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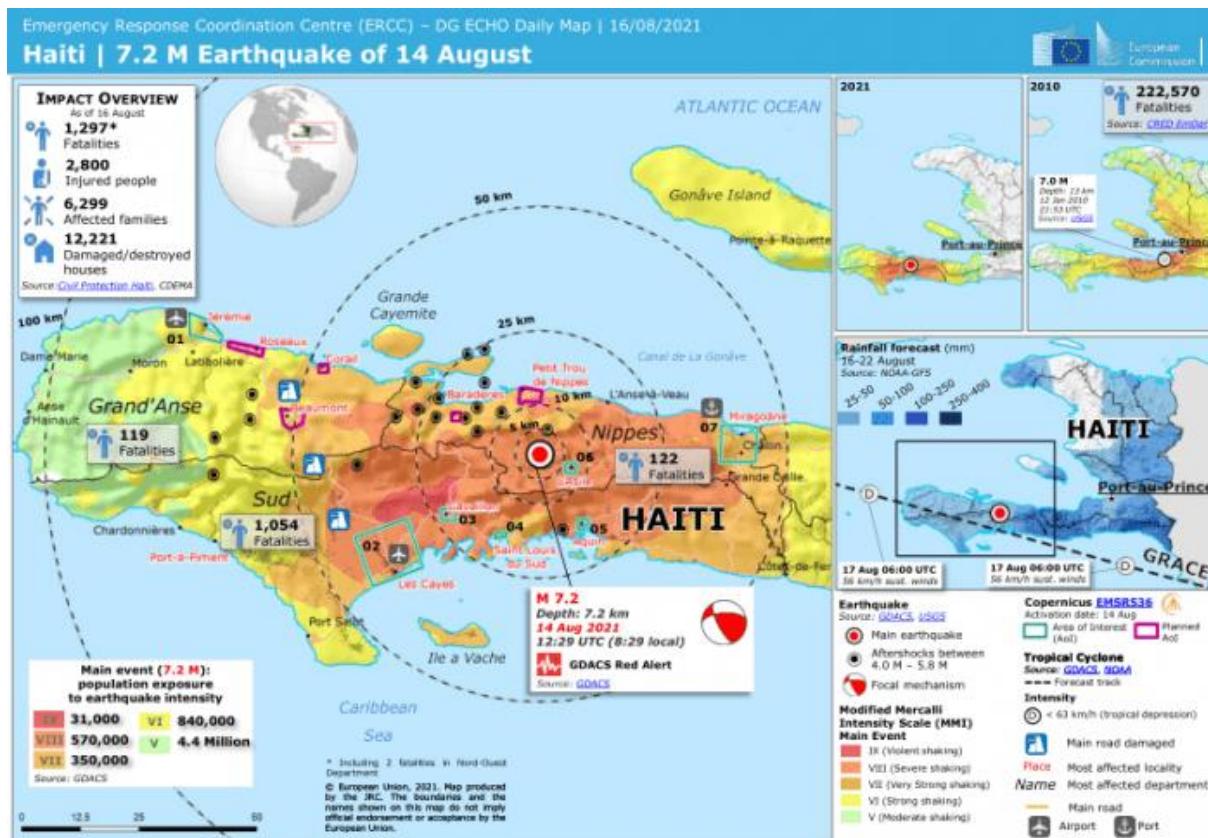


*Real-time evaluation
of UNICEF's response
to the
Haiti earthquake of 2021
Evaluation Report*

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PHOTO N°1: DESTRUCTION: HOSPITAL IN LES IPES

Map of the affected areas



(https://commons.wikimedia.org/wiki/File:Haiti_7.2_M_Earthquake_of_14_August_2021_%28cropped%29.jpg)

Acknowledgements

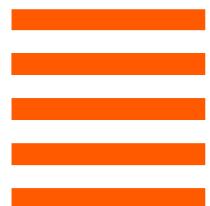
The evaluation team would like to thank all the institutions and individuals who made this fascinating evaluation possible. Haiti is a context that pushes institutions to their limits. Despite this, so many people took time out to meet us, answer our questions, and share their concerns and views about UNICEF's earthquake response.

Special thanks to the UNICEF Haiti Country Office team, who, from the UNICEF Representative to the drivers, were very supportive to the RTE process.

List of acronyms and abbreviations

ACF	Action contre la Faim
ACTED	Agence d'aide à la Coopération Technique et au Développement
AFD	Agence Française de Développement
AMC	Affaires mondiales Canada
ASCP	Agent de Santé Communautaire Polyvalent
BINUH	Bureau intégré des Nations Unies en Haïti
C4D	Communication for Development - Communication pour le développement
CAD	Comité d'Aide au Développement
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women -Convention sur l'élimination de toutes les formes de discrimination à l'égard des femmes
CERF	Central Emergency Response Fund - Fonds central d'intervention d'urgence des Nations Unies
CPD	Country Programme Document – Document de Programme Pays
CSO	Civil Society Organisation
DDE	Direction Départemental de l'Education
DG-ECHO	General Directorate for Civil Protection and Humanitarian aid of the EU Commission
DGPC	Direction Générale la Protection Civile d'Haïti
DINEPA	Direction nationale de l'eau potable et de l'assainissement
DSF	Direction de la Santé familiale
EMMUS	Enquête de morbidité, de mortalité et d'utilisation des services
FAO	Food and Agriculture Organization – Organisation pour l'Alimentation et l'Agriculture
FONDEFH	Fondation pour le développement et l'encadrement de la famille haïtienne
FOSREF	Fondation pour la santé reproductrice et l'éducation familiale
GAVI	Global Alliance for Vaccines and Immunization – Alliance mondiale pour les vaccins et la vaccination
GHESKIO	Haïtian Global Health Alliance
GPE	Global Partnership for Education – Partenariat mondial pour l'éducation
GRE	Groupe de Référence de l'Évaluation
HCT	Humanitarian Country Team
HHF	Haïtian Health Foundation
IBESR	Institut du bien-être social et de la recherche
IDG	Indice de Développement de Genre
IDH	Indice de Développement Humain
IHSI	Institut haïtien des statistiques et de l'information
JICA	Japan International Cooperation Agency –
LACRO	Latin America and the Caribbean Regional Office
MAST	Ministère des Affaires sociales et du Travail
Mdm	Médecins du Monde
MENFP	Ministère de l'Éducation nationale et de la Formation professionnelle
MINUJUSTH	Mission des Nations Unies pour l'appui à la justice en Haïti
MINUSTAH	Mission des Nations unies pour la stabilisation en Haïti
MPCE	Ministère de la Planification et de la Coopération externe
MSPP	Ministère de la Santé publique et de la Population
NGO	Non Governmental Organization
OCDE	Organisation de coopération et de développement économique
PAGEDEV	Partnership for Gender Equity and Development
PAHO	Pan American Health organization
PDNA	Post Disaster Need Assessment
PIPE	Programme d'interventions prioritaires en éducation
PLAFODA	Plate-forme Haïtienne de Plaidoyer pour un Développement Alternatif
PNPPS	Politique nationale de protection sociale
PNS	Politique Nationale de Santé
PPE	Personal Protective Equipment
PSDH	Plan Stratégique de Développement d'Haïti
PSEA	Protection Against Sexual Exploitation and Abuse
PSN	Programme Strategy Notes – Notes stratégiques de programme
PSNSSANH	Politique et Stratégie Nationales de Souveraineté et Sécurité Alimentaires et de Nutrition en Haïti
RTE	Real Time Evaluation

SAEP	Systèmes d'approvisionnement en Eau Potable
SDG	Sustainable Development Goal
SI	Solidarités International
SitAn	Situation Analysis – Analyse de la Situation
SMR	Strategic Moment of Reflection - Moment de Réflexion Stratégique
SOP	Standard Operating Procedures
ToC	Theorie of Change
ToR	Termes of Reference
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNFPA	United Nations Funds for Population Activities
UNS	United Nations System
WFP	World Food Programme
WHO	World Health Organisation
WB	World Bank



Contents

Map of the affected areas	2
Acknowledgements	2
List of acronyms and abbreviations	3
EXECUTIVE SUMMARY	
A. OBJECT, OBJECTIVES, AUDIENCE and METHODOLOGY	8
B. A COMPLEX CONTEXT	8
C. CONCLUSIONS.....	10
D. RECOMMENDATIONS.....	11
Recommendations for the current recovery phase:.....	12
Recommendations for UNICEF's strategy in Haiti	13
MAIN REPORT.....	15
1. INTRODUCTION	16
1.1. Structure of the Evaluation Report.....	16
1.2. Overview of the object and scope of the RTE	16
1.3. Purpose and objectives of the RTE	17
2. METHODOLOGY	18
2.2. Humanitarian frameworks specific to UNICEF: L2 and CCC.....	18
2.5. Information sources, collection methods and information treatment	21
2.6. Limits, risks and mitigation measures	23
2.6.1. Contextual risks and uncertainty	23
2.6.2. Difficulties in accessing information.....	23
2.6.3. Mitigation measures related to the identified risks	24
2.6.4. Summary of risk management strategy.....	24
2.7. Ethical considerations	25
3. HAITI: A COMPLEX OPERATIONAL CONTEXT.....	26
3.1. The Haitian political and socio-economic situation.....	26
3.2. A disaster-prone country.....	28
4. UNICEF IN HAITI PRIOR TO THE EARTHQUAKE.....	30
5. THE 2021 EARTHQUAKE: HOW THE EVENTS UNFOLDED	32
5.1. The earthquake	32
5.2. The impact of the earthquake by sector and the global response	33
5.3. Time line of the international response	36
5.4. Global funding of the Haiti earthquake response	36
6. FINDINGS.....	38
6.1. Relevance/ Appropriateness:	38
6.2. Effectiveness:	41
6.3. Efficiency	55
6.4. Coverage:	56
6.5. Connectedness:	57
6.6. Coordination:	61
6.7. Equity	63
7. LESSONS LEARNED	64
8. CONCLUSIONS.....	70

8.1.	High level conclusions	70
8.2.	More specific conclusions linked to key issues from the ToR:.....	72
9.	RECOMMENDATIONS.....	73
9.1.	Recommendations for the ongoing activities of the rehabilitation phase:	73
9.2.	Recommendations for UNICEF's strategy in Haiti	74
	ANNEXES.....	77
	Annex n°1: Terms of reference	78
	Annex n°2: Itinerary of the mission	84
	Annex n°3 List of people met.....	85
	Annex n°4: Evaluation Matrix related to the CAD evaluation criteria:	88
	Annex n°5: Evaluation judgment in line with the L2 declaration process.....	93
	Annex n°6: Evaluation judgment in line with the Core Commitment for Children.....	94
	Annex n°7: Consulted documents.....	98
	Annex n°8: Guidelines for the interviews, RTE UNICEF in Haiti	100
	Annex n°9: Workshop Lessons learn Les Cayes 7-9 Feb 2022.....	101
	Annex n°10: Presentation of the team	104

Photos:

- Photo n°1: Destruction of an hospital in Les Nippes
 Photo n°2: Destruction in Les Nippes
 Photo n°3: School rehabilitation in the Sud Department
 Photo n°4: Logistical difficulties in the South
 Photo n°5: An ambulance mobilized for the mobile units
 Photo n°6: Destroyed bridge in the Sud Department
 Photo n°7 : Nutritional programme in Les Nippes
 Photo n°8: Field visit to look at WASH activities
 Photo n°9: Tent used as school
 Photo n°10: Temporary school constructed with the support of UNICEF (Les Cayes)
 Photo n°11: Efforts to make schools earthquake resistant
 Photo n°12: Health and Nutrition consultation
 Photo N°13: Transitional school
 Photo n°14: Youth of today, leaders of tomorrow
 Photo n°13: COVID management
 Photo n°14 : UNICEF education kits

Maps :

- Map N°1: Itinerary
 Map N°2: Map of affected areas
 Map N°3: Map of the human impact of the earthquake

Diagrams:

- Diagram n°1 : Integrating different evaluation frameworks
 Diagram n°2: Evaluation logics
 Diagram n°3: Triangulation process
 Diagram n°4: key Stakeholder analysis
 Diagram n°5: Timeline of the response
 Diagram n°6: Funding request as per the flash appeal (OCHA, flash appeal, August 2021)
 Diagram n°7: Access issues for the school sites visited during the mission

Tables:

- Table n°1: Disasters in Haiti
 Table n°2: Recommendation's from Hurricane Matthew
 Table n°3: Funding of the operations (source FTS)
 Table n°4: Funding of the operations (source UNICEF HCO)
 Table n°5: Key actors in the psychosocial sector

EXECUTIVE SUMMARY

PHOTO N°2 : DESTRUCTION IN LES NIPPE

EXECUTIVE SUMMARY

A. OBJECT, OBJECTIVES, AUDIENCE and METHODOLOGY

The evaluation team carried out a real-time evaluation (RTE) of UNICEF's response to the earthquake that struck the three southern departments of Haiti on 14 August 2021. The RTE reviews both the emergency response phase (between August 14th, 2021 and October 14th, 2021) and the recovery phase (between October 14th, 2021 and the RTE deployment).

The objectives of the RTE were:

- a. to determine whether UNICEF's response to the earthquake was appropriate/relevant, effective, connected, coordinated and coherent;
- b. to assess the extent to which UNICEF adhered operationally and programmatically, to the Core Commitments for Children in Humanitarian Action (CCCs);
- c. to examine the extent to which UNICEF effectively responded to the needs of the most affected population in a timely manner and identify gaps and appropriate strategies to improve operational coverage and effectiveness (see Annexe 1 ToR).

The *primary audience* includes UNICEF's management and staff at the field, country, regional and headquarters levels involved in the response to the earthquake. The *secondary audience* includes: the wider community of partners - governmental, UN agencies and other implementing partners (international and national NGOs); populations affected by the emergency, the Executive Board and interested member states; and donor agencies that support emergency programmes with technical and financial resources at all levels.

The data collected for the evaluation came from a literature review, a large number of interviews with stakeholders, and observations during field visits. Data collected was triangulated and then the findings, conclusions and recommendations were validated through a series of workshops with staff from the field office, Country Office and Regional Office. The evaluation team used different frameworks and approaches for the two different phases of the response:

- For the emergency response phase the team used OECD/DAC evaluation criteria as the main analytical framework combined with the procedure on regional emergency activation for L2 emergencies and the CCCs. The findings are presented in relation to these in the main report as well as in annexes 5 and 6;
- For the ongoing recovery phase, the team opted for an iterative “real-time evaluation” approach to trigger real time learning and provide “real time solutions”.

B. A COMPLEX CONTEXT

Over the last 20 years, Haiti has been affected by more than 20 disasters. The earthquake on August 14th 2021 further compounded a complex context which includes a) a political crisis related to the assassination of the President on July 7th; b) an economic crisis that has been looming for years, including regular gas shortages; c) the impact of the COVID-19 pandemic; and d) gang-related insecurity which has made the transportation of supplies and aid extremely difficult. The rural areas of the southern peninsula's three most westerly departments were the hardest hit. The damage was located in a number of isolated communities that could only be contacted and reached after several hours. Two days later, on August 16th, with people mostly sleeping in the open, tropical storm Grace hit, further blocking roads due to landslides.

The impact of the earthquake was significant with around 2,200 deaths, 12,700 injured and around half a million children affected. As in other responses to natural disasters, UNICEF's response to the 2021 Haiti earthquake had two main phases. an emergency phase, during which UNICEF conducted a series of relief activities in health/nutrition, water, sanitation and hygiene (WASH), education and child protection, and a rehabilitation phase to assist the affected areas and populations to recover from the main impacts of the earthquake. The findings below are structured in relation to the following 7 criteria:

RELEVANCE/ APPROPRIATENESS: Despite its low level of emergency preparedness, to a large extent, UNICEF's emergency response was appropriate, with some variation in levels of appropriateness between sectors. However, many remote rural areas received only limited assistance for some time due to access difficulties. The response only started to be more comprehensive at the beginning of the recovery phase. Regardless of the difficulties, most activities were organized in order to restore basic services. UNICEF's response was largely aligned with the CCCs (see annex N°6), with different levels of success depending on the sectors. The strategy for the recovery phase was also relevant as it was in keeping with local needs and priorities and despite significant constraints, including the lack of long-term funding which limited the capacity to reach the most affected people at scale.

EFFECTIVENESS: During the emergency phase, with a rapidly changing situation on the ground, most of the emergency response was reactive (sometimes at the expense of staff safety), and it focused on emerging needs rather than on implementing and achieving planned targets. More planning was developed for the recovery phase in coordination with the national and local authorities and other agencies. During this phase, it was the reactivity and adaptability of the Haiti Country Office (HCO) that made the response effective, rather than any longer term planning process. On another level, a serious concern remains the extent to which the office was able to maintain business continuity for the other programmes in the other parts of Haiti and to manage two crises simultaneously: the earthquake and the urban crisis in Port-au-Prince. However, the office was not fully staffed as key positions remained vacant despite requests for replacements made by the HCO. The L2 declaration with the proactive engagement of the Latin America and Caribbean Regional Office (LACRO) and UNICEF HQ was of great help in terms of solving some of the human resources issues, facilitating access to financial resources and easing some of the bureaucratic procedures. Fundraising was only partly successful with the main bilateral and multilateral donors but worked relatively well with NatComs. During the emergency phase, the most urgent health and WASH activities were mostly timely. The mobilization of Haitian health personnel and the means to support them, the water trucking, the existence of the office in Les Cayes and the one month “open window” in Martissant greatly facilitated the timeliness of the early response in the Southern Peninsula. However, UNICEF's response in GrandAnse and Les Nippes was insufficient compared to its response in the South Department.

Despite the existence of useful tools and a number of activities carried out prior to the earthquake, the emergency preparedness activities (EPP) had little influence on the way the Country Office's responded to the earthquake. The constraints linked to the access to roads, the need to work with the UNICEF Copenhagen Supply Division and internal difficulties within Haitian counterparts significantly affected the speed of the supplies during the emergency phase. The recovery phase was significantly hampered by the rainy season and the blockade of the bridge in Jeremie, in addition to the difficulties getting convoys out of Port-au-Prince.

COVERAGE: Despite efforts, UNICEF encountered many difficulties in reaching the most vulnerable groups (e.g. communities in hard-to-reach areas, IDPs, people with disabilities, unaccompanied/separated children, and pregnant women) during the emergency phase as many national bodies were inadequately staffed and equipped to deliver. Things improved significantly during the recovery phase. Though we know the number of kits that were distributed, it is not possible to assess the number of people assisted via programmes that target community infrastructure such as water, health, schools, etc. Nevertheless, we can say that geographic coverage was relatively significant at the time of the RTE.

EFFICIENCY: Although the RTE mission did not have the means to carry out a proper cost-efficiency analysis, the evaluation team observed that efficiency varies significantly depending on phases, subject and territories. Some of the hindrances in this area are linked to internal choices made by UNICEF on procurement (“petits et grands achats”). The speed of international and local procurements varies significantly depending on who is in charge. The mobilisation of the fleet, in particular the fleet of vehicles based in Port-au-Prince to support the operation, which was constrained by the Martissant blockade, was apparently not optimal, and resulted in expensive car rentals in the South.

CONNECTEDNESS: UNICEF’s approach was broadly oriented towards ensuring that infrastructure and local services could be properly rehabilitated, and such able to deliver services, as a component of the exit strategy for its emergency response. This was particularly important in WASH (what to do after water-trucking) and in education (what to do to ensure that education was able to resume promptly in appropriate buildings than in tents).

COORDINATION: Coordination within UNICEF and with other actors was a key challenge in order to ensure that there was effective coverage of very specific, scattered and multidimensional needs. Internally, coordination was extremely time-consuming (for example, due to the large quantity of information that LACRO and HQ wanted to received) and did not always lead to a sufficient amount of multi-sector coordination. Externally, UNICEF’s support to strengthen national leadership was a key factor for the appropriateness and effectiveness of its response. In the field, UNICEF was a key player in sub-national coordination during the emergency phase at the les Cayes level and to a lesser extent in the GrandeAnse and Les Nippes departments, both globally (COUD) and in its thematic areas of responsibility.

GENDER EQUALITY AND INCLUSION: In Haiti, women and children are often victims of different types of mistreatments and require proper protection. The earthquake was seen as an aggravating factor in this regard. Gender and disability were taken into consideration as much as constraints and the characteristics of the context permitted. UNICEF had to develop specific workstreams with specific national institutions and with specialized NGOs to ensure proper management of these highly sensitive issues. The policy on Protection Against Sexual exploitation and Abuses (PSEA) was well supported at the political level and coordinated with the UN World Food Programme (WFP).

The report includes 11 main lessons which are drawn from the findings and conclusions. Lessons 1 to 7 have been drawn from the overall response and evaluations of previous disaster responses. Lessons 8 to 11 concern UNICEF emergency management procedures.

C. CONCLUSIONS

The conclusions below, are structured in line with the 6 objectives stated in the evaluation ToRs and the Evaluation Questions:

- A) UNICEF’s response to the earthquake was appropriate and relatively effective given the needs that it created and the significant constraints. There was substantial effort to contribute to enhanced coordination, including with the national institutions, and to connect the short-term response with the longer term. The lessons from previous evaluations have not been fully integrated;
- B) Both during the emergency phase and during the ongoing rehabilitation phase, UNICEF has made a significant effort to adhere operationally and programmatically to the CCCs, despite major constraints. UNICEF’s response was facilitated a great deal by the L2 declaration.
- C) The level of preparedness was low, with key HCO staff absent despite the beginning of the cyclone season. UNICEF was caught “off guard” by the earthquake. As such, the L2 declaration was of great help.
- D) The primary focus of the M&E system is to “report to the donor and HQ” rather than being “a tool for steering complex operations in an unpredictable environment”.

- E) UNICEF did all it could to effectively respond to the needs of the most affected population. The level of political, security, logistical and access constraints made the timeliness of the response variable although the L2 declaration was of great help. The high level of vulnerability of the population even prior to the earthquake made needs overwhelming. Nevertheless, efforts were made at the local and central levels, including through interagency processes to ensure the best coverage of the hard-to-reach rural areas.

D. RECOMMENDATIONS

The recommendations are split into 3 main categories:

- a) what to do to improve the ongoing response;
- b) how to better prepare for the ongoing cyclone season; and
- c) key elements to contribute to “risk informed and shock responsive” Haitian development.

Recommendations for the current recovery phase:

The first set of recommendations are related to the ongoing operations (timeline: immediate).	HCO
Recommendation 1: Make UNICEF's response more effective by:	
Strengthening UNICEF field presence	
<ul style="list-style-type: none"> • Open operational offices in GrandAnse and Les Nippes • Ensure proper logistics for these offices and their local counterparts. • Ensure proper inclusion of gender and disability in the design of the response in all sectors 	
This will help ensure that all programmes achieve their targets (both quality and quantity). Furthermore, each sector can be further reinforced:	
Strengthen Health/Nutrition -	HCO
<ul style="list-style-type: none"> • Establish an agreement with PROMESS to pre-position medicines in the country. • Look into ways of supporting hospital departments with fuel during acute fuel crises. • Strengthen the visibility of health/nutrition interventions in GrandAnse and Nippes. 	
Reinforce the WASH sector –	
<ul style="list-style-type: none"> • Ensure strong presence of staff to support the continuation of the OREPA rehabilitation work in the three departments. • Fund OREPA directly to accelerate future fixing of broken SAEP. 	
Reinforce Education and Child Protection -	LACRO
<ul style="list-style-type: none"> • Advocate for faster construction in order to ensure that more resources are available for this process. Ensure that kits are available before classes are opened. • Ensure involvement of DDE in all interventions (distribution, construction monitoring, etc.).. • Advocate for an increase in the number of IBESR staff present in the Grand Sud to avoid slowing down certain activities. • Advocate to strengthen the operational capacity of state protection agents (the institutions in charge of protection) 	
Social Protection and Cash Transfer -	
<ul style="list-style-type: none"> • Strengthen UNICEF's cash response dedicated to supporting education processes. • Improve the HCO's capacity to design and implement emergency cash transfer programmes in order to better respond to the needs of vulnerable populations, including women with young children and protection cases. 	
Limit the weight of silo approach and develop interconnection between the different sectoral programmes	
<ul style="list-style-type: none"> • Develop multi-sectoral team work • Engage more in inter-agency coordination (with PAHO/WHO, WFP and FAO) 	

The second set of recommendations are related to the urgent need to enhance disaster preparedness in view of the cyclone season.

