INTER-AGENCY HUMANITARIAN EVALUATION OF THE RESPONSE TO THE HUMANITARIAN CRISIS IN YEMEN

TERMS OF REFERENCE

January 15th, 2020

1   BACKGROUND

1. The humanitarian crisis in Yemen continues to stand out as the largest in the world, driven by conflict, economic collapse, and the continuous breakdown of public institutions and services. Even before conflict broke out in early 2015, Yemen was one of the poorest countries in the Arab world. With an average life expectancy below 64, the country is ranked 177th out of 189 in the 2019 Human Development Index. At least 50 percent of the population is estimated to be living in poverty, and more than 90 percent of food in Yemen is imported.

2. Since 2015, the country has been subjected to continuous armed conflict, mainly between forces affiliated with Ansar Allah ("Houthis") and the Government of Yemen, supported by an Arab coalition led by the Kingdom of Saudi Arabia. Since 2018, several rounds of conflict have also occurred between the Government of Yemen and the separatist Southern Transitional Council. Al Qaida in the Arabian Peninsula (AQAP) and ISIL have also carried out attacks. From 2015-16, AQAP held broad swathes of territory in the east and along the southern coast. They remain present in remote areas today.

3. Nearly six years of continuous conflict have resulted in eighty percent of the entire population requiring some form of humanitarian assistance and protection. In 2014, before the conflict, 14.7 million people required assistance. In 2015, this number increased to 15.9 million; in 2016 to 21.2 million, and in 2018 to 22.2 million. In 2019, 24.4 million people needed assistance and protection. Yemen faced a serious risk of famine in 2018-19, which was rolled back by concerted international action.

4. The humanitarian situation in Yemen has never been worse than in 2020, and the risk of famine has returned. Data released in July 2020 confirm that food security indicators in Government-held areas have severely deteriorated, with 40 percent of the population in those areas now assessed to be highly food insecure. More than one in four children are acutely malnourished in some areas – the highest rates ever seen. As of 20 November, an analysis was underway to estimate food security conditions in Houthi-held areas.

5. Yemen has always been among the most difficult humanitarian operating environments, mainly due to politization, obstructions, restrictions and interference with humanitarian aid by parties to the conflict. In particular Houthi authorities have steadily increased these restrictions, which reached unprecedented levels in 2019. However, humanitarians are increasingly facing similar challenges in the South of the country controlled by the Government of Yemen. In February 2020, donors and humanitarian partners convened in a Senior Officials Meeting, which set out several specific benchmarks that required improvements. In parallel, agencies have taken steps to minimize risk exposure and recalibrate programmes that cannot deliver in a

principled manner. In November 2020, a second Senior Officials Meeting acknowledged substantial progress in improving the operating environment in line with the benchmarks, although further progress is needed.

6. Over the past five years, humanitarian partners have continued to assist civilians in Yemen to survive violence, secure food, and receive the nutrition, health, WASH, shelter, education, and protection support they require. Partners have also continued to advocate for adherence to international humanitarian and human rights law. The Humanitarian Response Plans (HRP) in the 2015-2018 period focused primarily on providing lifesaving assistance, protection of civilians, and advocacy. In 2019-2020, the HRP was adapted to include issue-specific priorities (e.g. reducing outbreaks of cholera and infectious diseases), activities that aimed at greater risk prevention (e.g. reducing the risk of displacement and violence against civilians) as well as recovery (e.g. facilitating the recovery of people traumatized by the conflict; restoring capacity of public sector institutions to deliver life-saving basic services).

7. The 2020 HRP, which extended the 2019 strategy and was published in May 2020, also includes the humanitarian response for COVID-19. At the end of October, confirmed COVID-19 cases in Yemen had reached 2,064 with 601 associated deaths according to official figures. However, this vastly undercounts the extent of the pandemic. A lack of testing facilities and official reporting, people delaying seeking treatment because of stigma, difficulty accessing treatment centers, and the perceived risks of seeking care, are some of the reasons behind the low number of reported cases. Independent research has projected much higher estimates.

8. Since the beginning of the COVID-19 pandemic/response, further bureaucratic impediments make the operating environment more difficult, such as interference by the authorities into planning and management of humanitarian activities and movement restrictions imposed on humanitarian staff and transport.

9. The humanitarian crisis is further exacerbated by a funding crisis. As of November 2020, only 47 percent of funding requirements for the year had been met. This is equivalent to about $1.5 billion in funds – only half of what was received in the previous year and the lowest figure since 2016. Funding shortages forced severe programme cuts at different times during the year, including a reduction of emergency food aid rations by half in the north.

2   INTER-AGENCY HUMANITARIAN EVALUATIONS

10. An Inter-Agency Humanitarian Evaluation (IAHE) is an independent assessment of the results of the collective humanitarian response by member organizations of the Inter-Agency Standing Committee (IASC) to a specific crisis or theme. IAHEs evaluate the extent to which planned collective results have been achieved and how humanitarian reform efforts have contributed to that achievement.

11. IAHEs were introduced to strengthen learning and promote accountability towards affected people, national governments, donors, and the public. IAHEs are guided by a vision of addressing the most urgent needs of people impacted by crises through coordinated and accountable humanitarian action. IAHEs contribute to both accountability and strategic learning across the humanitarian system and aim to improve aid effectiveness to ultimately better assist affected people.

