, many stakeholders argued that by supporting the R4V platform, DG ECHO had indirectly contributed to the inefficiencies that the double coordination mechanism of R4V vis a vis pre-existing coordination structures had generated.³⁷³ A few stakeholders also mentioned DG ECHO's funding of specific coordination activities which, while limited, helped to enhance coordination.³⁷⁴

- DG ECHO contributed to enhanced coordination through its **advocacy and communication efforts**. Compared to other donors, DG ECHO's main contribution to enhancing coordination related to its advocacy efforts to mobilise funds and, albeit to a lesser extent, enhance donor coordination, and promote field coordination (with and between partners, and with national authorities). Advocacy took place at various levels:
- At international and EU level, DG ECHO played a key role in raising the visibility of the crisis among EU institutions to mobilise EU funding.³⁷⁵ Within the international community, DG ECHO had a co-leading role, together with UNHCR and IOM, in the first Solidarity Donor Conference (2019), which contributed to further raising visibility of the crisis, strengthening political support and increasing funding to support a regional response.³⁷⁶ While DG ECHO was very vocal about advocating for support, pressure also came from iNGOs and other humanitarian organisations. DG ECHO Field Office Panama stated that they supported the response to the crisis from the start, in an uninterrupted manner, with a robust budget as a regional donor, trying to advocate for increased support, while acknowledging that improvements in coordination could not be exclusively attributed to DG ECHO's efforts.³⁷⁷
- At national level, advocacy was done by DG ECHO Field Offices. Field evidence reveals that DG ECHO's advocacy efforts contributed to key improvements observed during the evaluation period in various countries, notably the widening of the humanitarian space in Venezuela, and the simplification of coordination structures in other countries in the region.³⁷⁸ Inside Venezuela, where low visibility was required due to the political context, DG ECHO also played an important role in connecting partners and enhance information

³⁷² Desk Report; Portfolio analysis; Field interviews in Colombia (DG ECHO: 1; Other donors: 1); Field interviews in Ecuador (DG ECHO: 1; Coordination mechanisms: 1). Both in Ecuador and Colombia DG ECHO's financial contributions were significantly smaller in terms of funding compared to other donors, in particular to the US.

³⁷³ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 2); Field interviews in Venezuela (DG ECHO partners: 3); Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 5; Other donors: 2); Field interviews in Ecuador (DG ECHO partners: 4); KIIs (DG ECHO: 1).

³⁷⁴ Field interviews in Venezuela (DG ECHO partners: 2).

³⁷⁵ For instance, DG ECHO hosted a field mission for MEPs at the beginning of the crisis under the guise of visiting development projects in the region. This raised visibility of the humanitarian aspects of the crisis in Europe and triggered the first round of EU funding (Source: Field interviews in Panama (DG ECHO: 1)).

³⁷⁶ Field interviews Panama (DG ECHO: 2); OCHA. 2019. The Venezuela displacement crisis: A shift from regional to international in scope. Available on <https://reliefweb.int/report/venezuela-bolivarian-republic/venezuela-displacement-crisis-shift-regional-international>

³⁷⁷ Field mission Panama (DG ECHO: 2)

³⁷⁸ Outside Venezuela, DG ECHO has been very articulate from the beginning about the need to clearly define roles and responsibilities of the various existing coordination mechanisms and, where possible, simplify coordination structures, following the establishment of the R4V platforms at national level which duplicated existing coordination structures (Source: Field interviews in Venezuela (DG ECHO partners: 7).

exchange and communication among them to foster collaboration, learning and complementarity, based expertise of the partners.

At **programming level**, DG ECHO's regional approach to respond to the crisis also contributed to enhancing regional coordination given the regional dimension of the crisis and the fact that Venezuelan refugees and migrants were facing similar situations in the countries across the region.³⁷⁹ Overall, stakeholders deemed this a relevant strategy and believed that the regional response had facilitated a coordinated and non-fragmented response.³⁸⁰ Despite this, a few partners and coordination leads raised concerns that country-specific issues had not always been adequately reflected in DG ECHO's HIPs.³⁸¹

Concerning coordination with other humanitarian actors at programming stage, the field missions showed positive aspects of DG ECHO's strategy, but also shortcomings:

- While DG ECHO consulted partners and coordination mechanisms in the development of the HIPs through online surveys and national and subregional consultations, stakeholders reported that they could have been more actively involved through formal coordination. According to interviewees, DG ECHO used information provided by the partners (as well as collected during the monitoring missions) to develop the HIPs and in some instances, meetings were organised to discuss specific topics of interest (e.g. meeting with Oxfam in Colombia on protection of IDPs) and/or to discuss the needs of the partners (e.g. meeting with Mercy Corps to discuss the level of support needed in Venezuela), but in informal manners³⁸²
- In terms of alignment with other donors, DG ECHO could not integrate the RMRP/HRP into the HIPs due to a mismatch in publication timelines between the two (i.e. the HIP was published before the RMRP/HRP).³⁸³ However, the HIPs encouraged partners to align actions with the RMRP and participate in coordination mechanisms. Stakeholders in Colombia and Ecuador revealed that there was limited or no dialogue between donors and passive participation in the cluster meetings, and in Venezuela, views were mixed in terms of programme coordination between DG ECHO and other donors.
- Despite the lack of active programming coordination between donors, no instances were reported in terms of duplication of DG ECHO funded actions or programmes at national or regional level with other donors, or government programmes. A few stakeholders³⁸⁴ explicitly mentioned the complementarity between DG ECHO funded actions and government programmes across the region.

DG ECHO significantly contributed to enhancing the coordination at regional level, especially through advocacy and by strengthening existing coordination mechanisms or establishing new ones as the crisis unfolded. Various stakeholders consulted in Venezuela and Panama appreciated DG ECHO's timely and flexible response, considering the limited time available to develop coordination in onset crises. As highlighted by one of the interviewees *"DG ECHO played*

³⁷⁹ Field interviews Panama (DG ECHO: 2; Coordination mechanisms: 2); Field interviews in Colombia (DG ECHO:1; DG ECHO partners: 8; National and local authorities: 1; Other donors: 2); Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 4); Field interviews in Venezuela (DG ECHO partners: 7; Coordination mechanisms: 1); KIIs (DG ECHO: 2).

³⁸⁰ Field interviews Panama (DG ECHO: 1; Coordination mechanisms: 2). This was also shared by multiple partners and coordination mechanisms consulted in Colombia and Ecuador, and KIIs in Panama and Venezuela.

³⁸¹ Field interviews in Panama (DG ECHO: 1); Field interviews in Venezuela (DG ECHO: 2); Field interviews in Ecuador (DG ECHO partners: 2; Coordination mechanisms: 1); Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 1; Coordination mechanisms: 1).

³⁸²Field interviews in Venezuela (DG ECHO partners: 4; Coordination mechanisms: 1); Field interviews in Ecuador (DG ECHO: 1; Coordination mechanisms: 1); Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 1; Other donors: 1); Field interviews in Panama (Coordination mechanisms: 3).

³⁸³ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 1).

³⁸⁴ Field interviews in Venezuela (DG ECHO partners: 2); Field interviews in Colombia (DG ECHO partners: 3; Coordination mechanisms: 1); Field interviews in Ecuador (Other donors: 1; Coordination mechanisms: 2; DG ECHO partners: 3); Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 2).

*an important role in strongly improving regional coordination, relatively quick. At the beginning it was a big mess until the humanitarian community got organised. As often is the case with humanitarian crises, they were unprepared.*³⁸⁵

In terms of **advocacy**, the Solidarity Donor Conference – in which DG ECHO played a prominent role – was perceived as the biggest achievement during the evaluation period. Along with raising the visibility of the crisis and mobilising the donor community, it also contributed to increased alignment between donors and other EU stakeholders, including DG INTPA.³⁸⁶ DG ECHO's regional advocacy efforts during the evaluation period went beyond their role as co-leader of the Solidarity Donor Conference; already before its first edition (held in 2019), DG ECHO's Regional Office in Panama raised awareness about the crisis towards DG ECHO HQ presenting the humanitarian needs during a visit in Brussels.³⁸⁷ DG ECHO Regional Office in Panama also managed to escalate the message to the UN through OCHA ROLAC, circumventing national UN agencies inside Venezuela, who did not recognise the crisis.³⁸⁸ Finally, DG ECHO supported the Quito Process through the Group of Friends of Quito Process together with other donors, including USA and EU Member States, to facilitate information exchange and good practices.³⁸⁹

Stakeholders consulted in Panama involved in the regional coordination of the response were also appreciative of DG ECHO's support to the **R4V Platform** which, in their view, had helped raise the visibility of the crisis.

The role of the R4V platform in the coordination of the response at regional level

The field missions revealed contrasting opinions about the R4V Platform and national platforms. The platform facilitated the alignment of messaging across the region and, according to national R4V Platforms consulted, it also facilitated information exchanges between R4V regional and the national offices, who received steer from regional level.³⁹⁰ Despite its valuable role in terms of advocacy, DG ECHO Field Offices and various coordination leads consulted expressed concerns about the overlaps of the R4V Platform and pre-existing coordination mechanisms.

By supporting the regional R4V platform (through funding and advocacy), DG ECHO indirectly contributed to the improvements to regional coordination identified during the evaluation period (see box above). However, stakeholders clarified that these improvements were the result of a collective effort made by donors and the entire humanitarian community and could not be exclusively attributed to DG ECHO.³⁹¹

Regarding the concerns around the duality of coordination structures, DG ECHO was reportedly very vocal on the need for simplification to avoid overlap. According to DG ECHO staff consulted, they raised concerns from the start, advocating towards UNHCR/IOM to define terms of reference for each of the existing structures and how they would engage.³⁹² Despite this, one stakeholder consulted in Panama explicitly regretted DG ECHO's significant funding to the regional R4V Platform instead of financing existing sector lead agencies/organisations to expand their regional and national sector coordination capacities to respond to the new crisis.³⁹³

As regards programming coordination, DG ECHO's Regional Office engaged in regular dialogues about the priorities that should be reflected in the HIPs with other coordination mechanisms, donors and partners.³⁹⁴ Stakeholders also acknowledged DG ECHO's efforts to fill in funding gaps in the response to the crisis and seek complementarity with respect to what OCHA was doing at regional

³⁸⁵ KIIs (DG ECHO Field: 3; DG ECHO HQ: 1).

³⁸⁶ Field interviews in Panama (DG ECHO:1; Coordination mechanisms: 2).

³⁸⁷ Field interviews Panama (DG ECHO: 1).

³⁸⁸ Field interviews Panama (DG ECHO: 1; Coordination mechanisms: 1).

³⁸⁹ Field interviews Panama (DG ECHO: 1).

³⁹⁰ Consultations with national R4V platforms in Colombia and Ecuador (Field interviews) and Peru (KII).

³⁹¹ Field interviews in Panama (DG ECHO: 2; Coordination mechanism: 1); KIIs (DG ECHO: 2)

³⁹² Field interviews in Panama (DG ECHO: 1).

³⁹³ Field interviews in Panama (Coordination mechanisms: 1).

³⁹⁴ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 2).

level. As a result of this, no misalignment with the RMRP was identified or reported by stakeholders consulted.

In Venezuela, while stakeholders acknowledged DG ECHO's efforts to deliver a comprehensive and coordinated response, views were mixed regarding the actual impact of the response and to which extent the coordinated response delivered can be attributed to DG ECHO. Some stakeholders stated that DG ECHO's role was pertinent, especially at the start, mobilising the donor community and promoting a complementary response.

Stakeholders consulted in Venezuela and Panama admitted that it took the international community, including DG ECHO, some time to qualify the situation in Venezuela as a humanitarian crisis.³⁹⁵ One DG ECHO staff member consulted highlighted the hesitant attitude of the UN Resident Coordinator to start the procedure for activating the clusters,³⁹⁶ crucial to deliver a coordinated humanitarian response.³⁹⁷ The lack of humanitarian architecture in the country delayed a coordinated and comprehensive humanitarian response. Against this background, DG ECHO took a leading role in mobilising the humanitarian community and kicking off activities, aiming to deliver a coordinated and comprehensive response. Several stakeholders highlighted the complementary approach adopted by donors, with DG ECHO being praised for its flexibility, knowledge and presence on the ground.³⁹⁸

Until 2019, strong efforts were required from the DG ECHO Field Office in Colombia to facilitate a response inside Venezuela.³⁹⁹ The absence of an OCHA country office and a DG ECHO office in Venezuela limited the extent to which DG ECHO could effectively enhance coordination. During that time, DG ECHO's main contributions related to mobilising the humanitarian community, attracting funding through advocacy and awareness raising among the international community.⁴⁰⁰ Even inside Venezuela, where low visibility was required throughout the evaluation period,⁴⁰¹ DG ECHO consistently worked towards improving the situation 'behind the curtains', with stakeholders in Venezuela claiming that DG ECHO had a leading role in terms of advocacy in the country.⁴⁰² DG ECHO partners and coordination mechanisms consulted were also appreciative of DG ECHO's advocacy efforts towards the Resident Coordinator and the wider humanitarian community, as well as its funding, which helped to activate the clusters and mobilise other donors.⁴⁰³

In this sense, the importance of the monitoring missions in Venezuela between 2016 and 2018 was mentioned by DG ECHO field office and a few partners.⁴⁰⁴ DG ECHO's regular visits allowed them to get a better understanding of the situation and helped them to advocate towards the international community.

DG ECHO also funded actions that supported advocacy and coordination efforts. Although only 2% of total funding to Venezuela between 2019–2021 was specifically allocated to coordination⁴⁰⁵ DG ECHO funded actions that were crucial for coordination. At the start of the evaluation period, DG ECHO funded OCHA through UNDRR projects aiming to integrate the coordination mechanism in the

³⁹⁵ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 1); KIIs (DG ECHO: 2).

³⁹⁶ Field interviews in Panama (DG ECHO: 1).

³⁹⁷ What is a Cluster Approach? UN OCHA, Humanitarian Response. 2020. Available at <https://www.humanitarianresponse.info/en/about-clusters/what-is-the-cluster-approach>

³⁹⁸ Field interviews in Venezuela (DG ECHO partners: 4; Coordination mechanisms: 2).

³⁹⁹ Field interviews in Panama (DG ECHO: 1); KIIs (DG ECHO Field:3; DG ECHO HQ: 1).

⁴⁰⁰ Field interviews in Venezuela (DG ECHO partners: 5).

⁴⁰¹ Despite DG ECHO's strong advocacy towards the international community, the political sensitivities surrounding humanitarian assistance in Venezuela forced humanitarian actors to limit the visibility of the actions throughout the evaluation period and required DG ECHO to operate discretely.

⁴⁰² Field interviews in Venezuela (DG ECHO partners: 9). As stated by one DG ECHO partner: "Without DG ECHO's advocacy, the coordination mechanisms in Venezuela would not exist. They were fundamental in how the situation evolved. Among the donors, DG ECHO is the one encouraging partners to coordinate, while also funding some coordination activities." As mentioned in another interview: "the only coordination body in Venezuela was DG ECHO, and meetings were held at the EU delegation until 2019."

⁴⁰³ Field interviews in Venezuela (DG ECHO partners: 4; Coordination mechanisms: 2).

⁴⁰⁴ Field interviews in Venezuela (DG ECHO partners: 5)

⁴⁰⁵ ICF (2023). Analysis of OCHA FTS data.

country. One of the first DG ECHO funded actions allowed UNICEF to collect data on malnutrition rates in the country, which DG ECHO used draw attention to the crisis. As of 2019, DG ECHO supported the Humanitarian Country Team (HCT) in Venezuela and other coordination mechanisms.⁴⁰⁶

Despite limited dialogue and a lack of coordination between donors, DG ECHO managed to deliver complementary response funding actions that were not funded other donors in Venezuela. Interviewees explained that this was because the needs were so high that all actions were welcomed and risk for duplication was minimal.⁴⁰⁷ DG ECHO partners and coordination mechanism leads also testified that DG ECHO's funded actions remained complementary to the Venezuelan government over the evaluation period.⁴⁰⁸

In Colombia, DG ECHO played a less prominent role compared to regional contributions and inside Venezuela, both in terms of funding (compared to the needs) and in terms of advocacy support.⁴⁰⁹ Although DG ECHO was the second largest donor in the context of the migration crisis in Colombia, EU funding represented only a fraction compared to that of the US. This put the US in a unique position towards the Colombian government, which limited DG ECHO's role in enhancing coordination.⁴¹⁰

Despite these limitations, DG ECHO contributed to enhancing coordination in Colombia by (i) supporting the clusters, the GIFMM and the sectoral working groups,⁴¹¹ (ii) carrying out (numerous) monitoring missions which allowed them to acquire a good understanding of the needs and funding gaps, (iii) leading the Humanitarian Donors Group (*Grupo de Donantes Humanitarios*) together with the US, and (iv) advocating for a simplification of coordination structures. Partners consulted in Colombia highlighted DG ECHO's leading role as regards advocacy towards the national government on specific issues, the main one being humanitarian transport.⁴¹²

Room for further enhanced donor coordination in the Humanitarian Donors Group (HDG)

DG ECHO's leading role in the HDG was positively highlighted by several stakeholders consulted in Colombia, including DG ECHO partners and other donors. US representatives explained that while the group was theoretically co-led by DG ECHO and the US, DG ECHO had taken on a comparatively bigger role, which was highly appreciated by the US counterparts. While the group provided an opportunity for the main donors to gather regularly and discuss key issues and needs in the country, it was pointed out that the meetings held during the evaluation period had mainly focused on providing a situational analysis for other donors, rather than on discussing potential synergies and collaboration.⁴¹³

The issues stemming from the double coordination structure (i.e. HCT – led by OCHA – for the response to needs linked to the internal armed conflict and natural disasters, and GIFMM – led by UNHCR and IOM – to address the needs of refugees and migrants in the context of the Venezuelan crisis) were brought up by most stakeholders consulted in Colombia.⁴¹⁴ In the view of many, this

⁴⁰⁶ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 1)

⁴⁰⁷ KIIs (DG ECHO Field: 3; DG ECHO HQ: 1).

⁴⁰⁸ Field interviews in Venezuela (DG ECHO partners: 7; Coordination mechanisms: 2).

⁴⁰⁹ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 3; National and local authorities: 1).

⁴¹⁰ Field interviews in Colombia (DG ECHO: 1; Other donors: 1). US representatives in the country admitted that the Government of Colombia would sometimes reach out to them directly to discuss specific topics rather than relying on existing coordination mechanisms.

⁴¹¹ DG ECHO supported the humanitarian coordination architecture through funding OCHA and the GTRM through funding the R4V Platform. DG ECHO also supported the cluster and GTRM through participating in the meetings, despite their rather passive attitude (non-financial support).

⁴¹² Field interviews in Colombia (DG ECHO: 2; DG ECHO partners: 7; Coordination mechanisms: 2; National and local authorities: 1). The legal uncertainty surrounding the transport of irregular migrants by transport companies generated problems for organisations carrying out humanitarian transport in the country, with buses carrying Venezuelan migrants being blocked by national authorities during the evaluation. In this context, DG ECHO strongly supported its partners in their advocacy efforts.

⁴¹³ Field interviews in Colombia (Other donors: 1).

⁴¹⁴ Field interviews in Colombia (DG ECHO: 1; DG ECHO partners: 12; National and local authorities: 1; Coordination mechanisms: 2; Other donors: 2).

complicated structure generated inefficiencies (as most organisations were part of both clusters and sectors) and was not well adapted to address the *doble/triple afectación* phenomenon,⁴¹⁵ which became increasingly common during the evaluation period. Against this background, DG ECHO, with the support of other coordination leads, advocated strongly for the simplification of the coordination structure in Colombia by combining both mechanisms. In an attempt to achieve this, a back-to-back mechanism was set up in the last years of the evaluation period, whereby cluster and sector members held back-to-back meetings to discuss, respectively, issues related to COLSIT (armed conflict and natural hazards) and VENSIT (migration crisis). Further attempts at streamlining coordination in the country were made in 2022, following advocacy efforts of DG ECHO and coordination leads, by establishing a National Coordination Team that would serve as bridge between the HCT and the GIFMM. The new coordination scheme entailed the creation of the co-lead position (specific individuals from UN Agencies or INGOs) to connect the clusters and the sector working group covering the same topic.⁴¹⁶

In Ecuador, the DG ECHO only played a minor role in enhancing coordination in in the country. Coordination of the national response to the crisis in Ecuador happened through the national and local R4V platforms (*Grupo de Trabajo para Refugiados y Migrantes* or **GTRM**), which brought together UN agencies, NGOs and civil society. Until 2022, donors were prevented from participating in the GTRM. Following advocacy of DG ECHO Regional Office and the EU Delegation in Ecuador, DG ECHO and other donors were accepted as observers in the GTRM in 2022, hence limiting their role in coordination under the platform.⁴¹⁷ Moreover, feedback from stakeholders in Ecuador suggests that the meetings held under the umbrella of the GTRM allowed for information exchange among donors, but did not translate into effective coordination.⁴¹⁸

DG ECHO's main contributions to coordination to the response in Ecuador were mostly linked to the financial support of UNHCR's information management role (e.g. border monitoring),⁴¹⁹ and its efforts to raise awareness about the migration crisis, although both remained limited.⁴²⁰ One of the main factors that explained the lower level of proactiveness in Ecuador as compared other case study countries was the limited the resources available and DG ECHO's willingness to avoid duplicating efforts of UNHCR and IOM, coordinating the response in Ecuador.⁴²¹

RQ2: How successful were DG ECHO and its partners in ensuring a coordinated and comprehensive response to the Venezuela regional crisis (in Venezuela and the region)? (EQ4)

Although many stakeholders agreed that DG ECHO and its partners managed to enhance field coordination over the evaluation period, they also identified room for further improvement. According to DG ECHO and coordination leads consulted, despite the advances observed during the evaluation period, coordination became increasingly complex as a result of the worsening of the crisis in Venezuela and subsequent increase in the number of people in need, humanitarian actors and coordination mechanisms and meetings.⁴²²

Regarding field coordination across the region, one of the main successes identified during the field missions is the adoption of a harmonised reporting system with clear indicators across multiple countries, followed by partners and donors in the region. In contrast, interviewees at regional level reported some missed opportunities to further exploit synergies between partners across different

⁴¹⁵ Situations in which a Venezuelan migrant was affected by the internal conflict and/or national disasters.

⁴¹⁶ Field interviews in Colombia (DG ECHO staff, 5 framework partners, 2 coordination mechanisms). For instance, NRC and DRC took up the role of colliders within the National Protection Coordination Team (Equipo de Coordinación Protección) to connect the Protection cluster (HCT) and sector working group (GIFMM).

⁴¹⁷ In terms of funding, DG ECHO did not directly finance the GTRM in Ecuador either, so the only financial support to the platform was indirectly through the funding of the regional R4V platform.

⁴¹⁸ Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 3; Coordination mechanisms: 1; Other donors: 1).

⁴¹⁹ Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 1).

⁴²⁰ Field interviews in Ecuador (DG ECHO: 1; DG ECHO partners: 2; Coordination mechanisms: 1).

⁴²¹ Field interviews in Ecuador (DG ECHO: 1).

⁴²² Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 2).

countries. In their view, rather than multi-country actions that duplicated actions in various countries, more attention should have been given to the design of integrated regional projects to ensure a real regional response. Room for further synergies between partners with regional capacities and working on related sectors was also observed.⁴²³ Similarly, despite DG ECHO's efforts to encourage partners to integrate actions, DG ECHO staff consulted argued that coordination and information exchanges between different consortia remained challenging.⁴²⁴

Good practice

According to DG ECHO Field staff, some consortia managed to deliver a coordinated response and exploit synergies by, for instance, establishing a referral system among partners for beneficiaries to ensure a more holistic approach.

In Colombia and Ecuador, improvements at field level were reported over the course of the evaluation period, especially at local level, where DG ECHO partners collaborated extensively both formally (through formal coordination mechanisms, i.e. the local R4V platforms) and informally (e.g. WhatsApp messages). However, coordination in Colombia remained relatively poor as a result of the dual coordination structure put in place, which proved to be particularly challenging because of its pre-existing operational mechanisms. The establishment of the GIFMM in Colombia, undermined efficient and effective coordination. Coordinating the response to VENSIT, COLSIT and DRR through separate coordination mechanisms proved to be resource intensive (e.g. participating in various meetings, double/triple reporting and monitoring) and curbed effective coordination, creating gaps in the response due to limited information exchange at national level (i.e. siloed structures). The parallel structure led to serious ramifications related to mixed migration issues and the doble/triple afectación phenomenon

In Ecuador, no real functional mechanisms were in place before the establishment of the GTRM. The GTRM reportedly helped to strengthen the relationship between humanitarian organisations in the field. It facilitated information exchanges, offering partners a platform to connect, exchange experiences, foster peer learning and capacity building. It helped partners understand who was doing what where, facilitating coordination on a day-to-day basis.⁴²⁵ However, coordination through the platform at national level remained mostly limited to information exchange and could be enhanced in terms of efficiency. While the GTRM helped to respond to the specific needs of Venezuelan refugees and migrant,⁴²⁶ the double coordination structure also posed challenges in Ecuador for similar reasons as in Colombia, especially for smaller partners with limited resources. Both in Colombia and Ecuador interviewees expressed to be in favour of a simplification of coordination structures.⁴²⁷

At local level, coordination among DG ECHO partners seemed to work best, according to interviewees. DG ECHO partners collaborated through the local R4V platforms and the “*mesas técnicas*” set up as part of the local R4V platforms. Although the quality of coordination through the local R4V platforms varied across regions,⁴²⁸ DG ECHO partners' feedback suggests that they generally contributed to field coordination by facilitating information exchanges and allowing humanitarian organisations who was operating, where. For instance, in Colombia - where both new

⁴²³ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 1); KIIs (DG ECHO: 1). It was suggested, for instance, that UNICEF and WFP could work on nutrition and food security together.

⁴²⁴ KIIs (DG ECHO: 1).

⁴²⁵ Field interviews in Colombia (DG ECHO partners: 10; national authorities: 1; Coordination mechanisms: 2); Field interviews in Ecuador (Coordination mechanism: 2, DG ECHO partners: 2, Other donors: 1); DG ECHO in Ecuador voiced appreciation for UNHCR and IOM for leading and supporting DG ECHO partners in implementing a coordinated response.

⁴²⁶ In Colombia, given the different issues faced by Venezuelans compared to other individuals affected by the national conflict. In Ecuador, because there was no structure in place to be scaled up.