N° EQ	Conclusions	Recommendations	Targets
5, 6, 7	C, E,	<p>Recommendation 2: Ensure optimal readiness for the cyclone season with a multi-hazard approach. Support the replenishment of emergency stocks at the COUD levels. Ensure that stocks include water treatment equipment and products, as well as bladders. Ensure that some basic medical equipment and medicine is available in the Grand Sud.</p> <p>Organise consultations with the affected population to revise the content of the hygiene kits and ensure that a certain quantity of kits is available in the Grand Sud. Include cash options to make hygiene kits more appropriate (provided that a proper market study is carried out)</p> <p>Support the institutionalization of national emergency medical teams in coordination with the MPH and PAHO.</p> <p>Run training sessions for all staff on UNICEF emergency mechanisms and procedures including the use of Cash In Hand for the HCO team.</p> <p>Ensure that disability and gender are taken into account as key parameters in preparedness efforts</p>	HCO Supply division , LACRO HCO, LACRO, HQ

Recommendations for UNICEF's strategy in Haiti

These recommendations have been tailored to help the UNICEF Haiti office prepare the next Country Programme

N° EQ	Conclusion	Recommendations	Targets
1, 3, 5, 7	A, B, C, D,	<p>Recommendation 3: Ensure that Disaster Risk Management is incorporated into all programmes: “risk-informed development programming”.</p> <p>Systematically analyse the risks potentially affecting programme implementation. Partners must develop, together with UNICEF and MENFP, mitigation strategies to enable activities to be carried out in areas of difficult access.</p> <p>Support and improve the mechanisms for crisis management (contingency PCA activation, operation, etc.) especially in the most vulnerable departments. Invest more in national/local NGOs/CBOs. Strengthen support to national coordination systems (DGPC and/or coordination with OCHA, IOM, WFP) for a multi-sector response. For instance, having preparedness programmes in every school and testing evacuation plans at the beginning of the hurricane season.</p> <p>Support the government’s data collection capacity in order to increase national ownership & leadership in crisis management</p> <p>Reinforce AAP strategy with greater support to U-Report, social networks.</p> <p>Ensure that disability and gender are taken into account as key parameters in Disaster Risk Management. This should include gender and vulnerability analysis as well as the design of specific measures</p>	HCO, LACRO
1, 3, 6, 7	A, C, D,	<p>Recommendation 4: Develop UNICEF’s localisation agenda for Haiti</p> <p>Continue to support local actors in the implementation of strategies to encourage victims and their relatives to report cases through a referral system while accompanying victims in legal procedures.</p> <p>Increase support to decentralised structures and support their “mobility and capacity to reach out to the field”. Ensure that UNICEF has its own offices in the departments to provide independent project supervision in each area of operation. Improve logistics to facilitate the mobility of UNICEF field teams, their local counterparts and partners.</p> <p>Ensure that the localisation agenda includes the role of people with disabilities and takes gender& equity into consideration.</p>	HCO

5, 6	A, B, E,	Recommendation 5: UNICEF should engage more in strategic planning with other UN organizations Develop a comprehensive 5-year “multi-agency” programme in health (including GBV response) for the Grand Sud with PAHO and UNFPA as there are significant needs and a positive experience with the interagency health project SIAF.. Ensure that UNICEF keeps the PSEA agenda high in the interagency debates by regularly advocating and organizing PSEA induction and programmatic integration for new staff Develop a collaborative action plan with WFP and FAO for schools garden. This could improve nutrition and be a good entry point for nutritional and environmental education	HCO, LACRO, HQ
2, 4, 6	B, D, E,	Recommendation 6: Improve internal management for crisis response Ensure that key positions (Dep rep, etc..) are not left absent without clear OIC delegations and arrangements to allow them to make critical decisions when necessary. <ul style="list-style-type: none"> • Training all HCO staff for the implementation of L2/3 procedures (using SOP) with operational and administrative simulation exercises, • Continue to implement a stronger staff wellbeing strategy. • Rapidly establish a communication and visibility strategy. • Ensure that ToRs and end-of-mission reports of surge experts are shared and discussed. • Ensure that the period of the surge is longer to ensure more continuity in the efforts. • Ensure to develop Response Plan and be shared with RO/HQ for proactive support. • Ensure that all offices understand the importance of sharing the Emergency Response Plan with RO/HQ for effective and timely support. 	HCO, LACRO, HQ
		Recommendation 7: Strengthen the M&E capacity in all sectors and zones by having a stronger M&E team and an M&E system that is more geared towards project steering than reporting to HQ and donors, with a system of sentinel indicators and a fast track to decision-making levels <ul style="list-style-type: none"> • Develop an M&E system which is design more towards operational steering than reporting to HQ and donors 	HCO LACRO
1, 2, 3, 4, 6	A, B, E	Recommendation 8: Improve UNICEF’s resource mobilization and visibility - <ul style="list-style-type: none"> • Organise a week-long press visit with national/international media to the South to showcase UNICEF activities on the ground, attract international media to the South (they are staying in Port-au-Prince). • Support the production of communication assets ready to share with HQ, through an HCO multimedia producer pool. • Continue to support internal and external coordination, at Port-au-Prince and in the field. 	HCO; LACRO HQ

MAIN REPORT

PHOTO N°3: SCHOOL REHABILITATION IN
THE SUD DEPARTEMENT

1. INTRODUCTION

This Real Time Evaluation of UNICEF's response to the 7.2 magnitude earthquake that struck Haiti on August 14th, 2021, was commissioned by the UNICEF Regional Office for Latin America and the Caribbean (Terms of Reference in Annex 1). The earthquake caused schools, homes and health centres to collapse, leaving 2,246 people dead, 12,763 injured and small rural communities in crisis in Haiti's three most southerly departments (Sud, Grand'Anse, and Nippes). The main challenge resided more in timely reaching very specific and localized necessities in poorly accessible zone and institutionally disconnected than in attending the sheer number of humanitarian needs.

1.1. Structure of the Evaluation Report

The Report is based on the Terms of Reference (ToR) (see annex N°1).

After an introduction presenting the objectives of the Real Time Evaluation, section 2 outlines the main elements of the methodology and the constraints encountered during the mission.

Section 3 presents an analysis of the Haitian context.

Section 4 then looks at UNICEF's prior to the earthquake.

Section 5 briefly describes the earthquake's impact on UNICEF's main sectors of activity

Section 6 explores a series of key findings through the lens of 7 evaluation criteria (relevance, effectiveness, efficiency, coverage, connectedness, coordination and equity) with their overarching evaluation questions and sub questions. It also analyses the impact of UNICEF's L2 declaration and the key findings for the ongoing recovery phase.

In Section 7, we outline the key conclusions based on the OECD/DAC evaluation framework and the Core Commitments for Children (UNICEF's key UNICEF operational framework).

Section 8 summarises the main recommendations for the ongoing recovery phase, for the preparation of the cyclone season and for risk-informed, shock-responsive development programming.

The annexes include the Terms of Reference of the evaluation, the itinerary of the mission, the list of people interviewed during both the inception phase and the field mission and of consulted documents.

1.2. Overview of the object and scope of the RTE

The RTE focused on UNICEF's post-earthquake activities (WASH, Education, Health, Nutrition, Child protection, PSEA) between August 14th, 2021 and May 2022 in the 3 affected departments (Sud, Grand'Anse & les Nippes) as well as the support provided by the UNICEF Haiti Country Office (HCO), the Latin America & the Caribbean Regional Office (LACRO) and UNICEF Headquarters (HQ).

As the evaluation process spread took longer than initially planned (availability of the team, complex technical discussions on the evaluation framework, etc.), It is important to note that there were two different processes to take into account:

- **The evaluation of the emergency response:** this turned out not to be a "real-time" evaluation but more an "end-of-action" evaluation, in a context where inconsistent flow of information, fast-changing needs and fragile state institutions. As such, there was no static response plan to compare with but more a set of adjustable targeted response activities which were regularly adapted as more information became available and improvements in access to the most affected zones became reality. Other factors affecting the need to remain flexible where the development of activities of other agencies and the availability of resources;
- **The "Real-Time Evaluation" of ongoing activities with different levels of implementation:** the regular evaluation questions developed in the Terms of Reference based on the OECD/DAC criteria had to be adapted for an UNICEF RTE process with more emphasis given to the Core Commitments for Children in emergency and to the effects of the L2 declaration.

1.3. Purpose and objectives of the RTE

The ToR indicated that the purpose of the real-time evaluation is learning and accountability. The ToR omitted the most important aspect of a real-time evaluation which is “the provision of real-time advice”.

According to the ToR, the **objectives** of the RTE are to:

- a. Determine the appropriateness/relevance, effectiveness, coverage, connectedness and coherence (coordination/partnerships) of UNICEF’s response.
- b. Assess the extent to which UNICEF adhered operationally and programmatically to the Core Commitments for Children (CCCs).
- c. Examine the extent to which UNICEF effectively responded to the needs of the most affected population in a timely manner and identify gaps and appropriate strategies to improve operational coverage and effectiveness.
- d. Assess the extent to which emergency preparedness and organizational readiness have enabled Haiti to respond more effectively to rapid onset disasters, with the objective of identifying the factors hampering/facilitating the response.
- e. Examine the extent to which the Haiti CO incorporated gender and equity dimensions (e.g. communities in hard-to-reach areas; people with disabilities; separated, unaccompanied children, etc.).
- f. Finally, the evaluation is expected to distil lessons and make recommendations for adjusting and improving the response and planning for recovery after sudden onset emergencies.

This evaluation is seen as particularly relevant in view of UNICEF’s important involvement in the response, newly developed or adapted tools (such as the L2 and CCC) and the recent history of multiple disasters in the less developed nation of the Americas.

The conclusions at the end of the report indicates how much these objectives were achieved.

During the mission, it became clear that the results of the RTE should be used to prepare the new 5-year Haiti Country Programme (2023-2028). As such, the primary audience of the RTE is UNICEF’s management and staff at the field, country, regional and HQ levels involved both in the response to the earthquake and to the wider perspective of future of UNICEF operations in Haiti. The secondary audience includes: the wider community of partners (governmental, UN agencies and other implementing partners); people affected by the emergency, the Executive Board and interested member states; and donor agencies who support emergency programmes with technical and financial resources at all levels, among others.

By definition, a RTE aims to inform decision-making. The current evaluation comes at a specific time:

- HCO is preparing its new Country Programme Document (CPD), which will be influenced by the content and recommendations of the RTE;
- The Sendai Framework for Disaster Risk Reduction 2015-2030 invites all countries and institutions to explore key issues related to disaster risk management (DRM) and propose new approaches based on lessons learned. The RTE could help Haiti to make a significant contribution to this global process, with HCO and LACRO using the results of the RTE to improve the contribution of UNICEF in disaster management;
- With the acceleration of climate change, as described in recent IPCC reports, severe climatic events are going to become more frequent, more impactful and more unpredictable. The RTE therefore includes recommendations for UNICEF and the Haitian population to improve DRM programming.

2. METHODOLOGY

2.1. Evaluation frameworks and criteria

The ToR required the RTE to use an evaluation framework based on the OECD DAC evaluation criteria revised and adapted for humanitarian action by ALNAP <https://www.google.com/search?client=firefox-b-d&q=quality+frameworks+ALNAP+DAC>. The ToR drawn up by UNICEF excluded the “efficiency” DAC criteria as there would be no time to properly collect and treat all the information necessary to carry out a proper “cost benefit analysis”. However, the RTE team felt that the evaluation would be incomplete if this issue was not taken into account to some extent. In order to analyse the data/information collected, the RTE team used a set of evaluation frameworks linked to UNICEF key activities, the L2 declaration process and the Core Commitments for Children (CCC). Other well-tested tools were also used, such as the 9 criteria of the Core Humanitarian Standard (CHS).¹

2.2. Humanitarian frameworks specific to UNICEF: L2 and CCC

UNICEF's L2 declaration and its Core Commitment for Children in Humanitarian Action make it a somewhat unique institution within the UN in specifically addressing disasters response with its full institutional weight at all levels. An L2 emergency is defined by UNICEF as a situation where a Country Office (CO) needs additional and prioritised support from other parts of the organization (Headquarters, Regional and Country Offices), and where the Regional Office (RO) must provide dedicated leadership and support. L2 is designed for the UNICEF Country Programme's response (sectors and cross-cutting areas) to be timely, appropriately assessed, designed and executed according to the Core Commitments for Children in Humanitarian Action (CCCs). The week after the August 14th earthquake, HQ approved the L2 declaration.

The evaluation team initially proposed to use two UNICEF frameworks (L2 declaration, CCC framework) in addition to the classical DAC/OECD criteria as a way to have a more specific analysis of the response. This seemed logical as these frameworks impose specific criteria which could easily be turned into evaluation criteria. Finally, this approach was integrated into a single framework linked to the “evaluation questions” included in the ToR but specific paragraphs and an annex have been dedicated to the compliance to the CCC and to the impact of the L2 declaration. In order not to lose the very interesting points related to the “L2 Declaration evaluation framework” and the “CCC evaluation framework”, they have been attached in the annex.

From different targeted evaluation frameworks to a single system

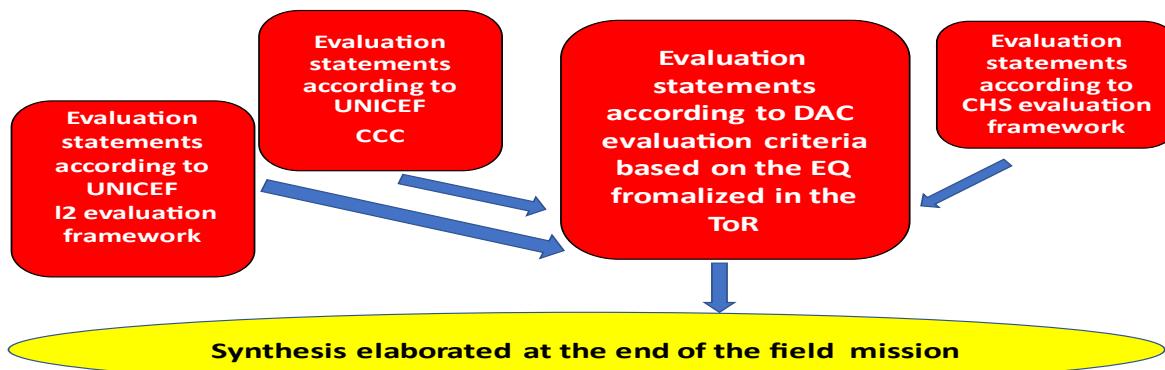


DIAGRAM N°1: INTEGRATING DIFFERENT EVALUATIVE FRAMEWORKS

¹ <https://www.urd.org/en/publication/the-core-humanitarian-standard/> and <https://www.urd.org/en/publication/toolbox-quality-accountability-compass-to-help-implement-the-chs-in-the-field-2019/>

The RTE process followed the following evaluation logic:

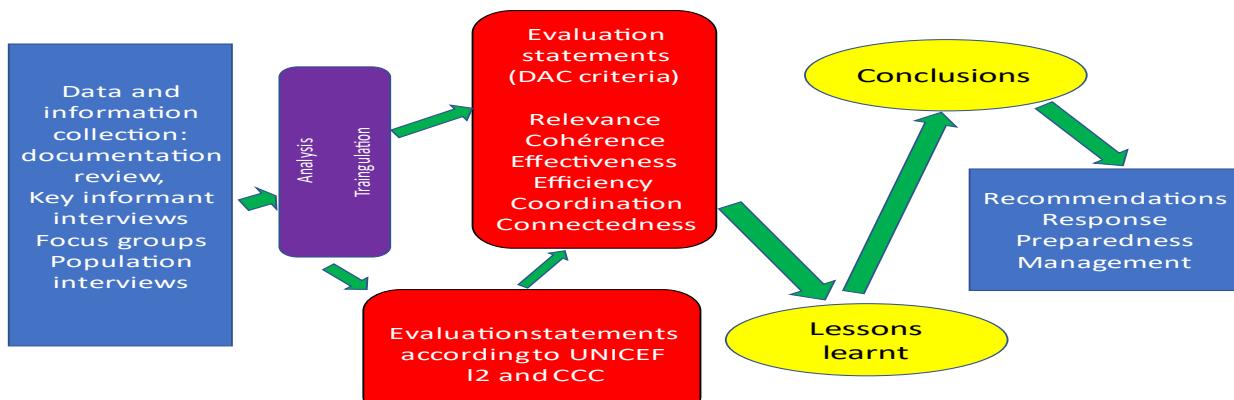


DIAGRAM N°2: EVALUATION LOGIC

2.3. Main criteria and overarching questions guiding the report

In line with the learning component mentioned in the Terms of Reference, and discussions with LACRO, the evaluation focuses its analysis on the following:

- UNICEF's response** to the earthquake vis-a'-vis 7 criteria with its corresponding overarching questions:
 - Relevance/Appropriateness:** Overarching RTE Question 1: How appropriate has UNICEF's response strategy (present and planned) been in reaching the most affected populations at scale?
 - Effectiveness:** Overarching RTE Question 2: To what extent has UNICEF achieved/is UNICEF achieving its intended results within the planned timeframe? (Consider HAC, response plans, monitoring, adherence to CCCs etc.)
 - Efficiency:** *not initially included in the ToR, but still taken into account.* Overarching RTE Question 4: To what extent have the technical choices made by UNICEF made best use of rare resources?
 - Coverage:** Overarching RTE Question 3: To what extent has the affected population, including vulnerable girls and boys, displaced persons and people with disabilities, been adequately identified, targeted and reached by UNICEF and its partners?
 - Connectedness:** Overarching RTE Question 4 To what extent has UNICEF's response contributed to longer-term goals of preventing future emergencies, mitigating the negative effects of future natural hazards (resilience/sustainable solutions) and preparedness?
 - Coordination:** Overarching RTE Question 5: How effectively and efficiently has UNICEF coordinated its response both internally and externally (with key entities such as other UN agencies, civil society organisations (CSO) development partners, national and local governments)?
 - Gender and inclusion:** Overarching RTE Question 7: To what extent have gender and disability been integrated into the needs assessment, the planning, implementation, monitoring and reporting of the response, as well as the recovery planning?
- The extent to which UNICEF adhered operationally and programmatically to the **Core Commitments for Children in Humanitarian Action** (CCCs).
- The extent to which UNICEF effectively **responded to the needs** of the most affected people in a timely manner and identified gaps and appropriate strategies to improve operational coverage and effectiveness.

2.4. Information and data gathering methodology

The RTE adopted a mixed approach which could be summarized as follows:

- a desk review of existing secondary data and documentation² (e.g. relevant findings from earlier UNICEF evaluations,³ parallel inter-agency evaluations, reviews; SitReps; HAC; needs assessments; monitoring indicators and reports; funding information; HR data; supply data; COs preparedness and contingency plans reflected in the Emergency Preparedness Platform (EPP);
- a series of semi-structured interviews were carried out during the inception phase with key informants in the Haiti Country Office (HCO), the Latin America Regional Office (LACRO) and UNICEF Headquarters (HQ) (for the list interviews, see list in Annex 3). These interviews were complemented by
- participation by a member of the evaluation team in an internal lessons learned workshop in Les Cayes organised by HCO and LACRO on 9-10 February, 2022 (see the agenda of the Les Cayes workshop in the annexes).

As a result of this initial process, an Inception report was produced including some preliminary findings.

Following the inception phase, the field mission took place between April 24th and May 10th, 2022. It included:

- A series of field visits in the three affected departments to exchange with the population, UNICEF's NGO partners, and local administrations in the different areas of operation of UNICEF. It is important to recall that the mission collected qualitative information and did not engage in quantitative data generation (the itinerary of the mission is presented in annexe 2 and the list of persons met in annex 3). These visits allowed field observations and analysis of the quality of the work, the way disaster risks were being taken into account and the durability of infrastructure. They also made it possible to review the different constraints that have affected, and are still affecting, UNICEF's response;
- interviews with a wide range of stakeholders (90 individuals) and 12 different group discussions, with a purposive sample of beneficiaries from affected communities. Questions discussed covered the situation before the earthquake, the activities carried out since, the areas where people were satisfied and the areas where improvements were required. The perception of UNICEF's role was also discussed.
- After the visits to each Department, feedback sessions took place with the UNICEF staff to triangulate and validate findings and analyses and to make some initial recommendations.
- This was complemented by a series of interviews in Port-au-Prince with UNICEF staff, Haitian institutions, UN agencies and donors. To a large extent, the agenda for the different working groups followed the format presented above for individual interviews. There were 12 focus group meetings and about two thirds of the key informants were women.
- Before the evaluation team left Haiti, a workshop was held involving staff from HCO, LACRO and UNICEF HQ to present emerging findings and initial recommendations.

² See list of consulted documents in annex 3

³ [Independent Review of UNICEF's Operational Response to the January 2010 Earthquake in Haiti](#)

[Inter-Agency Real-Time Evaluation in Haiti: 3 months after the earthquake](#)

[Inter-Agency Real-Time Evaluation of the Humanitarian Response to the Earthquake in Haiti \(20 Months After\)](#)

2.5. Information sources, collection methods and information treatment

The RTE used existing primary data (Annexe 6 presents the list of consulted documents) which was complemented with information from field visits and interviews with a wide range of individuals in order to include the views of:

- **National stakeholders in the response:** collecting the views of these national actors (the Haitian Civil Protection Agency, the Ministries of Health, Education, and Social Protection, the DINEPA at both central and decentralized levels, and staff from the three most affected municipalities - Les Cayes, Miragoane and Jérémie) was a key part of the RTE process;
- **International actors:** UN staff, including UNICEF staff in different positions, international and national NGOs, donors);
- **Haitian NGOs and CBOs:** including mutual aid networks, and groups linked to the diaspora.
- **Donors:** ECHO, AFD, the French Embassy, etc.
- **Representatives of coordination mechanisms:** UN, NGOs, clusters, PCs, town halls.
- **Haitians affected by the earthquake** and targeted by the intervention, particularly the most vulnerable (e.g. displaced persons, people with disabilities, hard-to-reach communities, and people who have not left their homes but have endured significant difficulties).

Several social science tools were used and are presented below. Examples of interview guides are presented in Annexe 3.

Sampling strategy

As there was no generation of quantitative data, the sampling strategy focused on qualitative approaches in order to get the broadest range of perspectives on UNICEF activities. Site visits were chosen on the basis of UNICEF's activities in different environments:

- Activities in urban settings
- Activities in easily accessible rural areas
- Activities in hard-to-reach rural areas

In the different sites, the RTE team discussed UNICEF's response with the local authorities, local primo-responders, local managers of health and WASH facilities and the populations using them.

The mission conducted many field visits and covered the 3 departments of the Grand Sud, as shown on the map below:



MAP N°1: ITINERARY OF THE MISSION

Timelines

Experience shows that establishing and comparing timelines is a way of objectifying, comparing and validating narratives that may otherwise be difficult to reconcile. Several periods of time were discussed during the interviews and focus groups.

- The month before
- The first 48 hours
- The first two weeks
- The first two months
- From the fourth to the sixth month

Testimonies and life stories

The recording of 'life stories' is one of the most powerful tools in the social sciences for gathering perceptions, and listening and understanding complex facets of multiple realities. It was very informative to have insight into a broad range of perspectives:

- Affected people (aid seen through the eyes of those it is supposed to serve):
 - o By age and by gender
 - o By socio-economic categories.
- Aid actors (aid as seen by those who implement it):
 - o Informal solidarity
 - o Traditional NGOs and International NGOs
- Authorities:
 - o National actors
 - o Departmental representatives of line ministries, municipal actors, etc.;
- Donors
- Coordination bodies

Information analysis and validation

The RTE did not engage in primary quantitative data production and gathered only qualitative information. The information was collected through intensive field visits and discussed with different types of stakeholders. Validation took place during a set of workshops both at the departmental and at the Port-au-Prince levels where findings, conclusions and initial recommendations were presented, in order to triangulate and verify them.

Without compromising the independence of the exercise, RTEs are participatory in nature and built around regular interaction with key stakeholders. As such, the team participated in several workshops after each departmental visit and a final workshop organised prior to their departure from the country. These workshops were a key opportunity for the evaluators to share their findings and recommendations at the country level, and for stakeholders, in turn, to validate the findings and conclusions prior to the finalization of the evaluation report.

Information was systematically triangulated through document analysis, site visits, interviews in the field and in Port-au-Prince and through video-conferencing. Information that was not triangulated was not included in the report



2.6. Limits, risks and mitigation measures

In a context such as Haiti, there is a very high level of risks and uncertainty. A number of possible mitigation measures to offset the risks in conducting the evaluation were therefore developed prior to the mission.

2.6.1. Contextual risks and uncertainty

The context analysis presented in the first part of the Inception Report and validated at the beginning of the field mission underlined all the difficulties of operating in the Haitian environment

- **Political and gang-related insecurity:** this affects transport, access to the field, the choice of locations for nights in the field, etc.
- **Earthquakes:** these are unpredictable.
- **Extreme climatic events:** During the cyclone season, these can be anticipated and monitored relatively well thanks to existing specialized media and tools. The danger comes from the growing probability of extreme events outside the normal season due to climate change.
- **Health issues:** In Haiti, there are significant health risks, including cholera, COVID, dengue fever, diarrhoea, etc.

2.6.2. Difficulties in accessing information

- **The quality of data and information:** For an RTE taking place long after the events, there is a risk that what people remember might, at best, be selective, and at worst, inaccurate. In addition the design of the UNICEF M&E system (see paragraph 1.2.) did not provide information in a timely and user-friendly manner. In fact, the team had to ask several times to be given access to information that should have been readily available, not so much for the evaluation itself but for proper programme steering;
- **Many people had left the affected areas:** after a few months, many international staff had already left the Southern departments and even Haiti. However, many Haitian colleagues, and of course the inhabitants of the affected areas, were still there and were able to be interviewed properly.
- **The limited development of planning, monitoring and steering mechanisms.** Most of the project management systems are related to programme outputs and outcomes but are not clearly connected to contextual analysis, critical contextual indicators, or the flow of information to decision-making levels in real time.

'Evaluability' depends on having a base with which you can compare the observed response (quality of the programme design and availability of related information) and the context's characteristics facilitating or hindering the search of information. Issues to be dealt with during the mission were:

- There was only a limited level of information in terms of reactive planning for the emergency phase. More documents were developed for the rehabilitation phase.
- Though access to and circulating within Port-au-Prince was highly problematic, access to the affected areas and populations was only hindered by a few physical difficulties which were easily overcome.

2.6.3. Mitigation measures related to the identified risks

Vigilance and continuous communication with the UNICEF team were required to manage the existing risks. The team ensured that it had all the available means of communicating with UNICEF (radio, mobile phones, satellite connections). Security briefings with UNICEF security staff and UNDSS took place at the beginning of the mission to ensure that the team was fully aware of up-to-date information on risks and related existing security measures for transport, overnight stays, etc. Dangerous areas were notified when needed and UNICEF and UN field security processes were fully respected when access was required.

2.6.4. Summary of risk management strategy

For each of these risks, mitigation measures were identified during the inception phase and had to be deployed with context-specific and time-bound considerations during the mission:

Risks	Mitigation measures	Comments
Political and gang-related insecurity:	Links with UNDSS, UNICEF security and local authorities. Following the rules in place and the advice given.	This affected transport, access to the field, the choice of locations for nights in the field, etc.
Logistics:	Links with UNICEF and other stakeholders. The team organised its own logistics when needed.	Possible financial and planning repercussions. Solutions were identified during the field mission.
Earthquakes:	Normal "stay safe" measures	These are unpredictable
Health issues:	Normal "stay safe" measures	Risks largely known by the team
New extreme climatic events	Normal "stay safe" measures	These are unpredictable
Lack of data:	Trying to work through "KII" and other information sources. UNICEF staff and national counterparts were very generous in sharing their information	This lack of information is clearly stated as a limit in the evaluation report
Absence of informed staff in Haiti:	Contacting missing key informants by video conference, WhatsApp or other means	This is normal procedure during an RTE carried out months after the event
Different points of view and understanding:	Organizing focus groups and mediation processes. For some issues, different points of view had to be managed	This is typical for exercises of this kind.