12. IAHEs follow the United Nations Evaluation Group's (UNEG) norms and standards that emphasize, among others: 1) the independence of the Evaluation Team, 2) the application of evaluation methodology, and 3) the full disclosure of results. IAHEs have a clear scope (defined in these Terms of Reference (TOR) and the inception report) concerning the period, geographic areas and target groups to be covered by the evaluation.

13. An IAHE is not an in-depth evaluation of any one sector or of the performance of a specific organization, and as such cannot replace any other form of agency-specific humanitarian evaluation, joint or otherwise, which may be undertaken or required.

14. The IASC guidance on Scale-Up Activation (previously known as L3 emergencies) requires conducting an Inter-Agency Humanitarian Evaluation (IAHE) within 9-12 months of its declaration. However, following the declaration of L3 emergency in July 2015 for Yemen the Emergency Relief Coordinator (ERC) decided to postpone an IAHE due to operational constraints that prevailed on the ground in Yemen at that time.

15. An Operational Peer Review (OPR) was undertaken in December 2015. OPRs serve as an internal inter-agency management tool to identify areas for immediate corrective action. The OPR in Yemen produced specific recommendations for the Humanitarian Country Team (HCT) to improve leadership, coordination, delivery and accountability to affected people and protection. The IASC Scale-Up protocols recommend that IAHEs should take into consideration the findings of the OPR.

16. In September 2019, as part of a coordinated audit of the United Nations humanitarian response in Yemen covering WFP, UNICEF, UNHCR and OCHA. The coordinated audit focused on the "effectiveness of inter-agency processes and common activities" and generated agency specific as well overall recommendations to HC and the ERC.

17. As part of the same exercise the United Nations Office of Internal Oversight Services audit of OCHA's operations in Yemen recommended that an IAHE should be undertaken to assess the impact of the humanitarian response in Yemen and identify lessons learned to help make a greater impact on the affected populations. Noting the requirement to conduct such evaluation after the declaration of an L3 emergency/Scale-Up, an IAHE was found to be long overdue in view of the marked growth of the humanitarian response, the growing number of people in need and the increasing complexity of their needs.

18. At the end of January 2020, the ERC officially launched the IAHE in Yemen. An Inter-Agency Management Group (MG) has been set up and the initial draft of the TOR was circulated for comments. However, in March 2020, due to the impact of the COVID-19 pandemic on humanitarian operations in Yemen, the evaluation process was suspended. In October 2020, with the agreement from the ERC and the HCT in Yemen, the IAHE Steering Group decided to re-restart the IAHE.

3   PURPOSE, OBJECTIVES, SCOPE AND USE OF THE IAHE

Purpose

19. The purpose of this IAHE is two-fold. First, it will provide an independent assessment of the extent to which planned collective objectives to respond to the needs and concerns of affected people in Yemen -- as set out in the HRP and other core planning documents and strategies since the 2015 L3 declaration -- have been met. Second, the evaluation aims to assess the extent to which IASC response tools and coordination mechanisms, including the Humanitarian Programme Cycle (HPC), have successfully supported the response, and to recommend improvement-oriented actions. Under these objectives, the evaluation will assess what has been learned from the response for later emergencies and generate recommendations for future responses. More specifically the IAHE will aim to:

- Conduct a brief analysis of the political, security, and operational environment that has been constraining and/or facilitating humanitarian action in Yemen.

- Assess how effectively IASC partners have identified and prioritized humanitarian needs in line with the evolving nature of the crisis and considering the prevailing operational environment, according to humanitarian principles.

- Assess to what extent the humanitarian response was able to complement the efforts of development and peace actors to address the underlying drivers of conflict, and the social-economic crises in Yemen.

- Assess the extent to which targeted results articulated in the HRP were achieved, and determine positive and negative, intended and unintended effects of the IASC humanitarian system's assistance for people affected by the crisis.

- Capture lessons learned and best practices to enable collective learning from the humanitarian response (ensuring that both first and second line of response are assessed).

- Provide actionable recommendations at operational and policy levels on how collective response mechanisms and advocacy might be strengthened or have to be refigured, particularly in light of the trajectory of the crises as affected by the operational, political, and security challenges in Yemen.

Intended Users of IAHE Results

20. The IAHE's findings and recommendations are expected to:

- Provide the **Humanitarian Coordinator (HC) and Humanitarian Country Team (HCT)** in Yemen with independent and credible evidence of collective progress towards objectives and results of the HRP and/or other collectively agreed humanitarian plans and strategies as determined during inception phase.

- Further, provide them with actionable recommendations for improving the ongoing humanitarian response in Yemen. Additionally, the IAHE may develop recommendations aimed at improving how humanitarian response may contribute to long-term recovery and recommendations for future responses in similar contexts.

- Contribute to the evidence base for decision-making at the global level – improving future humanitarian action, policy development, and reform by the **IASC Principals, Operations, Policy and Advocacy Group (OPAG), Emergency Directors Group,** and other stakeholders.

21. In doing so, they will also:

- Provide the national and local counterparts with evaluative evidence and analysis to inform their crisis-management policies and protocols for crises involving international agencies and other actors.

- Provide information to **affected people** on the outcomes of the response.