⁴²⁷ Field interviews Panama (DG ECHO: 1; Coordination mechanism: 1); Field interviews Colombia (DG ECHO: 1).

⁴²⁸ Field missions in Colombia (DG ECHO: 1; DG ECHO partners: 6); Field missions in Ecuador (DG ECHO partners: 3). Some local platforms were more developed and active than others. For example, in Ecuador, GTRM Quito revealed to be less developed compared to GTRM Lago Agrio and Tulcán. Similarly, in Colombia, several stakeholders explained that the GIFMM Norte de Santander (one of the first local GIFMMs set up in the country) was particularly active.

and old partners needed time to adapt to the specific context of the crisis and find where they could add most value at the beginning of the evaluation period – the GIFMM helped newly arrived partners to identify new areas of intervention where the needs were high and local presence low.⁴²⁹

The field visits for the case study confirmed effective collaboration between local implementing partners in Colombia and Ecuador also outside the local R4V platforms, especially in the border areas, where partners managed to deliver a complementary and coordinated response.⁴³⁰ Some partners in Colombia reported that they managed to collaborate well at local level, while others stated that collaboration depended on individuals and competition between UN agencies existed. Coordination at local level was less formalised and structured compared to the national level, and happened in common coordination spaces, referral systems among implementing partners or through “*mesas locales*”.⁴³¹

Collaboration between the national and local R4V Platforms took place in the case of challenging situations that were difficult to address at local level only. In some cases, implementing partners escalated issues through the local R4V platforms to the national platforms, so they could address it at a political level.

Good practice example of coordination between DG ECHO and its partners

In Tulcán (Ecuador), UNICEF managed – through their local implementing partners HIAS and supported by COOPI – an Integrated Support Space, financed by DG ECHO. In 2019, specific needs were identified that required an integrated multi-sectoral response provided by humanitarian organisations in collaboration with national authorities. Through the Space, UNICEF and its partners offered assistance to people in need, such as legal services, including support with documentation and application procedures, as well as safe spaces for children, psychological support and baby kits. DG ECHO partners reported that the space proved to be highly successful. Through the creation of a shared space, referral between organisations and services was facilitated.

Coordination with public authorities worked better at local level where local authorities were invited to coordination meetings, which happened through the “*mesas locales*”, bringing together local authorities and humanitarian organisations. In Ecuador, public institutions did not participate in the GTRM, but information exchange happens indirectly through UNHCR and UNHCR's network. In Colombia, it was reported that GIFMM collaborated very well with national authorities during the evaluation period, especially thanks to its close relationship with *Gerencia de Fronteras*, a governmental body that the previous Government set up to address the migration crisis. The situation changed in 2022 following the change in the national government in Colombia and the subsequent disappearance of this institution.⁴³²

Inside Venezuela, DG ECHO and its partners faced more difficulties delivering a coordinated and comprehensive response at national level compared to other countries in the region, mostly due to the lack of experience of partners, limited humanitarian space in the country and the wary attitude of the Venezuelan government towards humanitarian agencies, especially international NGOs.⁴³³ DG ECHO partners in Venezuela reported that humanitarian access improved but remained challenging throughout the evaluation

⁴²⁹ Field interviews in Colombia (DG ECHO partners: 4).

⁴³⁰ Field mission Ecuador (DG ECHO, 3 coordination mechanisms, 3 partners)
Field mission Colombia

⁴³¹ “*Mesas locales*” are coordination mechanisms bringing together humanitarian organisations at field level (UN-agencies, iNGOS or NGOs) and national authorities.

⁴³² Field interviews in Colombia (DG ECHO partners: 2; Coordination mechanisms: 2; National and local authorities: 2). Since then, humanitarian actors have struggled to collaborate with national authorities as there is no clear point of contact anymore hindering coordination. Coordination remains mainly limited to information exchange between humanitarian actors and national authorities.

⁴³³ Field interviews Venezuela (DG ECHO Partners: 5; Coordination mechanisms: 3)

period. This also created donor uncertainty, which made it hard for partners to plan their response as funding might stop at any given moment.

Thanks to DG ECHO's efforts to raise the visibility of the crisis and activate the clusters, partners inside Venezuela were able to connect and become aware of each other's presence. At the start, coordination between implementing partners was limited, due to the lack of awareness of each other's presence and each working with their own mechanisms.⁴³⁴ Furthermore, the political polarisation and the politicization of aid led to a lack of trust between partners (i.e. fear that partners might be "affiliated" to the Government). This hindered smooth information exchange between partners in cluster meetings. This was particularly true in for the Protection cluster.⁴³⁵

DG ECHO's **monitoring missions in Venezuela** between 2016 and 2018 allowed partners to get a better understanding of the situation on the ground and have a comprehensive overview of the partners active in the country.⁴³⁶ Before, this remained challenging because of the low profile that humanitarian actors were forced to maintain. DG ECHO's monitoring missions and communications efforts also helped implementing partners on the ground get to know each other, connect and exchange information, in so called "shared spaces for dialogue"⁴³⁷ and the clusters or working groups. Enhanced information exchange translated into stronger capacity and increased knowledge in some cases.⁴³⁸ Partners managed to better identify and address gaps in the response and avoid duplication. However, a few partners mentioned that information exchange and dialogue did not automatically translate into a coordinated response.

More broadly, although various coordination mechanisms were put in place to coordinate the response in the country (including clusters and round tables), partners stated that most coordination at local level still happened informally, as was the case in Colombia and Ecuador. Stakeholders confirmed that clusters improved coordination and that there is also inter-cluster coordination, but some flagged that there was no consistency in terms of attendance especially in large coordination meetings.⁴³⁹ Despite limited constructive cooperation between partners, many of the partners managed to avoid overlap, delivering projects in line with their own expertise, as was the case in Colombia and Ecuador.

Performance of the clusters inside Venezuela

Stakeholders consulted in Venezuela had mixed views on the quality of the cluster meetings and the extent it contributed to successful coordination between partners on the ground. On the one hand, the clusters facilitated contact between partners at national and local level and helped strengthen the relationship between UN agencies and local partners as well as with the national and local authorities, which also helped to improve access and local coordination. On the other hand, partners doubted the whether the cluster meetings were effective as it is often hard to collaborate (e.g. turnover of participants, limited to information exchange) and synergies could be better exploited. In addition, the lack of trust hindered information exchange and hence effective coordination.⁴⁴⁰

RQ3: What were the main challenges and enabling factors affecting cooperation between humanitarian actors in Venezuela and in the region? How did they evolve over the evaluation period? (EQ4, 6)

The field missions revealed the following **enabling factors** that enhanced cooperation between humanitarian actors in Venezuela and the region between 2017-2021:

- **DG ECHO's active engagement with partners:** stakeholders appreciated DG ECHO's proximity with their partners and the community through e.g., monitoring visits, regular

⁴³⁴ Field interviews Venezuela (DG ECHO partners: 5; Coordination mechanism: 1)

⁴³⁵ Field interviews. Venezuela (DG ECHO field: 1)

⁴³⁶ Field interviews Venezuela (DG ECHO partners: 5)

⁴³⁷ Field interviews Venezuela (DG ECHO partners: 3)

⁴³⁸ Field interviews Venezuela (DG ECHO partners: 1)

⁴³⁹ Field interviews Venezuela (DG ECHO partners: 1)

⁴⁴⁰ Field interviews Venezuela (DG ECHO partners: 5)

meetings and discussions. Partners explicitly mentioned that they appreciated DG ECHO's openness and guidance, claiming that DG ECHO was approachable but also open to learn from its partners.⁴⁴¹

- **DG ECHO's position as a donor:** partners relied on DG ECHO to raise challenges with OCHA and escalate it to the political level, and vice versa.⁴⁴² Despite its humanitarian mandate, DG ECHO found itself in a strategic position where it could lever other EU institutions and could exercise its influence as a reference donor and advocate towards the governments and other donors.
- **DG ECHO's funding and advocacy:** DG ECHO's funding of the coordination mechanisms and their advocacy towards other donors to encourage them to support and participate in these coordination mechanisms were highlighted as enabling factors. The establishment of coordination architecture (in Venezuela and Ecuador) or its strengthening also allowed partners to connect with each other and enhance their understanding of the situation. The latter resulted in enhanced capacity and resulted in better geographical complementarity in delivering the response.⁴⁴³
- **Shared implementing partners:** some framework partners shared the same implementing partners, which facilitated coordination (e.g. UNICEF and UNHCR both worked with HIAS in Ecuador).

Stakeholders expressed mixed views on the role of the R4V Platform and found that it both facilitated coordination and complicated it. There was consensus among stakeholders that the R4V Platform facilitated a regional approach in response to the crisis, bringing the international community together to discuss common issues across the region in the context of the Venezuelan crisis. The Platform accelerated donor mobilisation, getting them all on one line, while also contributing to aligned messaging and communication, adopting a common narrative across the region. The national and local platforms across the countries in the region also facilitated field coordination as it helped organisations understand who was doing what where, as already mentioned under RQ2.

However, the R4V Platform also led to a duplication of coordination structures, resulting in a duplication of meetings, programming and reporting. Stakeholders criticised the top-down approach followed by the R4V Platform, establishing national R4V platforms instead of scaling up existing structures to support the overall refugee and migration crisis in the region, and not exclusively Venezuelan migrants and refugees. The creation of the R4V Platform resulted in humanitarian organisations distinguishing between situations which involved Venezuelans and those that did not. Various programmes needed to be designed to cover all people in need instead of regardless of their nationality, which was an artificial separation in many cases, as for instance non-Venezuelans also faced issues similar to displaced Venezuelans and vice-versa (i.e. Venezuelans were also affected by disasters or conflicts not addressed by the R4V). The duplication of structures also created gaps in the response, as was the case in Colombia, where mixed migration issues and the *doble/triple afectación* phenomenon constituted one of the main concerns. This was a common challenge reported across the region by stakeholders at regional, national and local level.⁴⁴⁴

The challenges were compounded by the lack of communication between the R4V Platform and the UN coordination structures, due to the largely siloed structuring. In Panama, there was also limited communication between R4V and RED LAC Panama and little efforts to identify issues of common concern that could be addressed in an integrated way, instead of back-to-back meetings and

⁴⁴¹ Field interviews Venezuela (DG ECHO partners: 5); Field mission Colombia (DG ECHO partners: 6); KIIs (DG ECHO: 1)

⁴⁴² Field interviews Panama (Coordination mechanism: 1); Field interviews Venezuela (DG ECHO partners: 3)

⁴⁴³ Field interviews Venezuela (DG ECHO partners: 4; Coordination mechanism: 1)

⁴⁴⁴ Field interviews Panama (DG ECHO: 1; Coordination mechanism: 2); Field interviews Venezuela (DG ECHO partners: 2); Field interviews Colombia (DG ECHO: 1, DG ECHO partners: 5; Other donors: 2); Field interviews Ecuador (DG ECHO partners: 4)

duplicating programmes.⁴⁴⁵ Similar issues were reported in Venezuela (e.g. clusters at national level and *mesas técnicas* at local level), Colombia (e.g. clusters and sectors/working groups) and Ecuador (e.g. GTRM subworking groups and pre-existing coordination structures in place, called “mesas”).

Finally, the fact that the platform was led by two “operational” UN agencies, with their own agendas, further complicated coordination. In Colombia and Ecuador, some smaller organisations perceived that the GTRM/GIFMM was dominated by the UN (UNHCR and IOM), who imposed their own agenda and did not leave space for smaller NGOs to take part in negotiations. They saw decisions of local and national GTRM as “imposed” decisions that they did not necessarily agree with as they also have their own advocacy agenda for example. This was also mentioned by DG ECHO as a topic of concern that they tried to address over the evaluation period (moving away from UN-led system, through for example funding NGOs to co-lead clusters).⁴⁴⁶

Additional challenges across the region included the lack of direct funding for coordination at regional level (i.e. no funding for regional coordination but only for specific regional programmes) and national level (e.g. lack of staff dedicated to coordinating the response on the ground). Along with this, COVID-19 was highlighted to have had an impact on coordination in Venezuela and across the region, including in Colombia and Ecuador. The humanitarian community was forced to adapt its approach and shift to large online meetings. Finally, the lack of political will and shifting priorities of the government in Ecuador and Colombia puts additional pressure on enhancing coordination with national authorities.⁴⁴⁷

At regional level, one stakeholder also flagged the geographic distance between covered countries as a challenge to coordination, which makes it hard for partners to always be present in regional discussions, and the lack of regional coordination structures of other actors, including DG INTPA.⁴⁴⁸

Inside Venezuela, the humanitarian community faced specific challenges. The following hindering factors could be highlighted from the field visits:

- DG ECHO and its partners had to keep a low profile because of the political situation and the wary attitude of the government *vis-a-vis* the humanitarian community. Access improved over the evaluation period, according to a few stakeholders, who mentioned the increased openness of the government following DG ECHO advocacy efforts. DG ECHO managed to discreetly transcend restrictions, influencing national local actors and enhancing internal coordination.⁴⁴⁹
- Resistance of some partners to share information because implementing partners needed to maintain a low profile to avoid being exposed.⁴⁵⁰
- Despite improved information exchange between partners, cluster leads flagged the passive participation of donors, including DG ECHO, in the meetings, indicating room for improvement and a more active role of donors to coordinate, going beyond information exchange.⁴⁵¹

A8.3.4.2 Sustainability

Key findings

⁴⁴⁵ Field interviews Panama (DG ECHO: 1)

⁴⁴⁶ Field interviews Panama (DG ECHO: 2; Coordination mechanism: 2); Field missions Colombia (DG ECHO: 1; DG ECHO partners: 7; Coordination mechanisms: 2); Field mission Venezuela (DG ECHO partners: 5; Coordination mechanisms: 2); Field mission Ecuador (DG ECHO: 1; DG ECHO partners: 3; Coordination mechanisms: 1).

⁴⁴⁷ Field interviews Panama (DG ECHO: 2); Field interviews Venezuela (DG ECHO partners: 2); Field interviews Colombia (DG ECHO: 1, DG ECHO partners: 3); Field interviews Ecuador (DG ECHO partners: 2)

⁴⁴⁸ Field interviews Panama (DG ECHO: 1; Coordination mechanisms: 1); KIIs (DG ECHO: 2)

⁴⁴⁹ Field interviews Venezuela (DG ECHO partners: 4; Coordination mechanisms: 1)

⁴⁵⁰ Field interviews Venezuela (DG ECHO partners: 5)

⁴⁵¹ Field interviews Venezuela (Coordination mechanisms: 1)

- DG ECHO's response in Venezuela and the region remained limited to humanitarian, live-saving interventions and that little progress was made to develop longer term strategies, adapt a durable approach and progress on the nexus.
- Little efforts were made to adopt a multi-agency approach, going beyond the collaboration between humanitarian partner organisations, which was needed to generate resilience and durable solutions.
- The nexus mainly remained a theoretical concept throughout the evaluation period due to limited collaboration between humanitarian actors and development actors, including DG INTPA.
- The biggest challenge to implementing the nexus was the limited presence of development oriented donors in Venezuela (until 2019) and the lack of engagement of development donors in Colombia and Ecuador.

RQ4: What measures were adopted by DG ECHO and its partners to ensure alignment and complementarity with the development activities and the implementation of the triple nexus approach? What factors facilitated or hindered the progress towards the implementation of the triple nexus approach? (EQ4, 10)

In light of the limited budget available, ***DG ECHO's support remained limited to humanitarian, live-saving interventions and that little progress was made to develop longer term strategies, adapt a durable approach and progress on the nexus.*** Although, a few framework partners highlighted that DG ECHO could have adopted a less strict approach towards funding humanitarian actions (e.g. projects with development aspects, focusing livelihoods actions), the biggest challenge was the limited presence of development oriented donors in Venezuela and the lack of engagement of development donors in Colombia and Ecuador.

DG ECHO and its partners reported that not much progress had been made by DG ECHO to implement the nexus. Evidence showed that this was a wider problem among the humanitarian and development community and not just DG ECHO.⁴⁵² While interviewees proved to be aware about the importance of the nexus and interest in exploring how to implement it, they also flagged the sudden onset of crisis and the high number of people in need of humanitarian assistance, which required most of the resources and attention, especially during the first half of the evaluation period. Some stakeholders mentioned that it was too early to focus on strengthening the link between humanitarian and development actions, as the humanitarian aspects had to be prioritised. At the time of the field visits in 2023, the nexus seemed to be discussed more, however still at a theoretical level.⁴⁵³ In Colombia, stakeholders expressed mixed opinions about enhancing efforts to implement the nexus due to the protracted nature of the crisis, i.e. new migrants and refugees were still arriving, while other Venezuelans were in need of development support.

Inside Venezuela, the limited presence of development donors during the first half of the evaluation period posed the biggest challenge to implementing the nexus. Coordination with DG INTPA only started in 2021, when DG INTPA got funding to address the internal dimension of the crisis. From 2021 onwards, regular exchanges between the two entities took place.⁴⁵⁴ Venezuela Country Fiches produced by DG INTPA in 2021 show that DG ECHO's response was considered at the end of the evaluation period, and vice versa, the HIPs showed DG ECHO's intention to promote collaboration with DG INTPA and other EU funding instruments or donors. However, despite some examples of actions contributing to the nexus, no common strategic vision was adopted, or coordinated actions consistently implemented. In Colombia and Ecuador, exchanges remained limited at field level,

⁴⁵² Field interviews Panama (DG ECHO: 1; Coordination mechanisms: 1)

Field interviews Colombia (DG ECHO: 1; DG ECHO partners: 5, Other donors: 2)

Field interviews Ecuador (DG ECHO partners: 4, National authorities: 2)

⁴⁵³ Field interviews Venezuela (DG ECHO partners: 4; Coordination mechanisms: 1); Field interviews Colombia (DG ECHO partners: 5, National authorities: 3, Other donors: 2); Field interviews Panama (DG ECHO: 2; Coordination mechanism: 1); KIIs (DG ECHO)

⁴⁵⁴ Field interviews in Venezuela (Other EU institutions: 1); Field interviews in Panama (DG ECHO: 1; Coordination mechanism: 1)

mainly because of the limited resources from the development budget available.⁴⁵⁵ Stakeholders highlighted the need for improved coordination between DG ECHO and development donors.

Anecdotal evidence revealed that some efforts were made by DG ECHO and its partners to progress on the nexus during the second part of the evaluation period. In Panama, an informal coordination mechanism was created to share information between DG ECHO, EEAS, DG INTPA and the Foreign Policy Instruments.⁴⁵⁶ The joint advocacy efforts of the EEAS and DG ECHO at regional level were highlighted as an example of successful coordination (i.e. Solidarity Conference).⁴⁵⁷ Further efforts were rather fragmented than systemic and DG ECHO acknowledged that a transformative shift was needed to enhance sustainability of the response and better coordination between humanitarian actors and development actors.⁴⁵⁸ Some partners mentioned that DG ECHO aimed to create room to foster the nexus and keen to connect partners with other donors supporting development actions. However, it remained limited to the awareness raising and capacity building activities of the beneficiaries to enhance sustainability of the action. In some cases, partners tried to make the connection themselves aiming to bridge DG ECHO funding with funding from other donors.⁴⁵⁹ One stakeholder mentioned that in terms of integration of refugees and migrants across the region, if any progress made throughout the evaluation period, it was because of the efforts of the Venezuelans themselves rather than the humanitarian and development organisations.⁴⁶⁰

Complementarity of funding humanitarian and development funding mechanisms in the region to address gaps in the response

At the start of the of the evaluation period most of DG ECHO funding was allocated to Colombia and Venezuela (and a lesser extent to Ecuador). To fill the funding gap and address the needs of Venezuelans in Brazil, UNHCR - in collaboration with UNFPA - launched a project in 2018 funded by the EU through its Instrument for Stability and Peace (IcSP). Through the IcSP, the first humanitarian actions supporting Venezuelan refugees in Brazil could be delivered. Similarly, thanks to good coordination in Colombia, IcSP also shifted its activities to complement ECHO's actions in Colombia and provided institutional support for the regularisation of migrants and refugees. This helped to strengthen the regulatory framework through promoting registration procedures, improving the protection environment for Venezuelans and contributing to peaceful coexistence between displaced Venezuelans and the host communities.⁴⁶¹

In terms of potential improvements, the field missions showed national authorities and development actors needed to be better included in the response, as well as the beneficiaries to ensure ownership. Field visits also showed that the relationship between DG ECHO and its partners, and DG INTPA could be strengthened. As DG ECHO's role remains limited to operationalise the nexus and focus on long-term planning, DG ECHO could continue to advocate for more support⁴⁶² towards other donors and DG INTPA in terms of funding and aligning priorities (i.e. DG INTPA focuses on green transition, digitalisation, etc.).⁴⁶³ Furthermore, the lack of alignment of the EU Delegations and insufficient engagement of other EU services further hindered coordination.

⁴⁵⁵ ICF. 2023. (DG ECHO: 2; Other EU bodies: 1)

⁴⁵⁶ Field interviews in Panama (DG ECHO: 1)

⁴⁵⁷ Field interviews in Panama (DG ECHO: 1, Coordination mechanisms: 1)

⁴⁵⁸ Field interviews in Panama (DG ECHO: 1); KIIs (DG ECHO); Field interviews Colombia (DG ECHO partners: 5; Other donors: 2)

⁴⁵⁹ Field interviews Venezuela (DG ECHO Partners: 6); KIIs (DG ECHO); Field interviews Colombia (DG ECHO partners: 4; National authorities: 2; Other donors: 2); Field interviews Panama (DG ECHO: 1)

⁴⁶⁰ Field interviews in Panama (DG ECHO: 1)

⁴⁶¹ Field interviews in Panama (DG ECHO: 1, Coordination mechanisms: 2); KIIs (DG ECHO)

See also: R4V Platform. 2018. Joint action reinforces the attention of Venezuelans in Roraima. Available at <https://www.r4v.info/en/news/joint-action-reinforces-attention-venezuelans-roraima>

⁴⁶² One stakeholder in Colombia (UNHCR) mentioned that there was more interest in development programming at the start of the evaluation period, and that DG INTPA's attention shifted away from the region.

⁴⁶³ KIIs (DG ECHO partners: 1); Field interviews in Venezuela (DG ECHO partners: 5); Field interviews Colombia (DG ECHO partners: 4; Other donors: 2); Field interviews in Ecuador (DG ECHO partners: 4).

Integration of Venezuelan migrants and refugees in Brazil

In many countries across the region, integration of Venezuelans remained an issue, often due to the lack of political will and xenophobia. In Brazil, some progress of the nexus was made, where DG ECHO and its partners contributed to strengthening integration efforts, through speeding up processes of registration and documentation and providing other integration services, such as education integration and humanitarian transport. However, the number relatively low number of people arriving in Brazil compared to other countries, including Colombia, Ecuador and Peru, makes it hard to compare the situations and put Brazil forward as a best practice in terms of implementing the nexus. In addition, the *Operação Acolhida* (Acolhida), the main instrument adopted by the Brazilian government to guarantee the human dignity of migrants and refugees, provided a structural framework, which facilitated coordination between DG ECHO and its partners, development actors and national authorities. The lack of such a framework in other affected countries made it difficult to follow a similar approach. The unprecedented influx of refugees and migrants remained a challenge.⁴⁶⁴

From the interviews, the following additional aspects hindering the implementation of the nexus could be highlighted:

- At regional level, the lack of regional coordination structures of DG INTPA in Panama making it harder to systematically align and exploit synergies.⁴⁶⁵
- Lack of motivation of the EU Delegation to collaborate and align with DG ECHO funded actions, with differences that exist between countries across the region.⁴⁶⁶
- Lack of development partners present in the region.⁴⁶⁷
- Lack of common plans of action.⁴⁶⁸
- Lack of organisations or government capacity to follow up the projects once DG ECHO intervention ends.⁴⁶⁹
- Lack of stable financing lines, which allows for longer-term planning ensuring consistent engagement and support.⁴⁷⁰

⁴⁶⁴ Field interviews in Panama (DG ECHO: 1); KIIs (Coordination mechanisms: 2); Field interviews in Ecuador (DG ECHO partners: 3; Coordination mechanisms: 2); Field interviews in Colombia (DG ECHO partners: 3; Coordination mechanisms: 3).

⁴⁶⁵ Field interviews in Panama (DG ECHO: 1; Coordination mechanisms: 1).

⁴⁶⁶ Field interviews in Panama (DG ECHO: 1), KIIs (DG ECHO: 1).

⁴⁶⁷ KIIs (DG ECHO: 1).

⁴⁶⁸ Field interviews in Ecuador (DG ECHO partners: 4); Field interviews in Colombia (DG ECHO partners: 5).

⁴⁶⁹ Field interviews in Venezuela (DG ECHO partners: 4); Field interviews in Panama (DG ECHO); KIIs (DG ECHO: 2).

⁴⁷⁰ Field mission in Ecuador (National authorities: 2).

A8.4 CASE STUDY 4: THE PARTNERSHIP CONTRIBUTION TO ENHANCED FIELD AND SECTORAL COORDINATION

A8.4.1 Objectives and scope of the case study

This case study explores the extent to which the partnership – and its evolution over the evaluation period – enhanced field coordination (i.e. between DG ECHO and UNHCR, but also with implementing partners, other humanitarian actors and donors), as well as sectoral coordination at regional and country level. Also, the case study explores whether partnership contributed to improved cooperation between DG ECHO/ UNHCR regional and country offices, avoiding duplication of efforts and promoting synergies between humanitarian actors and donors, as well as whether it promoted the development and use of joint needs assessments, supported coordinated log frames and led to the establishment of consortia.

The case study answers the following research questions:

Criteria	Research questions	EQ
Coherence	To what extent did DG ECHO and UNHCR promote the development and use of joint needs assessments? Were DG ECHO and UNHCR aligned in their approaches to needs assessments?	1
Effectiveness	To what extent did the partnership contribute to reinforce and enhance relevant sectoral coordination at regional, and country/field level, and support UNHCR's lead or co-lead role in the cluster coordination system?	6
	To what extent did the partnership contribute to improved field coordination between DG ECHO and UNHCR regional and national offices as well as with other humanitarian actors (i.e. UN, NGOs and IOs)?	6
	What were the lessons learned from coordination between DG ECHO and UNHCR regional and national offices (e.g. in terms of definition of priorities, compliance with requirements and obligations, information sharing, respect for each other mandates, etc.)?	3

The case study primarily relies on evidence gathered during the field mission in **Jordan** and **Chad** as well as the remote mission in **Bangladesh**. It also draws from supporting evidence gathered during the field missions in Venezuela, Colombia and Ecuador.