2.7. Ethical considerations

As for any process involving the collection and treatment of potentially sensitive personal and organisational information, there were important ethical considerations related to protecting sources, so no name is quoted unless permission was granted to the evaluation team. This is particularly critical as many UNICEF programmes that are being evaluated concern children and women. The RTE team referred to the following guidance documents in order to protect personal information and the security of interviewed people:

- United Nations Evaluation Group (UNEG) Norms and Standards for Evaluation in the UN System 2016; (including impartiality, independence, quality, transparency, and consultative process);
- Ethical Guidelines for UN Evaluations;
- UNICEF Ethical Guidelines and standards for research and evaluation;
- UNEG guidance on integrating human rights and gender equality and UN System-Wide Action Plan (UN-SWAP) on gender equality;
- Relevant ALNAP guidance for evaluation and real-time evaluations of humanitarian action;

The evaluation team did their best to ensure that the people interviewed were informed of the purpose of the interviews, with a presentation of the RTE objectives and processes. In addition, the interviewees were informed that the source of any information used would remain anonymous.



PHOTO N°4: LOGISTICAL DIFFICULTIES IN THE SOUTH

3. HAITI: A COMPLEX OPERATIONAL CONTEXT

3.1. The Haitian political and socio-economic situation

Haiti is the poorest country in the Western Hemisphere, with a gross domestic product (GDP) per capita of US\$756 in 2019.⁴ It is ranked 170th out of 189 countries on the Human Development Index (HDI) (2018), with an HDI value much lower than the regional average (0.510 compared to 0.766 for Latin America and the Caribbean). The country's socio-economic situation is also marked by significant inequalities in human development: the Gini index was 41.1 in 2012, ranking Haiti 57th in the world. The main factors of inequality that can lead to exclusion are the living environment (rural or urban), the department of residence, the level of family income and the educational status of the mother or head of the family.

The latest poverty survey in 2012⁵ puts the number of Haitians living below the poverty line (less than USD 2.41 per day) at 6 million, i.e. more than half the population, including 2.5 million in extreme poverty (less than USD 1.23 per day). According to the latest United Nations Development Program (UNDP) report on the HDI in Haiti (2020) and based on 2016 data, 41.3% of the population lives in multidimensional poverty and 21.8% are considered vulnerable to multidimensional poverty. Both urban and rural contexts are affected by food insecurity, high levels of malnutrition and significant levels of unemployment. In the last 20 years, the country has been affected by the earthquake of 2010, hurricane Matthew in 2016, a cholera epidemic, and a series of political crises. Since 2018, it has been faced with anti-government demonstrations, gang violence and kidnappings. The COVID 19 pandemic hit Haiti as well. With the country already caught up in a major crisis that the authorities were struggling to cope with, 2021 was a particularly difficult year socially and politically.

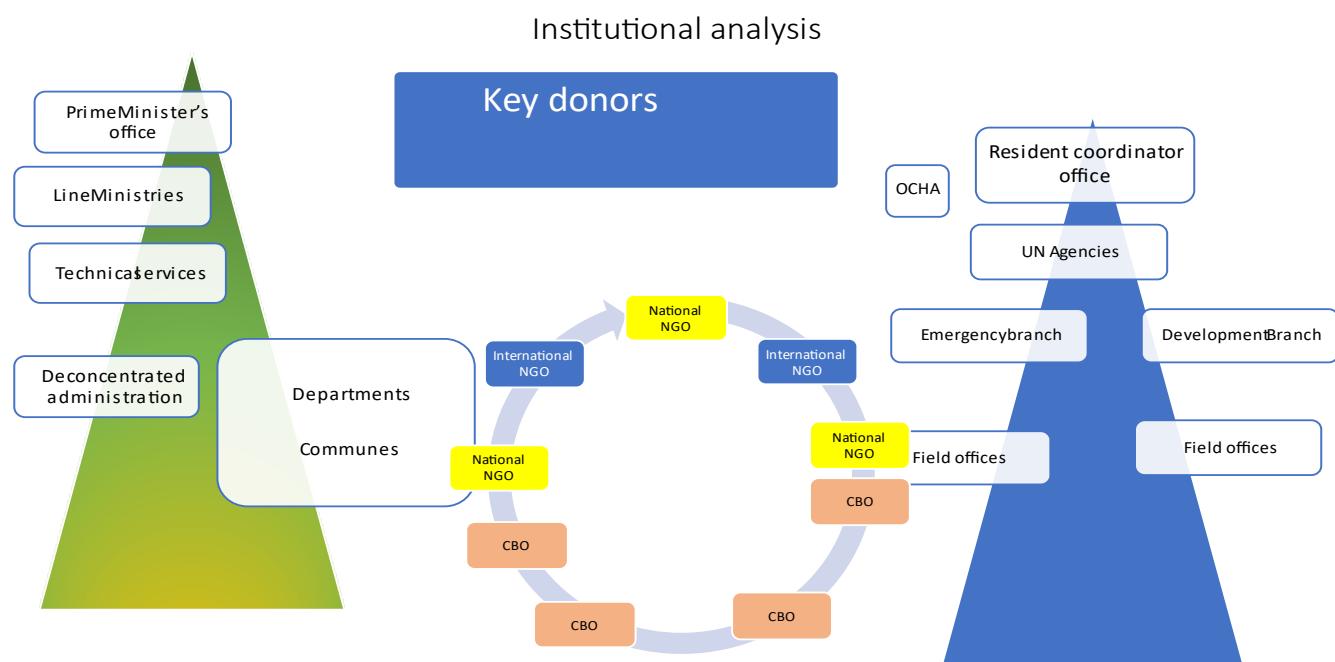


DIAGRAM N°4: KEY STAKEHOLDER ANALYSIS

⁴ World Bank report <https://www.worldbank.org/en/country/haiti/overview#1>

⁵ "World Bank ; Haïti - Investir dans l'humain pour combattre la pauvreté : Éléments de réflexions pour la prise de décision informée - Rapport final. World Bank, Washington, . <https://openknowledge.worldbank.org/handle/10986/21519> License: CC BY 3.0 IGO."

Increased criminal activity by armed gangs and related dramatic consequences

Since 2019, gang violence has made the situation in the Martissant area extremely difficult for the inhabitants with the government unable to resolve the crisis. Due to the growing number of shootings and attacks by armed gangs,⁶ thousands of Martissant residents fled⁷ the area in June 2021. National Road 2, the main artery⁸ to reach the Grand Sud region, is regularly blocked by the gangs. Those who take the road do so at their own risk. In December 2021, a bus carrying 38 passengers was attacked by bandits⁹ and several people were injured. Between October and November 2021, the country had to deal with a major fuel shortage due to armed gangs who blocked access to oil terminals. This paralysed several institutions. Health centres had to stop receiving new patients. 2021 also saw a significant increase in kidnappings. Between January 1st and December 15th, 2021, there were 949 recorded kidnappings, with 55 foreign nationals among the victims. These events had significant repercussions on humanitarian operations.

Constitutional controversy surrounding the end of the President's mandate

In January and February 2021, there were protests¹⁰ about when President Jovenel Moïse's term in office should officially end. The President and his allies contended that his term would end on February 7th, 2022,¹¹ but the opposition parties and certain civil society groups¹² argued that it should end on February 7th, 2021. Referring to the contested constitution, the President had ended the mandates of MPs and certain Senators¹³ in 2020 rather than in 2021, leaving the legislative authority in an institutional vacuum. As a result, the country had no effective legislative authority¹⁴ to control the actions of the government.

Assassination of President Jovenel Moïse

On July 7th, 2021,¹⁵ the country was plunged into a state of shock and uncertainty following the assassination of the President at his residence. A few days before the President's tragic death, he had issued an order appointing a new government,¹⁶ but the latter was unable to take up its functions. The outgoing government acted as the interim authority following the assassination.

Migration crises

In September 2021, there was also a major migration crisis. Many Haitians who tried to migrate to other countries were repatriated. At least 165 pregnant Haitian women were deported by the Dominican Republic back to Haiti.¹⁷ At the end of September 2021, the situation was also chaotic between the Mexican and American border, where more than 3,700 Haitian migrants were repatriated to Haiti.¹⁸ The combination of an ongoing political crisis, socio-economic challenges, food insecurity and gang violence further deteriorated the precarious humanitarian situation. Some 4.4 million people, or nearly 46 per cent of the population, were in a position of acute food insecurity, including 1.2 million in an Emergency situation (IPC Phase 4) and 3.2 million people in a Crisis situation (IPC Phase 3). An estimated 217,000 children were suffering from moderate-to-severe acute malnutrition.

⁶ <https://news.un.org/fr/story/2022/01/1112722>

⁷ <https://lenouvelliste.com/article/229978/la-querre-des-gangs-se-poursuit-a-martissant>

⁸ https://www.lemonde.fr/international/article/2021/09/01/haiti-apres-le-seisme-fragile-treve-des-gangs-a-martissant_6093001_3210.html

⁹ <https://lenouvelliste.com/article/232937/martissant-six-mois-apres-la-querre-des-gangs-se-poursuit-les-forces-de-lordre-tenues-en-echec>

¹⁰ <https://lenouvelliste.com/article/225880/le-mandat-du-president-jovenel-moise-doit-prendre-fin-le-7-fevrier-2021-selon-la-fbh>

¹¹ <https://www.france24.com/fr/am%C3%A9riques/20210207-crise-en-ha%C3%AFt-le-mandat-du-pr%C3%A9sident-jovenel-mo%C3%AFse-est-termin%C3%A9-estime-le-pouvoir-judiciaire>

¹² <https://uniq.edu.hn/note-sur-l-expiration-du-mandat-du-president-jovenel-moise/>

¹³ <https://lenouvelliste.com/article/217933/le-mandat-du-president-de-la-republique-prendra-t-il-fin-le-7-fevrier-2021-ou-le-7-fevrier-2022>

¹⁴ <https://news.un.org/fr/story/2022/01/1112722>

¹⁵ https://www.liberation.fr/international/amerique/en-haiti-l-assassinat-du-chef-hai-dun-pays-trahi-20210707_5SBKP3W325GT3LZ2MIK6Q2APCQ/?redirected=1

¹⁶ <https://ici.radio-canada.ca/nouvelle/1807246/jovenel-moise-assassinat-crise-constitution-claude-joseph>

¹⁷ Haïti Libre, 4/12/2021

¹⁸ Haïti Libre, 29/9/2021

The COVID pandemic.

After the cholera crisis, which now seems to be under control, with no new cases over the last 3 years, Haiti was hit by the COVID 19 pandemic. By the end of January 2022, there had been 29,323 cases and 876 deaths reported.¹⁹ The numbers continue to rise. The COVID pandemic further limited staff movement and supplies. It also further increased pressure on the health sector, with 24 facilities affected by the earthquake.

3.2. A disaster-prone country

Located in the Caribbean Sea, and crossed by a complex system of seismic faults, Haiti is significantly exposed to both tectonic and hydro-climatic risks. Over the years, and particularly since the 2010 earthquake in Port-au-Prince (see table below), there has been significant effort to increase the response capacity of Haitian institutions. The Haitian Civil Protection agency or DGPC had been transformed in the mid-2000 into a fully-fledged disaster management unit with its own national emergency centre, the COUN and several regional emergency centres (*COUD*). Significant resources have been invested to strengthen Haiti's disaster management system, with key donors including UNDP, the World Bank, France and British Foreign aid (FCDO) and regional cooperation mechanisms such as CARICOM (Caribbean Community) and Caribbean Forum (CARIFORUM).

When there have been disasters in the past, the proximity with the US coast and with Dutch and French territories and former territories has made it easier to rapidly mobilise significant levels of assets and support. It is important to note that despite the regular occurrence of seismic events, most disaster preparedness efforts are still focused on hydroclimatic events. However, efforts to strengthen response capacity at the department level have had an impact at different times, particularly during Hurricane Matthew.²⁰

The table below presents the succession of different disasters that have taken place since 2004. One important point that stands out is how frequently the Southern peninsula has been affected by earthquakes, hurricanes and tropical storms over the last 20 years.²¹

Unfortunately, risks are probably on the rise as the environmental degradation of Haiti's forests and land mean that even heavy rains will cause significant damage, without mentioning tropical storms and hurricanes.

¹⁹ John Hopkins University <https://coronavirus.jhu.edu/region/haiti> consulted in February 2022

²⁰ <https://evaluationreports.unicef.org/GetDocument?fileID=10722>,

²¹ <https://www.ufondwa.org/history-natural-disasters-haiti/>

TABLE N°1: DISASTERS IN HAITI

Year	Dates	Events
2004	23–24 May	Torrential rains pounded the south-east of Haiti causing 1,232 deaths, 1,443 disappearances and 31,130 displaced persons. <u>Mapou</u> , <u>Belle-Anse</u> , and <u>Fonds-Verrettes</u> , all located in Sud-Est department, were the places most badly hit.
	10 September	Hurricane Ivan struck the southern peninsula & west coast, causing flooding & serious damage in several areas.
	18–19 September	Hurricane Jeanne crossed the western section of Haiti and the Artibonite, causing flooding which killed 1,870 people. In addition: 2,620 injured, 846 disappeared and 300,000 displaced. With more than 3,000 dead, <u>Gonaïves</u> was the most seriously affected city
2005	6-7 July:	Hurricane Dennis hit the south-east coast of Haiti, causing flooding in several towns in Sud (<u>Bainet</u> , <u>Grand-Goâve</u> , <u>Les Cayes...</u>) and leaving more than 500 homeless.
	4 October	Floods in several parts of the country, including <u>Pétion-Ville</u> and <u>Grand-Goâve</u> in Ouest department, caused considerable loss of property. The government did not make a final accounting of this catastrophe
	18 October	Hurricane Wilma struck the west and south of Haiti.
	23 October	Tropical storm Alpha crossed the south peninsula, affecting the departments of <u>Grand'Anse</u> and <u>Nippes</u>
	25 October:	Flooding caused by torrential rain hit many parts of the Nord-Ouest department, particularly the settlements of Port-de-Paix, Bassin-Bleu, Anse-à-Foleur and Saint-Louis du Nord
2006	22-23 November	Heavy rain caused flooding in the Grand'Anse, Nippes and Nord-Ouest departments, causing damage to roads including the collapse of a bridge across Ravine Sable at Trou-Bonbon
2007	17 March:	Floods caused by storms hit a large part of Haiti for over a week. Six departments were particularly affected: Grand'Anse: Jérémie, Abricots, Bonbon, Les Irois, Sud-Est : Jacmel, Ouest : Cité Soleil, Delmas, Port-au-Prince Nord-Ouest : Port-de-Paix, Saint-Louis du Nord, Anse-à-Fleur ; Nord: Cap-Haïtien, Nord-Est : Ferrier, Ouanaminthe.
	8–9 May:	Torrential rain, causing considerable damage in several regions of the country, in particular in the Nord, Nord-Est and Sud departments. The town of <u>Ouanaminthe</u> was particularly hard hit.
2008	16 August:	Tropical storm Fay crossed the entire country
	26 August	Hurricane Gustav crossed the south peninsula, including the Sud and Grand'Anse departments, causing approximately 77 deaths and 8 disappearances, together with serious destruction of property. 15,000 families were affected by the storm, which destroyed 3,000 houses and damaged 11,458.
	1 September	Hurricane Hanna ravaged the Artibonite and Nord-Est departments. Several towns were flooded, including <u>Gonaïves</u> . One death was officially confirmed. In addition to Gonaïves, several towns in Jacmel, Nord-Est, Sud and Sud-Est were flooded.
	6 September	Hurricane Ike, a category 4 hurricane, touched the western coastline of Haiti, leading to heavy rain in Nord, Ouest and Nord-Ouest departments
2009	20 October	heavy rain in the <u>Haitian capital</u> and its suburbs. <u>Carrefour</u> , in the southern suburbs, was completely flooded
2010	12 January	The magnitude 7.0 earthquake killed between 100,000 and 316,000 people. Its epicentre was at approximately 25 km from Port-au-Prince, the capital. A dozen secondary shocks of magnitudes ranging from 5.0 to 5.9 were registered during the hours which followed. It was one of the deadliest earthquakes ever recorded.
	20 January	Magnitude 6.1 earthquake. The epicentre was at approximately 59 km west of Port-au-Prince, and at least 10 km beneath the surface
	20 October	A cholera epidemic imported by external players hit outside of Port-au-Prince, infecting over 340,000 people and killing at least 3,597.
	5 November	Hurricane Tomas killed at least 10 Haitians causing damage and worsening the cholera epidemic
2012	24 October	Hurricane Sandy passed just west of Haiti, causing flooding. At least 108 people were killed and 21 disappeared. Around 200,000 people were left homeless as of October 29.
2016	3–4 October	Hurricane Matthew caused flooding of up to 40 inches and storm surge of up to 10 feet. ^[18] At least 580 people were killed and more than 35,000 left homeless.
2018	6 October	A 5.9 magnitude earthquake with a depth of 11.7km ^[19] killed 12 people and injured 188. Damage was mainly recorded in the far north of the island.
2020	23 August	Hurricane Laura killed 31 people in Haiti and four in the Dominican Republic.
2021	14 August	A magnitude 7.2 earthquake struck Southwestern Haiti. Its epicentre was about 10 km from Petit-Trou-de-Nippes, approximately 150 km (93 miles) west of Port-au-Prince, the capital. The quake left behind significant damage. Tsunami warnings were immediately issued as several small tsunami waves struck surrounding areas. An estimated 2,207 people have been confirmed dead, while 344 remain missing, and over 12,000 have been left injured.
	17 August	Tempest hit the southern peninsula. By chance what was initially seen as an incoming hurricane transformed itself into a milder form of extreme event.

4. UNICEF IN HAITI PRIOR TO THE EARTHQUAKE

UNICEF's country programme document (CPD), which was duly evaluated in 2020,²² is aligned with the United Nations Development Assistance Framework 2017-2021 (UNDAF), with a particular focus on outcomes 2 (social services) and 5 (governance). It is also aligned with the 2030 Agenda and its Sustainable Development Goals (SDGs). One can note that the new United Nations Sustainable Development Cooperation Framework (UNSDCF) was not used for the current cycle due to the prevailing instability and the weakness of the national counterparts. The programming cycle has been extended until February 2023.

The ultimate goal of the programme is “to ensure the survival, development, participation and protection of children and their caregivers, with particular attention to the most disadvantaged and excluded children”. It emphasizes that sector-based projects should converge programmatically and geographically in order to best address the needs of Haitian children. The programme is structured around the six following components: Health; Nutrition; WASH; Education; Child Protection; and Programme Effectiveness. The Country Office has developed the Programme Strategy Notes (PSNs) with theories of change for each sector. The programme effectiveness component, which does not have a PSN, ensures that the following elements are shared across the entire office: coherence between programmes, external relations and institutional communication, programme monitoring and evaluation, integration of gender, communication for development (C4D), social policies and social protection.

The strategies implemented to achieve the objectives are as follows: political dialogue and advocacy; provision of services; capacity building; generation of evidence; South-South and horizontal cooperation with countries in Latin America, the Caribbean and other regions.

The country programme document (CPD) was finalised in October 2016. It placed great emphasis on the cross-cutting integration of gender equality and women's empowerment and insists on the coordination efforts to be carried out at the national level. The Country Programme was reviewed in the Strategic Moment of Reflection (SMR) exercise in 2019 and sectoral PSNs and Results Frameworks were revised. The programme has the following six complementary approaches:

- Multisectoral convergence in priority departments, several of which have been affected by natural hazards and cholera, particularly in border communities;
- Gender approach at all levels. Although the Country Office must have a gender specialist to support staff guidance, it only has a very committed gender focal point (C4D national officer). The CO doesn't have a Gender Based Violence (GBV) specialist under the Country Programme section either. It is a significant weakness as it is very difficult to put the proper emphasis on gender equality in a Country Programme without appropriate human resources;
- An integrated and environmentally friendly approach, notably combining WASH interventions and cholera control measures, in order to strengthen the complementarity and continuity of humanitarian and development activities;
- Integration of HIV/AIDS interventions throughout the programmes;
- Integration of gender and adolescent programmes, with emphasis on combatting violence against women and children as well as HIV prevention;
- The consideration, in each component of the country programme, of risk mitigation, emergency preparedness and response;
- And an integrated approach to social and child protection in order to reach the most excluded children.

²² Evaluation of UNICEF Haiti Country Programme, <https://www.unicef.org/evaluation/reports#/detail/17337/formative-evaluation-of-the-unicef-haiti-country-programme-2017-2021>

Hurricane Matthew hit the south of the country in mid-2016, affecting 2.1 million people. The evaluation of UNICEF's response to that disaster generated a series of recommendations- 6 of which are particularly relevant to this RTE and are highlighted in the box below.

Relevant recommendations from the Hurricane Matthew evaluation²³
1- Advocacy towards donors for more flexible and rapid funding;
2- Efforts towards mapping hard-to-reach zones;
3- Integrating aspects of transition between emergency and development into programming;
4- Expanding cash-based programming;
5- Unifying the different hotlines used by humanitarian actors during emergency responses; and
6- Planning an evaluation of the Humanitarian Performance Monitoring (HPM) system.

TABLE N°2: RECOMMENDATIONS FROM HURRICANE MATTHEW

Following a massive influx of funds for the response to Hurricane Matthew, the Country Office had to immediately reorient its programmes towards humanitarian and recovery interventions, with changes in the geographical coverage of the Country Programme Document (CPD) and an increase in its operational capacities. The first two years of the CPD were therefore marked by a major emphasis on emergency response.

In 2020, Haiti was affected by the COVID-19 pandemic.²⁴ On March 11th 2020, UNICEF declared a worldwide L3 emergency which had significant repercussions for operations. Personal Protective Equipment (PPE) was distributed to all staff and partners. Hand washing points were established throughout the country. Meetings were systematically held online and, for a period, masks were worn to enter offices and to visit colleagues.

Another key area touching different sectors of activities for UNICEF was disaster risk management (this was made possible thanks to a DG ECHO disaster preparedness programme). Interviews in several health and education institutions and WASH sites underlined the fact that UNICEF has made significant effort to implement some ‘risk-informed programming’ and has continued to promote good practices in disaster preparedness.

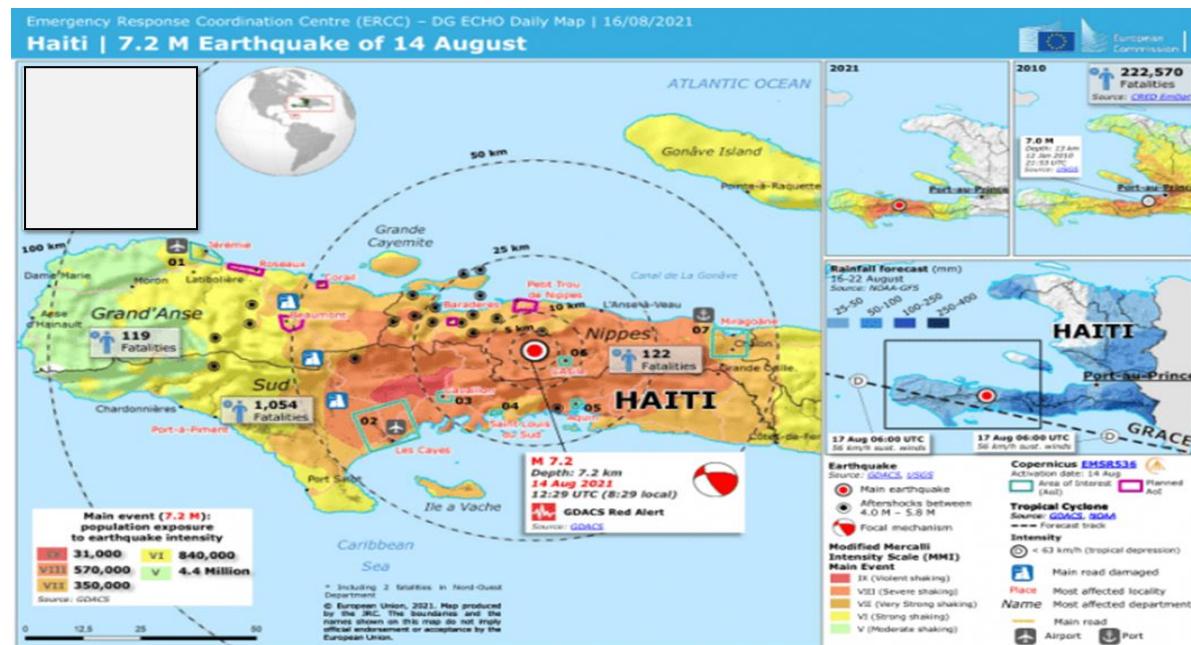
²³ <https://daraint.org/2019/01/02/5713/evaluation-of-unicefs-response-to-hurricane-matthew>

²⁴ <https://coronavirus.jhu.edu/region/haiti>

5. THE 2021 EARTHQUAKE: HOW THE EVENTS UNFOLDED

5.1. The earthquake

On August 14th, 2021 at 8:29 AM local time, a 7.2 magnitude earthquake struck the south-western coast of Haiti causing large-scale damage across the country's southern peninsula. The 10 km deep earthquake occurred 13 km southeast of Petit-Trou-de-Nippes, in the Department of Nippes, the same region devastated by Hurricane Matthew in 2016. Only two days after the earthquake, Tropical Depression Grace led to extremely heavy rain in southern Haiti,²⁵ causing flooding in the same quake-affected areas.