- Provide the **Member States of international organizations, donors, and learning and evaluation networks** with evaluative evidence of collective response efforts for accountability and learning purposes.

Evaluation Scope

22. The IAHE will cover the international humanitarian response to the humanitarian crisis in Yemen since the declaration of the L-3 response in 2015 until the date of the main evaluation mission to Yemen planned for May 2021.

23. The IAHE will assess the implementation of successive HRPs to the crisis in Yemen by IASC-participating organizations in relation to coordination, needs assessment, strategic planning, advocacy, and monitoring of the response and its results with particular focus on the period following the formulation of five priorities[1] by the ERC in 2018.

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[1] 1) the protection of civilians; 2) humanitarian access; 3) funding for the aid operation; 4) support for the economy; and 5) finding a political solution.

24. The IAHE will cover all geographic areas of Yemen affected by humanitarian crises in both Ansar Allah ("Houthis")- and government-controlled areas. The IAHE is expected to focus on the situation of 104 out of 333 districts in Yemen identified by the Humanitarian Needs Overview as priority districts where there are high and overlapping needs and vulnerabilities.

25. The IAHE will use the following documents as reference documents: HRP and its subsequent revisions (2015-2020), area- or population-specific humanitarian plans and other collective strategies and plans that might have been developed in response to constrained planning around the HRPs. In addition to these, the evaluation will consider all relevant planning and other documents to ensure the appropriate focus of the evaluation.

4   EVALUATION QUESTIONS AND CRITERIA

26. The evaluation's analytical framework will be structured around four evaluation criteria and associated questions[2].

   1. **Appropriateness –** To what extent have IASC's partners' plans and response strategies been based on identified needs of and consultation with affected people, including girls, women, men, and boys from different groups and those that belong to the most vulnerable and hardest to reach groups? How adaptive was the collective response to the changing conflict, economic and social environment, operational challenges, and other compounding factors such as outbreaks of infectious diseases and obstruction of humanitarian assistance?

   2. **Effectiveness –** To what extent were planned collective results formulated by the HCT achieved and to what extent was the humanitarian response effective in meeting the needs of affected people, including those of the most vulnerable and hardest to reach groups? What were the enabling and/or inhibiting factors to this end and how can they be addressed? What were the positive and negative, intended and unintended effects of the IASC humanitarian assistance for people affected by the crisis?

   3. **Connectedness –** How was the IASC humanitarian system's emergency assistance for people affected by the crisis linked to the efforts of development and peace actors? To what extent did these links ensure that humanitarian assistance was supportive of peace initiatives and longer-term recovery including strategies aimed at strengthening resilience of affected people? To what extent did international humanitarian assistance and coordination integrate and enhance local capacities?

   4. **Coordination and Partnerships –** To what extent did partnerships function adequately (with international, national, and local stakeholders) to deliver assistance to affected people, and to ensure humanitarian access? How well-coordinated was the humanitarian assistance, avoiding duplication of assistance and gaps? How effective and inclusive were coordination mechanisms given political, operational and other constraints? Has adequate and timely leadership for the response been put in place?

   During the inception phase, the Evaluation Team will further develop the evaluation's analytical framework with sub-questions.

27. An evaluation matrix will be prepared during the inception phase in which sources of data (including documents, information, and data asked of all agencies involved in the response, including those not represented on the Management Group or Advisory Group), methods and criteria will be defined for each evaluation question.

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[2] The standard IAHE questions have been adapted based on the comments received by the Steering Group.

28. The inception report will provide a detailed stakeholder analysis and a clear indication of which national entities and communities will be (a) consulted (b) engaged with (c) involved in the evaluation process, as relevant. The Evaluation Team will describe the approaches and strategies in the inception report that will be used to identify and reach affected people and adequately engage women, men, boys and girls of different ages, considering disadvantaged groups, including people with disabilities.

29. The draft inception report will be an opportunity for the Management Group, the country-level Advisory Group, and the IAHE Steering Group to provide more detailed feedback on the proposed methodology and approach.

5   METHODOLOGY

30. The IAHE will be conducted by a team of independent evaluation experts. The gender balance and geographic diversity of the team will be ensured to the extent possible. The team will include independent national evaluators (see section #10 for more on team composition and qualifications).

31. The evaluation will employ mixed methods (qualitative, quantitative) and several data collection tools. Information will be derived from primary and secondary sources, including a desk review of relevant documents, an analysis of data including financial and monitoring data, semi-structured key informant interviews with humanitarian workers including local responders and other stakeholders, focus group discussions with affected communities. This will ensure that the evaluation is inclusive of the views of diverse stakeholder groups. All information will be triangulated for validation.

32. As part of the methodology, a representative household survey of affected communities will be explored during the inception phase. The objective is to obtain, as systematically as possible, the experience of those affected by humanitarian crises in Yemen as related to each of the evaluation questions. If necessary, the Evaluation Team will propose alternative approaches such as the utilization of any existing survey data (e.g. UNICEF's MICS survey data) to assess the situation and perspectives of affected people.