During the in-country field missions (Jordan, Chad, Venezuela, Colombia and Ecuador), the following DG ECHO-funded actions implemented by UNHCR were visited:

- Jordan: Protection Assistance to Refugees in Jordan (ECHO/SYR/BUD/2021/91018)
- Chad: Protection pour les réfugiés et déplacés au Tchad (ECHO/-AF/BUD/2021/92046)
- Venezuela, Colombia and Ecuador: Emergency interventions to ensure protection and life-saving humanitarian assistance to vulnerable populations affected by the crisis in Venezuela in the context of the COVID-19 outbreak and its aftermath (ECHO/-AM/BUD/2021/91062)

A8.4.2 Methodological approach

This case study was developed based on data collected through field visits, combined with relevant primary and secondary information collected through other, more general, tasks (i.e. project review and documentation review).

A8.4.2.1 Primary data

As mentioned above, this case study mostly relied on **primary evidence (data and stakeholder feedback) collected during the field missions** in Jordan and Chad and the remote field mission

to Bangladesh. Although to a lesser extent, it also relied on data collected from the field missions in Colombia and Ecuador.

During the field missions, field researchers conducted:

- **Project visits** to consult in person stakeholders involved in the implementation of the selected DG ECHO funded actions (i.e. UNHCR and local implementing partners); and
- **Interviews with relevant stakeholders** in the selected countries (mostly UNHCR and DG ECHO field staff but also local implementing partners, national authorities, and other humanitarian actors).

The field interviews focused on different research issues/aspects, reflecting the experience and insights of the different stakeholders interviewed.

A8.4.2.2 Secondary data

The case study also relied on relevant secondary data collected by field researchers in the context of the evaluation and during the preparation for the field mission as well as data provided by stakeholders in the context of the field visits. This included:

- **Relevant documentation on the partnership** shared by DG ECHO and UNHCR in the context of the evaluation;
- Documentation containing **information on country contexts and existing coordination structures**; and
- **Project documentation** (Single Form, FichOp and, where relevant, annexes) for the countries visited.

Where relevant, the case study also integrated relevant information presented in the **desk report**, which summarised the evidence emerging from the documentation reviewed during the Desk Phase.

A8.4.2.3 Data limitations and methodological challenges

During the field visits, the evaluation team encountered some challenges in the data collection activities:

- High staff turnover in both DG ECHO and UNHCR over the evaluation period. In some countries, field staff with knowledge of DG ECHO-UNHCR cooperation on the ground was no longer in the countries visited and new staff had limited knowledge on the functioning of the partnership between 2017-2021;
- Most stakeholders consulted – other than DG ECHO and UNHCR – had very little knowledge of the functioning of the partnership and its impacts. While some stakeholders were aware that UNHCR had received funding from DG ECHO, in most cases, they did not know which type of activities were funded. Most stakeholders consulted outside DG ECHO and UNHCR could also not provide feedback on the partners' cooperation and communication on the ground;
- As all UNHCR funded actions were multi-donor, some UNHCR field staff did not know which specific program activities were funded by DG ECHO and therefore could not provide feedback on the impact of those activities. Data gathered through interviews with DG ECHO staff helped mitigating this challenge.

A8.4.3 Context

A8.4.3.1 Jordan: National context and coordination structures

The Syrian refugee crisis started 12 years ago as the result of the civil war in Syria which forced millions of Syrians to displace internally within Syria and to neighbouring countries (Egypt, Iraq, Lebanon, Türkiye and Jordan). The conflict is still ongoing with no signs that a solution can be found in the short term.

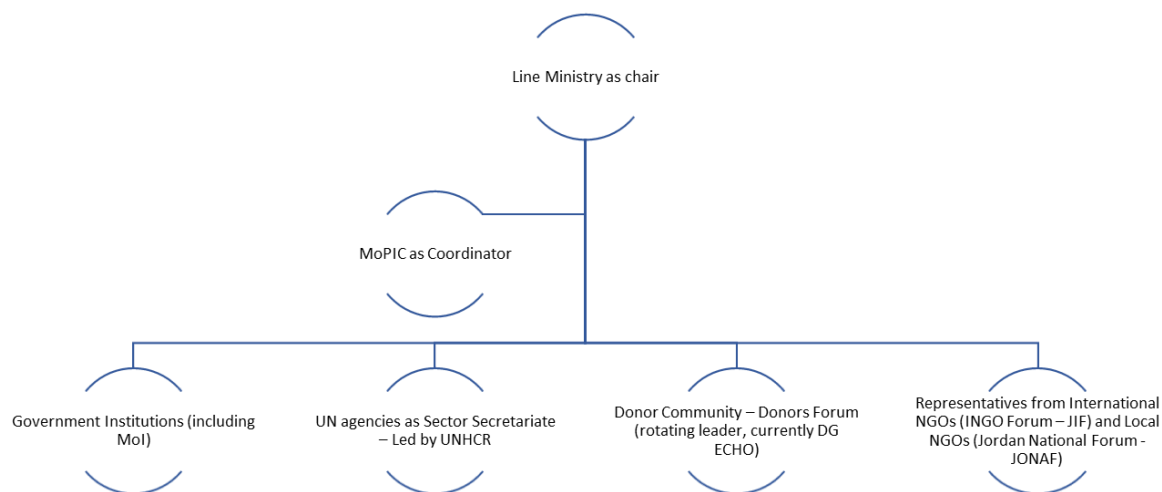
Of the over 5.4 million registered Syrian refugees⁴⁷¹ 12% live in Jordan (about 670 thousand in 2022), making it the third main country of asylum of Syrian refugees. After a sharp increase in the beginning of the crisis, the total number of registered Syrian refugees in Jordan has remained stable since mid-2014. Around 20% of the registered Syrian refugees live in refugee camps (Zaatari with about 80 thousand and Azraq with about 40 thousand), while the remaining live in urban areas. In addition to Syrian refugees, there is also a significant number of non-Syrian refugees, mostly Palestinians, Iraqis, Yemenis, Sudanese, Somalis and over 500 thousand people in need from host communities.

The response to the refugee crisis in Jordan was guided by successive “Jordan Refugee Response Plans” developed by the Ministry of Planning and International Cooperation (MOPIC) in close cooperation/collaboration with the national and international partners, including various government ministries (e.g., Ministry of Interior), donors (including DG ECHO as a member of the Jordan Donors Forum), UN agencies (with UNHCR being the key one given its mandate), national and international NGOs (see Figure 124). The last plan covered the period 2020 – 2022 but was extended through 2023 and it has two pillars:

Refugees / Humanitarian pillar: shorter term approach to the crisis, focusing on the addressing the most urgent and critical humanitarian needs;

Resilience pillar: medium/long term approach to the crisis focusing on building resilience and ensuring sustainability.

Figure 124. Core Structure of the Response in Jordan

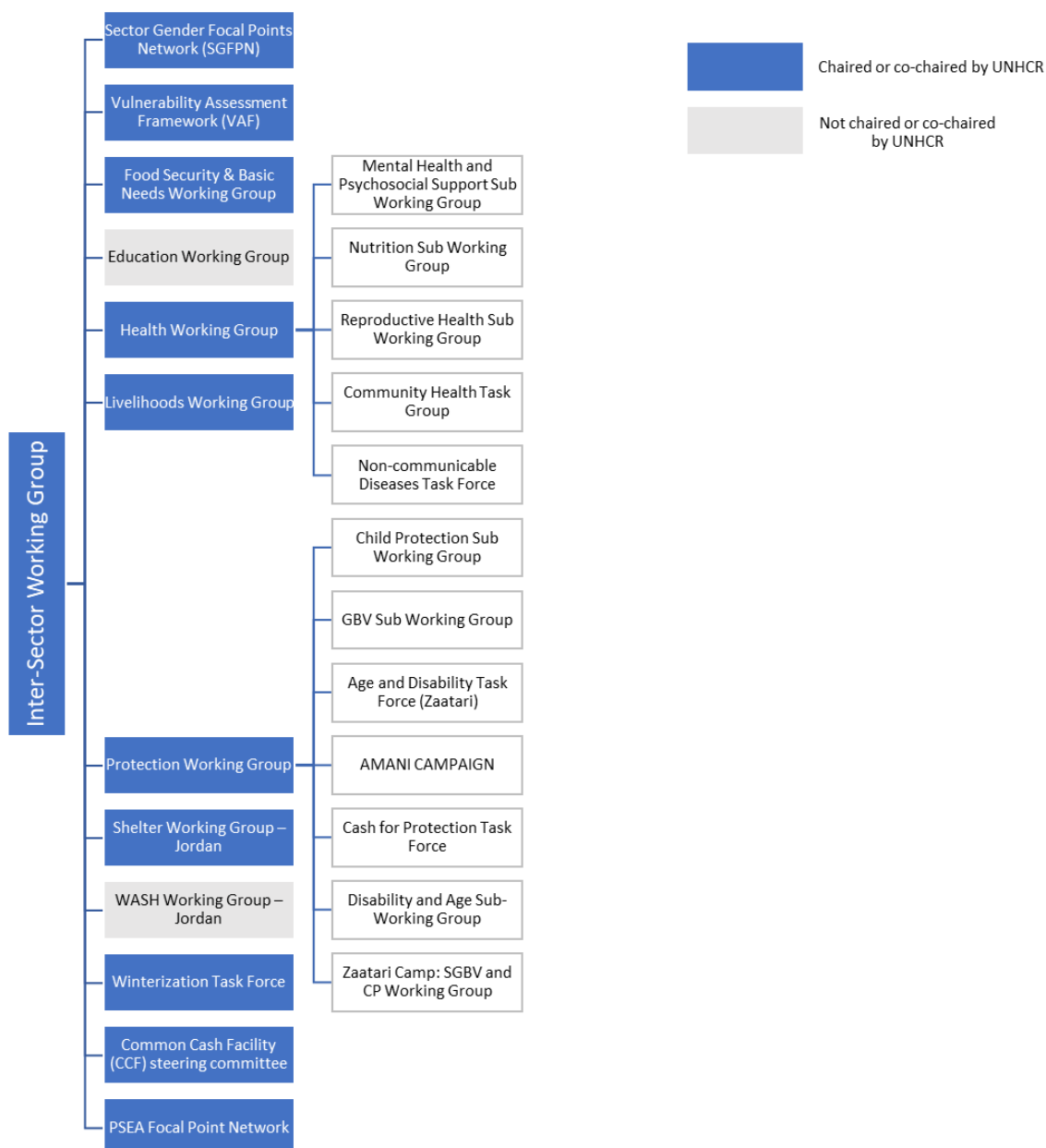


Source: ICF elaboration (2023) with data from Jordan Response Plan 2020-2022

The coordination of the humanitarian response in Jordan builds on a Working Group structure which involves UN agencies, international and national NGOs (see Figure 125). The Inter-sector Working Group and the majority of the Working Groups are chaired or co-chaired by UNHCR.

⁴⁷¹ <https://data.unhcr.org/en/situations/syria>

Figure 125. Humanitarian Response Sectorial Working Groups in Jordan (as of December 2022)⁴⁷²

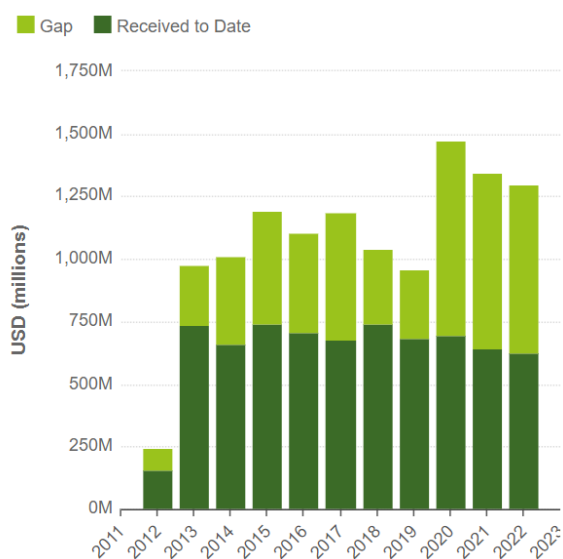


Source: ICF elaboration (2023) with data from UNHCR website

In spite of the funds received by many international donors, the Syrian crisis has remained underfunded since its onset, with both the funding needs and gap increasing as a result of the COVID-19 pandemic, as shown in the figure below.

⁴⁷² The structure is being revised.

Figure 126. Funding requirements

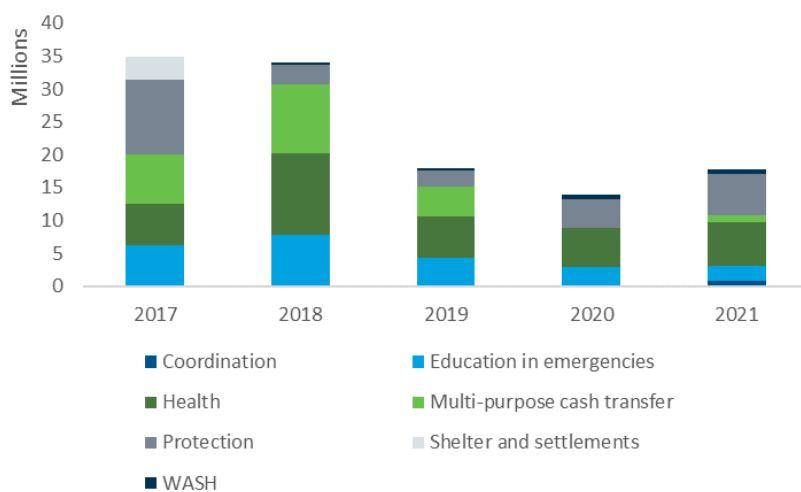


Source: ICF elaboration (2023) based on UNHCR Situation Syria Regional Refugee Response (unhcr.org)

Between 2020 and 2021, UNHCR received funds from many donors, including the United States (40%), Germany (24%) and EU/DG ECHO (9%).

In the evaluation period, most of the DG ECHO funding to Jordan was allocated to the health sector (32%), protection sector (24%) and MPCT (20%).

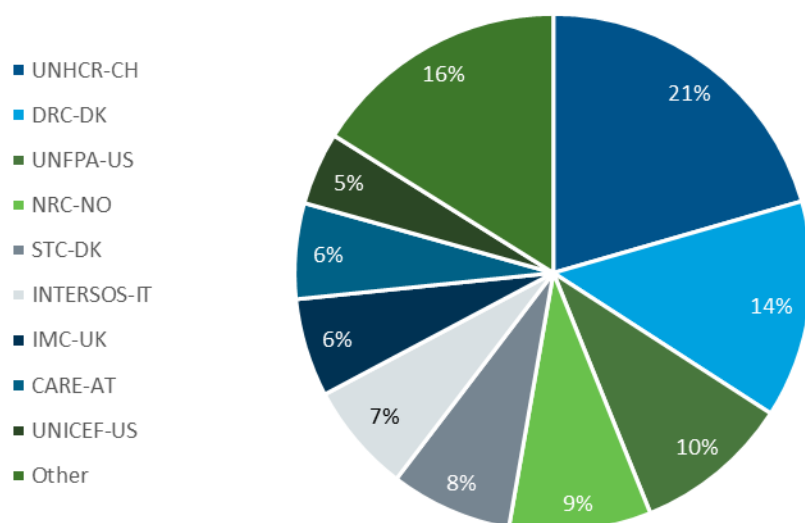
Figure 127. DG ECHO funding by sector in Jordan, 2017-2021



Source: HOPE data extracted March 2023

UNHCR received about 21% of that funding, being the main DG ECHO partner in the protection sector, followed by DRC (14%), UNFPA (9%) and UNFPA (10%).

Figure 128. DG ECHO funding by partner in 2017-2021



Source: HOPE data extracted March 2023

A8.4.3.2 Chad: National context and coordination structures

Chad, a landlocked country in central Africa, has been experiencing complex humanitarian crises for many years, including inter-communal violence, food insecurity, and displacement of people. Between 2016 and 2021, the humanitarian situation in Chad remained challenging, with refugees and internally displaced persons (IDPs) being the most affected.

Chad has more than a million displaced people, of whom 57% are children. Chad is neighbour to several crises affected countries, as of the end of 2021, Chad hosted 555,787 refugees, mainly from Sudan, the Central African Republic (CAR), Nigeria, and Cameroon, over 406,573 IDPs, who have been displaced by conflict, violence, and natural disasters as well as 106,913 returnees.⁴⁷³

In Chad, the humanitarian coordination mechanism is led by OCHA. The Chad Humanitarian Country Team (HCT) coordinates the overall humanitarian response. Figure 129 below shows the humanitarian coordination structure in Chad which follows the usual cluster approach.

UNHCR is a member of the HCT and participates in regular meetings of the HCT bringing together UN agencies and donors. UNHCR also participates in cluster coordination mechanisms, and Inter-Cluster Coordination meetings coordinated by OCHA for the response for IDPs in Lake Chad province.

In addition, UNHCR is the lead agency for two⁴⁷⁴ active clusters in N'Djamena and Baga Sola: the Protection Cluster and the CCCM, Shelter/ NFI clusters. As the lead agency for protection, the UNHCR's role is in particular to share information and analysis of protection risks and to ensure that the transversality of protection is taken into account in the response. The Protection Cluster also interacts with the Regional Protection Working Group based in Dakar to foster the development of common protection messages useful for joint advocacy and for the purposes of coordinated programming.

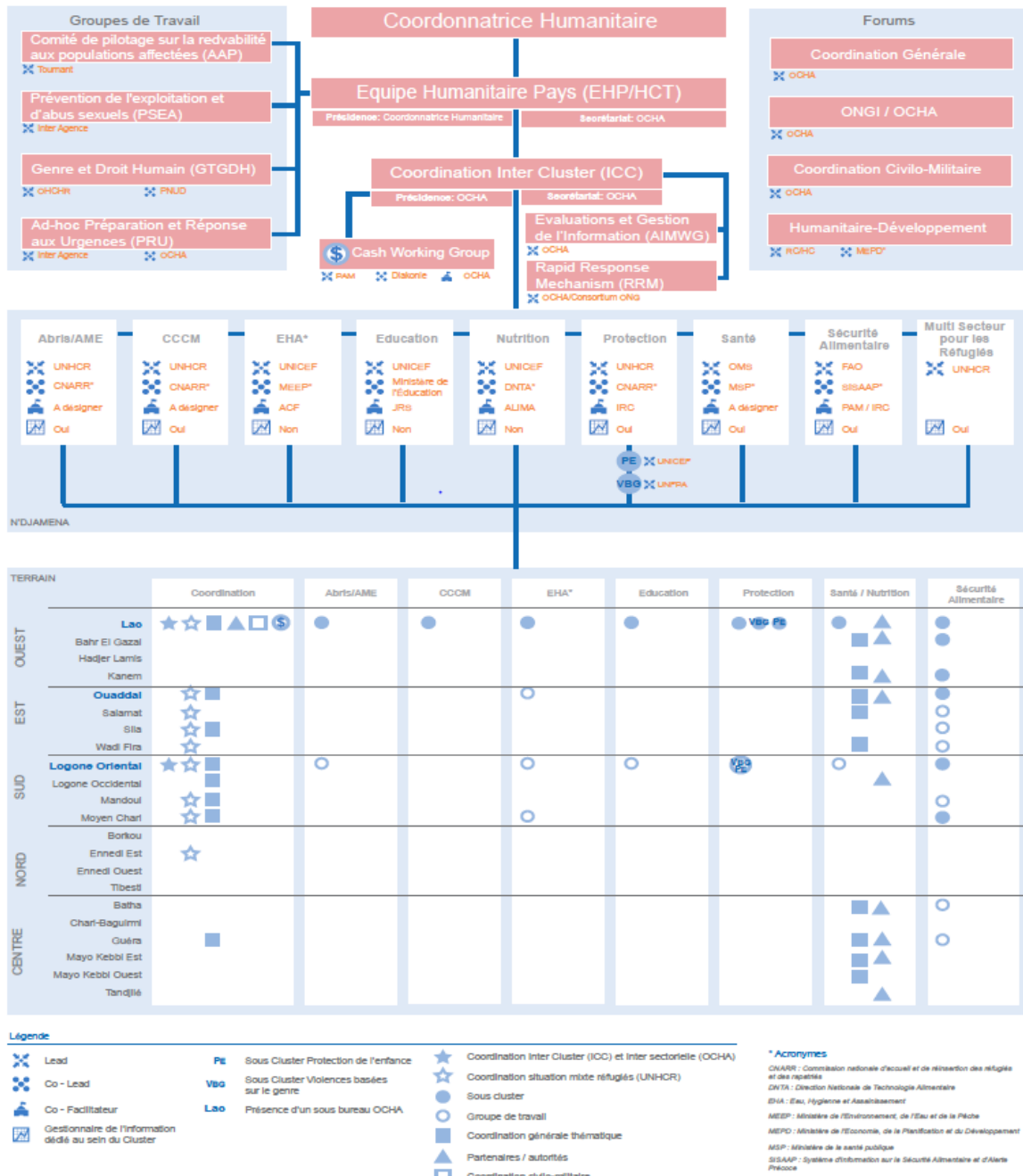
⁴⁷³ UNHCR. 2021. Personne relevant de la compétence du HCR Décembre 2021.

<file:///C:/Users/N115393/Downloads/UNHCR%20TCHAD%20Statistiques%20des%20personnes%20relevant%20de%20la%20comp%C3%A9tence%20du%20HCR%20Decembre%202021.pdf> UNHCR. 2021. Personne relevant de la compétence du HCR Décembre 2021.

<file:///C:/Users/N115393/Downloads/UNHCR%20TCHAD%20Statistiques%20des%20personnes%20relevant%20de%20la%20comp%C3%A9tence%20du%20HCR%20Decembre%202021.pdf>

⁴⁷⁴ Shelter/NFI and CCM clusters are combined in one

Figure 129. Coordination system for the Refugee Response



Source: OCHA. 2022. Humanitarian Response Plan

For the response for refugees in the South, UNHCR supports the authorities in coordinating the response, according to the Refugee Coordination Model. Regular meetings bring together actors active in areas hosting refugees, including local authorities, CNARR, UN agencies, NGOs, development actors present and representatives of local and refugee communities, to share information and coordinate activities.

In the period 2017-2021, DG ECHO funded UNHCR (5 projects worth EUR 4.6 million) to provide assistance and support to refugees and displaced populations in Chad mainly focusing on protection and food security and livelihoods but also WASH, nutrition and coordination.

A8.4.3.3 Bangladesh: National context and coordination structures

Between 2017 and 2021, DG ECHO funded UNHCR to respond to the Rohingya refugee crisis which, from August 2017 saw the largest influx of Rohingya refugees in Bangladesh, following a renewed brutal military crackdown in Myanmar's Rakhine State, which led to widespread violence, human rights abuses and an increase in the persecution to which the Rohingya Muslim minority had been subjected for decades. As a result, approximately 740,000 Rohingya refugees fled to neighbouring Bangladesh, seeking safety and protection. They joined hundreds of thousands of Rohingya who had already fled to Bangladesh during previous waves of violence, bringing the total number of Rohingya refugees to around 1 million. Most of these refugees settled in camps in the Cox's Bazar district.

The Rohingya refugee response in Bangladesh is led by the Government of Bangladesh with support from the international community. The coordination structure draws from past experiences, such as the Inter-Agency Standing Committee (IASC) cluster approach and has evolved into a hybrid coordination model led by UNHCR, IOM, and the UN Resident Coordinator. At national level, the Strategic Executive Group (SEG), co-chaired by UNHCR, IOM, and the UN Resident Coordinator and including representatives from UN agencies, NGOs, and donors, lead the refugee response and is accountable for its outcomes. The SEG in Dhaka provides strategic direction and oversight, while the Refugee Operations and Coordination Team (ROCT) in Cox's Bazar oversees operational issues.⁴⁷⁵

In Cox's Bazar, sectors have the primary responsibility for technical decisions and workplans in relation to their areas of responsibility and play a critical role in the coordination of the refugee response. Inter-sector meetings are held monthly to ensure a coherent, efficient, and timely inter-Sectoral response. Sectors and working groups are responsible for technical decisions and work plans in their areas of responsibility. The Inter-Sector Coordination Group (ISCG) supports and facilitates the work of all actors in the coordination system as well as strengthens partnerships across the response. The ISCG is a neutral coordination body reporting to the SEG Co-Chairs and guided by the SEG in Dhaka and ROCT in Cox's Bazar.

Currently, in addition to its coordination role within the overall response (along with IOM), UNHCR leads two sectors (Protection, Livelihood and Skills Development), co-leads the Site Management Site Development (SMSD) and Shelter/NFI sector with IOM, manages half of the camps in the Cox's Bazar area (33 camps in 2020)⁴⁷⁶ and recently took the leading role for the coordination of the response in Bhasan Char⁴⁷⁷ (with the response partially funded by the EU).⁴⁷⁸

Figure 130 outlines the coordination structures of the Rohingya refugee response in Bangladesh.