MAP N°2: MAP OF THE AREAS AFFECTED BY THE EARTHQUAKE (SOURCE DG ECHO)

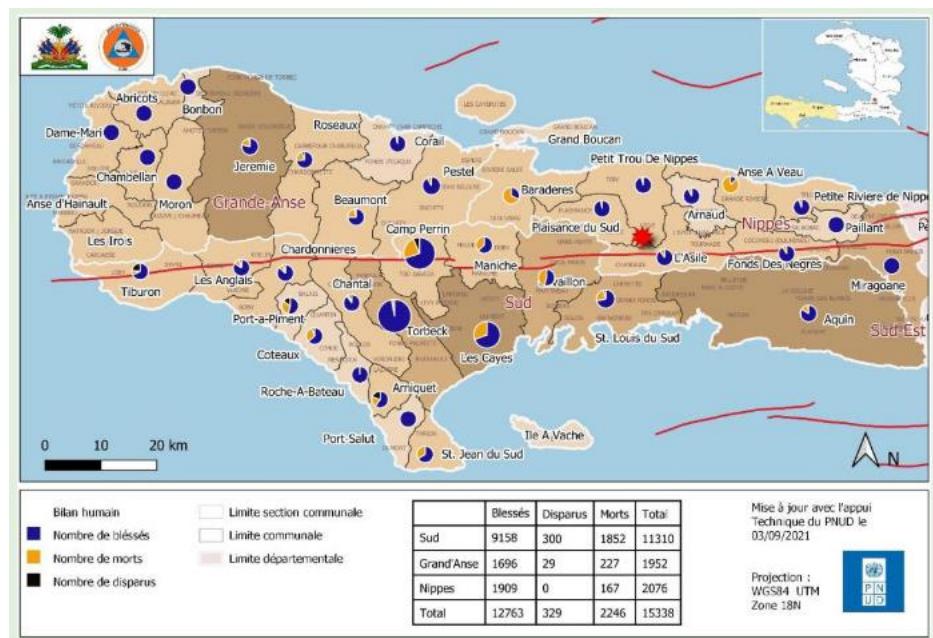
There was great concern about the forecasted arrival of Hurricane Grace²⁶ a few days after the earthquake, especially given the devastation that had been caused by Hurricane Matthew a few years before. Luckily, Grace became less violent, taking the form of a tropical storm accompanied by heavy rains. Many of the areas affected by the earthquake were affected, making relief operations more complicated, but the situation did not become as disastrous as feared.

Despite being much less catastrophic than the 2010 earthquake in Port-au-Prince, which had left more than 220,000 people dead and 1.5 million injured, the impact of the August earthquake was still devastating, despite the efforts made to enhance the country's national response capacity. The Haitian Civil Protection Agency reported 2,246 deaths, 329 missing persons and 12,763 injured.²⁷ According to the PDNA, almost 53,000 homes were destroyed and more than 77,000 sustained damage. About 800,000 people were affected and an estimated 650,000 people – 40 per cent of the 1.6 million people living in the affected departments – were in need of emergency humanitarian assistance.

²⁵<https://weather.com/news/news/2021-08-17-haiti-grace-storm-rain-earthquake>

²⁶ On August 13, Grace was a hurricane category 3

²⁷ PDNA Nov 2021



MAP N°3 : HUMAN IMPACT OF THE EARTHQUAKE (Source : Evaluation post désastre en Haïti, Séisme du 14 août 2021 dans la péninsule sud : DGPC/UNDP)²⁸

The combined impact of the earthquake and tropical storm Grace²⁹ left 650,000 people in need of emergency humanitarian assistance. 500,000 were targeted by UN agencies and humanitarian partners through the activities planned under the Flash Appeal for \$187.3 million. Based on an initial impact assessment, the government estimated that the damage exceeded US\$1 billion, as national authorities planned a more detailed assessment of damages, losses and post-earthquake needs in collaboration with the tripartite partnership comprised of the World Bank, European Union, United Nations under the leadership of the Ministry for Planning and external cooperation (MPCE).

5.2. The impact of the earthquake by sector and the global response

This chapter briefly describes the impacts of the earthquake on the population, including on each of UNICEF's sectors of activity.

The impact on health³⁰

The Ministry of Health reported that 105 (78%) of the 136 facilities³¹ in the Grand Sud³² were either intact or had only sustained minor damage. However, the issue was not so much the number of injured per facility requiring medical treatment but the fact that previously hospitalised patients had to be treated in the open due to fears that the buildings might eventually collapse. Long before the earthquake, there was a chronic lack of medical supplies and basic services.³³ Many of the injured and the high-risk patients were only reached later or were unable to access health services as they were in deep rural areas, without any means of transportation.³⁴

²⁸ https://reliefweb.int/attachments/cbfed1e7-348d-3d50-85ba-c03f132cc525/haiti_2021_final_oct21_1.pdf

²⁹ https://www.nhc.noaa.gov/data/tcr/AL072021_Grace.pdf (fig. 1 pag. 32)

³⁰ Information collected in the 3 affected departments and triangulated with Ministry of Health and aid actors

³¹ RAPPORT SECTEUR SANTE PDNA HAITI 2021

³² The three most western and southern department of Haiti

³³ 24% des établissements de santé n'ont qu'un service limite d'eau et 84% un service limite de gestion des déchets médicaux. MSPP PDNA Haiti 2021

³⁴ Interview Civil Protection

It took several days for the authorities and the international community to realize that there was damage along a broad strip on both sides of the fault line. As such, a large number of small, specialised health services were required, rather than large field hospitals.

Life-saving activities were the priority during the first days. On August 14th, the MSPP activated its Medical Information and Coordination Cell (CICOM – *Cellule d'Information et de Coordination Médicale*), also referred to as the EMT Coordination Cell (EMTCC), to coordinate the efforts from all Haitian medical staff and international Emergency Medical Teams (EMT) and the deployment for those of the teams that were accepted by the Government of Haiti. As of August 30th, nearly 10 international EMTs had been deployed – four in Sud and one in Les Nippes. National medical staff mobilised by the Ministry of Health (MoH) were the first on site. Nutrition was not perceived as an immediate need by the MoH. In the weeks following the earthquake, it re-established breastfeeding and other regular nutrition programmes that had been interrupted before or due to the earthquake. 62% of health facilities were affected, with 23% being too seriously damaged to be able to provide services. The MoH firmly coordinated the technical nutrition group. It took a couple of days to intervene in the affected areas as the Ministry of Health prioritized life-saving activities within the first 48 hours. The population rapidly indicated less interest in food aid and a preference for agricultural assistance. Southern Haiti is one of the most fertile parts of the country and it recovered faster than expected after Hurricane Matthew. In addition, apart from the limited number of cases where mothers are killed or are unable to practice breastfeeding, the nutritional impacts of earthquakes are often only seen long after the event if food production and accessibility are affected.



PHOTO N°5: AN AMBULANCE MOBILIZED FOR THE MOBILE UNITS

WASH³⁵

With thousands displaced and sleeping in the streets and water and sanitation infrastructure having sustained extensive damage, vulnerable populations were becoming increasingly exposed to the risk of infectious diseases, acute respiratory infections, diarrheal diseases, malaria and COVID-19. As such, there was a pressing need for access to safe water for consumption, sanitation services and hygiene promotion. The effectiveness of international assistance was increased due to that of the national water regulation agency (Direction Nationale de l'Eau Potable et de l'Assainissement (DINEPA)), and the regional service delivery body (the Office Régionale de l'Eau Potable et de l'Assainissement du Sud (OREPA-Sud)) which covers all 4 departments of the Southern peninsula. There is a lot of experience in water trucking in Haiti among the WASH sector staff. The whole process was rapidly put in place, including pumping water from rivers, using specific water treatment systems, transportation with specialised trucks and storage (bladders, water containers, etc.). In view of the difficulty of rapidly rehabilitating the many small sanitation and water distribution systems (SAEP) damaged by the earthquake, or made weak by years of limited maintenance, water trucking had to be continued for a few months. Rehabilitation work started in many geographical areas, although many difficulties were encountered in the field. The transportation of supplies, including high pressure resistant polypropylene pipes, connections, etc. was held up by the Martissant blockade.

³⁵ Information collected in the 3 affected departments and triangulated with DINEPA and aid actors

Education³⁶

Even before the earthquake of August 14th, 2021, the education system was facing major problems, such as insufficient human resources, limited material resources, inadequate or non-existent facilities in some places and unusable roads, especially during the rainy season, limiting the ability of inspectors to do their jobs. According to the education sector report, the number of schools damaged or collapsed by the August 14th earthquake was estimated at around 1,250. This included both the public sector and private sector schools. However, the losses were higher in the private sector (66%). As for the departments affected, the South was the most affected, with nearly 45% of the estimated damage and losses, followed by the Grand'Anse department, with more than 30% of the damage and losses. This situation resulted in the interruption of school services in the three departments and directly or indirectly affected 307,359 students. The effects of the earthquake affected 7,512 teachers and 1,000 school directors.

Child protection³⁷

In response to the earthquake, many of the awareness-raising, recreational and psychosocial support activities were practically finished at the time of the RTE as they were financed by the early emergency 6 month funds. But significant challenges on child protection are still present. Longer-term activities are needed as it is difficult to rapidly change mentalities and to establish social mechanisms to cope with the traumas after abuses. It is likely to require time and means as in Haiti, the violence against children is deeply rooted in several causes in particular multidimensional poverty.

Equity Gender³⁸

The direct and longer-term impacts are significant. According to several interviews, many men were killed on their way to their fields, leaving behind their wives, who are now widows. It should be noted that even though detailed gender analyses were carried out after the earthquake, they did not provide detailed gender desegregated data on the death toll consequence of the earthquake. Many water facilities and schools were destroyed, increasing the burden on women and girls due to additional work fetching water and caring for children unable to attend school. The memories of abuse of power by humanitarian professionals in previous disasters³⁹ in the country were still present among humanitarian institutions.

³⁶ Information collected in the 3 affected departments and triangulated with Ministry of Education and aid actors

³⁷ Information collected in the 3 affected departments and triangulated with Social services in Port au Prince and aid actors

³⁸ Information collected in the 3 affected departments and triangulated with key stakeholders and aid actors in Port au Prince

³⁹ <https://www.theguardian.com/world/2018/jun/15/timeline-oxfam-sexual-exploitation-scandal-in-haiti>

5.3. Time line of the international response

The UNICEF response was part of a concerted national and international effort to help Haiti which is illustrated in the timeline below.

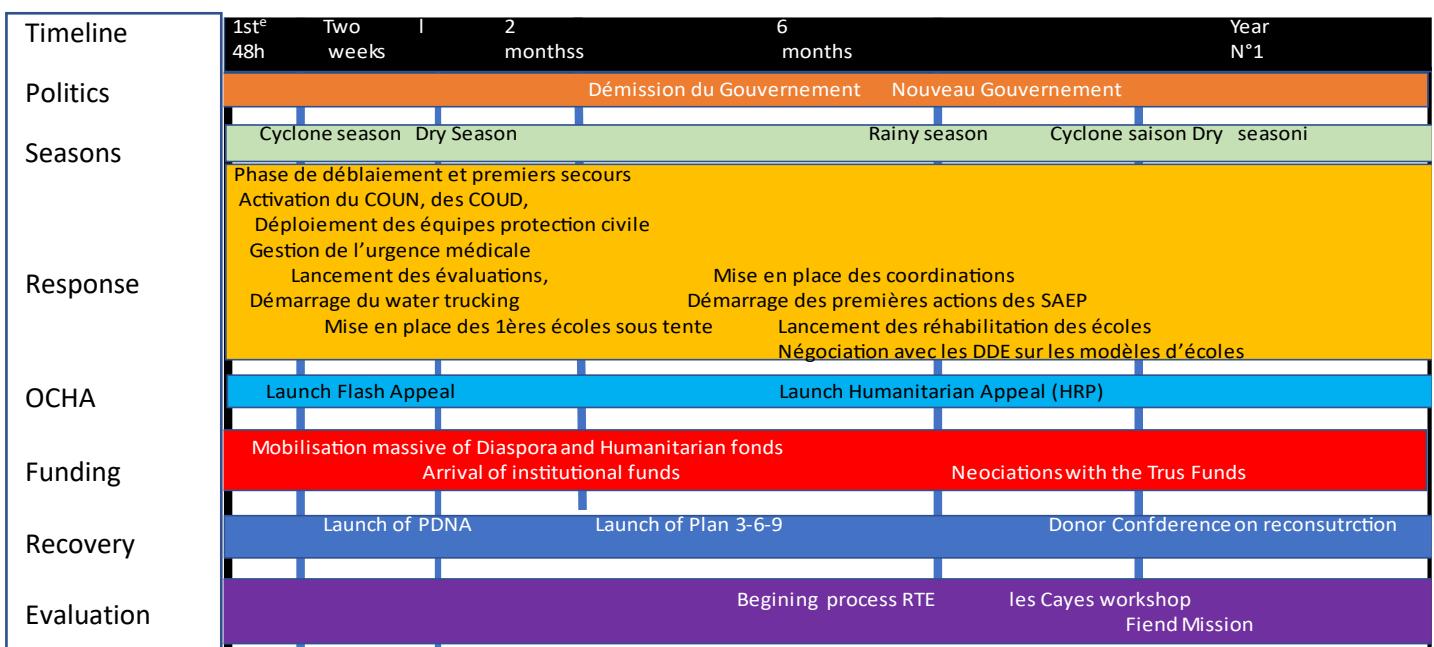


DIAGRAM N°5: TIMELINE OF THE RESPONSE

5.4. Global funding of the Haiti earthquake response

OCHA's effort to identify needs and raise funds for the response are presented in the following figure

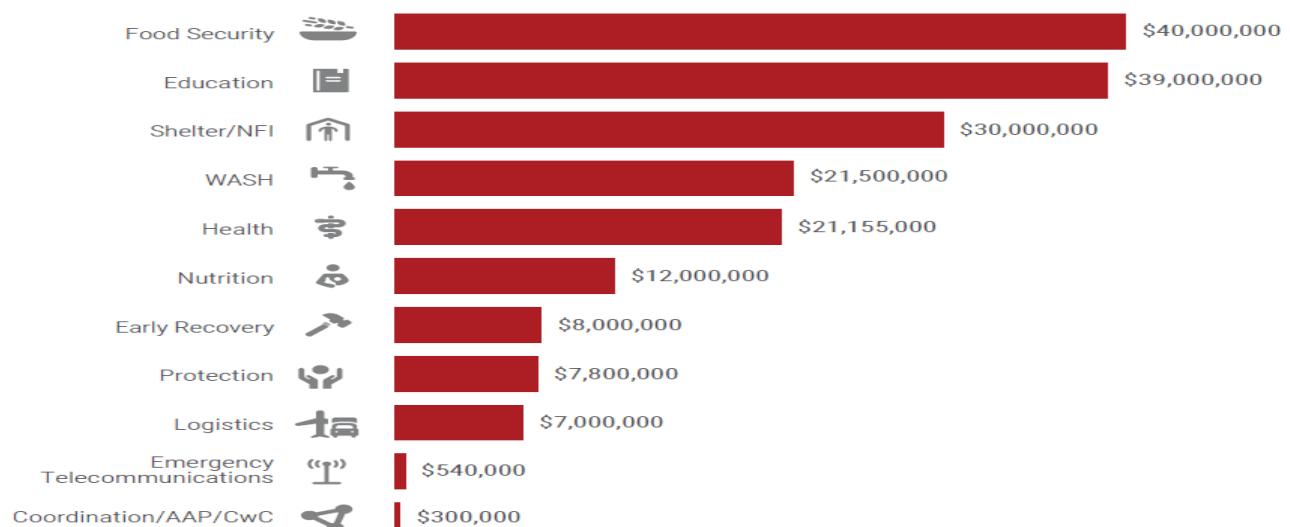


DIAGRAM N°6: FUNDING REQUEST AS PER THE FLASH APPEAL (OCHA, FLASH APPEAL, AUGUST 2021)

The OCHA Financial Tracking Service (FTS) indicates the following funding situation for 2021- 2022

Type of information	2021	2022
Total incoming funding	US\$77,451,142	US\$37,403,455
Total requirements:	US\$187,295,000	US\$373,165,734
Coverage	41.4%	10.0%

TABLE N°3: FUNDING SITUATION FOR THE HAITI RESPONSE

The political instability and lack of trust in the Haitian political system was a significant obstacle in terms of raising funds at the time of the earthquake. The rising financial needs related to the crisis in Afghanistan and the war in Ukraine, and the prospect of a global food crisis, are likely to make fundraising efforts even more difficult for Haiti.⁴⁰



PHOTO N°6: DESTROYED BRIDGE IN THE SUD DEPARTMENT

⁴⁰ Interviews with donors, UN agencies and International NGO

6. FINDINGS

The earthquake occurred at 08:29:09 EDT on Saturday August 14th, 2021. UNICEF's response was immediate. Within minutes several staff, both in Port-au-Prince and the Les Cayes sub-office, called their counterparts in the department's level. That morning, UNICEF participated in the first meeting with the Directorate General for Civil Protection (DGPC) in Port-au-Prince. By the evening of August 14th, the first trucks with UNICEF supplies reached Les Cayes, thanks to its committed transporters who were able to cross the gang-controlled area of Martissant. Rapidly, UNICEF deployed staff to Les Cayes, a deployment facilitated by the existence of the Les Cayes office and a certain level of legitimacy due to previous activities related to the cholera crisis, Hurricane Matthew and COVID-19. The response in the field was based more on the level of resources available than on needs. Choices had to be made based on resource availability, presence in the field, accessibility, and the presence of other agencies.

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2021	Resources reprogrammed	US\$	%
Health	8,320,040.00	3,509,234.22	4,000	4,806,806	58%
Nutrition	6,000,000.00	3,512,563.04	4,000	2,483,437	41%
WASH	21,500,000.00	4,044,251.49	154,000	17,301,749	80%
Education	31,000,000.00	9,533,704.00	3,065,800	18,400,496	59%
Child Protection, GBViE, PSEA	6,000,000.00	3,419,254.94	4,000	2,576,745	43%
Cluster coordination	500,000.00	267,390.46	85,375	147,235	29%
Total	73,320,040	24,286,398	3,317,175	45,716,467	62%

TABLE N°4 : FUNDING OF THE OPERATIONS (SOURCE UNICEF HCO)

The table above shows the significant funding gap in all sectors, with some more underfunded than others, this partly reflecting inter-agency competition for funding. For instance, a large grant for WASH was given to an NGO while UNICEF expected to receive it.

As requested in the ToR, UNICEF's response to the 2021 earthquake is analysed below by criteria, overarching questions and RTE sub questions or Evaluation Questions (EQ).

6.1. Relevance/ Appropriateness: 1

WHETHER THE RESPONSE IS IN LINE WITH LOCAL NEEDS AND PRIORITIES (AS WELL AS DONOR POLICY) AND HUMANITARIAN ACTIVITIES ARE TAILORED TO LOCAL NEEDS,

Overarching RTE Question N°1 How appropriate is UNICEF's response strategy (present and planned) in reaching the most affected populations at scale? By and large, UNICEF's response strategy for the emergency phase was appropriate as it was extremely flexible and responded to needs as they emerged. The response strategy for the recovery phase was more complex, based on better knowledge of the earthquake's impact. Both strategies nevertheless were constrained by the evolving Haitian context. In many remote rural areas, the process took time. In addition, direct engagement with communities by UNICEF remained marginal. Despite efforts made since Hurricane Matthew, preparedness was still too underdeveloped to ensure it could fully play its role.

RTE Sub question

1.1. To what extent is UNICEF's response aligned with and tailored to the needs of the most affected populations? Relatively well. Here again, it is important to recall how long and cumbersome was the process to access many remote rural areas. These areas were underserved by partners before the earthquake and only started to get a meaningful response during the recovery phase. The absence of a proper UNICEF office in Jeremie and Miragoane was a real hindrance from the beginning of the response which led to insufficient needs assessment and analysis and affected the relevance of the immediate response and the effectiveness of the recovery period in the Grand'Anse and Nippes departments.

1.2. What tools (i.e. methodologies, situation analysis, needs assessments, data systems etc.) were used to gauge these needs? /To what extent where these tools sufficiently appropriate to deliver what they were design for? Due to the difficulty of gaining access to the affected areas immediately after the earthquake, needs were gauged via phone calls, when feasible field visits and meetings with local authorities and partners. Discussions between international actors and the COUN about using the newly designed needs assessment form hindered the speed of the data collection and created some disparities which were detrimental to the planning process. The national institutions were not always able to play their role providing information, with significant differences between sectors. WASH was far better than others due to the pre-existing network with the OREPA/URD and CAEPA teams. Data systems remained sub-optimal with limited connectivity and staff shortages. For the recovery phase, UNICEF had largely to base its assessment on partner reports rather on its own assessments. One of the main issues on M&E is that the system is based on a process of data collection and treatment which is largely designed to feed the internal UNICEF reporting system and facilitate donor reporting. Thus, it is not a "project steering" system. The method and rhythm of data collection does not permit proper project management. There are no contextual indicators. A system of sentinel indicators that could be collected and processed rapidly would provide information that informed decision making.

1.3. To what extent have affected populations been involved in the needs assessment, delivery and management of humanitarian assistance? Affected people were interviewed during the assessment phase, but were far less involved during the implementation phases. Local recruitments for some recovery projects (in WASH and school reconstruction) also contributed to the engagement of local people. One innovation was the system of U-Reporters - volunteers from the community who collect information and send it to UNICEF. It is to be noted that UNICEF's engagement with affected people was marginal and often limited to the provision of work.

1.4. To what extent was a system of information management and disaster management in place prior to the crisis? The initial response by the CO and RO was only marginally informed and enabled by elements of preparedness. The initial response was most successful and impactful in places where there had been pre-earthquake-preparedness activities, such as in Les Cayes, where staff were present, or where supplies had been prepositioned. However, the level of preparedness was lower than expected given the investment that is supposed to have been made in the country in recent years. The slow-activation of the MENFP emergency plan,⁴¹ and limited efforts by DINEPA to have "emergency latrines" available are two examples of this low level of investment in preparedness. It is important to note that recent preparedness efforts focused on cyclones and not on the risk of earthquakes. In addition, these efforts were not sustained enough to generate institutional operational changes.

⁴¹ Interviews with MENFP, School Staff and DDE

1.5. How internally coherent/consistent has the response been between the various sectors of UNICEF's response? / how integrated was UNICEF's approach across key sectors when addressing key priorities (e.g. WASH, Child Protection, etc.)? Despite efforts both at field and CO levels, UNICEF still functions by silos, each of them having its own budget, staff and reporting line, thus making the intersector coherence a long term goal. At the field level, each sector tried to deliver emergency assistance in a rush, and not necessarily in a coordinated manner with other sectors. In addition, several interviews underlined the existence of a certain disconnect between the centre of operations (Port-au-Prince) and the periphery (Les Cayes field office) despite significant efforts to connect by telephone, meetings or visio-conferences. This impacted the work as field staff were not always aware of or present at the arrival of supplies or surge team. The multitude of tasks and daily meetings were additional constraints. The February lessons learnt meeting in Les Cayes underlined the limits in internal cohesion both within the UNICEF Country Office and between LACRO and HCO. These tensions were regularly mentioned during meetings at all levels. The pressure on staff was enormous, with most people working round the clock and spending up to six hours of meeting per day, especially during the first few weeks. This did not create a working environment facilitating intersectorial connections⁴². Things improved significantly during the recovery phase as projects were taken in a more holistic way, thus facilitating multi sectoral approaches.

1.6. To what extent was the response designed to complement the activities of other humanitarian partners (NGOs, UN agencies, and of course Haitian institutions) operating in the most affected areas? UNICEF's response was largely designed in a coordinated manner with other partners. This was done through the coordination mechanisms where UNICEF has a significant role: WASH, education, child protection and health/nutrition. Another area where the strong involvement of UNICEF to support the community of aid actors was frequently mentioned is PSEA. In terms of cash transfers, an area where UNICEF had less expertise, it tried to coordinate with more experienced agencies, such as WFP. However, there was also some competition between agencies. For example, there was competition with WFP over the model of schools to be rebuilt.

1.7. How coherent is UNICEF's response with the priorities/responses of the affected government? UNICEF's response was very coherent with the priorities of the Haitian authorities. It was in keeping with the direction given by the Resident Coordinator to ensure proper leadership by the national and local authorities. UNICEF embedded many of its strategic interventions within the coordination umbrella of COUN at the central level, within the COUDs at the departmental levels, and also within the line ministries (Education, Health, Social Affairs, DINEPA) and their departmental offices. There were a few areas that required a significant level of dialogue to ensure proper alignment between UNICEF and the authorities at the central and local levels, such as "temporary versus permanent schools"⁴³ or "how to deliver WASH services to IDP sites that were not supposed to exist".⁴⁴ Each time, there was dialogue to find a solution to improve the situation of the population (see sectoral paragraphs).⁴⁵

1.8. How consistent has the response been with the core principles of humanitarian action? Several core humanitarian principles relating to conflicts such independence and neutrality are not central to earthquake disaster responses. However, coordination with national authorities is essential. During the first weeks of the response, another key humanitarian principle, impartiality, was compromised due to logistical and financial constraints, as aid was allocated not only on the basis of needs, but also on the basis of access.

⁴² Interviews with UNICEF staff at different levels

⁴³ Interview with DDE and UNICEF staff

⁴⁴ Interview with DINEPA, OREPA URD and UNICEF WASH

⁴⁵ Interview with UNICEF, with staff from the DINEPA and with staff from the MENFP

The key issue here is the limited level of knowledge among UNICEF staff of International Disaster Law and the Core Humanitarian Standard (CHS).⁴⁶ Interesting to note that, despite this large ignorance of these Core Humanitarian Standards, UNICEF's post-disaster operations were relatively consistent with them. Putting the government at the centre of operations meant that there was respect for national sovereignty. Efforts to apply the "do no harm" principle were not obvious. For specific issues related to CCC, the reader can refer to the dedicated paragraph below and in Annex 6.

6.2. Effectiveness:

THE EXTENT TO WHICH THE RESPONSE ACHIEVES ITS PURPOSE, OR WHETHER THIS CAN BE EXPECTED TO HAPPEN ON THE BASIS OF THE OUTPUTS

Overarching RTE Question N°2: To what extent has UNICEF achieved its intended results within the planned timeframe? (Consider HAC, response plans, monitoring, adherence to L2, CCCs etc.)

It is difficult to answer this question for the emergency phase as UNICEF had no real planned framework beyond deploying response means to cope with a largely unknown and fast-changing situation. UNICEF's effectiveness was thus less related to "achieving intended targets" and more to do with its capacity to engage rapidly and energetically in a series of emergency response interventions. This was very appreciated by all actors, although the whole process was not as optimal as expected due to confusion on the information form to use between aid agencies and the DGPC.⁴⁷ Planning improved during the recovery phase, but constraints did limit the achievement of some of the intended targets (In particular in education where the reconstruction of schools proved more difficult than expected, and in WASH, where supplies of goods were constrained by DINEPA procedures and by logistical problems).