33. Given the many logistical, security and access challenges that are currently hard to predict due to ongoing conflict, as well as international and national travel restrictions related to the COVID-19 pandemic, the Evaluation Team will propose flexible and adaptive approaches to data collection in line with the evolving situation in Yemen and internationally. The Evaluation Team will propose methodological approaches for two main scenarios for this IAHE. The two scenarios are not totally mutually exclusive and may overlap in practice:

- **Scenario A.)** Deteriorating security and/or epidemiological situation in Yemen and/or globally results in mounting international, national, or local travel restrictions to and within Yemen as well as Duty of Care issues severely constraining or making it entirely impossible to undertake on-site fieldwork and data collection. In this scenario, the team will be required to undertake most, if not all, data collection using remote data collection methods, leverage pre-existing data, and deploy other innovative approaches (e.g. Big Data analysis of mobile surveys or radio call-ins to cover hard-to-reach areas).

- **Scenario B.)** With the conflict ongoing, the epidemiological situation in Yemen and globally continues to be a challenge for undertaking all inception and data collection activities, with some restrictions and delays, but travel to and within Yemen, including most of the key areas targeted by the humanitarian action is possible. Some restrictions imposed by local authorities limit the Evaluation Team's access to some areas, population groups, and/or the use some of the data collection tools (e.g. household survey). In this scenario, the team will be required to adopt or propose alternative data collection for a specific population or stakeholder, group, area.

    During the inception phase, the Evaluation Team will propose a detailed methodology for each scenario and how it plans to address key evaluation questions, develop sub-questions and identify data sources.

The proposal should include a description of data sources, data collection and analysis methods/tools, indicators, triangulation plan, financial overview, factors for comparative analysis, and validation strategy, as well as how the team intends to incorporate the views of affected people in developing the methodology.

34. In Scenario B the Evaluation Team will conduct a 1-week country visit during the inception phase and a 3-week country visit during the evaluation phase, including, if possible, travel to the affected areas and major hubs[3] for the humanitarian actors in Yemen: Sana'a, Ma'rib, Al Hudaydah, Ibb, Sa'ada, Aden and Al Mukalla. Other locations will be determined during the inception phase of the evaluation. The team will also visit Amman and Riyadh to interview staff providing regional support to Yemen operations. During the inception phase, a final proposal for the duration of the evaluation field mission will be made to ensure that there is enough time to collect the necessary data.

35. The IAHE will take into account existing evaluative evidence and ongoing evaluations or other reviews, including from the Operational Peer Review and coordinated audits, third-party monitoring reports as well as agency or sector-specific evaluations, to create synergies, avoid duplication, and reduce the burden on affected communities and frontline responders. The IAHE will explore establishing linkages with other evaluations, including joint missions, shared document libraries, and other data sources, interview and focus group discussion questions, etc.

36. For drawing final conclusions and generating forward-looking recommendations, the Evaluation Team will be guided by the IAHE key questions, IAHE impact pathway (Annex I), existing IASC policies and guidance, the trajectory of the crisis and the analysis of operating environment.

37. Many international staff may have moved on from their posts since the start of the evaluation timeframe in 2015 and may no longer be available for interviews. Thus, the evaluation should ensure to also interview national staff of UN agencies and NGOs who may more likely to remain in their positions.

38. The Evaluation Team will ensure that questions and approaches are in line with established norms and standards as described below, and the humanitarian principles.[4]

6 SPECIAL CONSIDERATIONS

39. Obstruction and restrictions on humanitarian assistance: Obstruction of humanitarian assistance and restrictions on activities of international humanitarian organizations imposed by authorities in Yemen have a significant impact on the ability of humanitarian organizations to access affected people, assess their needs, deliver and monitor humanitarian assistance and protection. Some of the key obstructive practices that prevent effective and principled delivery of humanitarian assistance in Yemen include direct and indirect taxation of humanitarian aid, delays in approving cooperation and sub-project agreements, restrictions on conducting needs assessments, restrictions on movement of humanitarian staff, and interference with planning and monitoring of humanitarian project activities. When analyzing data, the Evaluation Team will consider the impact of these obstacles on areas covered by the key evaluation questions.

40. **Humanitarian principles:** Humanitarian action is governed by the four humanitarian principles of humanity, impartiality, neutrality, and independence[5]. The evaluation will examine how these principles were considered and applied in the collective response of humanitarian actors in Yemen.

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[3] To be further determined in the inception phase.
[4] https://docs.unocha.org/sites/dms/Documents/OOM_HumPrinciple_English.pdf
[5] Humanitarian action should be motivated by the sole aim of helping other human beings affected by conflicts or disasters (humanity); exclusively based on people's needs and without discrimination (impartiality); without favoring any side in a conflict or

41. **Protection:** Protection is a critical issue in the Yemen context and the key element around which the humanitarian response has been structured. In line with the ALNAP Guide: Evaluation of Protection in Humanitarian Action and the IAHE Guidelines, the evaluation will consider the extent to which the inter-agency humanitarian response has mainstreamed protection issues and considered protection risks, particularly affecting the most vulnerable people. Protection will be particularly taken into account under the evaluation criteria of effectiveness and partnerships. Overall protection, protection of civilians, child protection, sexual and gender-based violence (SGBV), and other aspects will be included. The evaluation will assess to which degree the HRPs strategy puts protection and communities at the center of humanitarian action. The IAHE will also consider how the IASC strategy and commitments on Protection from Sexual Exploitation and Abuse (PSEA) have been integrated into the collective humanitarian response.