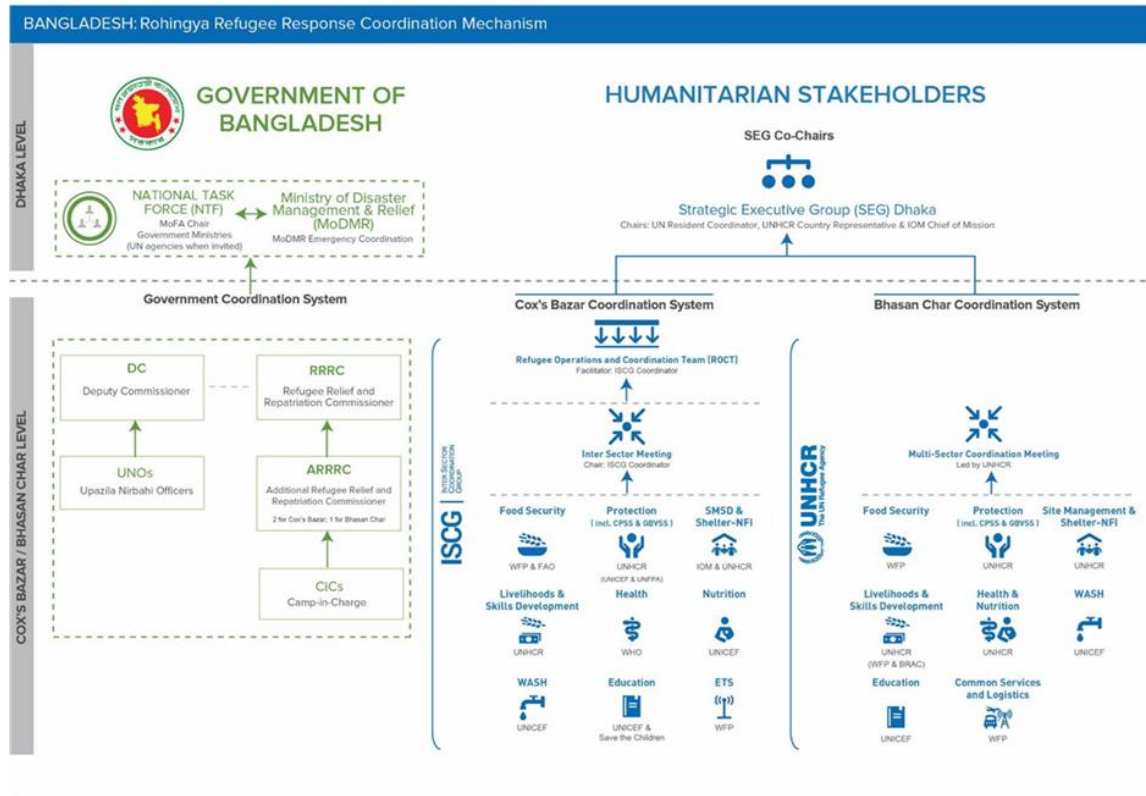
⁴⁷⁵ Documentation review

⁴⁷⁶ UNHCR Camp management and coordination, Bangladesh 2020, available at <https://reporting.unhcr.org/node/12019>

⁴⁷⁷ In 2021, 19,000 Rohingya refugees were relocated to Bhasan Char, an island where the Government of Bangladesh has made substantial investments to provide a temporary alternative measure for hosting refugees to alleviate overcrowded camp conditions. UNHCR, on behalf of the United Nations, signed a memorandum of understanding that provides a protection and policy framework for the island. UNHCR has also worked with the Government to ensure the voluntariness of relocations and freedom of movement. UNHCR Global Appeal 2023, Myanmar situation, available at <https://reporting.unhcr.org/myanmarsituation>

⁴⁷⁸ Documentation review, remote field interviews

Figure 130. Coordination system for the Rohingya Refugee Response



Source: Inter Sector Coordination Group (ISCG)

A8.4.3.4 Venezuelan crisis: Context and coordination structures

The humanitarian aid architecture and coordination mechanisms to respond to the Venezuela (regional) crisis differed, and also evolved differently, across Latin American and Caribbean (LAC) countries over the evaluation period.⁴⁷⁹ Specific coordination mechanisms were established inside and outside of Venezuela to coordinate the response to the two main geographic dimensions of the crisis:

- Within Venezuela**, the coordination of the internal response is led by OCHA since 2019, which also manages the 3W / 5W platform (i.e. Who does What Where When and for Whom). A cluster structure is also in place, with government representatives present in the clusters. Humanitarian Response Plans are developed by the Inter-Cluster Coordination Group (ICCG) under the supervision of the Humanitarian Country Team, in consultation with a range of stakeholders, including the Government of Venezuela and the National Assembly's Special Commission for the Monitoring of Humanitarian Aid. Over the evaluation period, other coordination mechanisms were established in Venezuela, namely: a) the Forum of INGOs (Foro ONGi, established in 2020), coordinated by NRC, and b) the National Platform for Humanitarian Action (PANHAL), which gathers Venezuelan civil society organisations involved in the response to the humanitarian crisis in the country.⁴⁸⁰ Both platforms are supported by DG ECHO.
- The coordination of the response to the **external dimension** of the crisis is co-led by UNHCR and IOM from Panama, through a regional coordination platform (R4V), supported by national platforms in the host countries. The R4V platform leads the preparation of the Refugee and Migrant Response Plan for Venezuela (RMRP), published every year since 2019. The R4V platform works closely with other regional coordination

⁴⁷⁹ DG ECHO (2021) '2021 Latin America and the Caribbean Humanitarian Implementation Plan'.

⁴⁸⁰ See more details: <https://pahnal.org/>

structures, such as the Quito Process, a technical multilateral forum which was set up in 2018 by eleven countries (i.e. ten Latin American countries and the United States) to share information and agree on a common approach towards the crisis, the Lima Group (established in 2017) and the LAC RMD Coalition.

The coordination of the national response in each country varies across countries, with more advanced systems in place in certain countries like Colombia where, in addition to the cluster system, other mechanisms exist such as the Foro ONGi, GHD and GRUC, while others have only recently developed formal coordination mechanisms. At EU level, the coordination structure for the response to the regional crisis evolved significantly over the evaluation period. Until 2019, DG ECHO did not have an office in Venezuela and the programmatic and operational responsibilities with respect to the Venezuela crisis laid with DG ECHO's office in Bogota. This changed in 2019, when the office in Venezuela was established and the management of the response to the crisis was taken on by the Regional Office in Panama. More widely, 2019 also saw the launch of the International Contact Group (ICG) with eight EU Member States – Italy, France, Portugal, the Netherlands, Sweden, Spain, Germany, and the UK – and six LAC countries – Uruguay, Bolivia, Costa Rica, Ecuador, Panama and Chile. DG ECHO participates in the ICG meetings and leads the working group on humanitarian assistance (ICG-HA WG), which worked towards the development of the humanitarian architecture in Venezuela. However, not all LAC countries of the ICG participated in the humanitarian aid working group (Uruguay and Ecuador from the beginning, joined later by Panama).

A8.4.4 Case study findings

A8.4.4.1 Coherence

RQ1: To what extent did DG ECHO and UNHCR promote the development and use of joint needs assessments? Were DG ECHO and UNHCR aligned in their approaches to needs assessments (EQ1)?

The field visits **overall showed that DG ECHO and UNHCR's approaches to needs assessments were aligned** in all funded sectors.⁴⁸¹ In two countries (Bangladesh and Chad), needs assessments are carried out through a multi-sector/multi-agency approach, and UNHCR reported on the basis of data collected through these collaborative exercises. In Jordan, Colombia, Venezuela and Ecuador, needs assessments were carried out by UNHCR directly and stakeholders reported that through feedback rounds and recommendations, DG ECHO and UNHCR **actively exchanged information and openly discussed potential issues**.⁴⁸²

Data shows that both partners promoted the use of multi-sector/multi-agency joint needs assessments, as the latter were deemed to also facilitate a coordinated approach towards the definition of a comprehensive response:

- In **Bangladesh**, there were limited direct exchanges between DG ECHO and UNHCR on needs assessments, as these are regularly (every two years) carried out through a Multi-Sector Needs Assessment (MSNA), a collaborative and systematic process which identifies and prioritises the needs of Rohingya refugees and host communities affected by the humanitarian crisis, covering all sectors. The assessment process involves various stakeholders, including government agencies, international organisations, NGOs, and local partners, and is carried out through several methods, including household surveys, key informant interviews, focus group discussions, and direct observations. The results of the MSNA are compiled into a comprehensive report, which is shared with all relevant stakeholders and serves as a basis for the development of the Joint Response Plan

⁴⁸¹ Note: This case study assessed the level of alignment and dialogue in the context of needs assessment carried out by UNHCR for all sectors funded by DG ECHO. The specific alignment of approaches for needs assessments in the protection sectors is analysed in a different case study.

⁴⁸² ICF. 2023. Field interviews.

(JRP).⁴⁸³ DG ECHO funds the MSNA (together with other donors) and considers it a cost-efficient tool which facilitates a coordinated effort and avoids overlaps.⁴⁸⁴

- In **Chad**, UNHCR collaborated with other agencies to develop inter-agency assessments for new disasters, under the supervision of OCHA. These assessments, such as the joint WFP/UNHCR assessment, focused on food insecurity, are shared and used by all involved stakeholders, including DG ECHO. Coordination on needs assessment happens at cluster and inter-cluster meetings, where various actors and government representatives jointly assess needs and decide on responses. Participatory assessments are conducted with refugees and IDPs, and intervention planning is usually based on these joint needs assessments.⁴⁸⁵

DG ECHO regularly reviewed the needs assessment data provided by UNHCR in its proposals and providing feedback and recommendations on specific issues. For example, in Bangladesh DG ECHO reported a discrepancy in the data provided by UNHCR on the needs of people with disabilities (particularly on the number of target beneficiaries within the Rohingya refugee community in the camps), and actively pushed UNHCR to make more efforts to identify this target group.⁴⁸⁶

In **Jordan**, stakeholders from both DG ECHO and UNHCR reported that the approaches to need assessments followed by UNHCR were generally aligned with DG ECHO's expectations and that the partnership allowed DG ECHO to provide feedback and suggestions for improvements to UNHCR, which in a few occasions adjusted its approaches accordingly.⁴⁸⁷ However, overall UNHCR faced difficulties in tailoring its approaches (which are standard and applied worldwide by UNHCR) to the requirements of each of its donors, and reported achieving full compliance with the specificities of each would lead to inefficient use of resources. DG ECHO generally considered the number and quality of needs assessments exercises carried out by UNHCR to be sufficient, and found the vulnerability framework jointly developed with the World Bank in 2019 and 2020 a very useful tool (also for other donors), as it helps assessing the vulnerabilities of beneficiaries and how they evolve. However, DG ECHO indicated that they would have preferred receiving the results of needs assessments with a higher level of disaggregation and that the vulnerability framework could also cover host communities.⁴⁸⁸ In **Colombia and Ecuador**, DG ECHO positively assessed the quality of UNHCR's needs assessments undertaken for actions funded in the context of the Venezuelan crisis, but also made some recommendations on how to strengthen these (e.g. better assessing the needs of IDPs in Colombia, making sure the needs assessments were updated during the course of implementation of the actions etc.).⁴⁸⁹

A8.4.4.2 Effectiveness

RQ2 and RQ3: To what extent did the partnership contribute to: 1) reinforce and enhance relevant sectoral coordination at regional, and country/field level; 2) support UNHCR's lead or co-lead role in the cluster coordination system; 3) improved field coordination between DG ECHO and UNHCR regional and national offices as well as with other humanitarian actors (i.e. UN, NGOs and IOs) (EQ6)?

While DG ECHO and UNHCR's cooperation in all countries in scope was reported as positive, data collected in the field **did not allow for an assessment of the direct contribution of the partnership to enhanced sectoral coordination at regional, country and/or field level,**

⁴⁸³ ICF. 2023. Documentation review, field interviews and project mapping

⁴⁸⁴ ICF. 2023. Field interviews.

⁴⁸⁵ ICF. 2023. Field interviews.

⁴⁸⁶ ICF. 2023. Field interviews

⁴⁸⁷ ICF. 2023. Field interviews and project mapping

⁴⁸⁸ ICF. 2023. Field interviews

⁴⁸⁹ ICF. 2023. Field interviews and project mapping (see Case Study 5 - The partnership contribution to enhanced needs-based protection responses)

while there was a limited contribution to improved field coordination (particularly with other humanitarian actors) in some countries. Furthermore, with the exception of single funding initiatives in some countries, the **DG ECHO's support to UNHCR's lead or co-lead role in the cluster coordination system was limited.**

Field and sectoral coordination happened through different platforms depending on the country, but most commonly included bilateral meetings, coordination and collaboration in the context of the cluster system and working groups (where UNHCR played a leading role), meetings of the Humanitarian Country Teams (HCT), and specific national/regional response plans and coordination mechanisms most of which were led or co-led by UNHCR (e.g. R4V, the Regional Refugee Response Plan (RRRP) in Chad, etc.).

In **Bangladesh**, the first phases of the hybrid camp coordination system (i.e. UNHCR and IOM coordinating 50% of the camps each) created issues related to a lack of harmonised approach between the camps. One of the main points that DG ECHO raised with UNHCR (and IOM) was to strongly promote the “one camp approach”, which entailed the maintenance of similar standards in different camps and equity in the services provided to refugees, aiming to ensure that common strategies, systems, protocols, and tools are used across all the camps, regardless of the Areas of Responsibility (AoRs) of the operating agencies.⁴⁹⁰ As a result, both partners made efforts to strengthen their coordinated approach to camp management, which recently led to the creation of a new sector for Site management, Site development and Shelter/NFI co-coordinated by both UNHCR and IOM. In terms of sectoral coordination, UNHCR reported that DG ECHO could be more proactive in order to participate in discussions on sectoral issues at the sub-sector level.⁴⁹¹ However, it is worth mentioning that the limited capacity of DG ECHO in Cox's Bazar did not allow to consistently participate in all coordination structures' meetings, therefore a consequent prioritisation was needed, and that the SEG called for a lower participation of donors in technical discussions (as opposed to strategic ones).⁴⁹²

Good practice

In **Bangladesh**, DG ECHO and UNHCR successfully coordinated their work to advocate for the inclusion of refugees in the vaccination schemes during the Covid-19 pandemic. This is considered by DG ECHO as one of the main achievements of the partnership at field level in the context of the Covid-19 emergency, as both partners were very actively involved in discussions with the Government of Bangladesh and the result guaranteed protection from the virus for Rohingya refugees in the camps.

Room for improvement

In **Bangladesh**, UNHCR reported that lack of coordination between UNHCR and DG ECHO led to the duplication of legal assistance activities in five camps in the Cox's Bazar area. The duplication started in 2021, when another DG ECHO Framework Partner (IRC) shifted its focus towards the provision of legal assistance (using DG ECHO funding), while these activities were already implemented by UNHCR. In UNHCR's opinion, this brought duplication in terms of: 1) the quality of services provided to refugees, as UNHCR had a harmonised approach to legal assistance in 33 camps and IRC operated with its own guidelines (although IRC's activities were carried out by the same implementing partner as UNHCR); 2) the functioning of the legal services, as in the five camps UNHCR and IRC's lawyers were using the same spaces with limited separation of individual files and potential risks of breach of data protection principles.

From UNHCR's point of view this was not an effective solution, as it created duplication and ambiguities, as well as difficulties in monitoring how the budget was used and evaluating the legal assistance activities. Nevertheless, DG ECHO reported that, despite the overlap happened (mainly due to a change in

⁴⁹⁰ ICF. 2023. Field interviews (DG ECHO Country and Field Office), Documentation review (ISCG, Principles of Rationalization in the Rohingya Refugee Response in Bangladesh).

⁴⁹¹ ICF. 2023. Field interviews (UNHCR sub-office).

⁴⁹² Feedback from DG ECHO

human resources in UNHCR and IRC), the three parties organised a meeting during which it was agreed that in the five camps where both IRC and UNHCR were active, IRC would focus on the ones with the highest backlog of legal case management, which resulted from access restrictions during the COVID-19 pandemic.

In **Jordan**, UNHCR was a key player in the coordination of the international response through its role as co-chair of the Inter-Sector Working Group as well as of several working groups, sub-working groups and task forces. DG ECHO reported that, given the relative small size of its funding to UNHCR (compared to donors such as the United States and Germany, and to the overall budget of UNHCR in Jordan) and considering that Jordan is a refugee setting for which UNHCR is mandated to be the lead humanitarian actor (as opposed to an IDP setting), DG ECHO's capacity to influence sectoral coordination was very limited both at political and programmatic level.⁴⁹³ Nevertheless, DG ECHO and UNHCR were generally aligned in their approaches to sectoral coordination in Jordan. For example, due to the recent (2021) reduction of funding to the Jordan crisis and need to improve efficiency and coordination across working groups and sectors, DG ECHO, as a member of the donors group, supported a reorganisation of the coordination structure, which UNHCR then implemented with other relevant agencies.⁴⁹⁴ With regard to field coordination, neither UNHCR nor DG ECHO identified specific impacts or contributions of the partnership in Jordan. However, DG ECHO indicated that **the switch to a more "strategic partnership approach"** (i.e. the move of the Unit responsible for the partnership from Operations to the new DG ECHO Unit D1 responsible for the EU's relations with UNHCR) **reduced the involvement of the field officers and changed the approach to the definition of priorities from a bottom-up to a more high-level approach**. DG ECHO also reported that the "strategic partnership approach" did not produce visible effects at field level, and that at field level the DG ECHO-UNHCR relationship is only based on funding (i.e. donor-implementor relationship), because the policy dialogue has been moved from the operational level to the strategic level, with **little involvement and visibility of the DG ECHO field offices in higher level strategic dialogues**.⁴⁹⁵

In **Chad**, DG ECHO and UNHCR stakeholders had different views regarding the contribution of the partners to sectoral and field coordination. While UNHCR stakeholders reported that DG ECHO should be more present at cluster meetings,⁴⁹⁶ DG ECHO Field Officers highlighted that they regularly meet with several sectoral clusters in order to closely follow the progress of the humanitarian response.⁴⁹⁷ Furthermore, **UNHCR staff reported a limited understanding of DG ECHO procedures (e.g. definition of activities, vulnerabilities, etc)** and suggested that DG ECHO should organise annual information sessions on its funding priorities even at provincial level.⁴⁹⁸ Nevertheless, evidence from the review of project documentation also highlighted that DG ECHO (financially) supported UNHCR's leading role in the Protection Cluster. Funding provided allowed, for example, to organise a cross-border coordination meeting with the clusters of Niger, Cameroon and Nigeria to coordinate efforts in their approaches to protection and population movement risks. Participation in those meetings allowed to find a consensus on common approaches to protection thus reinforcing the synergies of the relevant interventions.⁴⁹⁹

In **Colombia**, at national level there is a coordination system made of clusters (under the Humanitarian Country Team and in charge of the armed conflict, natural disasters and violence) and sectors (under the R4V and in charge of the migration crisis and refugees). The two systems operate through an almost mirrored structure, with similar sectors/clusters as well as sub-sectors/areas of responsibility (e.g. protection, food security, health, education, etc.). DG ECHO regularly followed the cluster coordination through its monitoring missions, and funded the clusters

⁴⁹³ ICF. 2023. Field interviews (DG ECHO Regional and Country Office)

⁴⁹⁴ ICF. 2023. Field interviews

⁴⁹⁵ ICF. 2023. Field interviews (DG ECHO Regional and Country Office)

⁴⁹⁶ ICF. 2023. Field interviews

⁴⁹⁷ ICF. 2023. Field interviews (DG ECHO Country Office).

⁴⁹⁸ ICF. 2023. Field interviews (UNHCR Sub-office)

⁴⁹⁹ ICF. 2023. Project mapping (ECHO/-AF/BUD/2020/92038)

and coordination mechanisms until 2022. DG ECHO staff consulted during the mission raised **criticism on UNHCR's role (and performance) as coordinator in the context of the double coordination structure**, which sees OCHA as a coordinator of the HCT for COLSIT (armed conflict and natural disaster in Colombia) and the Grupo Interagencial sobre Flujos Migratorios Mixtos (GIFMM) led by UNCHR and IOM with responsibility over the VENSIT (Venezuelan migrants crisis). In an attempt to make the system a bit more efficient, a back-to-back mechanism between the two structures was created, however DG ECHO reported that the mechanism is inefficient, doubled the number of meetings and created issues with the management of particular cases (e.g. events affecting both Colombian and Venezuelan victims).⁵⁰⁰ Nevertheless, as a result of DG ECHO's (financial) support to UNHCR Inter-agency coordination for the protection of IDPs (and others affected by the armed conflict), monthly sessions bringing together the Protection Cluster and the GIFMM Protection Sub-Group were organised, leading to enhanced coordination and complementarity between the IDP and Venezuelan responses. DG ECHO also supported a joint cluster/sector protection position to ensure coherence within the two coordination architectures (in 2020) as well as the Protection Cluster (under UNHCR lead) in the pilot implementation of the Rapid Protection Assessment (2018), which provided complementary protection information and analysis to the Multi Interagency Rapid Assessment (MIRA).⁵⁰¹

In **Ecuador**, DG ECHO financially supported UNHCR in its border monitoring and protection monitoring activities in the context of Grupo de Trabajo para Refugiadas y Migrantes (GTRM):

- **Protection Monitoring** is an information analysis tool developed by UNHCR to understand the protection situation of refugees and migrants in the country;
- The **Analysis of the Border Monitoring System and Profile Analysis of Flows** (Análisis del Sistema de Monitoreo de Frontera y Caracterización de Flujos) is an inter-agency information system with two objectives: 1) to compile information on the flow of refugees and migrants recently arrived in Ecuador, in a situation of transit or with a vocation to stay, who enter and/or leave the country using steps or informal crossings in the northern (Colombia) and southern (Peru) border; and 2) to analyse the profiles the population that receives humanitarian assistance during monitoring.

Both these activities were reported by stakeholders to be useful for a coordinated field and sectoral response.⁵⁰² For example, border monitoring allowed for early warning on and forecast of migration influx, better preparedness of the humanitarian community and for an analysis of the profiles of displaced people. Both activities implemented by UNHCR (in collaboration other agencies) contributed to provide consolidated data to the GTRM (especially at local level) and to the other humanitarian actors, which relied on this information to plan the response.⁵⁰³

RQ4: What were the lessons learned from coordination between DG ECHO and UNHCR regional and national offices (e.g. in terms of definition of priorities, compliance with requirements and obligations, information sharing, respect for each other mandates, etc.) (EQ3)?

Overall, **the fieldwork undertaken did not allow to identify specific lessons learned related to the coordination between DG ECHO and UNHCR** regional and national offices. This was, in most cases, due to a generally limited in-depth knowledge of the coordination mechanisms between the two partners. Nevertheless, some evidence was collected on potential improvements in terms of compliance with requirements and obligations as well as information sharing.

Issues with UNHCR's compliance with DG ECHO's requirements and obligations were reported by stakeholders in at least two countries. DG ECHO officers consulted in **Bangladesh** reported that the

⁵⁰⁰ ICF. 2023. Field interviews (DG ECHO Country Office).

⁵⁰¹ ICF. 2023. Project mapping (ECHO/-AM/BUD/2019/91017)

⁵⁰² ICF. 2023. Field interviews (DG ECHO Country Office, UNHCR Sub-office, other humanitarian actors)

⁵⁰³ ICF. 2023. Field interviews (DG ECHO Country Office, UNHCR Sub-office, other humanitarian actors)

quality of proposals and reporting of UNHCR was generally low, however they were satisfied with the quality of implementation (and results) of UNHCR's actions.⁵⁰⁴ Furthermore, as highlighted in Case Study 5, in more than one country in scope (e.g. **Bangladesh, Chad**), **DG ECHO was not satisfied with the data provided by UNHCR**, particularly with their use of Key Outcome Indicators.⁵⁰⁵ DG ECHO consistently raised these issues through comments in proposals and project reports. On the other hand, UNHCR officers reported that, considering that most of their actions are multi-donor, it was difficult to comply with requirements of all donors in terms of reporting (e.g. use of indicators).⁵⁰⁶ In **Jordan**, UNHCR staff mentioned that there should be better coordination between donors regarding monitoring and evaluation requirements (including indicators and joint missions) as well as reporting requirements, which could help reduced the administrative burden.⁵⁰⁷ Lastly, in **Chad**, DG ECHO staff mentioned that UNHCR's consistent use of armed escort in the field was not in line with DG ECHO's principles and practices. Moreover, it was reported that the consistent use of armed forces produced operational constraints to carry out humanitarian action in the field such as delays in reaching the area of operations (e.g. due to the slow convoys), and acted as a deterrent for the production of risk analysis of the areas of operations by UNHCR.⁵⁰⁸

⁵⁰⁴ ICF. 2023. Field interviews (DG ECHO Country and Field Office).

⁵⁰⁵ See RQ1 in Case Study 5: The partnership contribution to enhanced needs-based protection responses

⁵⁰⁶ ICF. 2023. Field interviews (UNHCR Cox's Bazar Sub-office)

⁵⁰⁷ ICF. 2023. Field interviews (UNHCR Country Office)

⁵⁰⁸ ICF. 2023. Field interviews (DG ECHO Country Office)

A8.5 CASE STUDY 5: THE PARTNERSHIP CONTRIBUTION TO ENHANCED NEEDS-BASED PROTECTION RESPONSES

A8.5.1 Objectives and scope of the case study

The **objective** of this case study is to explore **whether and how the DG ECHO-UNHCR partnership contributed to enhanced needs-based protection responses**, focusing on the protection provided to refugees and displaced persons in various regions (e.g. Venezuelan refugees in the LAC region, Syrian refugees in Middle Eastern countries, Rohingya refugees in Bangladesh and Sudanese and Central African refugees, as well as IDPs, in Chad).

In particular, the case study examines:

- The degree of alignment between DG ECHO and UNHCR in terms of needs assessments and vulnerability analyses in the protection sector (both in terms of processes and results), and the impact of the partnership on this;
- The extent to which DG ECHO and UNHCR were aligned in their understanding of the concept of protection within the humanitarian sector and in terms of their protection policies, principles, priorities and objectives; and
- The extent to which the partnership had an impact on the protection principles, priorities and approaches followed by other humanitarian actors and donors in the context of the four crises covered by the case study.

The case study specifically answers the following research questions:

Criteria	Research Questions	EQ
Coherence	<p>Did DG ECHO and UNHCR have a common understanding of the concept of protection and how protection activities should be delivered to beneficiaries? Did the partners have a common understanding of how to measure the results of protection activities?</p> <p>Were DG ECHO and UNHCR aligned in their approaches (e.g. in terms of processes and methodologies) to needs assessments and vulnerability analyses in the protection sector?</p> <p>To what extent did the partnership contribute to enhancing alignment in terms of needs assessments and vulnerability analyses in the protection sector?</p>	EQ 1
Effectiveness	To what extent did the partnership influence the protection principles, priorities and approaches followed by other humanitarian actors and donors?	EQ 4

The case study primarily relies on evidence gathered during the field mission in **Jordan** and **Chad**, as well as the remote mission in **Bangladesh**. It also draws from supporting evidence gathered during the field missions in **Colombia and Ecuador**.

During the in-country field missions (Jordan, Chad, Colombia and Ecuador), the following DG ECHO-funded actions implemented by UNHCR were visited:

- Jordan: Protection Assistance to Refugees in Jordan (ECHO/SYR/BUD/2021/91018)
- Chad: Protection pour les réfugiés et déplacés au Tchad (ECHO/-AF/BUD/2021/92046)
- Colombia and Ecuador: Venezuela, Colombia and Ecuador: Emergency interventions to ensure protection and life-saving humanitarian assistance to vulnerable populations affected by the crisis in Venezuela in the context of the COVID-19 outbreak and its aftermath (ECHO/-AM/BUD/2021/91062).