RTE sub-question

2.1. How realistic/feasible are planned targets (e.g. in Humanitarian Action for Children) and to what extent are they based on situation analysis and updated as new information becomes available? During the emergency phase, there was no real Humanitarian Action for Children (HAC). Most of the emergency response was reactive: it was implemented to deal with emerging needs rather than linked to any "planned targets" as the situation was fast-changing, and operational plans were very rapidly outdated. UNICEF nevertheless updated its HAC after the August earthquake. But the reliability and seriousness of such a document, with very precise targets, is questionable in a highly uncertain situation, with limited reliable data. There is also some concern about the level of competence within UNICEF in terms of using data. UNICEF also provided support to the initial damage and needs assessment in the most affected areas by collecting information through its network of key informants and sharing it in interagency forums. More sector-based planning was developed for the recovery phase in terms of supporting national and local priorities as defined by the different line ministries, and in collaboration with other agencies (PAHO/WHO and UNFPA in particular, as well as with WFP). UNICEF's efforts to support initial assessments through its field staff and connections helped to plan the first operations, in particular in Health and WASH. The response was constrained by access difficulties and the complexity of the context, and many of the initial objectives could not be met. OCHA launched a Flash Appeal a few days after the earthquake requesting \$187.3 million to support the aid response.

⁴⁶ Interview with UNICEF staff

⁴⁷ Interview with NGO and with DGPC

2.2. What factors contributed to or limited UNICEF's success? (HR surge; fundraising; communication w/donors and UNICEF National Committees)/ What role the COs, the RO and HQ play in this? During the emergency phase, the proactivity of the Haiti Country Office was key to the response. A range of factors contributed to or limited the effectiveness of the Office. These are summarized below.

Staffing

At the beginning of the response, the Haiti Country Office was not fully staffed. Some key positions (in particular the Deputy Representative), remained vacant for a long period despite requests for replacements. The absence of key staff such as the Deputy Representative or the Head of the Emergency Sector, made the work rather complicated. According to all the interviewees, the arrival of highly experienced staff on surge from UNICEF HQ, from LACRO and from other UNICEF offices was critical in alleviating this deficit in human resources. With the L2 declaration (see below), additional staff were externally recruited within a few weeks. However, tensions related to staffing at the beginning of the response were regularly mentioned during the RTE. Combined with the months of restrictions due to the COVID-19 pandemic, and the permanent fear linked to the security context, this resulted in significant pressure on staff, leading to what was described as “near burn out” situations.

Field presence and the opportunities offered by the Les Cayes Office

Before the earthquake, UNICEF was in the process of moving its office in Les Cayes. It speeded up the process and was able to move in within days of the earthquake. The building also hosts UNDSS, WFP and PAHO/WHO. The fact that UNICEF was the only UN agency with an office in Les Cayes made the UNICEF site a key hub for interagency coordination. This provided an opportunity to put the ‘One-UN’ approach into practice in Les Cayes with UNICEF, WFP and ILO organising a lot of joint distributions and joint missions.

Access to information

Difficulties in gaining access to information are common in chaotic and fast-changing post-disaster situations. Haiti was no exception. For example, the first flight over the affected zone did not provide a view of the level of devastation in the rural areas.⁴⁸ The delays in adopting the new Civil Protection rapid assessment forms, the fact that the multi-sectoral assessment tools were not presented in a timely manner, and the lack of a consolidated shared vision on what tools to use before the earthquake between UNICEF, its NGO and UN partners and the different governmental agencies involved hindered the early phase of the rapid assessment. During the first two weeks, the flow of information from UNICEF was erratic, limiting contributions to the Flash Appeal and institutional visibility. However, within two weeks, when the Sector Chiefs came back from rest and recuperation and a LACRO M&E member of staff was deployed to Haiti, better information was compiled, meeting notes started to appear, surveys were more structured and information channels became clearer at the level of the CO and with the Regional and HQ Offices.

Activation and use of L2

On August 19th, UNICEF activated the L2 Emergency procedure for 3 months (until November 19th). Following this activation, the Regional Director became accountable for the Emergency Coordination, while the Representative remained responsible for the implementation and evaluation procedures and the Haiti Country Office. This reorganisation of the system allowed stronger institutional support to Haiti’s operations. It also led to new activities (Technical Emergency Team meetings; Regional Emergency Management Team meetings, and an Emergency Coordination team), facilitated administrative processes and provided immediate access to UNICEF Emergency Response Funds (ERF) and Bridging Funds.

⁴⁸ Interview with CIAT and DGPC

More than 60 surge staff were deployed, first from within the organization (LACRO, HQ and other UNICEF offices), and then from the rosters attached to the global clusters. The LACRO office supported the HCO in multiple ways, particularly in technical areas, such as WASH, as the LACRO-based WASH Regional Coordinator had had a lot of experience in Haiti. The staff support given by LACRO at the time of the PDNA was also very appreciated as it freed some internal HCO staff and allowed them to concentrate on the field response.

One month prior to the expiry date of the L2 emergency Declaration (October 2021), the Regional Director and the Director of the Office of Emergency Programmes (EMOPS) assessed the four criteria (scale, urgency, complexity and capacity), and then presented several options to the Deputy Executive Director of Programmes: deactivate the L2 emergency; extend the scale-up phase for another three months; or support the transition to a stabilisation phase and specify if the complexity of the crisis persists; The L2 Declaration was finally extended it until mid-February 2022.

The L2 Declaration: a vital element for an emergency response

The L2 status was activated within four days. However, and despite the fact that L3 had been declared earlier due to the COVID-19 epidemic, it took the Haiti CO two weeks to implement it as most staff were not fully aware and/or concerned of infringing rules and regulation that use to enforce in order to protect the organisation from wrongdoings. Also, the L2 process was being fine tuned in the weeks before the earthquake, most staff were relatively new (2-4 months in Haiti), and were still in the process of getting to know the country and its security challenges, or had suddenly been repurposed from a more development perspective to an emergency response. The L2 activation implied:

- Enhanced support from LACRO and HQ: the rapid mobilisation of LACRO and HQ staff was key as the Haiti Country Office (HCO) was lacking key staff when the earthquake took place. This back-up was very appreciated by the HCO team, in particular because it was provided by experienced people.
- Better access to surge capacity staff. However, it seems that the roster was too limited and that there was very little prioritisation and arbitration about who came, especially given the need to speak French to work in Haiti and the competing priorities for different emergencies at the global level.
- Faster procedures, such as a fast track for recruitments, an enhanced financial ceiling for local procurements, and a quicker flow of resources. Two main internal mechanisms were activated (the Emergency Response Funds worth 2.5 M US\$ and the Bridge Funds worth 1.7 M US\$). The rapid injection of these funds was very useful, but it is important to remember that this money is "on loan" from the revolving funds systems and has to be repaid.
- The rapid dispatch of money with a higher ceiling for fast disbursement. The mobilization of EPF allows financial support even before donors are contacted. Yet, the absence of petty cash for staff on the ground was a problem for life-saving activities in the first days and weeks of the response.
- The increased possibility of using "Cash-On-Hand" (CoHa) mechanisms despite the HCO's poor past performance using them. Specific procedures had to be introduced within the HCO to facilitate control CoHa use.
- Coordination quickly became very demanding with valuable time taken up by long meetings. This reduced in intensity when the Deputy Representative for Operations returned.

Mobilisation of UNICEF on the basis of the overarching Core Commitments for Children (CCC)

The CCC are a fundamental aspect of UNICEF's crisis response policy. The UNICEF efforts in Haiti to comply with the CCC commitments are presented here. The analytical framework that was used in relation to the CCC is presented in Annexe 5.

Preparedness

Although efforts were made to reach some level of preparedness, as it is an overarching commitment for country offices as was the case for almost all actors in Haiti, UNICEF was caught “off guard” by the earthquake. This is because the main focus in Haiti is “extreme climatic events”. Tectonic phenomena are seen as marginal issue, despite the 2010 earthquake and advices from several specialists.⁴⁹ The efforts of UNICEF and the international community as a whole in response to Hurricane Matthew were useful, but only limited financial resources had been allocated since to replenish emergency stocks in the Grand Sud departments. More information on this overarching commitment is given in other chapters of this report.

Coordination:

Coordination is also a key overarching commitment of the CCC. UNICEF Haiti CO was a key player at all levels (central and field), as well as in UNICEF’s sectors of responsibility. Two points should be underlined: a) there was a clear demand by the UN Resident Coordinator to ensure that the leadership of the national authorities is seen as central; and b) due to the difficult experiences of 2010, the authorities asked that the cluster system should not be activated.⁵⁰ All the interviewees⁵¹ stated that UNICEF had performed well in its coordination role with these two parameters framing the coordination system (for more information see section 6.6).

Supplies and logistics

Supplies and logistics were key constraints in the operations, especially for the rehabilitation phase which involved the transportation of sizeable quantities of goods. The security situation on the way out of Port-au-Prince (gangs in Martissant), the state of the landslides in the affected areas, the damaged Jeremie bridge and the impact of the rains both in 2021 (during the emergency response) and in 2022 (during the rehabilitation) made logistics a very difficult component of the operation. During the emergency phase, airborne means made available for a few weeks and sea-borne means mobilized by WFP were critical in alleviating these difficulties. UNICEF’s decision to divide supplies to its operational partners between “big supplies” (large-scale procurements made by UNICEF supposedly for economies of scale) and “small supplies” (to be covered by NGOs) did not turn out to be as efficient as expected (see more on this in the paragraph on efficiency).

Humanitarian access

The difficulties were mostly linked to the situation in Port-au-Prince, with the gangs controlling the main exit road to the south. Some interagency efforts were successful in gaining access and getting convoys through the “Carrefour” bottleneck for a few weeks, but at one point access was impossible. A complex system of small barges and back-to-back transferral of goods from the barges to trucks was established thanks to WFP. Inside the affected zones, some access issues emerged when the populations in hard-to-reach affected areas felt they were receiving less assistance than the populations in easy-to-reach areas.⁵² This was solved through programmatic adaptations.⁵³

⁴⁹ Discussions with CIAT

⁵⁰ Interview with several high ranking Haiti officials

⁵¹ Interviews with UN agencies, Haitian authorities, NGO, donors

⁵² Field visits by the RTE team

⁵³ Interview with UNICEF, UNDSS and OCHA

The humanitarian access issue remained long after the emergency phase and is linked to the complexity of the Haitian terrain, as experienced during the RTE mission. The graph below represents the number of schools visited per department. It was very difficult to reach a good number of schools for two major reasons. Firstly, some schools are in very remote locations, which would require a whole day to visit. For example, the national school in Dublée is inaccessible by vehicle, requiring a 4-hour walk to reach the project site and a 4-hour walk back to where the vehicle has been left.⁵⁴ Secondly, most of the construction work is only just starting. It has been interrupted by rain and lack of materials due to supply problems caused by gang violence.

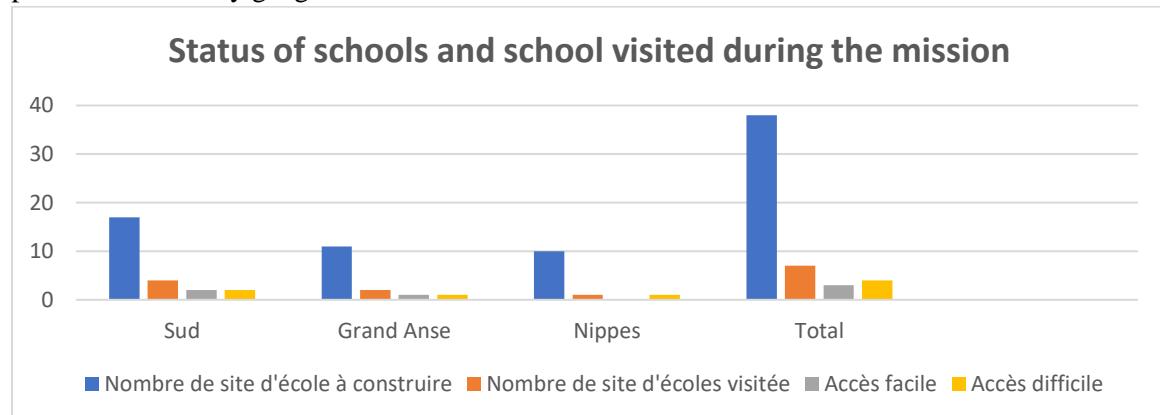


DIAGRAM N°7: ACCESS ISSUES FOR THE SCHOOL SITES VISITED DURING THE MISSION

Protection from sexual exploitation and abuse (PSEA)

A critical issue for PSEA management is the level of understanding of the risk. UNICEF was very active in relation to gender issues, both internally (including with its partners) and at the interagency level. The existence of GBV was acknowledged by all the interviewees.⁵⁵ UNICEF, in coordination with UN Women and CARE, supported a Rapid Gender Analysis in the three most affected areas to assess the differentiated impact of the crisis on women, girls and adolescent girls, and to design an evidence-based humanitarian protection response. Tools used for data collection included four U-report surveys, which aimed to reach young people and identify if the response was gender-equal. The new emergency procedures for PSEA were considered, facilitating the mobilization of EPF funds for PSEA under the L2. It was not easy for the HCO to adapt to this change in procedures as adaptation always takes time and time was a “rare resource” during the earthquake response. Likewise, the deployment of surge staff for PSEA was considered but it was very difficult to find people, it would also be important to accelerate the processes of contracting personnel for the field to support the actions. There were some major successes during the emergency response period. For example, a hotline was set up in close collaboration with WFP; a sensitization programme aimed particularly at humanitarian assistance providers was set up, partners and government counterparts were trained, audio-visual material was prepared, and 60,000 flyers were printed. Two additional staff were recruited to provide field support in the affected areas. The Accountability Survey organised by UNICEF reported that issues do exist, and a more detailed follow-up is needed in the following months in order to define and respond to the reported problems more effectively. In October 2021, UNICEF recruited a GBV specialist for three months through a stand-by partner. The UNICEF specialist produced a GBV analysis document and developed a strategy for UNICEF to combat GBV.

Three months after the earthquake, the surge support had to be withdrawn due to lack of funds. In terms of Communication for Development (C4D), UNICEF developed key messages on GBV prevention.

⁵⁴ Field visits by the RTE team and discussions with school constructors and UNIEFpartners

⁵⁵ Interviews with UNICEF staff

Accountability to affected populations

AAP was a key concern for UNICEF CO even before the earthquake. The support to the U Reporter network and the engagement of UNICEF in the interagency AAP survey are key indications of their commitment.⁵⁶

Cash transfers

Cash transfers are not only a useful tool for human development in a context of growing poverty and economic crisis, but they have also been proven to be a useful mechanism in emergency response.⁵⁷ After the earthquake, the first cash transfers delivered by the United Nations in the field were made by UNICEF using two Cash transfer programmes: through the GPE funds [1,200 vulnerable households (HH) with school-age children with disabilities, incentives to 1000 teachers in 3 departments (Sud, Grand'Anse and Nippes)] and through the MPTF multipurpose cash transfers to 1000 vulnerable HH in Grand'Anse (Corail, Pestel and Cayemites) in partnership with FAO (in-kind assistance) and WFP (targeting and connection with the longstanding social protection scheme). It is important to note that it took time to activate the proper mechanism as UNICEF had to negotiate with a Financial Service Provider for almost 12 months to have the contract signed. The internal lack of capacity (in terms of human resources in the UNICEF HCO), the limited knowledge among UNICEF staff (both in the programme and operations departments) and rare previous experience in implementing cash transfers in humanitarian responses represented a key limit. In addition, the administrative complexity to establish working mechanisms and contracts with FSPs, to develop existing partnerships (with NGOs, the government and UN Agencies) was another significant hindrance. For example, there was only one social policy chief in UNICEF, who in addition had to take over the role of Deputy Representative at the onset of the 2021 earthquake response. By comparison, WFP had 23 social protection staff including 12 internationals staff. UNICEF also put in place targeted cash transfer processes to facilitate the return to school of the most vulnerable children and to help teachers in the resumption of their activities.

Programme approach

Quality of Programmes:

There are two issues: the quality of the design and the quality of the implementation

- **Quality of the design:** The design of the emergency response programmes was largely geared by existing national standards and site-specific characteristics.
- **Quality of the implementation:** this depended on the capacity of the implementing partners and the capacity of UNICEF and its national counterparts to carry out proper monitoring and advisory missions. Both of these were limited in terms of the human, financial and logistical resources available to support field operations and help them overcome technical difficulties.
- **Equity and targeting the most vulnerable:** It is important to mention that, in a disaster situation in a context of widespread acute poverty like Southern Haiti, supporting mobile clinics that are treating wounded people, or establishing water distribution points, does not target a specific group but aims to meet the needs of people affected by the impact of a disaster or the needs of a community. However, special attention was paid to women and children to ensure that those with especially difficult situations could be targeted first.

⁵⁶ Interviews with U reporters, with UNICEF and with affected people

⁵⁷ And is now a key component of the commitments of the Grand Bargain since the World Humanitarian Summit of 2016

Multisector and integrated programming

Although it was relatively complicated during the early emergency phase, UNICEF efforts to target specific sectors and their institutions, such as schools, health institutions, nutrition support mechanisms or WASH systems, meant that a multi-sector approach was needed: schools without water or latrines would not meet UNICEF's or the MENFP's standards for schools. Nutritional support without basic health monitoring, vaccination, hygiene education and even basic mother education would not be in keeping with UNICEF's⁵⁸ Conceptual Framework on the Determinants of Maternal and Child Nutrition, 2020.⁵⁹ Of course, organizational "silos" could undermine this approach but an internal coordination system was established in the field to limit this risk.⁶⁰

Linking humanitarian aid, development and peace (HDP)

This is directly related to the capacity of communities to ensure proper maintenance of the rehabilitated infrastructures and therefore depends on their level of ownership of aid programmes. As has been the case in the WASH sector since before the earthquake (with the SAEP management committees), community members and users need to be integrated into the management and maintenance of schools. They must take ownership of all interventions in their territory and understand the importance of any projects in their community. Currently, MENFP is working on the creation of school councils who will participate in school management along with the departmental directorates of education. 50% of schools have had school councils since 2007, but these still struggle to participate in the effective management of schools. During the RTE visit, the Departmental Directorate of Education (*Direction Départementale de l'Education - DDE*) stated that by September 2022 all school councils should be in place.

Sectoral commitments

Health and Nutrition

UNICEF was instrumental in covering mobilisation costs and supporting the creation and operations of local mobile teams in the south. Staff appreciated the fact that UNICEF's first health supplies arrived as early as the night of August 14th. Within two weeks, the Health Department responded to needs by assembling mobile teams in which seven national professionals took part. These began to operate in the first week of September in the South department and later expanded to Nippes and Grand'Anse. UNICEF's financial support made the scale of the operation possible. There were delays in payment due to UNICEF's internal procedures and governmental processes. However, overall, this support was very positive as it empowered the DSS to identify people with health needs in the surrounding communities who did not have access to health services. The mobile health teams provided healthcare on the spot but also referred patients when needed. Efficiency was high as most staff were local. UNICEF enabled health facilities and mobile teams to provide even better care than before the earthquake by delivering chronically deficient medical supplies to health facilities, sometimes even crucial medicine. Over time, the mobile teams evolved as access to communities and information transmission improved, and health needs gradually changed. These supplies were paid for with a previous underfunded CERF, and the stocks will be replenished with the earthquake emergency funding. During the few weeks following the earthquake, national and international EMTs provided direct healthcare to affected people on the ground in the impacted areas. They also supported health delivery systems in the health institutions affected by the earthquake, including needs assessments, medical evacuations and post-earthquake GBV assistance within the mobile clinics.

The national authorities were prioritizing EMT deployments with a concentration on EMT Type 2 with surgical capabilities and EMT Type 1 with high capacity of orthopaedic trauma care. For UNICEF, the strategic entry point in the operation was the Ministry of Health in Port-au-Prince, and the Health

⁵⁸ <https://www.unicef.org/media/91741/file/UNICEF-Nutrition-Strategy-2020-2030-Brief.pdf>

⁵⁹ https://www.researchgate.net/figure/UNICEF-Conceptual-Framework-causes-of-malnutrition-and-death-19_fig1_343417658

⁶⁰ Interviews with UNICEF staff

Departments. The presence of a dedicated UNICEF national health professional who was well integrated into the Ministry of Health was very useful in supporting the health response in the departments affected by the earthquake. UNICEF tents and tarpaulins, which were used in hospitals and health centres, made a major difference to the many patients who were unable to return to non-affected facilities due to aftershocks and the fear of buildings collapsing. Within two weeks, UNICEF was able to support mobile clinics in the three affected departments in close coordination with the Department of Health.

46 health infrastructures were affected. It took some time to properly identify them as the Ministry of Health and WHO did not obtain the necessary information for a number of weeks, but this was eventually included in the PDNA. UNICEF focused mainly on health centres, clinics, GBV and other primary health care facilities. The speed of a medical response can make the difference between life and death. Local and national health staff were the first medical staff available in the affected areas. By covering the expenses of medical personnel mobilised by the ministry of Health, the HCO helped to

reduce death and morbidity.⁶¹ Some tents arrived within the first 48 hours. Medical professionals could have arrived in a more organised fashion and could have been better equipped.

Nutritional activities were not given a high priority during the emergency response as international experience shows that rapid onset disaster have seldom a direct and immediate nutritional effect. Yet, as the nutritional situation was subject of concerns in Haiti before the earthquake, nutrition programmes were set up after the acute emergency phase.



PHOTO N°7: NUTRITIONAL PROGRAMME IN LES NIPPES

WASH:

UNICEF's WASH response is cited in several evaluations as a success (see Annex 7).⁶² UNICEF's WASH response was possible thanks to strong institutional support to the national institution DINEPA since at least the 2010 earthquake, reinforced during a prolonged cholera response. It is important to note that UNICEF's response to end cholera was not led by the WASH section but by the Emergency unit. This resulted in a weak WASH leadership during those years and a strong leadership from the Emergency Unit), the response to Hurricane Matthew and other emergency responses. In addition to LACRO support, two WASH specialists were sent as part of the surge through standby agreements to strengthen the national team. UNICEF support to the global WASH response made an even greater impact because of the existing trust between DINEPA and UNICEF.

⁶¹ Reported in interviews and reports for hospital Saint Antoine Jeremie, Immaculee conception Les Cayes

⁶² Interviews with DINEPA, OREPAs in the three departments and with UNICEF staff

The fact that the DINEPA is widely respected, and that it combines emergency and development activities, was indeed a great asset in terms of planning, coordinating, and implementing the water and hygiene response. This allowed the fast distribution of hygiene kits, the rapid evaluation of water systems in the three affected departments, the sharing of information within the WASH sector, the early rehabilitation of certain systems thanks to the adoption of rapid corrective measures (it was much slower for many others, though), and water trucking. Here again, the absence of petty cash for staff on the ground was a problem for life-saving activities in the first days and weeks of the response.

PHOTO N°8: FIELD VISIT TO LOOK AT WASH ACTIVITIES

Water trucking: UNICEF supported several treatment systems as well as a fleet of trucks from the treatment sites to the communities. It also facilitated the whole emergency water response by providing spare parts, chemicals, etc.⁶³ This response was effective but expensive, so there was an incentive to move to SAEP rehabilitation in the early stages of the response.



Hygiene kits: The rapid and wide distribution of hygiene kits is one of the success stories of UNICEF's involvement in the response. These hygiene kits comprise water treatment products, basic hygiene products (soap, toothbrush, toothpaste and feminine hygiene products). According to the global survey supported by UNICEF, these kits were very useful, but their content might need to be reappraised in order to be "site specific". Options for cash transfer, in order to increase the possible adaptation of the content, might have to be further explored. As yet, there has been little analysis of local markets (functioning, supplies, accessibility, and prices) and of the capacity of the population to purchase items for hygiene kits, and this will require due attention.

Sanitation: Most of the affected rural areas have limited sanitation facilities apart from household latrines, and there is still a high level of open defecation. Villages and small cities have better systems which, luckily, were largely unaffected. In an emergency situation, it is difficult to work on behavioural change and empowering communities' involvement in sanitation systems. The situation was more complicated in the informal settlements and the zones where people sought shelter after the earthquake. On the one hand, the government policy was to try to avoid the creation of IDP sites, but for some people, there was nowhere to go back to after the earthquake. A "dry latrine" with a simplified design developed by an NGO was used in certain areas following complicated negotiations.⁶⁴

⁶³ Interview with the Head of the EECP deployment team
⁶⁴ Discussion with UNICEF WASH and OREPA les Cayes

Education:

Since August 16th, together with MENFP, UNICEF has contributed to the assessment and collection of data related to schools damaged by the earthquake. The need to ensure a “return to safe school” for the children was a concern of the government and many humanitarian actors. Focal points were designated in the three affected departments and all educational structures were assessed (public, private and community) using a colour code (green, yellow or red) according to the level of damage/destruction. A priority list was then established for schools to be rehabilitated. To facilitate the return to school, UNICEF distributed tents that could be used for school activities. In order to limit the economic burden on poor families, it distributed school kits for children with a bag containing pencils and school books. In addition, it distributed basic furniture to equip the tents and temporary schools and established a cash transfer system to help the teachers. It also encouraged the clustering of schools to allow all students to return to school quickly.⁶⁵ A system of double shifts was established, with mornings for the children who would normally attend the school, and afternoons for children from other neighbourhoods. In a few cases, UNICEF ran training seminars on risk and disaster management, community management in schools, and psychosocial support.



PHOTO N°9: TENT USED AS SCHOOL



PHOTO N°10: TEMPORARY SCHOOL CONSTRUCTED WITH THE SUPPORT OF UNICEF (LES CAYES)

⁶⁵ Highly visible on all roads and tracks in the affected areas

Child Protection

According to several interviews, there was already good collaboration between UNICEF and IBERS even before the earthquake. UNICEF was a co-facilitator in the meetings of the Working Group for the Protection of Children (WGPC). During its meetings, the following protection issues were discussed:

- Foster care. This is a structure created by IBERS whose mission is to take care of target children and to avoid placing them in children's homes. These are families who voluntarily decide to take in and take care of a child. These families are assessed and accredited by IBERS.
- Children/adolescents in conflict with the law;
- Children living in institutions;
- Street children.