42. **Gender:** In line with the UNEG Guidance on Integrating Human Rights and Gender Equality in evaluation,[6] the UN System-Wide Action Plan (UN-SWAP) on gender equality[7] and the IASC Gender Equality Policy Statement,[8] the evaluation will apply gender analysis in all phases. To facilitate this analysis, at least one member of the team should have qualifications in gender analysis. In a bid to promote durable solutions and sustainability, the IAHE processes will, where possible, seek to understand how underlying issues, barriers, and drivers of inequalities are identified and addressed within humanitarian programming.

43. **Inclusiveness:** To the extent possible, the evaluation methodology will integrate participatory processes at the community level[9] to adequately engage women, men, boys, and girls of different ages and take into consideration the existence of disadvantaged groups such as Muhammasheen, people with disabilities, etc. The evaluation process will aim to assess the extent to which the differential needs, priorities, risks, and vulnerabilities of different population groups have been identified and assessed in the response. Further, the evaluation process will seek to understand the processes and methodologies utilized to enhance the equitable and effective inclusion, access, and participation of particularly women and girls in humanitarian activities (both at design and implementation stage) and decision-making processes.

44. **Accountability to affected people:** The IAHE will endeavor to gain the perspectives of affected people on the quality, usefulness, and coverage of the emergency response to enhance accountability and incorporate these views in the evaluation findings. Additionally, it seeks to understand how the various segments of the affected population are consulted, especially regarding prioritization of needs, decision-making processes, and how limitations to participation and inclusion are addressed. To this end, evaluators will strive to devote an appropriate amount of time during the field visit to consult communities and seek their views. The evaluation will also include a household survey of affected people if the current situation allows for it. If the context allows for it, Evaluators will seek to provide feedback to the affected people on the evaluation findings.

45. **Ethical considerations:** Due diligence will be given to effectively integrating good ethical practices and paying due attention to robust ethical considerations in the conduct of any IAHE as stipulated in the United Nations Evaluation Group (UNEG) Ethical Guidelines for Evaluation of 2020.

46. **Relevance to context:** To enhance the Evaluation Team's understanding of the local context and to improve ownership and communication with local communities, the Evaluation Team will also include national evaluators and consult local experts and researchers to a possible degree. Recognizing that the national

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engaging in controversies where assistance is deployed (neutrality); and free from any economic, political or military interest at stake (independence).

[6] www.uneval.org/papersandpubs/documentdetail.jsp?doc_id=1401

[7] www.unsystem.org/content/un-system-wide-action-plan-gender-equality-and-empowerment-women-swap

[8] https://interagencystandingcommittee.org/gender-and-humanitarian-action-0/documents-public/iasc-policy-statement-gender-equality-humanitari-0

[9] Such as sex-separate focus group discussions, key informant interviews, and targeted consultations with organized community groups such as women's associations, youth groups, etc.

consultants may not always have the degree of autonomy required to stay independent, the team will seek to identify and mitigate factors that may interfere with their independence.

47. **Application of internationally established evaluation criteria:** In general, IAHEs draw from the evaluation criteria in the UNEG norms and standards,[10] OECD/DAC criteria for development programmes[11] and the ALNAP criteria for the evaluation of humanitarian action.[12]

7   MANAGEMENT ARRANGEMENTS AND STAKEHOLDER PARTICIPATION[13]

Management Group

48. The evaluation will be managed by a Management Group, which is comprised of the following organizations: ICVA, UNHCR, UNICEF, WFP, and OCHA (Chair). The Management Group will provide sustained support and guidance to the evaluation process to ensure its relevance, independence, and transparency, and promote the utilization of evaluation results.

49. Per the IAHE guidelines, the IAHE Management Group members will act as the point of contact for the evaluation for their organizations and provide quality control and inputs to the IAHE regarding the scoping, inception, planning, guidance, oversight, quality control, internal liaison, consultation, support and utilization of the evaluation.

50. The Chair of the Management Group will be OCHA's Evaluation Manager. They will be the main point of contact for the evaluation and ensure day-to-day support and consistency throughout the evaluation process, from drafting the TOR to the dissemination of the report. They will also be the contact person for administrative and organizational issues and will coordinate the activities of the different stakeholders involved in the evaluation. They will organize and supervise the various phases of the evaluation process and ensure the quality of all deliverables submitted by the Evaluation Team.

51. See the IAHE Steering Group's Terms of Reference of the Management Group for further details.

Advisory Group

52. An Advisory Group, representing country-level stakeholders that have been directly involved in the response in Yemen, will be established. It will play a key role in advising the Evaluation Team and Management Group, and in supporting the evaluation through the planning, implementation, and follow-up stages. It serves as an advisory rather than a decision-making authority.

53. The responsibilities of this group will include: to help ensure the relevance, credibility, and utility of the evaluation, to facilitate evaluation planning and data collection, to review and provide feedback on draft documents, to participate in a validation workshop, to help promote ownership of stakeholders, to support the HCT in the preparation of the management response plan and to assist with developing and implementing a communication strategy.