A8.5.2 Methodological approach

This case study was developed based on data collected through field visits, combined with relevant primary and secondary information collected through other, more general, tasks (i.e. key informant interviews, project review and documentation review).

A8521 Primary data

As mentioned above, this case study mostly relied on **primary evidence (data and stakeholder feedback) collected during the field missions** in Jordan and Chad and the remote field mission to Bangladesh. Although to a lesser extent, it also relied on data collected from the field missions in Colombia and Ecuador.

During the field missions, field researches conducted:

- **Project visits** to consult in person stakeholders involved in the implementation of the selected DG ECHO funded actions (i.e. UNHCR and local implementing partners); and
- **Interviews with relevant stakeholders** in the selected countries (mostly UNHCR and DG ECHO field staff but also local implementing partners, national authorities, and other humanitarian actors).

The field interviews focused on different research issues/aspects, reflecting the experience and insights of the different stakeholders interviewed.

In addition to the above, where relevant, data collected through **key informant interviews** with stakeholders with expertise in the protection sector and knowledge of the DG ECHO-UNHCR partnership were also used to complement data collected in the field.

A8522 Secondary data

The case study also relied on relevant secondary data collected by field researchers in the context of the evaluation and during the preparation for the field mission as well as data provided by stakeholders in the context of the field visits. This included:

- **Relevant documentation on the partnership** shared by DG ECHO and UNHCR in the context of the evaluation;
- **Documentation containing information on country contexts and existing protection needs** (e.g. UNHCR Global Trends Reports, Humanitarian Response Plans, DG ECHO HIPs, UNHCR Data Portal, GTRM reports, Protection Cluster documentation etc.); and
- **Project documentation** (Single Form and FichOp) for the countries visited.

Where relevant, the case study also integrated relevant information presented in the **Desk Report**, which summarised evidence emerging from the documentation review and scoping interviews undertaken during the Desk Phase.

A8523 Data limitations and methodological challenges

During the field visits, the evaluation team encountered some challenges in the data collection activities:

- High staff turnover in both DG ECHO and UNHCR over the evaluation period. In some countries, field staff with knowledge of the DG ECHO-UNHCR cooperation on the ground was no longer in the countries visited and new staff had limited knowledge on the functioning of the partnership between 2017-2021. To mitigate this challenge, data from key informant interviews with DG ECHO and UNHCR staff at HQ and regional level – who have extensive knowledge of the partnership – were also used to complement data collected in the field.

- Most stakeholders consulted – other than DG ECHO and UNHCR – had very little knowledge of the functioning of the partnership and its impacts. While some stakeholders were aware that UNHCR had received funding from DG ECHO, in most cases, they did not know which type of activities were funded. Most stakeholders consulted outside DG ECHO and UNHCR could also not provide feedback on the partners' cooperation and communication on the ground.
- As all UNHCR funded actions were multi-donor, some UNHCR field staff did not know which specific program activities were funded by DG ECHO and therefore could not provide feedback on the impact of those activities. Data gathered through interviews with UNHCR staff at national/country level and with DG ECHO staff helped mitigating this challenge. Moreover, additional data on results of DG ECHO funded actions was collected from the project documentation to complement primary data gathered through other sources.

A8.5.3 Context

A8531 Jordan: National context and main protection needs

The Syrian refugee crisis started 12 years ago as the result of the civil war in Syria which forced millions of Syrians to displace internally within Syria and to neighbouring countries (Egypt, Iraq, Lebanon, Türkiye and Jordan). The conflict is still ongoing with no signs that a solution can be found in the short term.

Of the over 5.4 million registered Syrian refugees⁵⁰⁹ 12% live in Jordan (about 670 thousand in 2022), making it the third main country of asylum of Syrian refugees. After a sharp increase in the beginning of the crisis, the total number of registered Syrian refugees in Jordan has remained stable since mid-2014. Around 20% of the registered Syrian refugees live in refugee camps (Zaatari with about 80 thousand and Azraq with about 40 thousand), while the remaining live in urban areas. In addition to Syrian refugees, there is also a significant number of non-Syrian refugees, mostly Iraqis, Yemenis, Sudanese, Somalis (around 90 thousand by the end 2021) and over 500 thousand people in need from host communities.

The response to the refugee/humanitarian crisis in Jordan was guided by successive “Jordan Refugee Response Plans” developed by the Ministry of Planning and International Cooperation (MOPIC) in close cooperation/collaboration with the national and international partners, including various government ministries (e.g., Ministry of Interior), donors (including DG ECHO as a member of the Jordan Donors Forum), UN agencies (with UNHCR being the key one given its mandate), national and international NGOs. The last plan covered the period 2020 – 2022 but was extended through 2023.

The main protection needs have remained constant in the evaluation period and are identified/described in the Jordan Refugee Response Plan 2020 – 2022.

The lack of legal and civil documentation including birth, marriage, and death certificates due has been a constant issue for many refugees in Jordan, as they can only access to support services if they are registered and have the necessary documentation. Moreover, lack of awareness regarding the procedures to register/obtain the relevant documentation and/or difficulties in obtain those documents led to unregistered marriages and births.

Sexual and gender-based violence (SGBV) was also a major challenge within the refugee communities, with violence against women being socially “accepted” and common,⁵¹⁰ and sexual

⁵⁰⁹ UNHCR, Operational Data Portal, Syria Regional Refugee Response, <https://data.unhcr.org/en/situations/syria>.

⁵¹⁰ According to DHS, in 2018 over 46% of women and 69% of men with ages between 15 and 49 believed to be justifiable for a husband to beat his wife. According to the same study, the most reported forms of violence were psychological abuse, physical assault and denial of resources.

violence / rape being under reported due to the stigma associated with such acts. Child marriage remained prevalent reaching about 70% of the total marriages in the Zaatari camps in 2019, often linked to harmful practices to test the virginity of adolescent girls.

Additional protection risks included:

- Child labour;
- Violence against children;
- Mental health and psychosocial issues;
- Exclusion of marginalised groups, in particular persons with disabilities and the elderly; and
- Risks of lack of security of tenure.

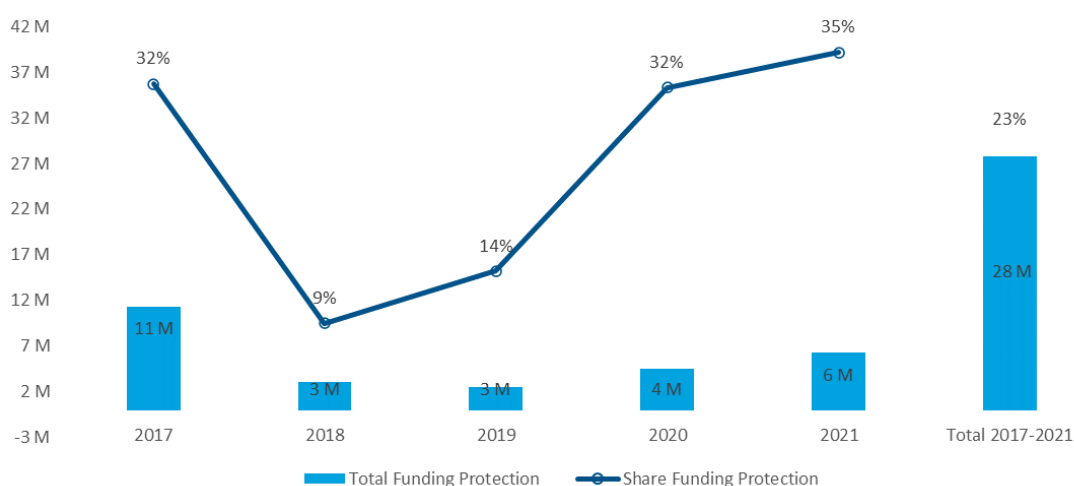
The lack or insufficient legal aid (in particular for vulnerable groups such as women and children), coupled with the cultural pressure for informally resolving disputes, was an important obstacle for refugees to claim their rights and exacerbated the consequences of aforementioned protection challenges as it increased the vulnerability of the victims.

The protection response in Jordan is coordinated by the Protection Working Group established in 2014 and chaired by UNHCR. UNHCR has been leading the international response to the refugee crisis in Jordan from the onset of the crisis. Between 2020 and 2021, UNHCR received funds from many donors, including US (40%), Germany (24%) and EU/DG ECHO (9%). According to UNHCR classification of the received funds, most of the 2020-2021 contributions were not as tightly earmarked as those of DG ECHO.

Over the evaluation period, about 24% of the DG ECHO funding to Jordan was allocated to the protection sector (EUR 29.6 million out of a total EUR 118.8 million) (see Figure 131). UNHCR received about 30% of that funding, being the main DG ECHO partner in the protection sector, followed by NRC (20%) and DRC (19%) (see Figure 132). The main UNHCR protection activities funded by DG ECHO were:

- Provision of a helpline to refugees so that can access information on their rights and entitlements, as well as, being referred to specific services depending on their needs;
- Provision of legal assistance to Syrian refugees;
- Support to ensure the continuous registration to refugees through remote registration, registration centres and delivery methods as appropriate to the context;
- Support to government of Jordan for the expansion of the verification / rectification exercise; and
- Capacity development activities to enhance law and policy, support administrative institutions and strengthen processes and practice.

Figure 131. DG ECHO funding to the Protection sector in Jordan between 2017–2021 (total in million and share of total funding to the protection sector)



Source: ICF elaboration (2023) based on HOPE data extracted on March 2023

Figure 132. DG ECHO funding to Protection sector by partner and total funding to UNHCR in the protection sector between 2017–2021

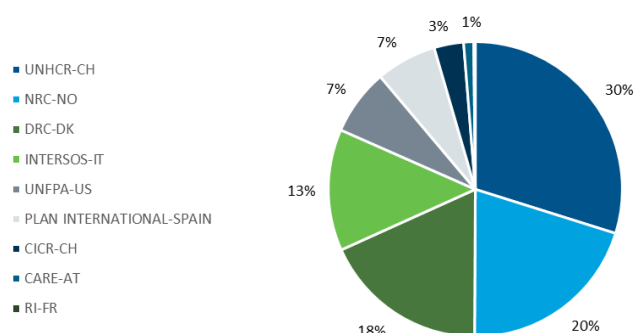
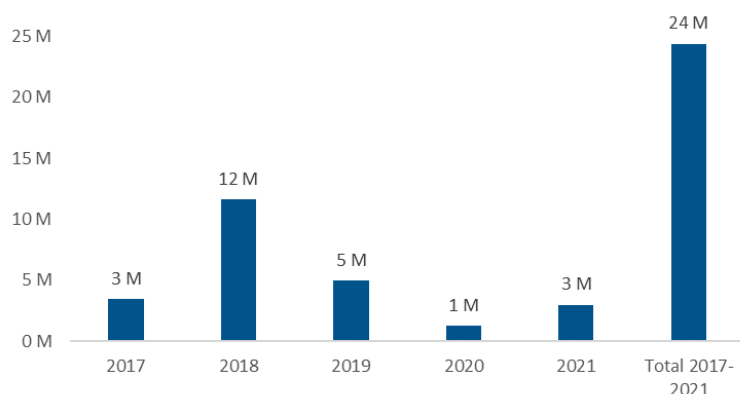


Figure 133. DG ECHO funding to UNHCR in the protection sector between 2017–2021



Source: ICF elaboration (2023) based on HOPE data extracted on March 2023

A85.32 Chad: National context and main protection needs

Chad, a landlocked country in central Africa, has been experiencing complex humanitarian crises for many years, including inter-communal violence, food insecurity, and displacement of people. Between 2016 and 2021, the humanitarian situation in Chad remained challenging, with refugees and internally displaced persons (IDPs) being the most affected.

Chad has more than a million displaced people, of whom 57% are children. Chad is neighbour to several crises affected countries, as of the end of 2021, Chad hosted 555,787 refugees, mainly from Sudan, the Central African Republic (CAR), Nigeria, and Cameroon, over 406,573 IDPs, who have been displaced by conflict, violence, and natural disasters as well as 106,913 returnees.⁵¹¹ Chad also faces food insecurity, with nearly 5.3 million people (51% women) suffering from food insecurity and a 10.9% prevalence of global acute malnutrition.

In addition to the multi-sectoral needs of displaced people, such as shelter, essential household items, access to drinking water, sanitation and primary health care, they need protection. Among displaced children, many are unaccompanied or separated children, exploited by armed groups and child heads of households. The protection situation has significantly degraded in the Lake province over the evaluation period with repeated attacks on villages by armed groups, exposure to explosive remnants of war and the increase in security incidents related to armed conflicts in the Lake region. Between January and September 2021, 1,196 protection incidents were recorded made up of 303 incidents of physical assault, 300 cases of kidnappings, 164 cases of homicides/murders. Abductions mainly affected women and children aged 4 to 17 representing more than half of the victims (52%). Men aged 18 and over represent 83% of homicide/murder victims and cases physical attacks.⁵¹²

Most refugees live in camps (19 camps) and villages (17 villages) while IDPs are scattered in small communities mainly in the Lake region.⁵¹³ Over the evaluation period, the main protection needs included:

- Biographical and biometric data on IDPs and returnees in Lake to ensure access to humanitarian assistance and protection services;
- Access to documentation to prevent risks such as statelessness, movement restrictions, arbitrary arrests, eviction;
- Access to shelters, lands and assets;
- Access to basic services (health and education);
- Peaceful coexistence for socio-economic inclusion of refugees;
- Protection of human rights to tackle family separation, recruitment into armed forces, homicide and physical assault, kidnapping, arbitrary arrests and forced labour;
- Protection from gender-based violence (GBV) including from sexual violence, physical assault, forced and early marriages, denial or resources/opportunities, emotional violence, forced prostitution and sexual slavery;
- Child protection including family care or alternatives, birth certificate, access to education, mental and psychosocial support, mine awareness, socio-economic reintegration of children released from armed groups;
- Assistance for people with specific needs.

To address the humanitarian situation, humanitarian organisations have been providing assistance to refugees and IDPs. However, funding for humanitarian operations in Chad has been inadequate,

⁵¹¹ UNHCR. 2021. Personne relevant de la compétence du HCR Décembre 2021. <file:///C:/Users/N115393/Downloads/UNHCR%20TCHAD%20Statistiques%20des%20personnes%20relevant%20de%20la%20comp%C3%A9tence%20du%20HCR%20Decembre%202021.pdf> UNHCR. 2021. Personne relevant de la compétence du HCR Décembre 2021. <file:///C:/Users/N115393/Downloads/UNHCR%20TCHAD%20Statistiques%20des%20personnes%20relevant%20de%20la%20comp%C3%A9tence%20du%20HCR%20Decembre%202021.pdf>

⁵¹² OCHA. 2022. Aperçu des besoins humanitaires Tchad.

⁵¹³ UNHCR. Global Compact on Refugees. <https://globalcompactrefugees.org/gcr-action/countries/chad>.

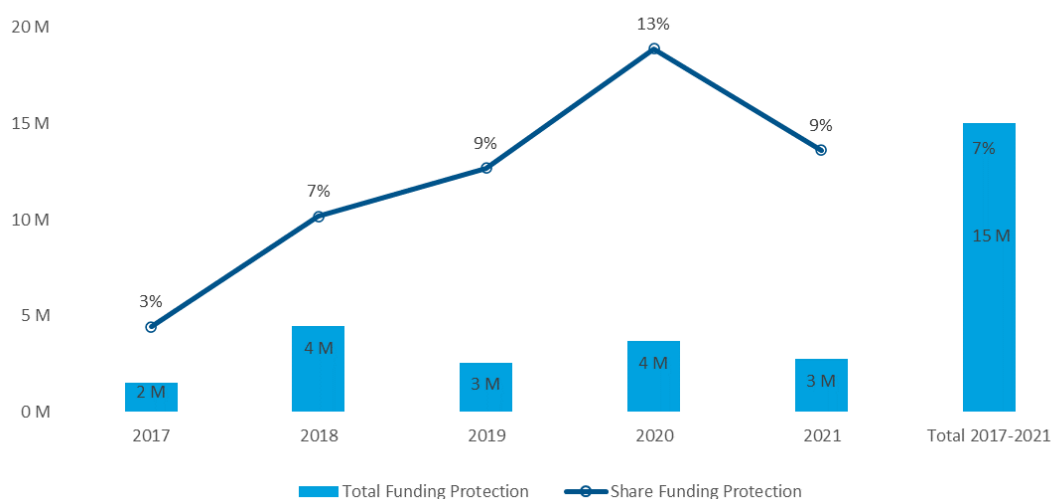
limiting the ability of humanitarian actors to respond adequately to the needs of the affected population.

Over the evaluation period, about 7% of the DG ECHO funding to Chad was allocated to the protection sector (EUR 15 million out of a total EUR 204 million) (see Figure 134). UNHCR received about 31% of that funding, closely followed by ICRC (25%) (see Figure 135 and Figure 132).

The main protection activities funded by DG ECHO and implemented by UNHCR in Chad included:⁵¹⁴

- Implementation of a harmonized approach to protection monitoring (P21);
- Sensitisation of affected populations on access to services and protection assistance in the Lake province;
- Protection against gender-based violence and prevention measures;
- Protection of vulnerable children (e.g. assistance to separated children);
- Individual registration and continuous improvement of the quality of registration;
- Assistance to refugees with specific needs;
- Distribution of NFIs and cash to cover non-food needs of refugees.

Figure 134. DG ECHO funding to Protection the sector in Chad between 2017-2021 (total in million and share of total funding to protection sector)



Source: ICF (2023) based on HOPE data extracted on March 2023

⁵¹⁴ Review of project documentation.

Figure 135. DG ECHO funding to Protection sector by partner and total funding to UNHCR in the protection sector between 2017-2021 in Chad

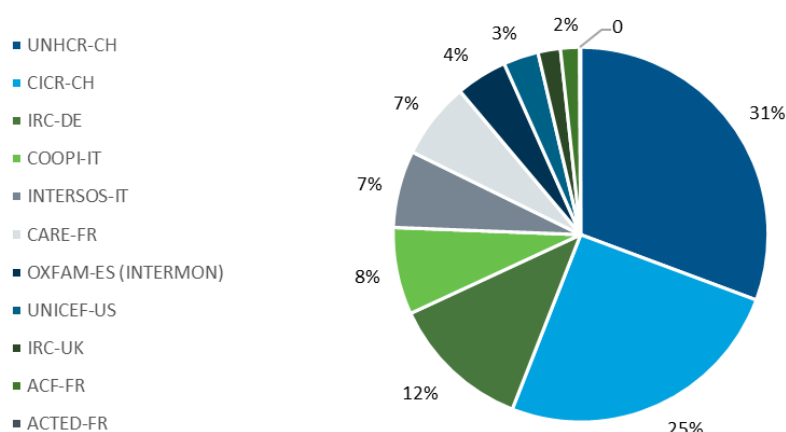
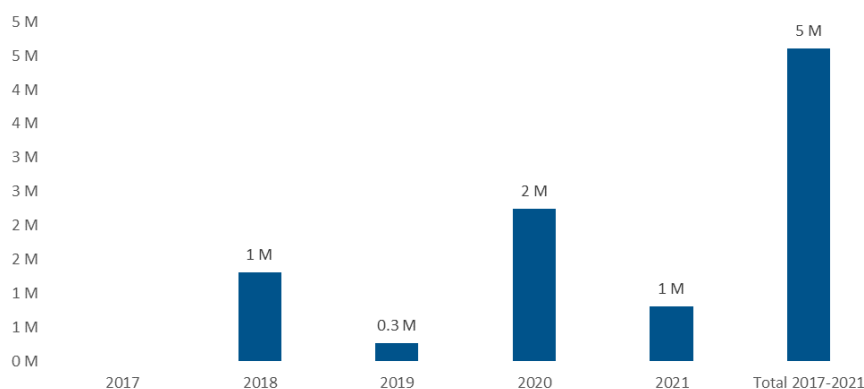


Figure 136. DG ECHO funding to UNHCR in the protection sector between 2017-2021 in Chad



Source: ICF elaboration (2023) based on HOPE data extracted on March 2023

A8533 Bangladesh: National context and main protection needs

Between 2017 and 2021, DG ECHO funded UNHCR to respond to the Rohingya refugee crisis which exacerbated, following a renewed brutal military crackdown in Myanmar's Rakhine State, which led to widespread violence, gross human rights abuses, and an increase in the persecution to which the Rohingya Muslim minority had been subjected for decades. As a result, approximately 773 thousand Rohingya refugees fled to neighbouring Bangladesh, seeking safety and protection.⁵¹⁵ They joined hundreds of thousands of Rohingya who had already fled to Bangladesh during previous waves of violence, bringing the total number of Rohingya refugees to around 1 million.⁵¹⁶ Most of these refugees settled in camps in the Cox's Bazar district.

Over the evaluation period, Rohingya refugees in Bangladesh faced several protection needs while living in the camps, including:⁵¹⁷

- Safety and security: Rohingya refugees faced risks of violence, harassment, and criminality within the camps and by armed groups;
- Gender-based violence (GBV) ;

⁵¹⁵ DG ECHO, Bangladesh, https://civil-protection-humanitarian-aid.ec.europa.eu/where/asia-and-pacific/bangladesh_en.

⁵¹⁶ UNHCR, Bangladesh, <https://www.unhcr.org/bangladesh.html>.

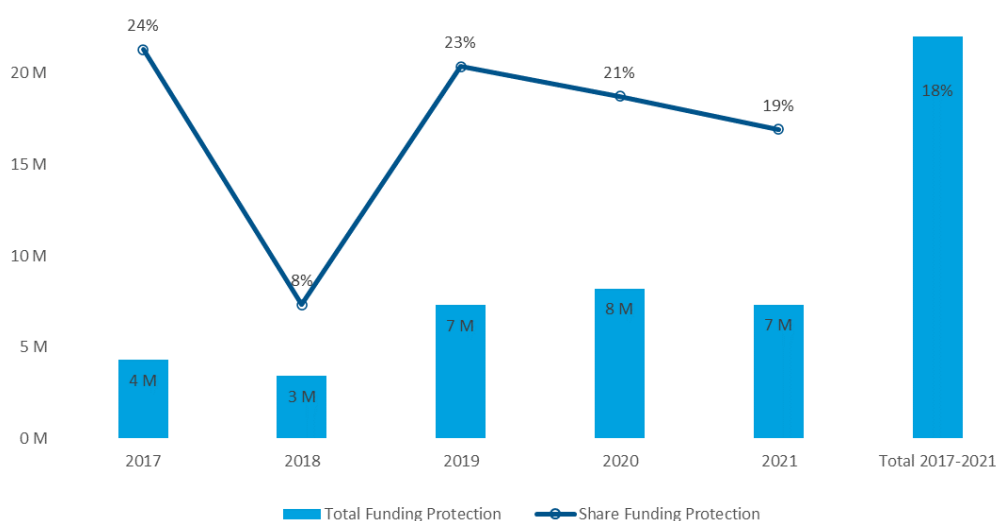
⁵¹⁷ Field interviews and documentation review.

- Child protection: Rohingya children faced various protection risks, including family separation, exploitation, abuse, and neglect;
- Access to documentation: many Rohingya refugees lacked personal identification documents, which hindered their access to humanitarian assistance and essential services;
- Psychosocial support needs;
- Persons with specific needs: persons with disabilities, the elderly, and the chronically ill, required tailored support and assistance to address their specific needs and vulnerabilities; and
- Access to education: limited access to education exacerbated protection risks for Rohingya children refugees, as it may lead to child labour or survival sex.

Over the evaluation period, about 18% of DG ECHO's funding to Bangladesh went to protection activities (EUR 32.2 million out of a total EUR 192.9 million) (see Figure 137). UNHCR was DG ECHO's main protection partner in the country in terms of protection funding (22% of the total funding to protection) followed by IOM (16%) and DRC (16%) (see Figure 138). The main protection activities implemented by UNHCR with DG ECHO funding over the evaluation period included:⁵¹⁸

- Legal assistance;
- Protection monitoring and provision of technical support to humanitarian actors;
- Provision of capacity building to local authorities;
- Advocacy for access to the territory and to reception conditions for Rohingya Refugees and vulnerable host community members;
- Enhance access to justice in order to strengthen protection solutions;
- Awareness raising on gender-violence prevention and response;
- Psycho-social and mental health support (e.g. for survivors of SGBV); and
- Child protection.

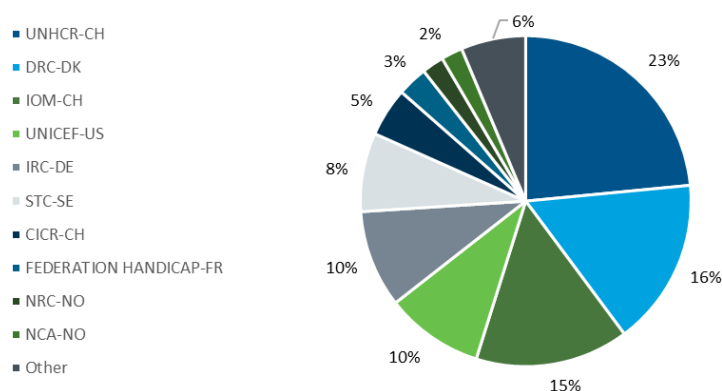
Figure 137. DG ECHO funding to Protection sector in Bangladesh between 2017-2021 (total in million and share of total funding to protection sector)



Source: ICF elaboration (2023) based on HOPE data extracted on March 2023

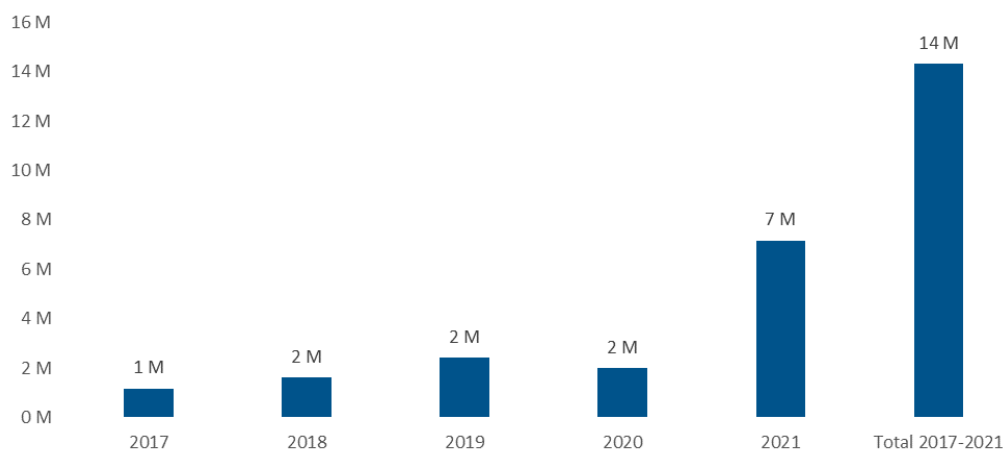
⁵¹⁸ Review of project documentation.