Following the earthquake, UNICEF provided technical and financial support to IBERS for activities to child protection. IBERS officers from the three departments are satisfied with this technical support and reported several improvements:

- Many more people in the communities are aware of the existence and activities carried out by IBERS.
- The creation of child protection committees.
- IBERS is able to make referrals and do an initial follow-up when faced with a case of abuse or maltreatment of a child.

UNICEF partners receiving financial support for the implementation of child protection activities. During the field mission in the far south, meetings were held with UNICEF partners who had received financial support from UNICEF for the implementation of child protection activities. Interviews with partners in the South and Grand'Anse departments showed that short-term funding limits the assistance that is provided to beneficiaries. It is true that GBV existed before disasters, but with disasters there is a huge risk that cases will increase, and there is some evidence that this may already be happening. In the current context of weak data collection, it is difficult to conclude that cases are increasing. There was a strong group within the Ministry of Social Action, and the department directorates, prior to the earthquake. These received firm support from UNICEF. Indeed, many issues existed before the earthquake, and were aggravated by it: children separated from their parents, children and adolescents deprived of liberty, children with disabilities, children victims of violence, street children, etc. The earthquake impacted a relatively limited number, but, especially when it comes to children, numbers do not matter. Every single life must be protected from long-term effects. Within a few days, thanks to UNICEF and its partners' support to the IBESR, children and adolescents deprived of liberty were separated from adult prisoners.⁶⁶ Also with UNICEF support, quick monitoring of high-risk children was carried out (street children, children in foster care, children in temporary settlements, etc.). UNICEF staff were already in Les Cayes prior to the earthquake and additional staff were deployed to Jérémie. A Child Protection specialist was sent as part of the surge to support the UNICEF response. The combination of extremely dedicated governmental staff, the close interaction with UNICEF's partners, the *Centre de Formation et Recherches en Appui Psychosocial* (CFRAPS) and the quality of UNICEF staff led to an effective response.

⁶⁶ Interviews with IBERS staff

The table below presents a summary of the activities carried out by UNICEF's partners in the three departments, including Care, AVSI and CFRAPS.

Department	Partner	Activities supported
Sud	AVSI	1- Psychosocial support with a 5-point programme: manual activities; recreational activities; discussion group and awareness raising.
Sud	CFRAPS	1- Psychosocial support. 2- Support for unaccompanied children, victims of sexual abuse. 3- Help to identify foster families, assess & support IBERS in the accreditation process.
Sud	IDEJEN	1- Psychosocial support through the creation of reception centres for children. 2- Setting up a reintegration programme for adolescents aged 15 to 18, who will have to undergo vocational training over a period of 6 months through community-based organisations.
Grand'Anse	IDEJEN	1- Psychosocial support through the creation of a reception centre for children in the commune of Pestel
Grand'Anse	Care	1- Psychosocial support for children through the establishment of appropriate spaces. 2- Referral of unaccompanied children to protection services via a referral system. 3- Raising awareness on gender-based violence. 4- Support and accompaniment of IBERS in the revitalisation and strengthening of local social protection mechanisms.
NIPPES	Fondation Zanmi Timoun	1- Psychosocial support for children affected by the earthquake of August 14 th , 2021. 2- Assistance to separated children and children in institutions.

TABLE N°5: KEY ACTORS IN THE PSYCHOSOCIAL SECTOR

2.3. How timely was the response? In general, WASH responses were relatively timely, with water trucking, the rapid dispatch of water treatment plants and the distribution of hygiene kits. On the other hand, there were significant delays before work began on fixing even the smaller water distribution systems. In the immediate aftermath of the earthquake, the mobilization of mobile medical teams, the rapid provision of medical equipment, the distribution of tents for clinics or schools and the implementation of child protection activities (the identification of at-risk children) were all extremely rapid. There were significant delays, however, in reopening schools in keeping with the timeframe promised by UNICEF. The office in Les Cayes and the fact that, during the first month, the Martissant blockade was lifted greatly facilitated the timeliness of the response in Les Cayes. In contrast, there were delays in Grand'Anse and Nippes, but the response there eventually came together (see para 6.4 on coverage).

In the WASH sector, it seems that going through the DINEPA procurement system slowed down the procurements as NGO could find alternative channels to ensure fast transportation of goods through the difficult areas. The limited mobility of the OREPA team and the Unités Rurales Départementales (URD) at the department level held up technical support and monitoring in the field was a key constraint. The counterfactual was observed in Grand'Anse with the high mobility of OREPA when the UNICEF surge was present and able to rent a car and move with the OREPA staff to identify needs and monitor progress in rehabilitation.

2.4. To what extent did emergency preparedness planning influence the CO's capacity to respond? Despite the fact that Haiti is a risk-prone country, the Emergency Preparedness and Planning (EPP) process was largely sub-optimal. Even though UNICEF supported the COUN with contingency planning training as part of the MoU with the General Directorate of Civil Protection (DGPC) from 2020 (prior to the earthquake), preparedness efforts were insufficient to influence the response itself. The Southern department civil protection system had no contingency stocks since Hurricane Matthew, and the issue of earthquakes did not figure in discussions despite the likelihood of one taking place (see EQ 1.4.).

Les Cayes national staff left their affected dwellings within minutes of the earthquake to assess the damage in the city and continued to work relentlessly despite the fact that they were sleeping in the open with their families, and despite the rain and wind of tropical storm Grace during the night of August 16th. Port-au-Prince staff were mobilised from day one via convoys and flights. Despite repeated requests from LACRO and HQ at Regional Management Team (RMT) meetings and others, no consolidated Emergency Response Plan was ever shared with RO/HQ. This was a missed opportunity as it would have allowed LACRO and other UNICEF divisions (HQ, in particular the Emergency Response and Resource Mobilisation divisions, the Supply division in Copenhagen, etc.) to implement more timely and focused technical assistance. Without the Emergency Response Plan, support from RO/HQ was rather ad-hoc and reactive, as it was based on the requests of HCO. Opportunities for providing more strategic and structured advice/actions (risk mapping, prepositioning, training, etc.) were missed by HCO, which opted to give priority to an agile response rather than to planning.

However, thanks to the L2 declaration, the regional and HQ response was immediately triggered, and international staff were mobilised as of the second day. The speed of the response was due to:

- a) prepositioned assets (such as the UNICEF warehouse in Port-au-Prince);
- b) the existence of the suboffice in Les Cayes;
- c) the presence of staff familiar with the field conditions and the population's needs, with close relations in local authorities;
- d) and the accumulated experience since the 2010 earthquake.

However, there were significant limitations due to the HR situation. For example, the Standby Partnership Agreement based on a signed project document (PRODOC) were not as valuable as expected. Partnerships with the Netherlands Red Cross and ACTED did not work partly due to unexpected logistical and HR limitations among the partners and partly by the competition between UNICEF and some of its partners for the same donor resources. Also, four key management staff (the UNICEF Representative, the Deputy Representative for Programmes, the Deputy Representative for Operations and the Head of Emergency) and three Heads of Sections were out of the country when the earthquake took place: The Representative returned to the country immediately (on August 18th), the Deputy Representative for Programmes returned a few weeks later and the Head of Emergency returned on September 9th. The Head of the Health Section returned on August 15th, while the Head of the Education Section returned later. On the other hand, surge staff arrived within days to assume key coordination functions, support field operations, ensure security and provide technical support.

The example of preparedness in the education sector:

Preparedness and readiness in education for the coming Atlantic Hurricane season (known in Haiti as “the cyclone season”) and the next emergency⁶⁷

The Department of Education felt unprepared for a geological hazard. More preparatory drills in schools could have reduced the number of injuries among children and teachers. The curriculum should cover all hazards more effectively in order to familiarise students and their parents more with disaster preparedness and resilience. The schools to be repaired or reconstructed by UNICEF will be built in two stages. The first with a solid foundation and light upper structure. The second phase will replace the light structure by a permanent structure. This reconstruction of schools will provide an opportunity to review the resistance of schools to all hazards. It remains unclear how the reconstruction process will ensure that schools are hazard-resilient beyond UNICEF’s immediate responsibilities. In addition, the Ministry of Social Affairs and its partners identified several weaknesses that need to be addressed rapidly in order to be able to respond more effectively in the future. The following ideas were mentioned to rapidly improve the child protection sector’s ability to respond to future disasters: developing a detailed operational contingency plan with partners’ responsibilities, updating assessment forms for their use in emergencies, assessing buildings and homes where children are fostered for earthquake resistance, and improving the organisation of the emergency operation centre and data collection by the Ministry.

⁶⁷ Interview with DDE and MENFP staff

2.5. How aligned was the supply component with the overall emergency response? What were the most significant contributions of supply to the response? The supply component of the overall response varied significantly due to a variety of constraints: access to roads, the lack of prepositioned supplies in the country, the lack of agreements with local suppliers (including the national central warehouse responding to UN international standards), and the need to work with the UNICEF Copenhagen procurement centre. Internal difficulties within UNICEF HCO in relation to procurement and tendering procedures and among Haitian counterparts also significantly affected the speed of supplies. The decision to separate small purchases and large purchases was an additional impediment. The recovery phase was significantly hampered by the rainy season and the blockade of the bridge in Jeremie, in addition to the difficulties getting convoys out of Port-au-Prince.

2.6. To what extent has UNICEF been able to adapt its response to the changing needs on the ground? UNICEF was able to adapt relatively well to changing situations thanks, among other things, to the capacity of the UNICEF Representative to take risks and the immense dedication of staff during the emergency phase. UNICEF responded to emerging needs (in Health, WASH and Protection) in a flexible and agile way and managed to maintain a high level of relevance. Using this agile and often ad-hoc approach rather than attempting to stick to static plans,⁶⁸ UNICEF HCO managed to respond relatively well to the emergency. It became more complicated to adjust during the recovery phase due to the contracting out of work to NGOs and firms, and the delegation of work to the national authorities.

2.7. What role has innovation played in needs assessments and the response? The decision to immediately provide financial support for the deployment of Haitian emergency medical teams and to support them with logistics and catering was highly beneficial as it was faster, cheaper and, institutionally, more adapted to the most urgent needs of the population than international Emergency Medical Teams (EMT).

The support to mobile medical teams in the days immediately following the earthquake was also original in channelling the funds through the MoH. Another useful innovative approach was the work on information gathering and communication with the U-Report system. This is a system that is able to mobilize young Haitians in a very dynamic and creative way so that they are able to take action in favour of their communities, in particular through their presence, and through the use of social networks, such as Facebook or Instagram.

2.8. Did the humanitarian assistance have any unintended consequences (positive or negative)? The situation created by the earthquake gave Haiti some visibility within the aid agenda and increased the level of resources that it received. This did not last long, in particular due to the deteriorating situation and growing needs in other parts of the world. There were a lot of expectations within the population, and among national and local stakeholders and NGO partners which were not always met, such as the rapid reconstruction of schools or the rehabilitation of hospitals. This caused some frustration which was partly mitigated through dialogue and working closely with local actors to find solutions. On another level, a serious concern remains the extent to which the office was able to maintain business continuity for the other programmes in the other parts of Haiti and to simultaneously manage two crises: the earthquake and the urban crisis in Port-au-Prince.

⁶⁸ <https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwjhh4H-OfL4AhUUJMAKHZekAoEQFnoECBYQAQ&url=https%3A%2F%2Fwww.clear-plan.co.uk%2Fnews%2Fhow-to-move-from-static-planning-to-active-planning&usq=AOvVaw3IEeKNbO1cAVuGoiOICnGQ>

6.3. Efficiency

The evaluation ToR did not address the efficiency of UNICEF's response, which would imply a lengthy costing exercise and comparisons with alternative implementation approaches. However, given that some decisions did raise the issue of efficiency during the RTE process, the evaluation team decided to give it some attention. The main efficiency question was related to procurement: what became known as "*gros achats/petits achats*" (small purchases/big purchases). The decision was made to split supplies into two lines. One line was managed by UNICEF (big purchases), which concerned large quantities, and was supposed to bring economies of scale and savings. The other was managed by partners (small purchases) for the smaller inputs that were supposed to be procured locally. However, the 'big purchases' were often delayed and local partners had to use their 'small purchases' envelopes to cover for these delays. As a result, the expected economies of scale did not take place and it created a lot of obstacles and tension between UNICEF and its partners. In general, however, UNICEF's partners (past and present) have a positive perception of UNICEF's efficiency. The organisation was able to sign new contractual agreements within four weeks, including with local NGOs, some based in the southern peninsula. However, partners and staff within UNICEF highlighted long delays in payments that sometimes took weeks or even months. This is very slow given that the context had been declared an L2.⁶⁹ Although UNICEF provides various tools and mechanisms to speed up this process as part of the L2 declaration, organizational issues within the HCO, including the fact that, due to the COVID-19 pandemic and the insecurity in Port-au-Prince, many staff were still working from home, the absence of key staff during the emergency response and the limited level of knowledge of L2 processes hindered the smooth functioning of the administrative processes. As such, the surge was appreciated by all. However, many surge staff did not arrive in the country as fast as expected for an L2 emergency despite the speed allowed by the L2 SOPs. This was due to language constraints (the need for French-speaking staff), the fact that the Emergency Response Team (ERT) members were teleworking both within and outside Haiti, and COVID international air travel restrictions (fewer flights, testing requirements, and people from the rosters tested positive).⁷⁰

Field teams felt they were not sufficiently aware of new arrivals and received too little feedback on information sent to Port-au-Prince, causing serious coordination, duplication issues and inefficient use of this rare resource: the human factor. The HCO HR team, for its part, had significant challenges obtaining responses from staff who had requested surge support. This difficulties in communication made the preparation of required Terms of Reference (ToR) and to activate the administrative process to get the surge support caused significant delays. Field teams would have liked to have more administrative support, (for example, for lodgings and transport) even though the HR Department in Port-au-Prince did its best to ensure that surge and other supporting staff (SBP, etc.) were systematically provided with support in making travel arrangements, hotel reservations and in-country transport arrangements (UNHAS flights etc.) or in some technical areas (data collection and management), especially during the first weeks. The rapid changes in assignments, the sudden arrival of surge staff, and the exhaustion of staff prior to the earthquake meant that additional flexibility and adaptation were required, which some perceived as not being humanly possible. Funding was very quickly made available but not easily accessible to technical staff due to time consuming internal procedures despite the L2 Standard Operating Procedures (SOP). However, the Budget Officer rapidly created an excel sheet to update the UNICEF Representative and all senior staff on a daily basis. A later inventory showed that there were significant quantities of relief goods in the stocks but, according to some interviews, The importance of having the full picture of combined existence of stocks available with UNICEF and its partners as well as a proper understanding of the possibilities of local purchase was not fully understood across the response team.

⁶⁹ Interview with UNICEF partners in the field

⁷⁰ Interviews with UNICEF staff in Haiti and with other who were deployed as part of the surge

The fact that UNICEF did not have an established presence/office in both Jeremie and Miragoane resulted in a lot of time and logistical resources to be used to move from Les Cayes to the two other departments., This significantly held up the response in these two departments and compromised the quality of the monitoring that took place, while increasing transaction costs. This negatively affected UNICEF's efficiency. In several interviews, the different operational choices made by UNICEF (direct implementation through NGOs, ministries or private companies) were seen as having had different levels of efficiency. Yet, UNICEF direct interventions often had limited efficiency but gave a high visibility to the institution.

6.4. Coverage:

THE NEED TO REACH MAJOR POPULATION GROUPS FACING LIFE-THREATENING SUFFERING WHEREVER THEY ARE.

Overarching RTE Question 3: To what extent was the affected population, including vulnerable girls and boys, displaced persons and persons with disability, adequately identified, targeted and reached by UNICEF and its partners?

Immediately after the disaster, UNICEF targeted 'affected people' in general rather than any specific categories; victims of the earthquake, regardless of any other parameters. Triage was carried out on the basis of the seriousness of individual cases. Most of the post-disaster assistance targeted infrastructure such as schools and water facilities. Only specific programmes, such as child protection, support to lactating women, dedicated cash transfers and the distribution of school kits included targeting criteria, although the level of poverty in rural areas is such that almost all children were in need.

RTE sub-question

3.1. How successful has UNICEF been in reaching the most vulnerable groups (communities in hard-to-reach areas; IDPs; people with disabilities; unaccompanied/separated children; pregnant women etc.)? UNICEF had relatively limited success in reaching the most vulnerable groups during the emergency phase due to the scale of needs and the fact that national structures were inadequately staffed and equipped to deliver. During the recovery phase, UNICEF targeted communities rather than specific groups. The only area with specific targeting was protection.

Before the earthquake, UNICEF had opened an office in Les Cayes and scaled it up with unspent Hurricane Matthew funding, and then had subsequently scaled it down due to financial limitations. After the earthquake, the office had to be rapidly upgraded in order to ensure that it could serve as an operational hub to facilitate the work of all actors, including line ministries who had response capacities in place. The fact that most of the images of earthquakes are related to "urban contexts" made it difficult to assess the impact of the earthquake from the airborne information gathered during the initial "fly over missions". This significantly slowed down the understanding of the scale and magnitude of rural disaster affecting the Southern Peninsula. This meant that the situation in many hard-to-reach areas was discovered only later.

3.2. How successful has UNICEF been in ensuring youth participation during the response? UNICEF was relatively unsuccessful in promoting the participation of young people. Its main achievements were related to the U-Report system. Youth movements are often weak, with limited resources in contexts like Haiti where there is severe poverty. Indeed, the involvement of young people in CSOs and U-Report activities is remarkable in a context where survival is often a daily battle.

What is U-Report ? (<https://haiti.ureport.in/about/>)

Developed by UNICEF, the U-Report is a free and anonymous online tool. It encourages young people to become active citizens using surveys sent to their phones, via Facebook Messenger. U-Report makes young people take part in social and political dialogue via surveys about their daily lives, the issues that they face and their expectations. U-Reporters defend their rights and share their point of view with the general public, the media and political decision-makers. U-Report is a tool for informing, raising awareness, mobilising and encouraging the engagement of young people. It has three platforms : a technical platform that allows questions to be sent to the U-Reporters' telephones using Facebook Messenger ; a website where survey results are shared in real time with the general public and informed audiences (the media, public authorities, political decision-makers, etc.) ; and Facebook social network which provides a platform for discussion and information sharing between the community of U-Reporters and the general public.

6.5. Connectedness:

THE NEED TO ENSURE THAT ACTIVITIES OF A SHORT-TERM EMERGENCY NATURE ARE CARRIED OUT IN A CONTEXT THAT TAKES LONGER-TERM AND INTERCONNECTED PROBLEMS INTO ACCOUNT

Overarching RTE Question 4. To what extent is UNICEF's response contributing to longer-term goals of preventing future emergencies, mitigating the negative effects of future natural hazards (resilience/sustainable solutions) and enhancing preparedness?

Recovery considerations still have to be incorporated into planning and relief interventions

UNICEF's contribution to linking relief, rehabilitation and development (LRRD) varied significantly depending on the sector. It engaged significantly with the relevant national line ministries and their focal points at the department level to ensure that its own recovery planning was in line with national strategies. It should be noted that it did not engage to the same degree with municipalities, and therefore was not integrated into communal recovery plans.

RTE Sub-question

4.1. How successfully have recovery considerations been incorporated into planning and relief interventions? Activities for the recovery phase were in many instances planned as a continuation of the emergency response implemented through NGO. These now need to be reviewed and oriented towards supporting national and local institutions to recover and strengthen their operational capacities. For example, by providing department-based institutions the means to supervise their activities and to plan for their future operations was a key element in that direction. A critical element was the series of attempts to develop exit strategies for most of the response projects. This was particularly important as many of them were due to end in the coming months. For instance, in the WASH sector, how to develop the access to water after the end of the water-trucking programmes? In education, the critical issue was what to do to ensure that education can take place in shelters more durable than tents. The health sector poses many "post emergency issues": Health facilities still had medical supplies when the RTE mission took place in May, but there is no clear plan for what to do when the funds dry up. In addition, how to incorporate "disaster preparedness" as part of the recovery efforts ? Some tents distributed to health facilities have not been used and could be re-assigned or stored in more appropriate places (COUD, UNICEF warehouse) for further use in case of a new disaster. Other tents are still in use by other organizations but not in optimal condition and will require longer term alternatives..

4.2. To what extent is UNICEF's response specifically contributing to improving the resilience of local government systems and their capacity to prepare, respond and mitigate the effects of an emergency? UNICEF did not engage with the municipalities in the affected areas, according to the 3 meetings with mayors and municipal councils organized during the RTE. Yet, UNICEF engagement with local representatives of the central ministries of the 3 Southern Departments worked relatively well. Yet , the impact of these collaborations will have only a short duration if they are not sustained over time as improving institutional resilience takes time.

By providing logistical support and resources for the initial response, UNICEF helped national actors to improve their response. In terms of crisis management, UNICEF engaged significantly with the DGPC at both the central level (COUN) and the departmental level (COUD) by supporting their coordination efforts. It also involved the COUD in some disaster preparedness training for school personnel.

PHOTO N°11: EFFORTS TO MAKE SCHOOLS EARTHQUAKE RESISTANT

4.3. To what extent has the response created the condition on the ground to contribute to the humanitarian development nexus? UNICEF was reasonably successful in linking relief, rehabilitation and development (LRRD), but this varied significantly depending on the sector. In WASH, the move away from costly water trucking and the engagement with the OREPA to rebuild destroyed or dysfunctional Systèmes d'Approvisionnement en Eau Potable (SAEP) with more durable materials is significant. The limiting factor here was UNICEF's insufficient engagement with communities. In the Health sector, there were three LRRD issues:

- 1) the rehabilitation of health infrastructures;
- 2) how to make the mobile clinic system sustainable, so that it can be reactivated in the event of a shock; and
- 3) psychosocial and mental health care for traumatized individuals, in particular children and women.

Regarding this last point, the lactating women programme is a great success. In the Education sector, the shift from temporary schools to semi-permanent ones and then to permanent ones is still a subject of much debate with the MNEFP. Another issue is adapting the curriculum to include DRR and climate change. LRRD has been more limited in the Protection sector due to the weakness of the Haitian state in this area. There appears to have been some tension between UNICEF and WFP regarding school reconstruction. UNICEF was promoting local reconstruction, while WFP adopted a construction method using prefabricated building elements from Port-au-Prince that were simply assembled in the south, thus leaving little room for the involvement of local builders or the local authorities. One area where there is potential to improve the links between emergency relief and development aid is cash transfers, by building on the changes that have already taken place since the earthquake (HCT specialist on board, training for HCO staff, etc.).



Programming for the post-earthquake rehabilitation

The programming for the rehabilitation phase was based on a series of documents:

- The Post Disaster Needs Assessment (PDNA), in which UNICEF invested significantly through the deployment of a highly experienced Surge Team (Education and WASH in particular), and which was published in November 2021;
- The resulting Plan de Réhabilitation Intégrée de la Péninsule Sud (PRIPS), published in February 2022 and launched during a pledging conference;
- The 3-6-9 Strategy (the strategy for 3 months, 6 months and 9 months periods after the earthquake), which clearly indicated four key pillars for the reconstruction: a roof for all families, a return to school, access to basic social services (health, wash, social support) and a return to food security. UNICEF has an obvious role in at least two of these pillars.

Nutrition

The nutrition response started early after the earthquake at the central level and within weeks at the departmental level, both in new areas and by strengthening existing UNICEF-funded activities in areas where UNICEF was already present. In order to link humanitarian aid and development, UNICEF provided children with food supplements produced in Haiti, rather than being imported. In the past, food distributions have been seen by some as undermining local producers, restaurants, and canteens. To limit dependency on imported RUTF and specialized artificial milk, UNICEF has actively promoted breastfeeding with the Ministry of Health and WHO. At the same time, it maintained programmes to assist the limited number of malnutrition cases among under-5s. The Global Nutrition cluster also provided training in nutritional emergency activities that the Ministry of Health was not familiar with. As a result, the Ministry of Health decided to simplify several registration forms so that it can react faster in future emergencies and be more efficient in non-emergency situations. The Nutrition Department wants to be better prepared for future crises, and wants to organize a lessons-learnt session, prepare a more operational contingency plan, design simple assessment forms and assess the resistance of buildings where Nutrition staff work. Training on feeding infants and young children in emergency situations⁷¹ was organised by UNICEF to support the MSPP, with input from the Global Nutrition cluster Technical Alliance. At the sites visited during the RTE, the evaluation team observed the ease with which mothers (and sometimes fathers) were able to speak about how their behaviour had changed thanks to health education and psychological support. The main strategy to maintain the timeliness and quality of activities was the funding of *Agents de Santé Communautaire Polyvalent* (Multi-purpose Community Health Workers – ASCP). However, there were significant difficulties in coordinating with government counterparts involved in Nutrition. This caused significant delays and slowed down the implementation of UNICEF's nutritional response on a number of occasions.



PHOTO N°12: HEALTH AND NUTRITION CONSULTATION

⁷¹ ALIMENTATION DU NOURRISSON ET DU JEUNE ENFANT DANS LES SITUATIONS D'URGENCE (ANJE-U)
https://www.nutritioncluster.net/sites/nutritioncluster.com/files/2020-08/IYCFE%20Capacity%20mapping%20toolkit%208th%20May%202020_FR.pdf

Education

Beyond the relief phase, UNICEF was involved in the Education recovery programme designed by the Ministry of Education and Professional Training, as designed by the Ministère de l'Education National et de la Formation Professionnelle (MENFP). The recovery strategy included three phases: the first, for short-term needs, represented 43% of the budget (17,256 million HTG), the second, for medium-term needs, 30% (12,276 million) and the third, for long-term needs, 27% (10,750 million).