54. See the Terms of Reference of the Advisory Group for further details.

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[10] See the UNEG website: www.uneval.org

[11] See the OECD/DAC criteria for evaluating development assistance. A factsheet can be found at https://www.oecd.org/dac/evaluation/evaluation-criteria-flyer-2020.pdf

[12] See the ALNAP guide for humanitarian agencies: Evaluating humanitarian action using the OECD/DAC criteria at www.alnap.org/pool/files/eha_2006.pdf

[13] For further details on the specific roles and responsibilities of the different IAHE stakeholders, please see "Inter-Agency Humanitarian Evaluations of Large-Scale System-Wide Emergencies (IAHEs): Guidelines, developed by the IAHE Steering Group, May 2018.

Steering Group

55. As per IAHE Guidelines, the IAHE Steering Group will approve the TOR, as well as the final evaluation report, based on the recommendations provided by the IAHE Management Group. The Steering Group will designate the members of the Management Group and will consider and approve whether staff from evaluation offices may be part of an IAHE. It will also contribute to the development of a communications strategy for IAHE results.

8   DELIVERABLES AND REPORTING REQUIREMENTS

56. The quality of the evaluation report will be assessed according to the UNEG Norms and Standards for Evaluation and the OCHA Quality Assurance System for Evaluations.

57. The inception and draft reports will be produced jointly by the members of the Evaluation Team and reflect their collective understanding of the evaluation. All deliverables listed will be written in good standard English, and submitted as Word and PDF documents, using the IAHE template. If in the estimation of the Evaluation Manager the reports do not meet required standards, the Evaluation Team will ensure at their own expense the editing and changes needed to bring it to the required standards.

Inception Report

58. The Evaluation Team will produce an inception report not to exceed 15,000 words, excluding annexes, setting out:

- The team's understanding of the issues to be evaluated (scope), and their understanding of the context in which the IAHE takes place

- An assessment of the evaluability of the evaluation questions and of available data to identify challenges/gaps and propose how they might be mitigated

- Any suggested deviations from the TOR, including any additional issues raised during the initial consultations

- A comprehensive stakeholder mapping and analysis, including a description of how key stakeholders and the affected population were involved/consulted in developing the inception report

- A reconstruction of the theory of change

- Evaluation framework selected criteria of analysis and sub-questions (building upon the initial list of evaluation criteria and questions provided in the present the TOR)

- An evaluation matrix showing, for each question, the assumptions to be assessed, the indicators proposed and corresponding sources of information

- A comprehensive methodological approach for the evaluation, including

    - Details of gender analysis and triangulation strategy

    - Data collection and analysis tools that will be used to conduct the IAHE (survey instruments, interview guides questions, document with the preparation of field visit and schedule of interviews, and other tools to be employed for the evaluation)

    - Any limitations of the chosen methods of data collection and analysis and how they will be addressed

- How the views of the affected populations as well as protection and gender issues will be addressed during the evaluation

- How challenges posed by the context, for instance through the obstruction of aid, will be addressed in the evaluation

- Detailed fieldwork plan

- Detailed timeline for the evaluation

- Draft dissemination strategy of the evaluation findings (including with the IAHE Management Group and the in-country IAHE Advisory Group)

- A contextual analysis report providing the context to the evaluation. The Evaluation Team will also prepare an overview (7-10 pages) of the internal and external political, security and operational factors that have constrained or facilitated humanitarian action in Yemen.

Evaluation Report

59. The Evaluation Team will produce a single report of not more than 25,000 words (excluding the executive summary and annexes), written in a clear and concise manner that allows readers to understand the main evaluation findings, conclusions and corresponding recommendations, and their inter-relationship. The report should be comprised of:

- Table of contents

- Executive summary of no more than 2,500 words

- Summary table linking findings, conclusions and recommendations, including where responsibility for follow-up should lie

- Analysis of context in which the response was implemented

- Methodology summary – a brief chapter, with a more detailed description provided in an annex

- Main body of the report, including an overall assessment, findings in response to the evaluation questions, conclusions and recommendations.

- Annexes will include: (1) TOR, (2) detailed methodology, (3) list of persons met, (4) details of qualitative and quantitative analysis undertaken, (5) team itinerary, (6) all evaluation tools employed, (7) list of acronyms; and (8) bibliography of documents (including web pages, etc.) relevant to the evaluation, (9) assessment of the usefulness of the IAHE guidelines and process and main recommendations for their improvement.

60. For accuracy and credibility, recommendations should follow logically from the evaluation findings and conclusions, and be:

- Categorized as a) Critical, b) Important, or c) Opportunity for learning

- Relevant and useful and reflect the reality of the context

- Specific, clearly stated and not broad or vague

- Realistic and reflect an understanding of the humanitarian system and potential constraints to follow-up

- Suggest where responsibility for follow-up should lie and include a timeframe for follow-up

- Build upon and take fully into consideration previous recommendations, such as OPRs, to avoid any contradictions unless justified by collected evidence

61. The draft report will be reviewed by the IAHE Management Group and the final version cleared by the IAHE Steering Group prior to dissemination.

Other evaluation products

62. Based on the communication plan, the Evaluation Team will produce presentations, as requested by the Management Group, including presentations to HC/HCT, IASC members, in-country presentations to local communities and affected people, etc. There will also be one presentation summarizing the final evaluation report.

63. The Executive Summary, a one-pager factsheet and presentation summarizing the key findings will be translated into Arabic.

64. Additional evaluation products such as briefs, video presentations or précis may be proposed in the inception report for the Management Group's consideration.