Figure 138. DG ECHO funding to Protection sector by partner and total funding to UNHCR in the protection sector between 2017-2021 in Bangladesh



Source: ICF elaboration (2023) based on HOPE data extracted on March 2023

Figure 139. DG ECHO funding to UNHCR in the protection sector between 2017-2021 in Bangladesh



A85.34 Venezuelan crisis: context and main protection needs

The impact of the Venezuelan political and socioeconomic crisis has extended beyond the country's borders: over 6 million Venezuelan refugees and migrants left the country between 2014 and 2021,⁵¹⁹ representing the biggest mass displacement in the history of South America. Located mainly in other South American countries; by the end of 2021, the largest numbers were reported in Colombia (1.8 million), Peru (1.3 million), Ecuador (508,900) and Chile (448,100).⁵²⁰ According to the UNHCR, by the end of 2021 there were 4.4 million Venezuelans displaced abroad.⁵²¹

Over the evaluation period, Venezuelan migrants and refugees in Ecuador and Colombia faced several protection needs including:⁵²²

⁵¹⁹ Platform for Interagency Coordination for Venezuelan Refugees and Migrants (R4V) (2021) 'RMRP 2022: Regional Refugee and Migrant Response Plan (RMRP)'. Available at: <https://reliefweb.int/report/colombia/rmrp-2022-regional-refugee-and-migrant-response-plan-rmrp-january-december-2022>

⁵²⁰ Platform for Interagency Coordination for Venezuelan Refugees and Migrants (2021) 'Refugiados y Migrantes Venezolanos en la Región, Noviembre 2021'. Available at: <https://www.r4v.info/en/document/r4v-latin-america-and-caribbean-venezuelan-refugees-and-migrants-region-november-2021>

⁵²¹ UNHCR. Global Report 2021. Available at: [Global Report 2021 | Global Focus \(unhcr.org\)](https://www.unhcr.org/global-report-2021/). Venezuelans displaced abroad refers to persons of Venezuelan origin who are likely to be in need of international protection under the criteria contained in the Cartagena Declaration, but who have not applied for asylum in the country in which they are present. Regardless of status, Venezuelans displaced abroad require protection against forced returns, and access to basic services.

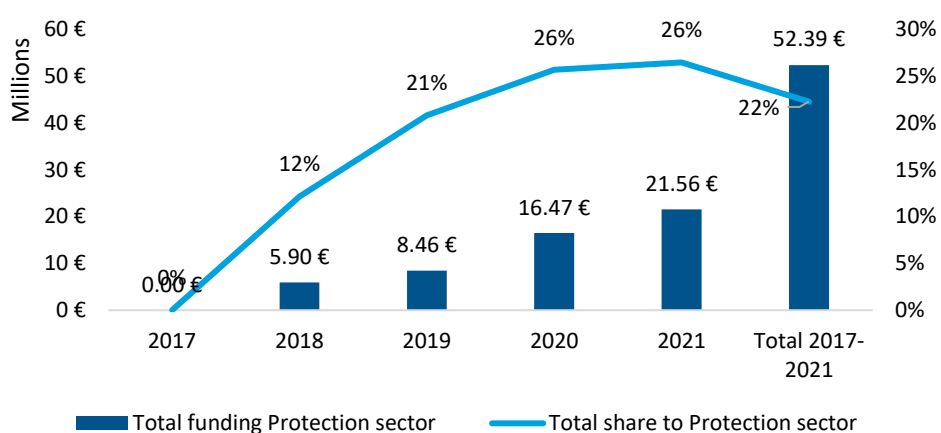
⁵²² Field interviews and observations from project visits and FGDs in Ecuador and Colombia.

- Exposure to serious protection risks (including trafficking, disappearances, kidnappings, forced recruitment by armed groups, extortion, risks to their physical safety) while crossing the border, compounded by the limited information/knowledge of the migratory route, the national context and risks;
- Exposure to violence, including gender-based violence (GBV) but also discrimination and acts of xenophobic violence (which saw an increase during the evaluation period particularly in some countries, like Ecuador);
- Limited access to documentation and legal status (e.g. access to regularization, residency, international protection);
- Need for transit/transport support, and
- Need for psychosocial support.

Between 2017-2021, about 21% of DG ECHO's funding to the Venezuelan crisis went to protection activities (EUR 52.4 million out of a total EUR 235 million) (see Figure 140Figure 137). UNHCR received about 19% of that funding, being the main DG ECHO partner in the protection sector, followed by Danish Refugee Council (15%) and UNICEF (13%) (see Figure 141Figure 132).). UNHCR protection activities funded by DG ECHO over the evaluation varied from country to country but primarily included:

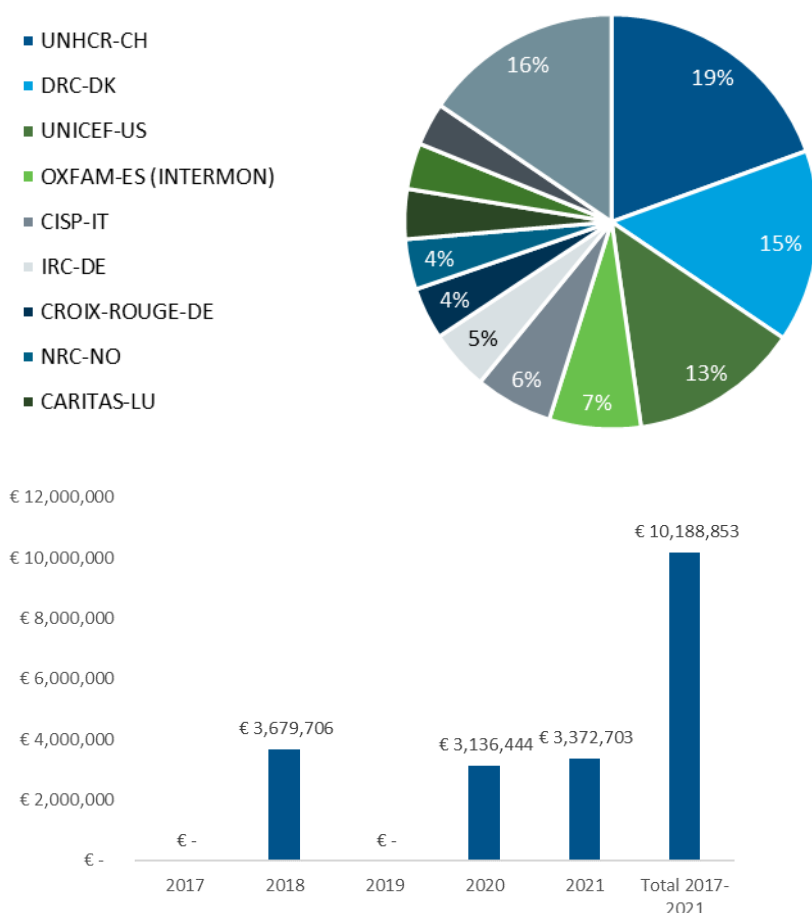
- Registration;
- Protection information dissemination activities;
- Provision of legal assistance;
- Monitoring of protection concerns and profiling of Venezuelan refugees;
- Coverage of basic needs and essential services for persons with specific needs through cash-based interventions;
- Access to basic rights; and
- Capacity building to national authorities.

Figure 140. DG ECHO funding to Protection sector in the context of the Venezuelan crisis between 2017-2021 (total in million and share of total funding to protection sector)



Source: VENSIT data, DG ECHO

Figure 141. DG ECHO funding to Protection sector by partner and total funding to UNHCR in the protection sector between 2017-2021 to the Venezuela Crisis



Source: VENSIT data, DG ECHO

A8.5.4 Case study findings

A8.5.4.1 Coherence

RQ1: Did DG ECHO and UNHCR have a common understanding of the concept of protection and how protection activities should be delivered to beneficiaries? Did the partners have a common understanding of how to measure the results of protection activities? (EQ1)

Evidence collected provided some examples of differences in the way DG ECHO and UNHCR understand what protection encompasses at operational level.⁵²³

According to UNHCR staff, DG ECHO has a narrower understanding of humanitarian protection than UNHCR.⁵²⁴ UNHCR staff and some other Framework Partners consulted during the field missions commented that DG ECHO's understanding is limited to "core protection activities" including for example, physical protection, registration, access to documentation, legal assistance, child protection and prevention and response to sexual and gender-based violence (SGBV).⁵²⁵ UNHCR on the other hand, uses a broader concept of protection, which often includes an "assistance"

⁵²³ ICF. 2023. Field interviews, key informant interviews and documentation review.

⁵²⁴ ICF. 2023. Field interviews and key informant interviews.

⁵²⁵ ICF. 2023. Field interviews and key informant interviews.

component (e.g. provision of food and non-food items, building infrastructure, EiE, healthcare etc.) as these activities are seen as essential to ensuring individual protection and respect of rights. For example, under its Individual Protection Assistance programs (IPA), UNHCR takes an integrated and multi-disciplinary protection approach to address the protection needs of persons of concern (PoCs) which includes for example, the provision of Multi-purpose cash transfers (MPCT), EiE, shelter and healthcare to persons with specific protection needs to prevent their further exposure to risks. For DG ECHO, such activities can only be considered as “protection” if they specifically aim to achieve protection outcomes (as part of integrated protection programming) and not where they are used to address basic needs without links to protection.⁵²⁶ Some DG ECHO staff also expressed concerns around UNHCR including some activities of other sectors (e.g. MPCT, education, health, WASH) under protection results, without these being necessarily linked to protection outcomes, particularly with regard to the use of cash for protection in some contexts.⁵²⁷ This issue is currently being discussed by the partners at strategic level.

DG ECHO understands humanitarian protection as the provision of emergency protection assistance to cover the most urgent needs. Conversely, UNHCR has a broader understanding of what protection in a humanitarian context entails and considers that other types of protection activities, which are not necessarily “live-saving” but rather address protection needs through longer-term programming, should also be included.⁵²⁸ In **Chad** for example, DG ECHO focused on the provision of emergency protection assistance, while UNHCR also wanted to focus on recovery and longer-term solutions for protection issues. UNHCR staff consulted in the field highlighted child marriage as a protection issue that could not be addressed through short term assistance but rather required more structural, longer-term responses.⁵²⁹ These longer-term responses were however not part of DG ECHO's response in the country. In **Colombia and Ecuador**, UNHCR saw the provision of support to livelihoods as linked to protection results as ensuring that people can cover their basic needs was seen as key to avoid resorting to negative coping mechanism and preventing people from being exposed to further protection risks.⁵³⁰

Stakeholders consulted in the field in all countries covered by this case study agreed that DG ECHO and UNHCR were generally aligned in their understanding of existing “core” protection needs e.g., registration, access to documentation, legal assistance, prevention and response to SGBV and child protection. In **Ecuador** for example, DG ECHO and UNHCR were highly aligned in their understanding of the most pressing protection needs and setting protection priorities. For example, over the evaluation period, DG ECHO showed great interest in enhancing protection monitoring and information management, which was also a key priority for UNHCR in Ecuador. Both DG ECHO and UNHCR also prioritised the provision of legal assistance and access to international protection for Venezuelan refugees in the country. Similarly in **Chad**, both DG ECHO and UNHCR identified registration, access to legal assistance and the prevention and response to SGBV as some of the most pressing protection needs.⁵³¹ In the same vein, in

Room for improvement

While existing differences in the partners' understanding of protection were discussed at strategic level i.e. in the context of EU-UNHCR Strategic Dialogues and DG ECHO-UNHCR High-level Dialogues, some DG ECHO and UNHCR staff consulted in the field (i.e. Chad, Bangladesh and Colombia), highlighted that in some cases, more regular discussions at field level on existing protection needs (outside the proposal cycle) could allow to better identify common priorities and discuss existing gaps and

⁵²⁶ For DG ECHO, targeted protection actions consist of two distinct sub-approaches, namely integrated protection programming and stand-alone protection programming. For protection programming to be integrated, there has to be an objective of achieving a protection outcome, and the sectors have to combine efforts to achieve this. See: https://civil-protection-humanitarian-aid.ec.europa.eu/system/files/2016-06/policy_guidelines_humanitarian_protection_en.pdf.

⁵²⁷ ICF. 2023. Key informant interviews, field interviews and documentation review.

⁵²⁸ ICF.2023. Key informant interviews and field interviews.

⁵²⁹ ICF. 2023. Field interviews.

⁵³⁰ ICF. 2023. Field interviews.

⁵³¹ ICF. 2023. Field interviews and project mapping.

Bangladesh DG ECHO and UNHCR also saw case management, legal assistance and border monitoring as essential protection activities.⁵³² In **Jordan**, protection needs were identified and reported in the Jordan Response Plans developed under the leadership of the Ministry of Planning and International Cooperation (MoPIC) involving all humanitarian actors in the country, including UNHCR and DG ECHO.⁵³³ Ensuring access to legal assistance, documentation and registration were among the common protection priorities for the partners over the evaluation period.⁵³⁴

Anecdotal evidence suggests that in some contexts, DG ECHO and UNHCR were not fully aligned in their protection priorities and/or their preferred approaches to address protection needs. For example, in **Colombia**, while DG ECHO wanted UNHCR to focus on providing direct protection assistance to beneficiaries, UNHCR primarily focused its response on capacity building of national and local authorities to strengthen the migration and asylum systems.⁵³⁵ There were also some differences in the way DG ECHO and UNHCR used advocacy strategies to achieve protection outcomes. For example, DG ECHO staff mentioned that they had expected UNHCR to be more vocal on the promotion of the implementation the Cartagena Declaration in **Colombia** as well as in pushing the government to improve the protection system. Similarly, in **Chad**, DG ECHO expected UNHCR to play a more active role in advocating towards the government for the adoption of the Asylum Law and the implementation of the Kampala Convention. In **Jordan**, DG ECHO and UNHCR were not entirely aligned in their views on the use of cash to prevent or address urgent protection needs. DG ECHO considered that in a context where core protection needs (e.g., registration) were still unaddressed, UNHCR – as the only actor that could work on those issues – should have focused on those needs and not have dispersed their efforts.

When it comes to the partners' approaches to measuring the results of protection activities, data collected during the field visits as well as through the key informant interviews and documentation review evidenced significant discrepancies in the way the partners measure and report on protection activities.

DG ECHO staff consulted at HQ and field level noted that UNHCR does not generally use DG ECHO Key Result Indicators (KRIs) and Key Outcome Indicators (KOIs) for protection.⁵³⁶ DG ECHO staff consulted in **Bangladesh** for example, highlighted that UNHCR was too focused on output indicators and did not measure the outcomes of protection activities. Particularly in crises like Bangladesh, where UNHCR has been operating for a number of years, this was considered problematic as the organisation should be able to collect data and present protection outcomes.⁵³⁷ DG ECHO also suggested that UNHCR should use more qualitative indicators. In **Chad**, DG ECHO staff also expressed concerns around the quality of UNHCR's reporting on protection activities. In DG ECHO's view, UNHCR did not always provide sufficient information on how they measure the results of protection activities and were too focused on output indicators.

⁵³² ICF. 2023. Field interviews and project mapping.

⁵³³ ICF. 2023. Field interviews.

⁵³⁴ ICF. 2023. Project mapping.

⁵³⁵ ICF. 2023. Field interviews.

⁵³⁶ ICF. 2023. Scoping interviews, Field interviews, documentation review.

⁵³⁷ ICF. 2023. Field interviews.

UNHCR staff consulted during the field visits and through key informant interviews reported that they had their own monitoring systems and indicators which are not always aligned with those of DG ECHO. Moreover, considering that all UNHCR actions are multi-donor, it was not always possible for UNHCR to use all the different indicators suggested by the different donors. In some cases, the nature of UNHCR's protection activities e.g. training and capacity building, made it very difficult to report on outcome indicators (e.g. to measure increase knowledge of participants in trainings, particularly for national and local authorities). Some UNHCR staff consulted also suggested that DG ECHO should better align its protection indicators with those used by the humanitarian community under the Humanitarian Response Plans (HRP) – which are also generally aligned with national indicators – to ensure consistency and avoid creating a parallel monitoring and reporting system.

Good practice

In **Jordan**, dialogue and exchanges between DG ECHO and UNHCR translated into significant changes in the protection indicators used by UNHCR. Following discussions between the partners, UNHCR introduced indicators to measure protection outcomes (and not just outputs) as well as specific protection mainstreaming indicators. Even though this was not an easy process for UNHCR as it required some changes to its monitoring and reporting systems, UNHCR staff consulted recognised the improvements and added value brought by the use of the new indicators.

In some contexts (e.g. in Jordan and Bangladesh), evidence collected suggests that UNHCR has been making efforts to align, to the extent possible, indicators used in DG ECHO funded actions with DG ECHO's requirements.⁵³⁸ For example, as described in the box above, in **Jordan**, following many discussions with DG ECHO, UNHCR introduced DG ECHO's protection mainstreaming indicators in their proposals. In **Bangladesh**, some UNHCR staff consulted stated that some of DG ECHO's indicators were more useful than their own and confirmed to have invested efforts to use more outcome indicators for protection activities.

RQ2 and RQ3: Were DG ECHO and UNHCR aligned in their approaches (e.g. in terms of processes and methodologies) to needs assessments and vulnerability analyses in the protection sector? To what extent did the partnership contribute to enhancing alignment in terms of needs assessments and vulnerability analyses in the protection sector? (EQ1)

When assessing humanitarian protection needs, both DG ECHO and UNHCR use a similar approach for protection risk analysis (i.e. assessing existing threats, vulnerabilities and capacities). Even though the partners use a slightly different definition of vulnerability, both emphasise that the latter is determined on the basis of specific individual circumstances.⁵³⁹ In some cases however, DG ECHO staff considered that UNHCR's pre-determined list of vulnerabilities was not sufficiently adapted to the context.

For its needs assessments, DG ECHO relies on a combination of data collected by its partners – including UNHCR – and assessments undertaken by DG ECHO's field-based humanitarian experts, as well data from international indices (i.e. the INFORM Risk Index and the INFORM Severity Index).⁵⁴⁰ Over the evaluation period, DG ECHO relied on UNHCR data for its own assessments of humanitarian needs in the HIPs covered by this case study (e.g. number of refugees, number of registered asylum seekers, number of returnees, existing conditions for safe, voluntary, informed and sustainable refugee returns, number of IDPs etc.).⁵⁴¹

⁵³⁸ ICF. 2023. Field interviews.

⁵³⁹ UNHCR, Glossary of Terms, <https://www.unhcr.org/glossary/#p>; DG ECHO, Thematic Policy Document, Humanitarian Protection, Improving protection outcomes to reduce risks for people in humanitarian crises, https://ec.europa.eu/echo/files/policies/sectoral/policy_guidelines_humanitarian_protection_en.pdf.

⁵⁴⁰ European Commission. DRMKC – INFORM. INFORM severity. Available at: <https://drmkc.jrc.ec.europa.eu/inform-index/INFORMSeverity>.

⁵⁴¹ Documentation review.

UNHCR undertakes different types of protection needs assessments depending on the crisis/context and its role in the humanitarian response (e.g. leading the response or contributing). Thus, UNHCR's needs assessment methodology used in the different countries visited slightly varied but mostly included:⁵⁴²

- Participatory and community-based needs assessments with persons of concern (e.g. through key informant interviews, focus groups, feedback mechanisms, surveys etc.) following UNHCR's age, gender and diversity (AGD) policy;
- Border and protection monitoring activities;
- Joint needs assessments in the context of the cluster system, working groups/task forces and the GTRM/GIFMM (in Ecuador/Colombia);
- Consultations and workshops with local and national partners;
- Inter-agency rapid assessments; and
- Observations and assessments missions undertaken by UNHCR protection staff.

In addition to the above, in all countries covered by this case study, UNHCR's registration activities (implemented directly or through local implementing partners) were seen as an important tool to identify existing protection needs and refer beneficiaries to the relevant protection services.⁵⁴³

The field visits did not show any significant discrepancies in the ways DG ECHO and UNHCR approached needs assessments and vulnerability analysis in the protection sector.

Nonetheless, the degree of alignment between UNHCR's needs assessments with DG ECHO's requirements varied from country to country:

- In **Bangladesh**, DG ECHO praised the quality of UNHCR's needs assessments and in particular, UNHCR's protection risk analysis. Nonetheless, in the face of a raise in the number of security incidents in the camps, DG ECHO requested UNHCR to enhance its assessment of the security situation and provide more qualitative data on existing security risks. Moreover, in DG ECHO's view, UNHCR should have made more efforts to identify people with disabilities in the camps. DG ECHO found that the number of people with disabilities reported by UNHCR was very low when compared to numbers reported by other Framework partners (around 1% versus 12% reported by other humanitarian actors).⁵⁴⁴
- In **Chad**, DG ECHO staff had different views on the quality of UNHCR's protection needs assessments. The quality of these assessments also varied considerably across the funded actions. For example, for the 2018 UNHCR funded action, DG ECHO considered that the need assessments undertaken by UNHCR were rather generic and not always up to date. Conversely, for the 2020 and 2021 funded actions, UNHCR's needs assessments (particularly in the protection sector) were found to be sufficiently comprehensive and detailed. DG ECHO staff consulted in the field mentioned that UNHCR protection assessments included in the proposals for Chad were often too general and did not provide enough information on existing needs, risks and vulnerabilities. According to DG ECHO staff, UNHCR staff on the ground had a very good understanding of existing needs but this was not always well reflected in the proposals.⁵⁴⁵
- In **Jordan**, DG ECHO found that the number and quality of needs assessments undertaken by UNHCR were adequate and sufficient. Moreover, the vulnerability

⁵⁴² ICF. 2023. Field interviews and project mapping.

⁵⁴³ ICF. 2023. Field interviews and project mapping.

⁵⁴⁴ ICF. 2023. Field interviews and project mapping.

⁵⁴⁵ ICF. 2023. Field interviews and project mapping.

Framework developed by UNHCR, together with the World Bank, was considered by DG ECHO to be a very useful tool to assess vulnerabilities and their evolution over time. However, DG ECHO indicated that they would have preferred to receive the results of needs assessments with a higher level of disaggregation and that the Vulnerability Framework could have also covered host communities.⁵⁴⁶

- In **Colombia and Ecuador**, DG ECHO positively assessed the quality of UNHCR's needs assessments undertaken for actions funded in the context of the Venezuelan crisis overall, but also made some recommendations on how to strengthen these (e.g. better assessing the needs of IDPs in Colombia, making sure the needs assessments were updated during the course of implementation of the actions etc.).⁵⁴⁷

UNHCR staff consulted during the field visits did not report any challenges in complying with DG ECHO's requirements for needs assessments in the context of the funded actions. UNHCR staff consulted through the key informant interviews mentioned however that often, UNHCR has access to very sensitive protection information on PoCs that cannot be put in writing to avoid, among other things, that this information is used by donors for advocacy purposes towards the government which in some countries, could be detrimental to UNHCR's capacity to deliver protection assistance.⁵⁴⁸ That is why in some cases, UNHCR needs assessments included in the proposals did not contain very detailed information on some protection indicators as requested by DG ECHO. This issue has been discussed with DG ECHO staff in different contexts.

DG ECHO and UNHCR were largely aligned in their targeting strategies in all counties visited, although the degree of alignment varied from country to country.⁵⁴⁹ In **Bangladesh** for example, both partners focused on the provision of protection assistance to the most vulnerable refugees.⁵⁵⁰ Similarly in **Chad**, DG ECHO and UNHCR prioritised the provision of assistance to newly displaced populations as well as other vulnerable groups (e.g. children, victims of SGBV, etc.).⁵⁵¹ In **Ecuador and Colombia**, the partners transitioned from a targeting approach based on nationality (funded actions differentiated between Colombian and Venezuelans) to a targeting strategy based on vulnerability regardless of the nationality (as of 2021).⁵⁵² That was the result of regular conversations between DG ECHO and UNHCR at national and field level. This shift in targeting strategy was very relevant to avoid tensions between Venezuelans and the local population in Colombia and with Colombian immigrants and refugees in Ecuador.

Despite a general alignment in targeting approaches, evidence collected also provided some examples of differences between the partners:

- In **Chad**, UNHCR pushed to target all refugees and not only the most vulnerable ones. This was not in line with DG ECHO's targeting strategy in the country which required focusing on the most vulnerable groups. While DG ECHO allowed for a blanket targeting approach when it came to new arrivals, it required UNHCR to target other groups based on vulnerability.⁵⁵³
- In **Jordan**, UNHCR targeted any refugees with specific needs without further consideration to existing vulnerabilities. DG ECHO staff consulted reported that they had often encouraged UNHCR to better contextualise vulnerabilities and adjust their programming accordingly, as a more granular approach to targeting would allow a better prioritisation of resources. DG ECHO staff also indicated that they have discussed

⁵⁴⁶ ICF. 2023. Field interviews.

⁵⁴⁷ ICF. 2023. Field interviews and project mapping.

⁵⁴⁸ ICF. 2023. Key informant interviews.

⁵⁴⁹ ICF. 2023. Field interviews and project mapping.

⁵⁵⁰ ICF. 2023. Field interviews and project mapping.

⁵⁵¹ ICF. 2023. Field interviews.

⁵⁵² ICF. 2023. Field interviews.

⁵⁵³ ICF. 2023. Field interviews and project mapping.

this with UNHCR and that there were noticeable improvements over the evaluation period.⁵⁵⁴

- In **Bangladesh**, DG ECHO staff considered that UNHCR should have made more efforts to identify and target people with disabilities.⁵⁵⁵
- In **Ecuador**, DG ECHO focused primarily on new arrivals and people in transit while UNHCR also prioritised the provision of assistance to people who wanted to stay in Ecuador.⁵⁵⁶

There was no evidence that the DG ECHO-UNHCR partnership contributed to enhancing alignment between the partners' approaches to needs assessments and vulnerability analyses in the protection sector in any of the countries visited. As already described above, UNHCR has its own processes to identify needs and vulnerabilities that are independent from those of its donors (including DG ECHO's).