PHOTO N°13: TRANSITIONAL SCHOOL

Financing the education sector: a key challenge for the Ministry of Education and Professional Training (MENFP)

The financing of education in Haiti remains a great challenge. In the government's budget, only 13.3% is allocated to the functioning of the MENFP, whereas in 2016 the budget was 20%. If we analyse the rectified budget for 2020-2021, of the 12.9% of the budget that was allocated to the MENFP, 9.4% was destined for the payment of personnel, with almost nothing left over for investment. The MENFP tends to rely on investment from outside sources. Even the National Education Fund (FNE), which was created by former president Michel Martelly, is exclusively made up of funds from the Haitian diaspora. In its three years of operation, the FNE has invested more than 5.5 billion Haitian gourdes in efforts to increase access to education. It should also be noted that at the national level, the Digicel Foundation has also been financing school construction since 2007. After the earthquake, it announced that it would invest 1 million US dollars in the reconstruction of destroyed schools. Meetings with the heads of the three DDEs showed that UNICEF's funding is very significant and its support for reconstruction is very much appreciated, especially as UNICEF is one of the few partners to agree to build schools in places with extremely difficult access. Currently UNICEF is rebuilding 38 schools in the three affected departments, while the PDNA report revealed that 1250 schools had been damaged as a result of the earthquake. As mentioned by the Minister, Nesmy Manigat, the Education system is in a state of emergency as many children are still receiving education in tents, while the MENFP has not received the funding that it had been promised by certain partners, without counting the Martissant blockade. There is a real need for funding in the Grand Sud and particularly for the reconstruction of schools

It is true that, financially, the state does not have the means to invest more in education. However, from the beginning of the earthquake, the government has been actively involved in collecting data and inspecting buildings. The reports and interviews conducted show that there is some ownership of reconstruction and psychosocial support projects. However, it should be noted that there are constraints to effective ownership.

Apart from the problem of financing reconstruction, there is also the problem of financing the quality of education, which goes far beyond the earthquake response. On the ground, the problem of accessibility and availability of teachers was also raised. For example, in remote areas, it remains a great challenge for the state to have teachers, let alone competent and qualified ones. When visiting the school in Bélance in the commune of Beaumont, a teacher who teaches in tents mentioned that most of the teachers come from the town of Beaumont.

When it rains, they are unable to come because they do not have the means to travel. In such a situation, for the 6 classes, there may be two teachers living near the school to teach these children. Even the headmaster cannot get to the school when the road conditions do not allow it, let alone inspectors who ensure that the education provided is of a sufficiently high quality.

In the context of the reconstruction, the MENFP plays an important role in selecting the schools to be supported by UNICEF. Within the MENFP, there is an engineering department that is responsible for supervising school construction. The departments of Nippes and Grand'Anse have engineers on site. However, in the southern department, there is no engineering school. Officials from the Departmental Directorate of Education (DDE) have to rely on engineers attached to the MENFP central office in Port-au-Prince, who also have to receive a per diem from UNICEF in order to be able to return to the department to provide supervision in conjunction with UNICEF engineers.

During the evaluation, a number of questions were raised about the effective ownership of the UNICEF project by the government and other community actors: during the meeting with the Nippes DDE, officials expressed their concern about the number of classrooms to be built, since the Bernard reform⁷² provides for nine classrooms, whereas the UNICEF project aims for six. It is understandable that there was no real debate on the management's needs in terms of the number of classes. Moreover, the criterion of 100 pupils per UNICEF school was questioned by Nippes DDE insofar as some schools had reached 100 pupils before the earthquake and that following the earthquake, some parents who were afraid of the building decided to put them in other schools further away. These children could well go back to their local school. Another issue that was raised was the problem of fencing. When it rains, animals go into the courtyard and classrooms. People in the community may also use the space inappropriately as there is no barrier. This can also be a serious problem in terms of security, maintenance and sanitation. The DDEs of the South and Grand'Anse departments placed a lot of emphasis on the sustainability of the constructions and the setting aside of the FNE construction plan. The DDEs mentioned their concern about the semi-permanent nature of the schools to be built. It seems that the dialogues between the different stakeholders regarding the choice of construction model (UNICEF versus FNE) did not lead to a real consensus about the model that would be more sustainable and adapted to the recurrent hydrometeorological events in the Grand Sud region.

In order to help school children overcome psychosocial problems linked to trauma after the earthquake, UNICEF trained trainers who will now be able to train teachers. However, UNICEF mentioned its concern about the quality of the training in the sense that the trainers did not necessarily know how to transmit the messages and they were not adequately prepared to assume such responsibilities.

6.6. Coordination:

THE SYSTEMATIC USE OF POLICY INSTRUMENTS TO DELIVER HUMANITARIAN ASSISTANCE IN A COHESIVE AND EFFECTIVE MANNER

Overarching RTE Question 5: How effectively and efficiently has UNICEF coordinated its response both internally and externally (with key entities such as other UN Agencies, CSOs and development partners, national and local governments)?

Internal coordination

In Haiti, this was done through a very time-consuming series of meetings within the HCO, between HCO and UNICEF les Cayes office. In addition, frequent meetings between HCO, LACRO and HQ were organized. "Coordination meeting fatigue" was mentioned in several interviews, as many of these coordination meetings were more about "information sharing" than "operational coordination".

⁷² [HAITI_ESP_Sept_2007.doc_\(unesco.org\)](http://HAITI_ESP_Sept_2007.doc_(unesco.org))

External coordination

UNICEF's successes in supporting coordination processes were due to several decisions and actions. First, it integrated lessons from 2010, by supporting rather than trying to stand in for the government's lead role in the response. Quickly after the earthquake, it very strategically embedded one person in the Les Cayes COUD, while maintaining close collaboration and supporting the General Directorate of Civil Protection (DGPC). This was highly appreciated by the authorities and gave visibility and inside information to UNICEF.

The Civil Protection Directorate acknowledged the good work done in preparing the National Contingency Plan but also found that it focused too much on extreme climatic events, and too little on earthquakes. The assassination of the President five weeks before the earthquake, the absence of a functioning Assembly and Senate, the firing of the Chief Prosecutor and an illegitimate PM, combined with limitations to movement and gatherings, meant that all the ingredients were in place for coordination to fail.

However, the Civil Protection Agency as well as all the senior technical positions in the ministries remained operational. The COUN was strategically positioned at the centre of coordination before the earthquake. When clusters are activated, their coordination system normally involves two co-leads (one UN agency and one NGO). In Haiti, in the absence of cluster activation, the lead position was assigned to specific line ministries or designated Departments. This was not always easy, and it delayed the initial response due to many logistical and staffing difficulties on the Haitian side. With time, though, it was generally effective in avoiding critical gaps in the response and in reducing duplication. UNICEF immediately assisted technical departments at the central and department levels in coordinating and sharing information respectively under the auspices of the COUN and COUD. All the interviews in Port-au-Prince and the three departments confirmed that this coordination was effective and that UNICEF's role in it was widely appreciated. UNICEF's fund-raising efforts were, unfortunately, only partly successful. This is one area where the "coordination/competition" between agencies can raise tensions. The high level of competition for funding and visibility between UN agencies limited the synergy that would be expected from a "One-UN" approach. This was particularly apparent in communication and fundraising activities. UNICEF collaborated with UN agencies for many activities in the field and at the technical level (WFP, OCHA, HC/RC, UNFPA, WHO, UNDSS). The Nutrition Department of the Ministry of Health perceived UNICEF as a key partner thanks to close relations and trust built up over years of cooperation. UNICEF was Nutrition cluster co-lead.

RTE Sub question

6.1. How effectively has UNICEF balanced its 'internal' operations with cluster coordination/leadership responsibilities? To what extent are considerations of comparative advantage applied in designing and implementing the response and, as applicable, recovery efforts? UNICEF was a key player in coordination during the emergency phase at the National and les Cayes levels and, to a lesser extent, in Grand'Anse and Nippes, both generally and in its thematic areas of responsibility. The lack of data collection capacity within UNICEF prior to the earthquake and the lack of administrative support to the field team made the task of systematically producing factual reports challenging. However, unstructured information was rapidly shared through multiple channels and reflected in the media. Luckily, the responsibility to supervise UNICEF's contribution to the Post Disaster Needs Assessment (PDNA) was assigned to one specific team. This helped to highlight the position and role of UNICEF relatively well.

6.2. How well did UNICEF support the government at different levels (districts, city, provincial, central) in coordinating the response? UNICEF support to the different government levels varied a great deal. The government decided that the cluster system would not be activated. However, UNICEF's financial and logistical support to coordination at the central and departmental levels was very effective and widely recognized. UNICEF's decision to accompany the government rather than act in its place, meant that there was a quick start, appropriate actions were taken, and synergy with the Civil Protection Agency and the line ministries. There were, nevertheless, some tensions. For instance, national and local institutions shared their frustration on the issue of assistance in the IDP sites as this assistance to IDP site was against national policy. They indicated that they could have interrupted the activities on the sites, which they did not do for humanitarian reason. They also mentioned that if they had been involved at the beginning, they would not have accepted semi-permanent constructions, because within two or three years the wood and plywood will be damaged by rain, and they would have opted for concrete block construction. During the field visit, the RTE team met with several *municipal* authorities (Les Cayes, Chantal, Jérémie) to understand their involvement in the response to the earthquake. It appears that the people in charge were not contacted, even though local authorities are the gateway to a town and know the local context very well. Their ownership of projects being implemented in their community is essential. They were very appreciative of the work done by UNICEF.

6.3. How effective was the CO in coordinating the setting up and the development of new operational stations at the height of the crisis? The CO provided sufficient resources to strengthen the Les Cayes office, but little was done to create a proper UNICEF presence in Grand'Anse and Nippes. Logistical issues in Jeremie, due to the inability to cross the river, and the fact that Miragoane was largely untouched (while the rest of the department was badly hit), were frequently mentioned to explain this situation. This of course meant that UNICEF was less visible and less involved in the operational follow-up and the dialogue with the authorities.

6.7. **Equity (GENDER AND DISABILITY)**

Overarching RTE Question 6: To what extent have gender and disability dimensions been integrated in the needs assessment, and in the planning, implementation, monitoring and reporting of the response, as well as in recovery planning? A part from the “all victims” approach taken during the emergency phase and specific programmes established for the recovery phase, gender and disability dimensions were not central to the design of the response.

RTE Sub question

7.1. What are/were the specific gender and equity dimensions of the emergency? What particular challenges or good practices have arisen in working with vulnerable groups? In Haiti, women and children are often victims of violence of different kinds and require proper protection. UNICEF had to develop a specific approach to manage these issues properly. This entailed working with specific national institutions and specialised NGOs. The strong presence of women within UNICEF teams was also an important asset.

7.2. Were activities and practices (including assessments, innovations etc.) implemented based on ethical principles (respect for autonomy, beneficence, non-maleficence, justice)? The RTE team did not find many traces of new activities specifically based on ethical principles, although the teams involved in child protection and Protection Against Sexual Exploitation and Abuse (PSEA) did their best to protect individual data.

7. LESSONS LEARNED

A series of lessons have been identified:

Lesson N°1: Humanitarian assistance has the greatest impact when local/national authorities are leading the operations (related to the DAC criterion of 'relevance')

This earthquake's impact was smaller than the 2010 earthquake. It was not part of the international headline news, and therefore there was much less pressure to step over state institutions, as seen in January 2010. Nonetheless, it is important to mention that UNICEF took into account some of the 2010 earthquake evaluation⁷³ recommendations by accepting that the national institutions should have the leadership of the response. National institutions lacked financial means, supplies, staff and advanced technology, but their technical capacity, legitimacy and knowledge of the affected population helped to make UNICEF's response meaningful. UNICEF's response had some limitations and sometimes was delayed by national decision-making processes (particularly in Nutrition). However, in general, it was very relevant as it was fast and appropriate over the period under review (see EQ 1.1) and was adapted to needs due to being more embedded in the government response than in previous events (EQ 1.7). It was also in keeping with humanitarian principles (EQ1.8).

Lesson N°2: Humanitarian assistance has the greatest impact when the population, local grassroots organisations and community-based organisations are involved (related to the DAC criterion of 'effectiveness')

Actors at the local level have an appropriate understanding of the context, the impact of the earthquake, the population's needs and the true capacities of the local responders. Several local authorities are disconnected from politics and are well rooted locally, which enhanced the relevance and effectiveness of post-earthquake relief (DAC criteria). UNICEF's response benefited from the involvement of local people and organisations on a number of occasions: the reactivation of the U-Report system (EQ 1.3); the establishment of a local office prior to the events (EQ 1.4, 2.2); the presence of local stocks of supplies (EQ 2.2); by supporting local assessments (EQ2.1); by supporting local mobile health response teams (EQ 2.2 health); immediate water trucking (EQ 2.2); and deep involvement in decentralised entities like IBERS (EQ 2.2 Child protection). In addition, the mobilisation of these local capacities was essential for the short-term response and will continue to be for the longer-term recovery and the chance to develop proper disaster preparedness. The lesson is also identified as to reduce some of the limitation in the field presence (EQ 6.1) or to stimulate closer involvement with municipalities (EQ 6.2. in the future).

Lesson N°3: Field and institutional presence is effective to ensure proper preparedness and response (related to the DAC criteria of 'effectiveness' and 'efficiency')

The decision to strengthen the Les Cayes office (EQ 2.2) and to facilitate UNICEF's temporary presence in Jérémie and Miragoane was key to the success of the response.⁷⁴ It allowed for stronger links with local actors and better accountability to the affected population. It also helped to enhance UNICEF's position vis-à-vis media exposure. The decision to further strengthen and increase the authority of the local office will improve the efficiency and effectiveness of recovery programmes. The existence of field offices and the embedding of staff in the Civil Protection Agency and in line with the ministries should not depend on the availability of emergency funding.

⁷³ 2010 earthquake evaluation

⁷⁴ Interview with COUD, DDE; DDS, OREPA in Les Cayes, Jeremie and Miragoane as well as with UNICEF staff and local NGOs

It should be an integral part of the development programme in a country where the agenda is likely to be driven by socio-natural crises for the decade ahead.⁷⁵ (EQ 4.3 nexus) However, after six months, there was no longer a field office in Jérémie or Miragoane (due to lack of means), which hampered UNICEF's field work. UNICEF's major success in terms of response (direct assistance in the field, coordination) was due to the dedication of its staff (EQ 2.6) and their ability to react quickly and take advantage of opportunities when they arose despite fatigue and frustration due to the absence of key staff and tensions resulting from the high demand from the leadership (EQ 2.2 use of L2, staffing).⁷⁶

Lesson N°4: CCC, L2, and other procedures are clearly very useful mechanisms (related to the DAC criteria of ‘effectiveness’ and ‘efficiency’)

The L2 activation facilitated the response a great deal. Although known only in a limited way, CCC was regularly quoted as a useful framework for UNICEF staff,⁷⁷ and planning with the CCC indicators will help to improve future Country Programme Documents (CPD). However, this will require more than additional regular training. It will require the development of simulation exercises, especially for administrative staff who are responsible for managing resources effectively. The L2 activation requires timely technical assistance from the RO to ensure the quality of UNICEF's emergency response (EQ 2.2 L2 box, ccc). The difficulties that the CO encountered in sharing an Emergency Response Plan, despite repeated requests from RO/HQ, were due to the complexity of developing a plan in an extremely fast-changing situation where there is a lack of reliable information. This nevertheless led to a number of missed opportunities. It hindered the capacity of RO/HQ to provide proactive technical support, to properly support effective fundraising efforts, due to lack of information about the CO's plans for the response. This also limited the capacity of LACRO and HQ to develop strategic/political interventions.⁷⁸ Many activities were implemented in the field, but mostly on a reactive and ad-hoc basis. The CCC, L2 and SOPs were too little known by the staff to be immediately implemented.⁷⁹ The humanitarian programme monitoring tool did not perform as well as expected. The ability to regularly update the warehouse inventory were available within UNICEF and its partners. Local purchase possibilities were at the disposal of all required personnel in order to reduce expensive and delayed procurements and increase local purchase of supplies and services.

Lesson N°5: the central role of information management and M&E (related to the DAC criteria of ‘effectiveness’ and ‘relevance’)

Information is critical to institutional positioning, fundraising, and coordination. For the first two weeks, UNICEF did not perform too well as many key staff were absent (EQ 2.2 staffing). The Flash Appeal was launched rapidly, and UNICEF contributed, but the quality of data was perhaps not very high (EQ 2.1). Each sector needs to work with their counterparts to prepare the collection of rapid assessment information together. However, in order to ensure that the HCO could count on a strong M&E team, the latter should not only be a “reporting tools” but a “programme steering instrument” with clear warning systems and real-time transmission of information to decision-makers. The sectors (technical teams) and administration/operations greatly contributed to the office M&E processes but the design of the system limited their contributions for programme management. The absence of a data manager and the lack of administrative support for the first response team overburdened staff who had to simultaneously manage the response, provide accurate information and participate in complex ad-hoc coordination activities.⁸⁰

The absence of the Programme Coordinator (Deputy Representative) further complicated the issue. Similarly, recovery was not sufficiently included in relief planning, (EQ 4.1 and resilience 4.2)

⁷⁵ Discussion with DGPC, CIAT, UNDP, RCO and donors

⁷⁶ Interview with Haitian authorities at the central and department levels, as well as with UNICEF staff

⁷⁷ Several interviews with UNICEF HCO staff

⁷⁸ Interview with LACRO, HQ and staff deployed as part of the surge

⁷⁹ Interviews with HC and surge staff

⁸⁰ Interviews with UNICEF HCO staff and with staff deployed as part of the surge

Lesson N°6: Financial management (related to the DAC criterion of ‘efficiency’)

There is a need to have a proper grant management system in place, under the Deputy Representative, from the beginning of operations. All this financial information is available in UNICEF’s internal tools (“insight” and “VISION”), but there was insufficient capacity in the HCO to do everything that needed to be done. Funds that were available within the UNICEF system were not used. Many Section Chiefs did not know how to manage their budget well enough in order to reallocate funds to other (emergency) programmes and necessary guidance was not provided due to the prolonged absence of the Deputy Representative for Programmes. There was not enough internal training on how to manage budgets for grant management to take place. This information gap within the HCO led the CO management to continuously request more funds (criteria 6.3 ‘efficiency’).

Lesson N°7: Two critical ingredients for a good response are staff and a functional organigram (related to the DAC criteria of ‘efficiency’)

The absence of the four most senior members of the office was addressed through a number of effective and opportune decisions, especially by the HCO leadership (EQ 2.2 staffing).⁸¹ This was made possible with the immediate reallocation of HCO staff and the arrival of surge staff within a few days from other parts of the organization (many people were outposted from their normal location for a few weeks) (EQ 2.2 Staff surge). However, the limits of short-term staffing quickly became apparent and the strategy moved towards longer-term staffing in the Les Cayes office. Staff returning to the country were reassigned to tasks that were not part of their normal functions/responsibilities if these were being done by surge staff. The surge was highly effective but could have been much more efficient with a longer-term vision based on previous emergency response activities.

Lesson N°8: Coordination is an essential component of a relevant, agile and effective response (related to the DAC criteria of ‘coordination’)

From the onset of the crisis, the UN Resident Coordinator and Humanitarian Coordinator indicated that UN humanitarian coordination efforts should support the primary role of the national authorities, based on previous evaluation reports and humanitarian principles. UNICEF fully endorsed this policy and supported the national institutions engaged in their key sectors of activity (EQ 1.7 and 1.8). UNICEF’s performance in inter-agency coordination requires new strategic engagements with WFP (school canteens, nutrition) (EQ 1.6), OPS/PAHO and UNFPA for health system support, with FAO for school gardens programmes and nutrition sensitive support for vulnerable families (DAC criteria: coordination). The government refused to activate the Cluster mechanism. UNICEF was nevertheless responsible for sector coordination in Nutrition, Education and WASH. UNICEF’s role in supporting the national leads at the central and departmental level is widely recognised (EQ 6.1). Other agencies/institutions/NGOS were also involved in this sector-based coordination (EQ 2.2 multi-sector coordination) and most appreciated these nationally-led coordination systems, although their efficiency varied over time and depending on whether it was the central or departmental level. It should be noted that most coordination had to take place online because of the complex context in which the earthquake took place (COVID-19, a political and institutional legitimacy vacuum and insecurity).

⁸¹ Interviews with HCO staff

Lesson N°9: Coordination with the private sector is still in development but could be very useful (related to the DAC criterion of ‘coordination’)

Partnerships with private sector actors, such as DIGICEL, were original and useful (EQ 4.3). Private sector organisations were involved in rehabilitating schools, providing transportation and re-establishing telecommunications, among other things (EQ 2.5).⁸² However, suddenly embarking on new activities, such as construction or Cash-On-Hand, exposed them to significant risks, and should be balanced with partnerships with other UN agencies, such as WFP and IOM (EQ 2.2). The procedures involved had many shortcomings that should be addressed before the next crisis (DAC criteria 6.3 efficiency). Should UNICEF decide it has a mandate in these areas, it should establish a permanent programme to prepare for better engagement with the private sector (for example, by clarifying what ‘good school design’ should be, or how to ensure that WASH teams have the right mechanisms for Cash-On-Hand transactions, for quick repairs).

Lesson N°10: The better the emergency preparedness, the better the response and the higher the impact (related to the DAC criteria of ‘connectedness’)

In a context prone to emergencies, after so many disasters in the recent past, and so many external evaluations and lessons learned, the basics of emergency preparedness were just not sufficiently in place (EQ 2.4), including in terms of supplies (EQ 2.5). This is particularly serious given the growing impact of climate change and forecasts of increased tectonic activities.⁸³ The fact that the country is still insufficiently prepared to respond to emergencies has raised questions about the impact of international efforts in DRR and the fact that too large a proportion of funding goes to response. However, the successful aspects of UNICEF’s earthquake response both at the country level (stock available, DINEPA capacity, the Representative’s relationship with the authorities, the Les Cayes office, etc.) and the support from regional and HQ levels (surge, CCC, L2, SOPs, ERT, etc.) were immediately related to preparedness activities (EQ 2.2, staff surge, field office preparation, L2 declaration, knowledge of CCC, etc.). Likewise, most weaknesses, either internally (administrative processes) or externally (the late discovery of new rapid assessment forms by the government) were related to lack of preparedness (EQ 1.4, 2.2 cyclone preparedness, etc.).⁸⁴ Some can be quickly addressed through lessons learned or simulation exercises or the revision of the Country Programme Document (CPD), but most will require years of predictable investment. This should be included in the next CPD to ensure that training takes place and plans are regularly up-dated. Ensuring that preparedness is included in all programmes in the future in order to facilitate “risk-informed and shock-responsive development programming” would be the best way to contribute to strengthening the resilience of Haiti.

Lesson N°11: The importance of Child Protection, Prevention of Sexual Exploitation and Abuse (PSEA) and all activities related to gender and equity issues

Due to previous issues in Haiti (the OXFAM scandal),⁸⁵ PSEA was given a high profile. All staff had to sign the Code of Conduct. It was made prominent at all levels (HCO, field, COUN, COUD, etc.). The accountability survey launched by UNICEF in the name of the interagency system in Haiti, as well as several U-Report point out at serious concern (EQ 2.2 evaluation sexual exploitation).⁸⁶ Despite many functional difficulties and its relatively low visibility, the dedicated hotline is a major achievement, maintaining the dialogue with all communities in order to attain UNICEF objectives in this area (EQ 1.6).⁸⁷

⁸² Interview with COUD, with NGOs and with municipal teams

⁸³ Interview with CIAT and DGPC

⁸⁴ Interviews with HCO staff and EMOPS staff deployed for the surge

⁸⁵ <https://www.theguardian.com/world/2018/jun/15/timeline-oxfam-sexual-exploitation-scandal-in-haiti>

⁸⁶ Interviews with UNICEF HCO staff and with U-Reporters

⁸⁷ Interview with UNICEF protection officer and with Haitian authorities

Ready-to-eat meals, school kits and recreation kits were dispatched to the field. Recreation kits were specifically allocated to the child protection programmes to create child friendly spaces. In view of the complexity of local procurement and changing needs according to the time of the operation and the location, it was essential to deal properly with Cash-On-Hand (CoHa) processes with a rigorous and flexible approach.⁸⁸ A faster approval process should have been put in place very early in the crisis management cycle. If the regular operation system had been functioning, there would not have been the same problems increasing the speed and flexibility of the flow of cash during the emergency response.

The lesson learned here is that a CO in a crisis-prone context should never have four top managers absent from the country at the same time (the Representative, both Deputy Representatives and the Emergency Manager).⁸⁹ At least two of them should be present in the country at any given time. There is now a relatively strong capacity in Les Cayes, but this will soon be jeopardised if additional funding is not forthcoming, and the capacities of local authorities and communities are not enhanced. UNICEF still has insufficient capacities in the other departments to ensure a meaningful presence.⁹⁰

Lesson N°12: Duty of Care

Staff were, and still are, in a very stressful environment, with insecurity, kidnappings, and difficult economic conditions (DAC Criteria 6.3 efficiency). Staff morale was generally low even before the earthquake. A lot of national and international staff felt the weight of this insecurity. Duty of care issues need to be given sufficient attention and need to be dealt with early, especially in such a difficult environment. Supporting caregivers and responders should be seen as a priority.⁹¹ Attending to children's needs requires well trained staff. The impact of the earthquake generated a sudden increase in demand on staff who were already drained due to security issues (one staff member was killed and one kidnapped prior to the earthquake), COVID-19 isolation and control measures, the reduction in staff numbers due to reduced funding, the absence of a stable government and national counterparts and not knowing if their homes or lodgings were earthquake resistant. Enormous pressure was created, especially for existing HCO staff, due to the arrival of large numbers of surge staff who were not always familiar with Haitian reality, slow administrative processes, changes in assignments, new demands from the regional office and HQ due to L2 status activation, HCO's constant requests for additional funding, management who expected total flexibility and dedication, and the delays before the arrival of staff to counsel surge staff.

Debriefings and discussions with specialists were organised and the two collective debriefing sessions were highly appreciated.⁹² However, there were no proper structures and mechanisms to deal with Duty of Care with clear benchmarks. Regular assessments of the different aspects that contribute to staff wellbeing are needed (economic, security, the impact of home-based working hours, etc.) to ensure that any deterioration can be managed proactively. Regular consultations are needed with staff to monitor their state of mind. There should also be a clear, fully discussed office improvement plan, and a system for staff support (psychosocial counselling). And proper mechanisms to facilitate the flow of information from staff to management are needed (linked to CHS criteria N°8).