9   DISSEMINATION AND FOLLOW UP

65. In consultation with the in-country advisory group and the Evaluation Team, the Management Group will prepare a dissemination, communication and engagement strategy for the IAHE. The strategy will outline how the evaluation's findings, conclusions and recommendations will be disseminated to all relevant audiences including affected people. The strategy will also outline specific communication products (in English and Arabic) and their dissemination channels.

66. The Evaluation Team will conduct the following presentations:

- In case a full in-country field mission will be possible (Scenario B), the Evaluation Team will conduct an exit brief with the in-country IAHE Advisory Group, HCT, the relevant Government counterparts, and (remotely) the IAHE Management Group to share first impressions, preliminary findings and possible areas of conclusions and recommendations at the end of the field visit. The brief will help clarify issues and outline expected or pending actions from any stakeholders as relevant and discuss the next steps.

- Upon completion of the draft evaluation report, the results of the IAHE will be presented by the Evaluation Team Leader (or Evaluation Manager) to the IASC Operations, Policy and Advocacy Group and to the IASC Emergency Directors Group in Geneva and/or New York.

- Once the evaluation is completed, presentations of the main findings and recommendations will be made available to various fora as decided by OCHA and the IAHE Management and Steering Groups. The Evaluation Team may be requested to assist with these presentations.

67. The IAHE final report will be submitted to the IASC Operations, Policy and Advocacy Group (OPAG), the Emergency Directors Group and the Principals.

68. Once the evaluation results are finalized, national evaluators will help feedback results to communities who participated in the evaluation and to affected people and communities.

69. In addition to the Evaluation Report and oral briefings, the evaluation findings and recommendations can be presented through alternative ways of dissemination, such as websites, videos, etc. The Evaluation Team will consider possible ways to present the evaluation and include a dissemination strategy proposal in the inception report.

70. The inception and evaluation reports will be made available on the websites of the IASC and the IAHE Steering Group member agencies.

71. The recommendations of the evaluation will be addressed through a formal Management Response Plan (MRP). The preparation of the MRP will be facilitated by OCHA's Strategic Planning, Guidance and Evaluation Section and the OCHA Office in Yemen. For recommendations at the country level, the MRP will be approved by the HCT under the leadership of the HC and with guidance from the Advisory Group. Three months after the issuance of the IAHE report, the HC in Yemen will provide the ERC with an update on the implementation of follow-up plans.

10 THE EVALUATION TEAM

72. The Evaluation Team will be recruited through OCHA's systems contracts for evaluative services. The evaluation will require the services of an Evaluation Team of four members – a team leader, a senior evaluator (recruited through international recruitment procedures) and two or three nationally recruited evaluators – with the following collective experience and skills:

    - Extensive knowledge of humanitarian law and principles, and experience with using human rights, protection and gender analysis in evaluations (at least one of the team members should have experience in protection and gender analysis)

    - Extensive evaluation experience of humanitarian strategies and programmes, and other key humanitarian issues, especially humanitarian finance and funding instruments

    - Experience with and institutional knowledge of UN and NGO actors, inter-agency mechanisms at headquarters and in the field

    - Good understanding of cross-cutting issues, such as gender, disability, resilience etc.

    - At least one team member should have extensive skills in data analysis and presentation as well as population surveys

    - An appropriate range of field experience

    - Experience in facilitating consultative workshops involving a wide range of organizations and participants

    - The Team Leader should have excellent writing and communication skills in English. All team members must have working knowledge of English. In addition to national consultants, at least one international team member must have excellent speaking, reading and, preferably, writing skills in Arabic

    - Context-specific knowledge and experience, including experience in the Middle East and North Africa is highly desirable

73. The Evaluation Team will include a Team Leader, who is responsible for the overall conduct of the evaluation in accordance with the TOR, including:

    - Developing and adjusting the evaluation methodology

    - Managing the Evaluation Team, ensuring efficient division of tasks between mission members and taking responsibility for the quality of their work

    - Representing the Evaluation Team in meetings

    - Ensuring the quality of all outputs

    - Submitting all outputs in a timely manner

74. The Team Leader will have no less than 15 years of professional experience in humanitarian action, including experience in the management of humanitarian operations. The Team Leader will further have at least 10 years

of experience in conducting evaluations of humanitarian operations and demonstrate strong analytical, communication and writing as well as team leadership skills.

75. The two or three national evaluators will be managed by the Team Leader. The Team Leader will put methodological and management measures in place to reduce any potential bias in data collection undertaken by national consultants that may arise due to their regional, religious or ethnic identity. The national consultants will also play a key role in disseminating the evaluation results to affected communities.

76. To the extent possible, the Evaluation Team will be gender balanced.

11 SEQUENCE

77. The following presents a proposed schedule and description of each evaluation phase. Figure 1 gives an overview of the timeline with the tasks and deliverables expected in each phase.

Preparations and Scoping Phase (Month 1 – Month 3)

The scoping phase will be conducted by the IAHE Management Group. The evaluation will focus on the impact of the collective humanitarian response to the humanitarian crisis in Yemen, as outlined in successive response plans. During the scoping phase: (1) the evaluation scope will be further refined, taking into account the various crises resulting from the conflict, and clearly defining which of these will be included in the scope of the evaluation (2) the evaluation plan will be defined in more detail, (3) data sources will be identified, and (4) security and access issues will be reviewed. The scoping phase will be a desk exercise, there will be no scoping mission. The outcomes of the scoping phase are likely to lead to changes in the evaluation planning and budget, including proposed travel, duration of travel, balance of days between international and national consultants or any other aspects.