The partnership between DG ECHO and UNHCR in the countries visited was mostly seen as a “donor-implementer relationship” with little impact on strategic and structural aspects. One UNHCR staff consulted in **Chad** highlighted that the fact that the exchange of information on existing needs between DG ECHO and UNHCR only happened in the context of the submission of proposals, limited the impact that their cooperation could have on their approaches to needs assessments (see also above). Having more regular exchanges on existing needs and approaches to needs assessments outside the project cycle could better enhance the partners' needs assessments and vulnerability analysis and better align their approaches thereof. Similarly, in **Colombia**, the fact that the exchanges between DG ECHO and IOM were mostly project-based limited the impact of their cooperation on more strategic aspects. In DG ECHO's view, the limited cooperation with UNHCR on strategic aspects in Colombia was mostly due to: UNHCR's internal structure (funding was provided at regional level and managed by the regional office, and the fact that all exchanges had to go through UNHCR External Relations Officers who did not always have the necessary technical expertise on specific sectors); the very politicised context in the country (and the region); and the limited funding that DG ECHO provided to UNHCR in Colombia which reduced DG ECHO's leverage with UNHCR on strategic aspects.

A85.4.2 Effectiveness

RQ4: To what extent did the partnership influence the protection principles, priorities and approaches followed by other humanitarian actors and donors? (EQ4)

The field visits evidenced that **there was little awareness of the specificities of the DG ECHO-UNHCR partnership among humanitarian actors in the field.** In some cases, humanitarian actors were aware that UNHCR had received funding from DG ECHO but did not always know for which activities nor had information about the DG ECHO-UNHCR cooperation on

Room for improvement

The field visits showed that in most cases, there was little knowledge of the DG ECHO-UNHCR cooperation among humanitarian actors on the ground. Moreover, UNHCR staff and another DG ECHO Framework partner consulted in the context of the field visits also stated that overall, DG ECHO could provide more information on which organisations are being funded and for which types of activities to facilitate coordination. This lack of information sometimes made it more difficult to maximise existing synergies in the protection sector and to avoid duplications of efforts among DG ECHO-funded partners. One framework partner consulted highlighted as a good practice the approach taken by other humanitarian donors of bringing together all organisations funded to discuss the type of activities implemented.

⁵⁵⁴ ICF. 2023. Field interviews.

⁵⁵⁵ ICF. 2023. Field interviews.

⁵⁵⁶ ICF. 2023. Field interviews.

the ground. This lack of visibility made it difficult for stakeholders other than DG ECHO and UNHCR to provide feedback on the impact of the partnership on the overall protection responses.

The field visits did not generate any evidence related to the influence of the partnership on the protection principles, priorities and approaches followed by other humanitarian actors and donors on the ground. This was partly explained by the fact that: a) the partnership between DG ECHO and UNHCR in the countries visited was mostly a “donor-implementer relationship”; b) there was little knowledge of the partnership and its effects among humanitarian actors; and c) the small share of DG ECHO's funding provided to UNHCR as compared to other donors. In **Jordan**, however, stakeholders consulted stated that when compared to the share of budget provided by DG ECHO to UNHCR in the country, DG ECHO had a relatively high influence in their response due to their presence in the field and high technical expertise.

The field missions also provided a few examples of **joint advocacy efforts** in the framework of the partnership that contributed, at least to some extent, to amplifying protection messages and raising awareness on existing protection needs. For instance, in **Bangladesh**, DG ECHO and UNHCR joined efforts to advocate for any Government relocation of refugees to Bhasan Char to be voluntary. In **Chad**, DG ECHO supported UNHCR and the protection cluster in the preparation of the advocacy note on abductions. In **Ecuador**, DG ECHO and UNHCR worked together on raising awareness about Venezuelan migrants and refugees in the country through the “On the Other Side” campaign. UNHCR staff consulted in the field mentioned that the visibility that DG ECHO gave to the Venezuelan crisis in the country was very helpful in attracting the attention of other donors.

UNHCR and DG ECHO staff consulted in the countries visited also overall agreed that their partnership contributed, at least to some extent, to enhancing the quality of the overall humanitarian protection response, primarily through the funding provided by DG ECHO to some of UNHCR's core protection activities (e.g. protection monitoring, registration and capacity building).

In Chad, Bangladesh and Ecuador, DG ECHO's support to UNHCR's **protection information management and monitoring** contributed to enhancing the quality of the overall protection response by making available to the humanitarian community and national authorities, relevant data on existing protection needs and risks. This information facilitated the planning and implementation of protection responses.⁵⁵⁷ In **Bangladesh** for instance, UNHCR's border monitoring activities supported by DG ECHO (among other donors)

Good practice

In Chad, DG ECHO facilitated a briefing organised by UNHCR in context of the Protection Cluster to explain the protection situation and existing protection risks to donors and mobilise additional resources for the protection response. This was considered as a good practice by both DG ECHO and UNHCR. The initial idea was to organise these briefings on a regular basis, however, due to UNHCR staff turnover, this regularity

Good practice

DG ECHO's presence in the field and their technical expertise were positively valued by several UNHCR staff consulted in the different countries visited.

Recommendations made by DG ECHO staff during monitoring visits were also highly appreciated and, in some cases, translated into adaptations to UNHCR's actions (e.g. enhanced accountability to affected populations in Bangladesh).

were seen as an essential protection tool to monitor movements from Myanmar and Cox's Bazar. In **Ecuador**, DG ECHO's support to UNHCR border monitoring (“*monitoreo de frontera*”)⁵⁵⁸ and information management activities – undertaken together with other humanitarian actors in the context of the GTRM – were highly valued by different stakeholders consulted (i.e. DG ECHO, UNHCR, local implementing partners and national authorities). The information provided in the context of border monitoring activities was also used by

⁵⁵⁷ ICF. 2023. Field interviews.

⁵⁵⁸ See: <https://www.r4v.info/en/ecuador>.

national authorities to plan their own response.⁵⁵⁹ Protection information collected by UNHCR was also perceived as essential to understand existing protection needs and to adequately design the overall protection response. In **Chad**, DG ECHO supported the implementation of UNHCR's P21 project which established a harmonised protection monitoring system at regional level in the Lac region. The implementation of the P21 approach contributed to generating a more coherent picture of the protection situation in that region that allowed to better plan and implement protection responses.⁵⁶⁰ Moreover, in Chad, DG ECHO recommended UNHCR to develop a service mapping that would offer information on available protection services per type of protection need. Following DG ECHO's recommendation a service mapping exercise was concluded in 2021 in cooperation with the protection cluster and all relevant protection actors. The service mapping was considered to be very useful to enhance the quality of the protection response and to facilitate access to protection services.⁵⁶¹

DG ECHO's support to UNHCR's **registration activities** in some of the countries covered by the case study also contributed to some extent to enhancing the quality of the protection response. In **Ecuador and Colombia**, for example, UNHCR's registration activities supported by DG ECHO facilitated access to other protection services e.g. legal assistance, psychosocial support, protection against SGBV etc. In **Jordan**, DG ECHO's support to UNHCR's registration activities was positively valued by stakeholders consulted as this activity was seen as key to allow refugees to access other types of support like health and education.

Through the funding provided to UNHCR's **capacity building activities** with national authorities, the partnership also contributed to some extent to enhancing the quality of the protection response. In **Ecuador** for instance, the support provided by UNHCR to public institutions (i.e. Directorate for International Protection (DPIN), Ombudsman and Public Defender's Office) was seen by stakeholders as key for strengthening the national asylum system and ensuring access to protection services. Thanks in part to DG ECHO's funding (among other donors), UNHCR managed to increase the capacity of the DPIN to identify and process international protection cases as well as of the Public Defenders' Office which provided free legal assistance to migrants and refugees. Similarly, in **Colombia**, DG ECHO's financial support to UNHCR activities aiming to enhance the capacity of the Public Defenders was seen as key specially to address the double affection issue as, in some areas of the country, public defenders were the only ones present on the ground. In **Jordan**, the support provided to UNHCR's capacity development activities contributed to achieving changes among government actors e.g. with regard to the use of administrative detention for refugees.

Stakeholders consulted during the field missions also highlighted some **aspects that may have prevented the partnership from fully achieving the desired impacts on the ground** (including improving the quality of protection responses). The table below provides some examples of hindering factors reported by UNHCR and DG ECHO staff consulted in the different countries covered by this case study.

Table 56. Challenges identified (per country)

Country	Challenges
Bangladesh	<p>UNHCR staff consulted stated that there was a need for more regular exchanges with DG ECHO on existing protection issues outside the context of the of proposals and monitoring visits. In DG ECHO's view, UNHCR could have been more proactive in reaching out to DG ECHO and other donors to discuss the protection context.</p> <p>There were some issues of duplication of protection activities. Over the evaluation period, UNHCR received funding from DG ECHO for legal assistance activities in the camps. These activities were implemented through two local implementing partners. At the same</p>

⁵⁵⁹ ICF. 2023. Field interviews.

⁵⁶⁰ ICF. 2023. Field interviews and project mapping.

⁵⁶¹ ICF. 2023. Field interviews and Project Mapping.

Country	Challenges
	<p>time DG ECHO was funding IRC to implement the same activities through the same local implementing partners. UNHCR raised this issue with DG ECHO and IRC who agreed to find a solution.</p>
Chad	<p>Lack of a clear definition the partnership and a common strategic vision at operational level. The partnership was defined by field staff in both organisations and their good or bad relationship.</p> <p>DG ECHO reported some issues with the overall quality of UNHCR protection activities.</p> <p>The high staff turnover within UNHCR was perceived as a factor that may have hampered continuity and the achievement of greater impacts.</p>
Jordan	<p>UNHCR's local implementing partners consulted indicated that the "double hat" of UNHCR as key implementing actor and key response coordinator may have hindered their ability to focus on the protection needs, they were better placed to address and their availability to give space to other organisations to address other protection needs.</p> <p>The good UNHCR and DG ECHO cooperation on ground was seen as something independent of the Strategic Partnership (at global level). The Strategic Partnership between both organisations did not have an impact in how they worked at country and local level. In the field, there was a lack of visibility of what is being discussed at HQ level in the context of the Strategic Partnership.</p>

Source: ICF based on field interviews.

ANNEX 9 TERMS OF REFERENCE

Terms of Reference for the Combined evaluation of the European Union's response to the Venezuelan regional crisis, and of DG ECHO's partnership with the United Nations High Commissioner for Refugees, 2017-2021

A9.1 EU HUMANITARIAN INTERVENTIONS

A9.1.1 Framework

The **legal base** for Humanitarian Aid is provided by Article 214 of the Treaty on the Functioning of the European Union, and the Humanitarian Aid Regulation (HAR). The objectives of European Union (EU) humanitarian assistance are outlined there and could – for evaluation purposes – be summarized as follows: From a donor perspective and in coordination with other main humanitarian actors, **to provide the right amount and type of aid, at the right time, and in an appropriate way, to the populations most affected by natural and/or manmade disasters, in order to save lives, alleviate suffering and maintain human dignity.**

The **European Consensus on Humanitarian Aid** (the Consensus) – which has been jointly endorsed by the Council, the EU Member States, the European Parliament and the Commission – provides a reference for EU humanitarian aid, and outlines the common objectives, fundamental humanitarian principles and good practices that the European Union as a whole pursues in this domain. The aim is to ensure an effective, high-quality, needs-driven and principled EU response to humanitarian crises. It concerns the whole spectrum of humanitarian action: from preparedness and disaster risk reduction, to immediate emergency response and life-saving aid for vulnerable people in protracted crises, or to situations of transition to recovery and longer-term development. The Consensus has thus played an important role in creating a vision of best practice for principled humanitarian aid by providing an internationally unique, forward-looking and common framework for EU actors. It has set out high-standard commitments and has shaped policy development and humanitarian aid approaches both at the European Union and Member State level. Furthermore, with reference to its overall aim, the Consensus has triggered the development of a number of humanitarian **sectoral policies**.

The humanitarian aid budget is implemented through annual funding decisions adopted by the Commission, which are directly based on Article 15 of the HAR. The World Wide Decisions (WWD) define inter alia the total budget, and budget available for specific objectives, mechanisms of flexibility and for humanitarian operations in each country/region. The funding decision also specifies potential partners, and possible areas of intervention. The operational information about crises and countries for which humanitarian aid should be granted is provided through the General Guidelines on Operational Priorities for Humanitarian Aid and the 'Humanitarian Implementation Plans' (HIPs). They are a reference for humanitarian actions covered by the WWD and contain an overview of humanitarian needs in a specific country or region at a specific moment of time.

DG ECHO has more than 200 partner organisations for providing humanitarian assistance throughout the world. **Humanitarian partners** include non-governmental organisations (NGOs), international organisations such as ICRC and IFRC and the United Nations agencies and specialised Member States agencies. Having a diverse range of partners is important for DG ECHO because it allows for comprehensive coverage of the ever-expanding needs across the world – and in increasingly complex situations. DG ECHO has developed increasingly close working relationships with its partners at the level of both policy issues and management of humanitarian operations.

DG ECHO has a worldwide network of **field offices** that ensure adequate monitoring of projects funded, provide up-to-date analyses of existing and forecasted needs in a given country or region, contribute to the development of intervention strategies and policy development, provide technical support to EU-funded humanitarian operations, and facilitate donor coordination at field level.

DG ECHO has developed a two-phase framework for assessing and **analysing needs** in specific countries and crises. The first phase of the framework provides the evidence base for prioritisation of needs, funding allocation, and development of the HIPs.

The first phase is a global evaluation with two dimensions:

- Index for Risk Management (INFORM) is a tool based on national indicators and data which allows for a comparative analysis of countries to identify their level of risk to humanitarian crisis and disaster. It includes three dimensions of risk: natural and man-made hazards exposure, population vulnerability and national coping capacity. The INFORM data are also used for calculating a Crisis Index that identifies countries suffering from a natural disaster and/or conflict and/or hosting a large number of uprooted people.
- The Forgotten Crisis Assessment (FCA) identifies serious humanitarian crisis situations where the affected populations do not receive enough international aid or even none at all. These crises are characterised by low media coverage, a lack of donor interest (as measured through aid per capita) and a weak political commitment to solve the crisis, resulting in an insufficient presence of humanitarian actors.

The second phase of the framework focuses on context and response analysis:

- The Funding Information Tool (FIT) is the IT tool for the Humanitarian Aid Funding Allocation Exercise, helping to provide evidence-based decision making. To start this process, an Expert Survey is launched yearly for its completion by the Field Experts, which is then validated by their hierarchy through a workflow. The validated feedback will be used to provide data for the funding allocation proposals algorithm.

In 2016, the Commission endorsed the **Grand Bargain**, which is an agreement between more than 30 of the biggest donors and aid providers, with the aim to close the humanitarian financing gap and get more means into the hands of people in need. To that end, it sets out 51 commitments distilled into 10 thematic work streams, including e.g. gearing up cash programming, improving joint and impartial needs assessments, and greater funding for national and local responders.

A9.1.2 Scope & Rationale

The European Union aims at being a **reference humanitarian donor**⁵⁶², by ensuring that its interventions are coherent with the **humanitarian principles**⁵⁶³, are relevant in targeting the most vulnerable beneficiaries, are duly informed by needs assessments, and promote resilience building to the extent possible. The Commission also takes the role of – when necessary – leading, shaping, and coordinating the response to crises, while respecting the overall coordination role of the UN OCHA.

Interventions have a focus on **funding critical sectors and addressing gaps** in the global response to the needs of the most vulnerable populations, mobilising partners and supporting the overall capacity of the humanitarian system. As a consequence of the principled approach and addressing gaps in overall response, the EU intervenes in **crises**⁵⁶⁴ where needs and vulnerability of affected people are the highest, i.e., severe, protracted humanitarian crisis situations where affected populations are receiving no or insufficient international aid and where there is little possibility or no political commitment to solve the crisis. This refers primarily to protracted conflict and violence situations but can also refer to crises resulting from the cumulative effect of recurring natural disasters, or, a combination of different factors.

Actions funded comprise **assistance, relief and protection operations** on a non-discriminatory basis to help people in developing countries, particularly the most vulnerable among them, victims

⁵⁶² I.e., a principled donor, providing leadership and shaping humanitarian response.

⁵⁶³ Humanity, Impartiality, Neutrality and Independence

⁵⁶⁴ See also http://ec.europa.eu/echo/what/humanitarian-aid/needs-assessments_en

of natural disasters, man-made crises, such as international and non-international armed conflicts, violence and outbreaks of fighting, or exceptional situations or circumstances comparable to natural or man-made disasters. The actions should extend the time needed to meet the humanitarian requirements resulting from these different situations. Protection mainstreaming in all projects, regardless of the sector, is key. This implies incorporating protection principles and promoting meaningful access, safety and dignity, accountability, and participation and empowerment for all gender, age and diversity groups in humanitarian aid.

Health is a core sector of humanitarian aid interventions and the main reference for measuring overall humanitarian response. With the global trends of climate change and food insecurity a growing and ageing population, together with the increasing frequency and scale of natural disasters and the persistency of conflicts, humanitarian health needs are continuing to increase. Given the significance of Commission humanitarian health assistance for the health sector in emergencies, and of the sector for Commission humanitarian health assistance, the Commission developed a set of Guidelines to support an improved delivery of affordable health services, based on humanitarian health needs.

The poorest people carry the greatest exposure to the consequences of disasters such as **food insecurity and under-nutrition**. Insufficient food production or an inability of vulnerable people to purchase enough nutritious food leads to malnutrition and under-nutrition. Moreover, dramatic interruptions in food consumption heighten risks of morbidity and mortality. Addressing under-nutrition requires a multi-sector approach and a joint humanitarian and development framework. Humanitarian food assistance aims to ensure the access to and consumption of sufficient, safe and nutritious food in anticipation of, during, and in the aftermath of a humanitarian crisis. The European Commission is a member of the Food Assistance Convention and commits to provide a minimum of €350 million annually to alleviate food insecurity. The EU has largely exceeded its commitment in 2020 allocating in total €500 million for humanitarian food assistance and nutrition.

Protection is a core sector and it is embedded in DG ECHO's mandate as defined by the HAR and confirmed by the European Consensus on Humanitarian Aid. The purpose of EU-funded protection interventions is to prevent, reduce and respond to the risks and consequences of violence, deprivation and abuse. The Staff Working Document Humanitarian Protection: improving protection outcomes to reduce risks for people in humanitarian crises, released in May 2016, outlines the definition and objectives of the European Commission's humanitarian protection work. It provides guidance for the programming of protection work in humanitarian crises, for measuring the impact of sectoral interventions and for planning related technical activities.

Education in emergencies is crucial for both the protection and socio-emotional development of girls and boys affected by crises. It can rebuild their lives; restore their sense of normality and safety, and provide them with important life skills. It helps children and adolescents to be self-sufficient and to have more influence on issues that affect them. It is also one of the best tools to invest in their long-term future, and in the peace, stability and economic growth of their countries. Yet it has traditionally been one of the least funded humanitarian sectors. With the level of funding at 1% of its annual humanitarian budget still in 2015, the European Commission increased this share to 8% in 2018 and reached 10% in 2019, with an unprecedented funding target of 164 million euros. Globally, less than 3% of global humanitarian funding is allocated to education. Nearly 12 million girls and boys have benefited from EU-funded educational projects between 2015 and 2020.

Urban areas are complex settings to implement humanitarian assistance and are different from rural areas in terms of needs and vulnerabilities of the affected people. Furthermore, capacities, methods, and preparedness of local actors, institutions, and partners vary considerably between cities. Humanitarian actors, including DG ECHO, have developed an extensive range of policies, practices, standards and tools for humanitarian work that are often adapted to rural areas, but far less to urban areas. In the past few years, a number of studies have been conducted to explore the drivers of urbanization and its consequences and implications to humanitarian aid. Some of these

studies have formulated suggestions on how international humanitarian aid can best engage with the changing settlement patterns. Following these recommendations and field evidence, DG ECHO guidance note on Disaster Preparedness released in 2021 specifically addresses preparedness in urban settings, where certain characteristics may make affected populations more vulnerable to the impact of hazards and/or threats.

Water, sanitation and hygiene (also known as WASH) are closely connected sectors and essential for good public health. In emergencies and crises, providing access to safe drinking water in sufficient quantities is paramount. Basic sanitation and hygiene education are important for a healthy living environment. Lack of access to clean water and basic sanitation, and low hygiene standards increase the vulnerability to epidemic outbreaks. According to the United Nations, over 700 children under 5 years die of diarrhoea every day, brought about by unsafe water or poor sanitation. WASH, therefore, represents one of the core sectors of humanitarian operations provide a lifeline for millions of people who are caught up in humanitarian emergencies.

Humanitarian air services are often the only way to get access to remote places and reach people in need. When a crisis hits, guaranteeing fast and safe access to the field is vital to save lives. In contexts where there are no reliable roads, ports or other infrastructure, access to crises by land or water becomes difficult, if not impossible. In addition to transporting humanitarian supplies and workers, humanitarian air services also carry out medical and security evacuations.

Natural disasters and human-made crises are not gender neutral — they have a different impact on women, girls, boys and men. Strengthening the **gender** and age approach within the EU humanitarian aid is a commitment made in the European Consensus on Humanitarian Aid. It highlights the need to meaningfully integrate gender and age considerations, to promote the active participation of women, girls, boys, men and LGBTIQ+ groups in humanitarian aid and to incorporate protection strategies against sexual and gender-based violence. A Commission Staff Working document has been established to address this issue.

Disability Inclusion in humanitarian action remains insufficient. Due to discrimination and environmental, physical, economic and social barriers, people with disabilities are more likely to be excluded in emergency responses and humanitarian services. They also face additional threats and vulnerabilities. The European Union is party to the United Nations Convention on the Rights of Persons with Disabilities (2010) and has endorsed the World Humanitarian Summit's Charter on Inclusion of Persons with Disabilities in Humanitarian Action (2016). In 2019, the EU Civil Protection and Humanitarian Aid department published operational guidelines on disability inclusion with the purpose to ensure that the specific needs of disabled people are taken into consideration in all projects supported by EU humanitarian aid.

The **cash thematic policy** (See DG ECHO Thematic Policy document no 3) ensures humanitarian aid reaches directly those with the greatest need in a timely manner. The policy marks a step-change in linking cash transfers and social protection, and synergies with key reforms on digitalisation, localisation and greening of humanitarian assistance. It is complemented by the Large-scale Cash Guidance Note (Annex 1), which contains specific considerations for larger scale cash programmes. DG ECHO uses cash – either physical currency or e-cash and other alternative forms of humanitarian assistance only after thoroughly evaluating all options. The cash transfers modality provides affected people with the means and flexibility to decide and prioritise their recovery. In many contexts, cash assistance allows more aid to reach the beneficiaries directly. In March 2015, the EU developed 10 common principles for multi-purpose cash-based assistance to guide donors and humanitarian partners on how best to work with multi-purpose assistance.

Each year millions of people are forced to leave their homes and seek refuge from conflicts, violence, human rights violations, persecution, climate change or natural disasters. The number of **forcibly displaced persons** has continued to rise in 2017, calling for increased humanitarian assistance worldwide. The majority of today's forced displaced populations live in the developing world, which means that they flee to countries already struggling with poverty and hardship. In April 2016, the European Commission adopted a new approach to forced displacement, aimed at harnessing and strengthening the resilience and self-reliance of both the forcibly displaced and

their host communities. The new approach stipulates that political, economic, development and humanitarian actors should engage from the outset of a displacement crisis, and work with third countries towards the gradual socio-economic inclusion of the forcibly displaced.

The EU attaches great importance to the link between humanitarian aid, as a rapid response measure in crisis situations, and more medium and long-term development action. The **humanitarian-development-peace Nexus** is complex and requires increased coordination – leading to joint humanitarian-development-peace approaches and collaborative implementation, monitoring and progress tracking. In order to address crisis situations, humanitarian, development and peace actors need to work from the early stage of a crisis – or, in case of slow onset events, before a crisis occurs. The common humanitarian-development-peace agenda has long been referred to as Linking Relief, Rehabilitation and Development (LRRD). The need to further invest in this approach was reaffirmed in the Agenda for Change in 2011 and reinforced by the 2016 World Humanitarian Summit. The Council Conclusions on Operationalising the Humanitarian-Development Nexus of 19 May 2017 welcomed cooperation between EU humanitarian and development actors, including in the framework of the EU approach to forced displacement and development. The Council encourages the Commission and the Member States to take forward humanitarian and development work in a number of pilot countries, starting with joint analysis and leading, where possible, to joint planning and programming of humanitarian and development partners. The response should address not only the humanitarian needs in a country (deriving from an environmental crisis (prolonged drought), a natural disaster or a conflict) but also the improvement of resilience with a view to better managing different types of risks. In a number of countries Joint Humanitarian and Development Frameworks (JHDF) have been developed as a basis for humanitarian and development planning and programming.

A9.2 CONTEXT OF THE EVALUATION

A9.2.1 Humanitarian Needs in Venezuela and in the region

Venezuela continues to face a deep economic, social and political crisis. This situation has severely affected the healthcare and social care system, caused large shortages in public services and increased difficulties in accessing food. Hum Venezuela⁵⁶⁵ estimated that 14 million people suffer food insecurity. According to the World Food Programme, Venezuela is one of the countries most severely affected by food insecurity worldwide. COVID-19 has further deteriorated the health and social situation.

In Venezuela at the end of 2019, WFP reported 9.3 million people in need of food assistance inside the country. According to latest figures available, 84.4% of the population reported failures in food access and 82.7% indicated not having any savings or income.

Hyperinflation and a severe scarcity of food and essential goods continue compromising the daily lives and livelihoods of a large part of the population. According to the latest ENCOV⁵⁶⁶ survey the total **poverty rate in Venezuela reaches 94.5% while extreme poverty represents 76.6%**.

According to local calculations, the minimum wage is only enough to buy 9.1% of the monthly food needs of a family who receives the monthly State Support bonus. As of January 2021, 37.3% of the pregnant women supported by UNICEF were suffering from undernourishment, and the situation did not see any improvements during the COVID-19's pandemic.

Up to 70% of school-aged children are not attending class regularly and more than 15% have had significant delays in their education, even before the pandemic. The mass exodus has also resulted in the lack of qualified education personnel – at least over 200,000 teachers.