Output: Terms of Reference

Evaluation Team Selection & Recruitment (Month 4 – Month 5)

Based on the TOR, the Evaluation Team will be recruited. Although this will be confirmed once TORs for the IAHE have been approved, in principle it is envisioned that the team will consist of 4 people, including 2 international consultants (a team leader and one senior evaluator) and 2 national evaluators. As agreed by the Steering Group, both the Evaluation Team and the Management Group would invest time at the beginning of the evaluation process in identifying data sources. The recruitment of the Evaluation Team can be done through OCHA's systems contract for evaluations, or alternatively through the UN Global Marketplace using the system contracts of any other UN agency.

Output: Task Order signed with evaluation company and Evaluation Yeam recruited

Inception Phase (Month 5 – Month 7)

The Inception Phase will be conducted by the Evaluation Team and include a 7-10-day trip to one or two subnational hubs in Yemen in addition to visiting Sana'a. The Evaluation Manager can participate in the inception mission to facilitate team's interaction with the HCT members as well as any logistical, financial and other issues. The participation of the Evaluation Manager in the team's internal and external meetings will be at discretion of the Evaluation Team Leader.

Output: An overview of draft inception report, contextual analysis report and final inception report

Evaluation and Reporting Phase (Month 7 – Month 10, draft report Month 11, final report by Month 12)

If the situation regarding security and COVID-19 in Yemen allows, the evaluation phase will include a 3-week in-country field mission (final duration will be confirmed once the TOR are approved), including travel to 3-5 field locations across the country. All members of the Evaluation Team will participate in the field mission and should be accompanied by the Evaluation Manager. Before leaving Yemen, the Evaluation Team will conduct a debriefing for the Yemen HCT, in-country Advisory Group and Government authorities, as appropriate. Following the mission, the Evaluation Team will analyze data, information and other material collected, and prepare the evaluation report. The Evaluation Team may also conduct meetings outside of Yemen, e.g., with the IASC Emergency Directors Group. Moreover, a proposed local population survey to assess the views of affected people on the humanitarian assistance they received is included in the evaluation phase.

Output: Draft evaluation report and final evaluation report (including survey results)

Dissemination of Results (Month 12 and following)

The Steering Group aims to improve the dissemination of evaluation results, and all group members should support this effort. The Evaluation Team leader is expected to travel to New York and/or Geneva to debrief IASC members. In case the current situation regarding the global COVID-19 pandemic does not allow for this, the debriefings will be held virtually. The budget also includes a line for graphic design, web design, the production of a video or other communications material in English and Arabic languages. Side events could also be organized at ECOSOC and at the UN General Assembly to further disseminate the findings in line with the Steering Group's engagement and communications strategy.

Output: Information products and presentations

Implementation (Management Response Plan by Month 14)

The Steering Group aims to strengthen its links to the IASC, to ensure that both the HCT and, at the global level, the IASC develop timely management responses and fully address all relevant recommendations.

Output: Management Response Plan

Figure 1: Timeline and Phases of the Evaluation

Month	Timeline	Phase	Tasks and Deliverables
1	November 2020 – January 2021	Preparation and Scoping	Draft and Final Terms of Reference
2			
3			
4	February 2021	Evaluation Company Selection	Task Order signed with Evaluation Company
5	March 2021	Team Recruitment	Briefing at HQ
6	March – May 2021	Inception Phase	Document Review 1.5-week Inception Mission Draft and Final Inception Report
7	May – August 2021	Evaluation and Reporting Phase	Ongoing data collection by two national evaluators and survey conducted by survey company
8			3-week Field Mission, Data Collection Exit Debriefing Analysis
9			
10			
11	August – September 2021		Draft Evaluation Report Comments Process
12	September – October 2021		Final Evaluation Report
13	October – November 2021	Dissemination of Results	Information Products
14	December 2021	IASC/HCT Response to Recommendations and Implementation	Management Response Plan

Annex – Coordinated Humanitarian Action: The Ideal Model – Impact Pathway

LONGER-TERM IMPACT	Affected people live in enhanced safety and dignity with better prospects of thriving as agents of their own destinies					
↑↑↑						
CORE RESPONSIBILITIES	Prevent and end conflicts [conflict-related crises]	Uphold norms of safeguard of humanity	Leave no one behind	Change people's lives: from delivering aid to ending needs	Change people's lives: from delivering aid to ending needs	Invest in humanity & in local leadership and ownership of the response
↑↑↑						
OUTCOMES	Humanitarian access secured for all	Relevant response		Connectedness and coordination between humanitarian stakeholders	Good coverage	
↑↑↑						
OUTPUTS	Effective coordination mechanisms	Adequate partnerships	Common needs assessments & response plans	Common services	Concerted advocacy for adequate response capacity across sectors	Accountability
↑↑↑						
INPUTS	Enhanced leadership	Human resources, including surge capacity	Pooled and agency funds	Guidance and programming tools (HPC, MIRA, Sphere Standards, etc.)	Sector/cluster leads activation and common services provision	