In Venezuela, 2.4 million people are in need of protection assistance, mainly related to pervasive violence and armed conflict, sexual and gender-based violence and abuse, as well as human

⁵⁶⁵ Forum of Venezuelan Humanitarian NGO's

⁵⁶⁶ UCAB, Instituto de Investigaciones Económicas y Sociales, *Encuesta Nacional sobre condiciones de vida*, Sept. 2021.

trafficking, labour and sexual exploitation (of which 70% of victims are women and girls). Given the context complexity and the existing risks of violence exacerbated by the effects of COVID-19, Venezuelan people are affected by the multiple crises, especially children and elderly left behind, as well as populations on the move.

Around 82% of the population do not have continuous access to water. The country has seen several large outbreaks of infectious diseases, e.g., measles, diphtheria, and malaria. This is because preventative programmes have been discontinued, and sanitary conditions have worsened.

Homicide rates are among the highest in the world (40,9 deaths per 100,000 inhabitants in 2021). The situation in border and mining areas, confronted by the presence of armed actors and criminal gangs, is of particular concern. 2021 saw an increase in violent fighting in border areas and the mining arc, attributed to ex-FARC, ELN, criminal gangs and the Venezuelan Army all combatting. According to the latest estimates by humanitarian actors, there are 4.2 million people in need of protection in the country (early 2022).

These Venezuelans face appalling protection risks along the migratory routes and at least 2 million remain in irregular status. By September 2021, only 2.6 million Venezuelans had access to temporary residency permits and less than 75 000 were recognized as refugees in the region⁵⁶⁷. As a direct consequence of COVID-19, most displaced Venezuelans lost their formal and informal sources of income and are victims of evictions, facing severe obstacles to find safe housing solutions. As soon as lockdown measures were lifted, the flow of vulnerable people fleeing Venezuela increased again in 2021.

This situation continues fuelling a record number of migrants and refugees. According to UNHCR more than 6 million people are displaced as of early 2022. The situation of Venezuelan migrants and refugees in neighbouring countries is also dire and the flow continues, in one of the biggest population displacements nowadays.

Colombia is hosting around 1.8 million displaced Venezuelans. At the end of 2020, the Government announced the Temporary Protection Status for displaced Venezuelans (ETPV) living in Colombia. While by August 2021 more than one million Venezuelans have requested the status, important barriers hamper its effective implementation. Those Venezuelans arriving after the regularisation deadline (January 31st, 2021), remain in irregular situation with extremely limited access to services and solutions.

DG ECHO has identified high humanitarian needs amongst people on the move and Venezuelan displaced people in 16 countries across the region⁵⁶⁸.

A9.2.2 DG ECHO's response to the Venezuelan crisis⁵⁶⁹

The priorities and scope of the humanitarian intervention are defined annually in the HIPs and further developed in operational terms in the HIPTA. The following resources were allocated for the Venezuelan regional crisis during the period under evaluation (general allocations as per final modification of the HIP for each year. Other source of funding (SSR, ALERT, DREF not included):

- ECHO/WWD/BUD/2017/01000, EUR 2 000 000
- ECHO/WWD/BUD/2018/01000, EUR 32 095 000⁵⁷⁰
- ECHO/WWD/BUD/2019/01000, EUR 55 048 000⁵⁷¹

⁵⁶⁷ <https://www.r4v.info>

⁵⁶⁸ Colombia, Peru, Chile, Ecuador, Brazil, Bolivia, Guyana, Trinidad & Tobago (TT), Aruba, Curaçao, Costa Rica, Argentina, Paraguay, Panama, Uruguay, Mexico.

⁵⁶⁹ Response to the humanitarian consequences of the crisis in Venezuela and in the region.

⁵⁷⁰ In 2018 the EC concluded an external assigned revenue scheme with Portugal for a total amount of EUR 100 000, of which 96 000 for operational-related actions. In addition, EUR 7 million were transferred from DG DEVCO to DG ECHO in order to reinforce the emergency response.

⁵⁷¹ Including external revenue scheme with Slovenia

- ECHO/WWD/BUD/2020/01000, EUR 67 700 000
- ECHO/WWD/BUD/2021/01000, EUR 82 000 000

Within this framework, since 2017, the European Union has allocated over €238 million in emergency humanitarian aid. The funding helps assist Venezuelans in need inside the country, and those hosted in neighbouring countries. In 2021, actions inside Venezuela received a little less than 60% of the funds, and Colombia 25%. The remaining was shared between the rest of South America and the Caribbean.

EU humanitarian assistance is delivered through UN agencies, international non-governmental organisations (INGOs), and the Red Cross movement which implement projects covering the broad spectrum of humanitarian needs.

The aid focuses on addressing the most pressing needs of the Venezuelan affected population, targeting the most vulnerable groups, such as children under 5 years, pregnant women and breastfeeding mothers, older people, and indigenous groups.

Projects focus on delivering vital health care; education in emergencies; protection services to the most vulnerable population groups; nutritional and food support; water, sanitation and hygiene, especially during the COVID-19 pandemic. Coordination and information management efforts are also supported.

As part of the EU global response to the coronavirus, in August 2020 a Humanitarian Air Bridge operation consisting of 2 flights reached Caracas. The planes brought 82.5 tonnes of life-saving material to supply humanitarian partners in the field and support half a million Venezuelans in need. The cargo consisted mostly of medical equipment, e.g., personal protection gear, medicines, water purification equipment, and family hygiene kits.

The assistance to forced displaced people focuses on emergency medical services, food assistance, the provision of legal information and counselling, protection, prevention and response (specifically to gender-based violence, child protection needs, and human trafficking), education in emergencies, and shelter. It is targeting countries in South America and the Caribbean particularly affected by the Venezuelan migration and refugee outflow, with a particular focus in Colombia.

DG ECHO has sought humanitarian-development-peace (HDP) nexus opportunities with different EU funding instruments encouraging partners to also consider this aspect.

DG ECHO has also played a significant role in terms of humanitarian diplomacy (ICG for Venezuela), advocacy and visibility of the crisis (Venezuela migration and refugee crisis Pledging conferences).

A9.2.3 DG ECHO – UNHCR Partnership

Created in 1950, the United Nations High Commissioner for Refugees and his Office (UNHCR) form a multilateral, intergovernmental institution, which protects and assists refugees and other persons of concern (asylum-seekers, returnees, stateless, Internally Displaced Persons) around the world. UNHCR works closely with States, who are the principal actors in providing protection and in enabling solutions to problems of forced displacement and statelessness. In delivering these functions, UNHCR has a history of over 60 years of collaborating with Governments and developing partnerships with other international agencies and non-governmental organizations. UNHCR relies almost entirely on voluntary contributions from governments, UN and pooled funding mechanisms, intergovernmental institutions and the private sector. Since 2005 and the UN humanitarian reform, UNHCR is the Global Lead for the Protection, Shelter/NFIs and Camp Coordination and Camp Management clusters in complex situations of forced displacement (including IDPs).

The primary purpose at UNHCR is to safeguard the rights and well-being of people who have been forced to flee, protecting refugees, returnees, stateless people, the internally displaced and asylum-seekers. Together with partners and communities, UNHCR works to ensure that everybody has the right to seek asylum and find safe refuge in another country striving to secure lasting solutions.

During the period 2017–2021, UNHCR's Strategic Directions were in place. UNHCR's work focused on five core elements which, taken together, had provided protection and solutions for refugees, internally displaced and stateless people: protect, respond, include, empower, solve. Enabling actions related to each strategic direction can be found on UNHCR website. UNHCR's Global Strategic Priorities (GSPs) for the 2020–2021 biennium represent important areas in which the Office made targeted efforts to strengthen protection, improve the quality of life and seek solutions for refugees and other people of concern. The new UNHCR Strategic Directions are currently being negotiated, with the possibility of extension to 2026.

The coordination of international protection, assistance and solutions is central to UNHCR's refugee and protection mandate and derives from the High Commissioner's responsibility to ensure international protection for persons of concern to UNHCR from the time they become a refugee or internally displaced person (IDP) until they find a solution, whether they live in urban or rural host communities or in camps, with other refugees and internally displaced people, with other populations affected by humanitarian crises, or in non-emergency settings.

In September 2016 the General Assembly decided, through the adoption of the New York Declaration for Refugees and Migrants, to develop a global compact for safe, orderly and regular migration. On 13 July 2018 UN Member States finalized the text for the Global Compact for Safe, Orderly and Regular Migration. In 2018, UNHCR facilitated the negotiations leading to the affirmation by the UN General Assembly of the Global Compact on Refugees, a framework for more predictable and equitable responsibility-sharing, recognizing that a sustainable solution to refugee situations cannot be achieved without international cooperation. In addition, UNHCR contributes to the Global Compact for Migration, the first-ever UN global agreement on a common approach to international migration in all its dimensions.

In line with the Grand Bargain commitment to reduce management costs in refugee contexts, UNHCR implemented its regionalization process (regional offices in Bangkok, Amman, Nairobi, Pretoria, and Dakar, Panama) as well as the use of biometrics for refugee registration and food distribution.

With 17,878 staff members, UNHCR works in 133 countries. About 87% of its personnel operates in the field, while over 10% are based at the Geneva headquarters. Specific departments, mostly based in the Geneva headquarters, oversee key areas such as operations, protection, external relations, human resources, and finances.

The Financial and Administrative Framework Agreement (FAFA) establishes the overall legal framework for all agreements between the EU and the UN. These agreements outline the overall objectives and conditions of the collaboration concerning the award of funding to the partner organisations. They are implemented in practice through specific action-related funding agreements.

DG ECHO has established strategic partnerships with a limited number of humanitarian organisations (UN, International Organisations). UNHCR is one of these strategic partners, and DG ECHO has also the lead for EU relations with UNHCR. As a result, DG ECHO leads the annual Strategic Dialogue EU-UNHCR and prepares and coordinates EU statements for the UNHCR governing body meetings (Standing Committee, Executive Committee). DG ECHO further organises its own annual High-Level Dialogue with UNHCR, along other frequent exchanges at different levels. These provide an opportunity to discuss issues of common interest and concern, exchange views on strategic priorities, review challenges and opportunities and explore ways to reinforce the mutual cooperation.

UNHCR remains one of DG ECHO's biggest partners, with on average about 9% of the total EU humanitarian budget over the last three years. In 2021, DG ECHO allocated EUR 110.8 million to UNHCR.

In the context of the pilot Programmatic Partnership⁵⁷² process opened to UN and international organisations in 2021, UNHCR had submitted three proposals. After a thorough review and competitive process, none of them was selected by the DG ECHO evaluation committee.

From 2017 to 2021 (financial years), an initial analysis of DG ECHO's humanitarian project database recorded 136 actions carried out by UNHCR, with financial contributions from DG ECHO for a total value of over EUR 911 million globally – figures to be confirmed in the course of the evaluation.

Table 57. Contract Amount signed by Partner

Partners	2017	2018	2019	2020	2021
UNHCR	EUR 272.285.000	EUR 281.745.000	EUR 119.800.000	EUR 110.000.000	EUR 83.090.000

A9.3 PURPOSE AND SCOPE OF THE EVALUATION

A9.3.1 Purpose and general scope

Based on Art. 30(4) of the Financial Regulation and Regulation (EC) 1257/96, the purpose of this Request for Services is to have an independent evaluation, covering the period of **2017-2021** of two key components:

- the EU's humanitarian interventions in response to the **Venezuelan crisis**; and
- the DG **ECHO's partnership** with the **United Nations High Commissioner for Refugees**.

The specific **purpose** of the combined evaluation is to provide:

- an external, independent, thematic assessment of DG ECHO's actions in response to the Venezuelan regional crisis;
- a retrospective assessment of DG ECHO's partnership with UNHCR globally, with a focus on identifying lessons learned; and
- a maximum of **5 prospective, strategic recommendations to support DG ECHO's strategy in relation to the Venezuela crisis** and a maximum of **3 prospective, strategic recommendations to support its partnership with UNHCR**. These strategic recommendations could possibly be supported by further, related, operational recommendations. Successful 'de-facto' models/approaches should be identified – based on good practice – for possible, wider application in the region.

The main users of the evaluation report include *inter alia* DG ECHO staff at HQ, regional and country/field level, national and regional stakeholders, the participating implementing partners, and other humanitarian and development donors and agencies.

2020 and 2021 have been atypical years, during which the COVID-19 crisis has affected DG ECHO's interventions in different ways. This needs to be taken into account for the analysis, but should not be the only focus of the evaluation, whose scope is much broader.

The evaluation should cover the evaluation criteria of relevance, coherence, EU added value, effectiveness, efficiency and sustainability, as further detailed below in the Evaluation Questions.

⁵⁷² Programmatic Partnerships constitute a specific operational modality of the Framework Partnership Agreement (FPA) under which the Commission, as represented by DG ECHO, partners with NGOs under Article 7 of Council Regulation (EC) No 1257/96 of 20 June 1996 concerning humanitarian aid.

A9.3.2 Evaluation questions

The conclusions of the evaluation will be presented in the report in the form of evidence-based, reasoned answers to the evaluation questions presented below. These questions should be further tailored by the Evaluator, and finally agreed with the Steering Group in the inception phase.

A9.3.2.1 DG ECHO's Humanitarian response to Venezuela regional crisis

Relevance

What was the relevance of the (funded) actions that DG ECHO undertook to the objectives and strategies of the Venezuelan crisis response?

To what extent did DG ECHO-funded actions take into account the needs of the most vulnerable people affected, particularly women, children, elderly and disabled persons? To what extent were beneficiaries appropriately consulted in the design and implementation of DG ECHO-funded projects?

To what extent were DG ECHO and its partners successful in adapting the approaches and aid modalities to the evolving needs of beneficiaries during the period under evaluation?

Coherence

To what extent was DG ECHO's response aligned with: the humanitarian principles; DG ECHO's relevant thematic/sector policies; and relevant global thematic/sector guidelines and standards?

To what extent was DG ECHO successful in coordinating its response with that of other donors in the country, including the EU Member States, and by that avoiding overlaps and ensuring complementarities? In the context of the Nexus and humanitarian-development coordination, to what extent were DG ECHO-funded actions coherent with, and complementary to the response of other actors to the Venezuelan crisis?

EU Added Value

To what extent has DG ECHO's use of their mandate and resources in responding to the Venezuelan crisis generated a measurable added value compared to activities funded by individual EU member states or other donors?

Effectiveness

To what extent were DG ECHO's objectives (as defined in the HAR, the Consensus and the specific HIPs) achieved? What concrete and measurable results were achieved? What critical success or barrier factors can be distinguished?

How successful was DG ECHO through its direct and indirect advocacy and communication measures in influencing other actors on issues like humanitarian intervention and space, respect for IHL⁵⁷³, addressing gaps in response, applying good practice, and carrying out follow-up actions of DG ECHO's interventions?

Efficiency

To what extent did DG ECHO achieve cost-effectiveness in its response? What factors affected the cost-effectiveness of the response? (*The methodology applied for responding to this question must be based on the Cost-effectiveness guidance for DG ECHO evaluations⁵⁷⁴, which is to be adapted to and applied proportionally to the current exercise.*)

⁵⁷³ International humanitarian law

⁵⁷⁴ <https://publications.europa.eu/en/publication-detail/-/publication/c0bcc4e2-e782-11e6-ad7c-01aa75ed71a1/language-en/format-PDF/source-45568954>

Was the budget allocated by DG ECHO to the Venezuelan regional crisis timely, appropriate and proportionate to what the actions were meant to achieve? To what extent did restricted humanitarian access or other factors put limits to the absorption potential of EU funding?

What was the quality and usefulness of DG ECHO's geographical, field and thematic network at HQ, regional and country levels?

Sustainability

To what extent did DG ECHO manage to achieve longer-term planning and programming to address the protracted regional crisis (or Venezuelans' forced displacement)? What could be further done (enabling factors, tools, mechanisms, change of strategy, etc.) to promote sustainability, build resilience and strengthen links to interventions by development actors? What factors, positive or negative, internal to the EU or external (list and assess) have impacted directly or indirectly on the sustainability of DG ECHO-funded actions to address the Venezuelan crisis?

What international coordination mechanisms have promoted or hampered connectedness and meaningful collaboration in the planning, implementation and evaluation of humanitarian and development activities to respond to the regional Venezuelan crisis?

To what extent did DG ECHO manage to introduce environmental concerns into the humanitarian agenda, planning and strategy of its partners?

A9322 DG ECHO – UNHCR Partnership

How well aligned were DG ECHO and the UNHCR in terms of:

- strategies, objectives and mandate?
- needs assessments and vulnerability analyses?
- advocacy priorities, communication campaigns and visibility efforts?

To what extent did a structured, strategic, timely and functional dialogue take place between the two partners at HQ, regional and country/field level, and by what means and what has been the impact of this dialogue on funding trends between the two organisations? To what extent did this dialogue have any impact at policy and operational levels?

To what extent did the DG ECHO-UNHCR partnership succeed in:

- maximising efficiencies and decreasing management and related costs, including administrative burden?
- improving cost-effectiveness in their response?
- strengthening vulnerability, needs-based and quality responses?
- encouraging both sides to fulfil the ambitions of the partnership (definition of the partnership, clarity of obligations, information sharing, reporting, visibility, meetings and communication at different levels – HQ, Geneva, field etc)?

To what extent did the DG ECHO – UNHCR partnership contribute to:

- strengthening field coordination between relevant actors (notably during the COVID-19 response), including:
 - ECHO and UNHCR national and regional offices
 - Humanitarian actors – notably UN and NGOs
 - Donors
- reinforcing and enhancing relevant sectorial coordination at global, regional, and country/field level, and supporting UNHCR's lead or co-lead role in the cluster coordination system?

- strengthening the cooperation with development actors?

To what extent has the Strategic Partnership approach deepened, improved or hindered the overall cooperation between DG ECHO and UNHCR? In the spirit of this comprehensive approach, how could the partnership be further strengthened?

A9.3.3 Other tasks under the assignment

The Contractor should in relation to both components:

- Reconstruct the intervention logics for the Venezuela regional crisis and the DG ECHO-UNHCR partnership;
- Define and analyse DG ECHO's portfolio of actions during the evaluation period, for the Venezuelan regional crisis and for actions implemented by UNHCR globally
- Identify the main lessons learnt, from DG ECHO's intervention in the response to the Venezuelan crisis; what worked and what did not work, including advocacy activities; and for the DG ECHO-UNHCR partnership.
- Provide a **statement about the validity** of the evaluation results, i.e. to what extent it has been possible to provide reliable statements on all essential aspects of the intervention examined. Issues to be referred to may include scoping of the evaluation exercise, availability of data, unexpected problems encountered in the evaluation process, proportionality between budget and objectives of the assignment, etc.;
- Make a proposal for the **dissemination** of the evaluation results;
- Provide a Spanish **translation** (in addition to the English version) of the executive summary of the Final Report;
- Provide an **abstract** of the evaluation of no more than 200 words.

A9.4 MANAGEMENT AND SUPERVISION OF THE EVALUATION

The evaluation function of DG ECHO in DG ECO.E.2 is responsible for the management and the monitoring of the evaluation together with the DG ECHO Units responsible for the evaluation subjects, i.e. ECHO.D.4 and ECHO.D1. Other DG ECHO Units and field offices will also be involved on an ad hoc basis during the course of the evaluation to facilitate the consultation process and information gathering

A Steering Committee, made up of Commission staff involved in the activity evaluated, will provide general assistance to and feedback on the evaluation exercise, and discuss the conclusions and recommendations of the evaluation.

A9.5 SPECIFIC REQUIREMENTS

A9.5.1 Methodology

The bidders will describe in their offer the detailed methodological approach to address the evaluation questions and additional tasks listed above. This will include indicative **judgment criteria**⁵⁷⁵ that they may consider appropriate for addressing each evaluation question. The judgement criteria, as well as the information sources to be used in addressing these criteria, will be discussed with the Commission during the Inception phase at a **workshop** facilitated by the

⁵⁷⁵ A judgement criterion specifies an aspect of the evaluated intervention that will allow its merits or success to be assessed. E.g., if the question is "To what extent has DG ECHO assistance, both overall and by sector been appropriate and impacted positively the targeted population?", a general judgement criterion might be "Assistance goes to the people most in need of assistance". In developing judgment criteria, the tenderers may make use of existing methodological, technical or political guidance provided by actors in the field of Humanitarian Assistance such as HAP, the Sphere Project, GHD, etc.

Evaluator. This workshop will also give the evaluation team the opportunity to refine the evaluation questions, which will have to be included in the inception report, discuss the intervention logic, and analyse external factors at play.

The methodology should to the extent possible promote the involvement of the main actors concerned, including target populations and local communities when relevant and feasible. The conclusions of the evaluation must be presented in a transparent way, with clear references to the sources on which they are based. The evaluators undertake **field visits**, to be proposed in the tenderer's offer and agreed in the inception phase. The set of field visits will have to take into account both the security situation in the country and the current movement restrictions and personal health and safety considerations related to the COVID-19 pandemic⁵⁷⁶. In the current context, the evaluation team will have to show a high degree of flexibility regarding the dates and modalities of the field visits, and back-up plans should be provided in the tenderer's offer, addressing the risk of not being able to carry out field visits at all due to health and security problems.

DG ECHO has a network of regional and country field offices which will provide a certain level of support to the evaluation team, mainly in the form of information and advice on practical issues like accommodation, transport and the like. It will not be able to provide direct support like organising their transport. The evaluation team will be responsible of catering for their own protection and security.

A9.5.2 Evaluation team

In addition to the general requirements of the Framework Contract, the team should include experts with previous evaluation experience in Latin America. Additionally, it is recommended that the team should have experience assessing institutional partnerships and a solid knowledge of UNHCR.

A9.6 CONTENT OF THE OFFER

A. The administrative part of the bidder's offer must include:

- the tender submission form (annex C to the model specific contract); and
- a signed Experts' declaration of availability, absence of conflict of interest and not being in a situation of exclusion (annex D to the model specific contract).

B. The technical part of the bidder's offer should be presented in a maximum of **30 pages** (excluding CVs and annexes), and must include:

A description of the understanding of the Terms of Reference, their scope and the tasks covered by the contract. This should include the bidder's understanding of the evaluation questions, and a first outline for an evaluation framework that provides judgement criteria and the information sources to be used for answering the questions. The final definition of judgement criteria and information sources will be agreed with the Commission during the inception phase.

The methodology the bidder intends to apply for this evaluation for each of the phases involved, including a draft proposal for the number of case studies to be carried out during the field visit, the regions to be visited, and the reasons for such a choice. The methodology will be refined and validated by the Commission during the desk phase.

A description of the distribution of tasks in the team, including an indicative quantification of the work for each expert in terms of person/days.

A detailed proposed timetable for its implementation with the total number of days needed for each of the phases (Desk, Field and Synthesis).

⁵⁷⁶ During the inception phase it will be decided jointly if the field trips can be carried out or which modalities may be adopted to obtain information from the field.

C. The CVs of each of the experts proposed.

D. The financial part of the offer (annex E to the model specific contract) must include the proposed total budget in Euros, taking due account of the maximum amount for this evaluation. The price must be expressed as a lump sum for the whole of the services provided. The expert fees as provided in the Financial Offer for the Framework Contract must be respected.

A9.7 AMOUNT OF THE CONTRACT

The maximum budget allocated to this study is **EUR 400 000**.

A9.8 TIMETABLE

The indicative duration of the evaluation is **10 months**. The duration of the contract shall be no more than **11 months**.

The evaluation starts after the contract has been signed by both parties, and no expenses may be incurred before that. The main part of the existing relevant documents will be provided after the signature of the contract.

In their offer, the bidders shall provide a schedule based on the indicative table below (T = contract signature date):

<i>Timing</i>	<i>Event</i>
June 2022	Kick-off
T+1 week	
T+3 weeks	Inception workshop
T+5 weeks	Draft Inception Report
T+6 weeks	Inception meeting
T+11 weeks	Draft Desk Report
T+12 weeks	Desk Report meeting
T+14 weeks	Final Desk Report approved
T+16– 22 weeks	Field visits
T+23	Draft Field Report
T+24	Field Report Meeting
T+31 weeks	Draft Final Report
T+34 weeks	Draft Final Report meeting
T+38 weeks	Final Report published

A9.9 PROVISIONS OF THE FRAMEWORK TENDER SPECIFICATIONS

Team composition: The Team proposed by the Tenderer for assignments to be contracted under the Framework Contract must comply with Criterion T4 (see Section 3.2.3 of the Tender Specifications for the Framework Contract).

Procedures and instructions: The procedures and instructions to the Tenderer for Specific Contracts under the Framework Contract are provided under Section 5 of the Tender Specifications for the Framework Contract. However, those provisions relating to meetings and reports could be modified in a Request for Services or discussed and agreed during the Inception Phase under a Specific Contract.

EU Bookshop Format: For easy reference, the official template for evaluation reports is attached to these ToR. Reports produced by external contractors do not need the official font of the Commission (EC Square Sans Pro) or professional graphic design.

GETTING IN TOUCH WITH THE EU

In person

All over the European Union there are hundreds of Europe Direct information centres. You can find the address of the centre nearest you at: https://europa.eu/european-union/contact_en

On the phone or by email

Europe Direct is a service that answers your questions about the European Union. You can contact this service:

- by freephone: 00 800 6 7 8 9 10 11 (certain operators may charge for these calls),
- at the following standard number: +32 22999696, or
- by electronic mail via: https://europa.eu/european-union/contact_en

FINDING INFORMATION ABOUT THE EU

Online

Information about the European Union in all the official languages of the EU is available on the Europa website at: https://europa.eu/european-union/index_en

EU publications





You can download or order free and priced EU publications from EU Bookshop at: <https://publications.europa.eu/en/publications>. Multiple copies of free publications may be obtained by contacting Europe Direct or your local information centre (see https://europa.eu/european-union/contact_en).

The European Civil Protection and Humanitarian Aid Operations - ECHO

ECHO Mission

The primary role of the Directorate-General for Civil Protection and Humanitarian Aid Operations (DG ECHO) of the European Commission is to manage and coordinate the European Union's emergency response to conflicts, natural and man-made disasters. It does so both through the delivery of humanitarian aid and through the coordination and facilitation of in-kind assistance, specialist capacities, expertise and intervention teams using the Union Civil Protection Mechanism (UCPM)

Follow us:

-  :https://twitter.com/eu_echo
-  :<https://www.facebook.com/ec.humanitarian.aid>
-  :https://www.instagram.com/eu_echo/
-  :<https://www.youtube.com/user/HumanitarianAidECHO>