⁸⁸ Interview with several UNICEF staff deployed as part of the surge

⁸⁹ Discussion with HCO top management

⁹⁰ Interview with COUD, department-level Haitian authorities and UNICEF staff

⁹¹ Interviews with HCO staff, discussions during the Les Cayes workshop

⁹² Interviews with HCO staff

Lesson N°13: The importance of leadership

The involvement of the UNICEF Representative and their engagement with the UNICEF team, as well as with the Authorities, the UN system and NGOs, was crucial.⁹³ Their engagement with the Haitian authorities was underlined and largely appreciated. Engagement with the UN system was good but sometimes polluted by competition over rare financial resources and fear of mandate encroachment.⁹⁴ The most critical issue for under-pressure management was distinguishing between staff support and micro-management. The absence of key staff at the time of the earthquake made things even harder and should have been addressed much earlier in order to ensure that there was a better response, more predictable operations and more time devoted to duty of care and wellbeing of the staff.(EQ 6.6, 6.5 Criteria 6.3).



PHOTO N°14: YOUTH OF TODAY, LEADERS OF TOMORROW

⁹³ Interviews with UNRCO and with OCHA

⁹⁴ Discussions with several UN agencies and with HCO

8. CONCLUSIONS

This conclusion section is split into two parts:

- The first part concerns high-level strategic conclusions
- The second part concerns conclusions directly related to the specific objectives of the evaluation, in relation to the OECD/DAC criteria.

8.1. High level conclusions

These high-level strategic conclusions have been elaborated to address the objectives of this evaluation described in the TOR (objectives A to F) :

High-level conclusions	Lessons	Comments
A) Despite a variety of internal and external constraints, UNICEF's response to the needs resulting from the 2021 Haiti earthquake in the southern departments was appropriate in alleviating suffering for many Haitians.	Lessons N°1, 2, 3, 5; 7, 8, 9	Should receive due visibility for reinforcing UNICEF credibility in disaster response
B) Many lessons from previous disasters have been taken seriously by both the Haitian authorities and the aid sector including UNICEF. However, there is still a lot to do in terms of preparedness, and risk-informed and shock-responsive development programming.	Lessons N°1, 2, 3	A key role of the national institutions is to ensure that multi-hazard analysis informs better development planning by including risk knowledge in the programming process.
C) Nothing could have been done without the "human factor". Despite all kinds of difficulties, and in a difficult context, the mobilisation of dedicated UNICEF staff, as well as its partners at all levels, was a great example of what is best in international solidarity	Lessons N°11, 12, 13	Staff care should receive due attention. Conflict management systems need to be better placed between management and staff. Proper administrative support needs to be provided when establishing field sub-offices.
D) There are challenges related to funding management and the related accountability between Port-au-Prince and the field offices. This remains a challenge for the coming CPD.		It is the responsibility of each manager (especially Senior Managers) to be well familiar with these institutional tools.(financial management tools, etc.) A more user friendly system needs to be put in place to make sure senior staff are aware of office funds that are available, deadlines and the possible use and better allocation of funding to create synergy between sectors.

Conclusions in line with the evaluation questions		
Evaluation questions	Conclusions	References (EQ, Lessons)
E) Assess the extent to which UNICEF adhered operationally and programmatically to the Core Commitments for Children (CCCs) (TOR b.)	F) UNICEF performances were largely in adherence with the CCC at all levels (strategic, operational, by sector and for cross cutting issues). However, there is some room for improvement in all sectors for the current phase.	All EQ Lessons learned N°1, 2, 3, 4, 7, 8, 11...
F) Examine the extent to which UNICEF effectively responded to the needs of the most affected people in a timely manner and identify gaps and appropriate strategies to improve operational coverage and effectiveness. (ToR c.)	G) UNICEF effectively responded to the needs of the population although to varying degrees due to site specific constraints	EQ...1.1; 1.2; 1.6; 1.7; 1.8, 2.1; 2.2; 2.3; 3.1; 3.2; 6.2; Lessons learned N°1, 2, 3, 4, 5 , 6; 7, 8, 9
G) Assess the extent to which emergency preparedness and organizational readiness have enabled Haiti to respond more effectively to rapid onset disasters, with the objective of identifying the factors hampering/facilitating the response. (ToR d.)	H) Unfortunately, the level of preparedness and readiness was sub-optimal as preparedness efforts for earthquakes were low and many key senior staff were absent from Haiti at the time of the earthquake.	EQ N° 1.5; 3.1; Lessons learned N° 1 ,2, 4, 8
H) Examine the extent to which the Haiti CO incorporated gender and equity dimensions (e.g. communities in hard-to-reach areas; people with disabilities; separated, unaccompanied children, etc.). (ToR e.)	I) While gender and equity dimensions were known about and theoretically incorporated into the response, UNICEF's performance was uneven. Gender and disability dimensions were not central to the design of the response; but there was clear and substantive evidence in relation to PSEA.	EQ N° 7.1; 7.2; 8.1; Lessons learned N° 7, 8; 9; 11, 13
I) Finally, the evaluation is expected to distil lessons and make recommendations for adjusting and improving the response and planning for recovery after sudden onset emergencies. (ToR f.)	Lessons have been presented in the precedent chapter. The following chapter presents the key recommendations for a better, more risk-informed and shock-responsive UNICEF programming for short- and longer-term timeframes	

8.2. More specific conclusions linked to key issues from the ToR:

Objectives of the evaluation as per the ToR	Key conclusion	On the basis of..
E) Determine the appropriateness/relevance, effectiveness, coverage, connectedness and coherence (coordination/partnerships) of UNICEF's response (TOR a)	E) By and large, UNICEF's response met the DAC/OCDE criteria	EQ N°1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.6; 2.7; 2.8; 4.1; 4.2; 5.1; 5.2; 5.3; 6.1; 6.2; 6.3... Lessons learned N°1, 2, 4, 5 ,6, 8,

Relevance

In general, UNICEF's response was in keeping with the Haitian government's priorities. However, UNICEF insufficient preparedness limited the effectiveness of the response. The HCO/LACRO UNICEF response lacked internal cohesion, struggled to reach the most remote rural areas ("most affected populations"), and did not engage directly with communities.

Effectiveness

The extent to which UNICEF achieved its expected results is limited. UNICEF's effectiveness is less related to "achieving intended targets" (non-existent) and more linked to its capacity to engage in a timely manner and energetically in a series of emergency response interventions. This varied significantly depending on the sector and the phase: highly effective during the health, emergency education and emergency WASH responses, but less so during the recovery phase. Improvement is needed in terms of child protection

There were a few barriers and enablers in relation to effectiveness:

- Staffing: At the beginning of the response, a number of key staff, especially in the senior positions, were absent. There was significant pressure on staff, leading to "near burn out" situations.
- The Les Cayes Office provided field presence and opportunities for strengthening coordination.
- Access to information: The challenges with the rapid assessment and multi-sectoral assessment tools and the lack of a consolidated shared vision on what tools to use before the earthquake hindered the early phase of the rapid assessment.
- The L2 Declaration was vital to the emergency response.

The level of effectiveness varied from one sector to the other. Health and WASH proved highly effective. Education was effective during the emergency phase, though less so during the recovery phase due to constraints that significantly held up the reconstruction of the school. As Protection and Nutrition are of secondary importance during the acute phase, the efforts made were sufficient. Of course, protection efforts increased significantly with time.

Efficiency:

Efficiency varied significantly depending on the sector, the phase and the area, depending largely on the respective importance of item supplies in each of the programmes. It is clear that the choice made by UNICEF to work in the most hard-to-reach areas created extra costs and delays and limited efficiency. Some of the direct procurement and implementation efforts did not prove to be the most efficient way to proceed.

Coverage

During the immediate post-disaster situation, UNICEF targeted "affected populations" in general and not "specific categories". Only some specific UNICEF programmes included targeting. Coverage varied by sector and geographic area due to different levels of logistical constraints.

Connectedness

Recovery considerations were not fully incorporated into planning for relief interventions. Yet efforts became more systematic as soon as the emergency needs had received a more sustained response. UNICEF engaged significantly with the relevant national and departmental levels, but not with the municipalities, and UNICEF's LRRD contribution varied significantly depending on the sector. The links between UNICEF efforts in relief and recovery are not sufficiently linked with disaster preparedness.

Coordination

While internal (UNICEF) coordination was not always optimal and was more a case of "information sharing" than "operational coordination", UNICEF's contribution to external coordination was widely recognized and highly appreciated in all sectors .

9. RECOMMENDATIONS

The following recommendations were presented in a preliminary version at an end-of-mission workshop which brought together the RTE team, the UNICEF HCO core team and representatives of the LACRO office. They are presented here in sequence, from short term to longer term.

9.1. Recommendations for the ongoing activities of the rehabilitation phase: (4 main recommendations)

This first set of 4 recommendations relates to ongoing operations (to be addressed immediately). The first column of the table indicates the number of the Evaluation Question the recommendation is based on. The second column provides the corresponding lessons learned number, and the third column provides the letter of the conclusions. The fourth column describes the recommendations and some elements of the pathway to address it. The last column indicates who should implement it.

N° EQ	Lessons	Conclusions	Recommendations	Tar get s
1.7, 2.2;	L1, L2, L5;	A, C, D, E, F,	Recommendation N°1: Ensure more effective implementation by strengthening UNICEF field presence <ul style="list-style-type: none"> Open fully-fledged sub-offices in Grand'Anse and Nippes Ensure proper logistics for these sub-offices and their national local counterparts. 	HCO
1.2, 2.1;	L6	B; C, G	Recommendation N°2: Strengthen the M&E capacity in all sectors and zones by having stronger M&E team and a M&E system more geared towards project steering rather than reporting to HQ and donors	HCO LACR O
1.1, 1.2, 1.4 4.3;	L1	B, D, E, F	Recommendation N°3: Ensure that all programmes achieve their targets in relation to CCC (both quality and quantity): <p>Strengthen Health/Nutrition -</p> <ul style="list-style-type: none"> An agreement with PROMESS to pre-position medicines in the country. Study options in relation to supporting hospital departments with fuel during acute crises. Strengthen the visibility of health/nutrition interventions in Grand'Anse and Nippes. 	HCO
1.1, 1.2, 1.4, 4.3;	L1	B, D, E, F,	Reinforce the WASH sector- <ul style="list-style-type: none"> Ensure strong presence of staff to support the continuation of the OREPA rehabilitation work in the three departments. Fund local OREPA directly to accelerate future fixing of broken SAEP. 	
1.1, 1.2, 1.4, 4.3;	L1	B, D, E, F,	Reinforce Education and child protection <ul style="list-style-type: none"> Advocate for faster construction. Ensure availability of kits before the opening of classes. Ensure involvement of DDE in all interventions (distribution, construction monitoring, etc.). Advocacy to increase the number of IBESR staff present in the Grand Sud, to avoid slowing down certain activities. Advocacy to strengthen the operational capacity of state protection agents and institutions in charge of protection 	
1.1, 1.2, 1.4, 4.3;	L1; L2	D; B, F	Social Protection and Cash Transfer - <ul style="list-style-type: none"> Strengthen the cash transfer response of UNICEF dedicated to support education processes in coordination with other Cash transfer partners. Improve UNICEF's overall cash response capacity in order to better respond to the needs of vulnerable populations, including women with young children and protection cases. 	
1.5	L1, L2, L3,	D, E, G, H	Recommendation N°4: Enhance inter-sector collaboration and interconnection between the different sectoral programmes <ul style="list-style-type: none"> Within UNICEF, by strengthening multi-sectoral team work With others, by engaging more in interagency coordination (with PAHO/WHO, WFP and FAO) 	

The second set of recommendations is related to the urgent need to enhance disaster preparedness in view of the upcoming cyclone season.

N° EQ	N° Lessons	Conclusions	Recommendations	Targets
1.4, 6.1;	L3; L9; L10	B, C, G;	Recommendation N°5: Ensure optimal readiness for the coming cyclone season with a multi-hazard approach. Support the replenishment of emergency stocks at the COUD level. Ensure that there is some stock in water treatment equipment and products, as well as bladders and portable latrines. Ensure that some basic medical equipment and medicine are available in the Grand Sud.	HCO
1.2, 1.3	L1, L3, L4;	D, F,	Organise consultations with the affected population to revise the content of the hygiene kits and ensure that a certain quantity of kits is available in the Grand Sud. Include cash options to make hygiene kits more appropriate (provided that a proper market study is carried out)	HCO
1.6, 1.7,	L1; L3; L4	F , D, H,	Support the institutionalization of the mobilization of national emergency medical teams to support the Ministry of Public Health and PAHO.	HCO, LACRO
1.4, 5.3	L7; L8	A, B, C, E, G, C,	Run training sessions for all staff on UNICEF emergency mechanisms and procedures including the use of Cash-on-hand for the HCO team.	HCO, LACRO HQ

9.2. Recommendations for UNICEF's strategy in Haiti

These recommendations have been tailored to help the UNICEF Haiti Office prepare the next country programme

N° EQ	Lessons	Conclusions	Recommendations	Targets
2.2; 4.1; 4.2;	L1, L2, L3; L4	B; E, G;	Recommendation N°6: Ensure systematic incorporation of Disaster Risk Management in all programmes as requested by CCC: "risk-informed development programming". Systematically ensure an analysis of the risks which can potentially affect programme implementation. Partners must develop, together with UNICEF and MENFP, mitigation strategies to enable activities to be carried out in areas of difficult access to ensure better resilience, preparedness and the prepositioning of supplies. For instance, implement a preparedness programme in each school to test evacuation plans at the beginning of each hurricane season. Support and improve the mechanisms for crisis management (contingency PCAs activation, operation, etc.) especially at the department level. Invest more in preparing and involving national/local NGOs/CBOs in early response. Strengthen the support provided to the national coordination systems (DGPC) and to the international support coordination system (with OCHA, IOM, WFP) to ensure that there is a stronger multi-sector response. Support the government in terms of sectoral data collection capacity in order to increase national ownership, transparency and leadership in crisis management Reinforce AAP strategy with a stronger support to the U-Report system and social networks.	HCO, LACRO

1.1, 5.2;	L1; L2, L3	A; B; C; D; G	Recommendation N°7: Develop a UNICEF agenda for Haiti with measurable indicators to further support local actors to encourage victims and their relatives to report cases through a referral system while accompanying victims in legal procedures. Strengthen the support to national decentralised structures including support to increase their “mobility and capacity to reach-out to the field”. Ensure that UNICEF has its own office in the departments to provide independent project supervision in each area of operation. Improve logistics to facilitate the mobility of UNICEF sub-office field teams, their local counterparts and partners.	HCO
4.2; 5.1;	L11; L12	B; F; G; H	Recommendation N°8: Ensure stronger engagement of UNICEF with other UN organizations in strategic planning Develop a comprehensive 5-year “multi-agency” programme in health (including GBV response) for the Grand Sud with PAHO and UNFPA as there are significant needs and a there has been a positive experience with the SIAF. Develop a collaborative action plan with WFP and FAO for schools garden. This could improve nutrition and be a good entry point for nutrition and environmental education	HCO, LACRO, HQ
2.2;	L4, L5; L7; L8; L9	B, C; F; G; H;	Recommendation N°9: Ensure better internal management for crisis response <ul style="list-style-type: none"> • Ensure that key positions (Dep rep, etc..) are not left vacant when an emergency takes place. • Training all HCO staff for the implementation of L2/3 procedures (using SOP) with operational and administrative simulation exercises, • Develop and implement a stronger staff wellbeing strategy. • Establish rapidly a communication and visibility strategy. • Ensure that the ToRs and end-of-mission reports of surge experts are shared and discussed. • Prolong the duration of the surge to increase continuity. • Develop an operational Response Plan (including readiness) and share it with RO/HQ for proactive support. • Ensure that all staff understands the importance of sharing the Emergency Response Plan with RO/HQ for effective and timely support • Develop a M&E system which is more geared towards operational steering than reporting to HQ and donors 	HCO, LACRO, HQ
2.1; 2.2;	L5, L7, L9	A; B; C; E; F; G;	Recommendation N°10: Improve UNICEF's resource mobilization and visibility - <ul style="list-style-type: none"> • Organise a week-long press visit with national/international media to the South to showcase UNICEF activities on the ground in order to attract international media to the South (they are staying mostly in Port-au-Prince). • Develop quality communication products ready to share with HQ. • Support the production of communication assets ready to share with HQ, through an HCO multimedia producer pool. 	HCO; LACRO HQ

ANNEXES



PHOTO N°13: COVID MANAGEMENT

Annexe n°1: Terms of reference

TITLE/PURPOSE	<i>Real-Time Evaluation (RTE) of the UNICEF's response to the Haiti 2021 earthquake.</i>
RECRUITING OFFICER	<i>Regional Evaluation Advisor, UNICEF LACRO</i>
CONTRACT MODALITY	<i>Consultant Team Institutional Contract (2 international and 1 national consultant)</i>
LOCATION OF ASSIGNMENT	<i>Home based with travel to Haiti. Will report to UNICEF LACRO</i>
LANGUAGE(S) REQUIRED	<i>English and French</i>
DURATION OF CONTRACT	<i>5 months</i>

A. Background

Impact and damages of Haiti 2021 earthquake

On August 14th, a 7.2 magnitude earthquake struck Haiti, causing hospitals, schools and homes to collapse, claiming hundreds of lives, and leaving communities in crisis. The three most affected departments include Sud, Grand'Anse, and Nippes, while UNICEF estimates that about 2.200 lost their lives and 1.2 million people, including 540,000 children, have been affected by the powerful earthquake. The earthquake's devastating impact was later compounded with heavy rains from the tropical depression Grace on 17 August, causing flooding in the same quake-affected areas. The combined impact of the earthquake and the Tropical Depression Grace have left 650,000 people in need of emergency humanitarian assistance, of which 500,000 are being targeted by UN agencies and humanitarian partners through the activities planned under the recently launched \$187.3 million Flash Appeal. Based on an initial impact assessment, the Government estimates that damages from the powerful 7.2-magnitude quake exceed US\$1 billion, as national authorities plan a more detailed assessment of damages, losses and post-earthquake needs in collaboration with the tripartite partnership comprised of the UN, the European Union and the World Bank as well as the Inter-American Development Bank. The back-to-back disasters are exacerbating pre-existing vulnerabilities. In fact, the persistent political instability, is further compounded by socioeconomic crisis and rising food insecurity and malnutrition, gang related insecurity and internal displacement, the COVID-19 pandemic, as well as the Haitian-Dominican migration situation. The Flash Appeal states that "*At the time of the disaster, Haiti is still reeling from the 7 July assassination of President Jovenel Moïse and still facing an escalation in gang violence since June that has affected 1.5 million people, with at least 19,000 displaced in the metropolitan area of Port-au-Prince. The compounded effects of an ongoing political crisis, socio-economic challenges, food insecurity and gang violence continue to greatly worsen an already precarious humanitarian situation*".

UNICEF's response

In response, UNICEF Haiti is supporting the Government and humanitarian partners to ensure the continuity of basic services, including water, sanitation and hygiene (WASH), education, health, nutrition, child protection and social protection services, while facilitating disaster risk reduction, emergency preparedness, and interventions to address violence against children as well as GBV and prevention of sexual exploitation and abuse.

On August 19th, following the Haitian Government State of Emergency Declaration, UNICEF's Executive Director activated a Level 2 Corporate Emergency Activation Procedure (CEAP) for Haiti's earthquake response for an initial period of 3 months. On August 25th, an inter-agency flash appeal was launched requesting US\$187.3M, US\$73.3M of which were requested by UNICEF, for a period of 3 months. In parallel, UNICEF Humanitarian Action Appeal (HAC) for Haiti was reviewed in early September², requesting US\$122.2 million to meet the humanitarian needs of Haitian children and their families. This includes US\$ 73.3 million for the earthquake response and US\$48.9 million to reach 1.6 million people, including 800,757 children, over a 6-month period from August 2021 to February 2022. Overall, UNICEF's response to Haiti earthquake was informed by the varying scale of the disaster and the differing contexts in each department. Overall, in the first few weeks of the crisis, UNICEF provided critical life-saving assistance and recovery support to affected populations, while strengthening its support to the Internally Displaced Persons (IDPs) crisis in the metropolitan area providing WASH, health, nutrition, education and child protection services, and strengthened disaster risk reduction and emergency preparedness through various modalities including cash transfers. According to UNICEF's Appeal "*UNICEF continued supporting access to essential health care services, including immunization and maternal and child health, as well as prevention and treatment of acute malnutrition.*" The health sector responses included the provision of essential medicines, medical supplies, equipment and nutritional supplies as well as support for health care services resumption. *WASH response interventions "ensured access to sufficient safe drinking water for vulnerable communities, provide emergency latrines, and hygiene services, including critical hygiene supplies, hand washing facilities, and COVID-19 prevention"* and "*the rehabilitation/upgrade of damaged WASH facilities*" as well as "*hygiene promotion and awareness raising in health centers and schools*" for the prevention of "*infectious diseases including cholera, diarrhoeal diseases, malaria and COVID-19*". For education sector, "*UNICEF promoted a safe return to school through provision of school supplies for school reopening and access to distance learning programmes where needed.*" to respond to extended school closure. In earthquake affected areas, "*UNICEF prioritised the rapid establishment of temporary learning spaces and rehabilitate schools to provide a protective environment for 100,000 boys and girls while providing mental health and psychosocial support to students and teachers.*" UNICEF also supports national partners for

the provision of child Protection services “*to children exposed to violence, including gender-based violence, exploitation and family separation*” as well as “*psychosocial support, identification, referral and service provision for vulnerable children, and community and family sensitization on child protection risks and preventative measures.*” “*UNICEF provided emergency cash transfers to help the most vulnerable families meet their immediate needs*” in order to mitigate the negative socio-economic impacts of crises. “*In collaboration with the Government, UNICEF leads the WASH sector, continued to co-lead in education, nutrition, child protection sub-sector. Gender equality, Accountability to Affected Populations (AAP) and Protection against Sexual Exploitation and Abuse (PSEA) was mainstreamed throughout the response*”. Approximately two months after the onset of the emergency, the immediate life-saving supply provision mode of the response was gradually phasing out, the medium-term response still needs to focus on the resumption of interrupted essential services and the continuation of essential services. The challenges linked with the recovery phase are presenting themselves in different forms from immediate responses, yet with a common underlying query of how to reconstruct and restore basic services, while laying the ground for increased resilience and more sustainable solutions (‘how to build back better’) given the fact that the country have been facing multiple crisis and the disaster-prone context remains.

Purpose and Objectives of the Evaluation

UNICEF’s LACRO is proposing a real-time evaluation (RTE) of UNICEF’s response to Haiti’s 2021 earth quake to generate timely feedback and learning on key elements of its response, while complying with UNICEF’s Evaluation policy requirements.³ Given that this is a rapid-onset emergency, the value of rapidly-available evidence-based findings, and the support they can provide in informing the upcoming transition to the recovery phase, makes a strong case for an RTE of the response to Haiti earthquake to be conducted at this point in time.

Purpose

The RTE of UNICEF’s response to Haiti earthquake is expected to have a strong learning purpose on several fronts: i) providing iterative feedback loops, both operationally and programmatically, into the initial phase of UNICEF’s response to the crisis; ii) informing the direction of ongoing recovery efforts and planning of forthcoming response phases; iii) identifying lessons to strengthen resilience and the future preparedness levels of UNICEF Country Office (CO) and Government as well as key partners; and iv) supporting the learning of Regional Office (RO) and HQ vis-a-vis the activation of emergency procedures in the future. In this sense the evaluation is expected to yield learning that will be useful and applicable not only the CO level but also with the national as well as the RO level. The RTE will finally strengthen UNICEF’s accountability towards affected populations, as well as partners and stakeholders supporting the response at large, and should be thus conceived as an intrinsic component of the humanitarian response itself. In line with this purpose, the RTE is expected to generate actionable recommendations on how to strengthen ongoing recovery efforts from Haiti earthquake and how to improve future preparedness, response and planning for recovery after sudden onset emergencies in Haiti.

Objectives

The objectives of the evaluation are as follows:

- a. In line with the learning component mentioned above, the evaluation will determine UNICEF’s response to Haiti’s earthquake vis-a-vis issues of appropriateness/relevance, effectiveness⁴, coverage, connectedness⁵ and coherence (coordination/partnerships).⁶
- b. Assess the extent to which UNICEF adhered operationally and programmatically, to the Core Commitments for Children in Humanitarian Action (CCCs)
- c. Examine the extent to which UNICEF effectively responded to the needs of the most affected population in timely manner and identify gaps and appropriate strategies to improve operational coverage and effectiveness.
- d. Assess the extent to which emergency preparedness and organizational readiness have enabled Haiti to respond more effectively. This should include reviewing the extent to which UNICEF has systematically incorporated lessons learned from previous Independent Review of UNICEF’s Operational Response to the January 2010 earthquake in Haiti⁷ and the 2019 ALNAP 16 lessons on responding to earthquakes⁸ into its preparedness strategies in the current response; how the Emergency Preparedness Platform (EPP), SOPs, HR/surge capacities; data and monitoring systems; social protection/shock responsive systems in place, etc. have all enabled the Haiti country to respond rapidly. The experience on Huracan Mathew in the same area of disaster will be used as reference⁸.
- e. Examine the extent to which the Haiti Country Office have considered gender and equity during the response, including how UNICEF has been gender-responsive across its efforts and sensitive to the needs of the most vulnerable groups affected by the emergency (e.g. communities in hard-to-reach areas; people with disabilities; separated, unaccompanied children etc.).⁹ Along these lines, the evaluation should be informative about the ways in which Haiti earthquake affected different categories of people and the extent to which UNICEF has, in turn, incorporated this knowledge as a key driver of its response.
- f. Finally, the evaluation is expected to distil lessons and make recommendations for adjusting and improving the response and planning for recovery after sudden onset emergencies.

By showcasing what UNICEF has done well so far and identifying key gaps and the areas that will require more focus (in terms of efforts and funds) in the next stage of the response, the evaluation is also anticipated to have an instrumental role in supporting fundraising efforts for the recovery phase.

Expected Users

The expected *primary audience* of this RTE is UNICEF's management and staff at the field, country, regional and HQ levels involved in the response to Haiti earthquake; *Secondary audiences* include: the larger community of partners (governmental, UN agencies and other implementing partners; populations affected by the emergency, the Executive Board and interested member states; donor agencies that support emergency programmes with technical and financial resources at all levels, among others. Finally, the evaluation report and its summary brief will be publicly available on UNICEF's Country Office and Regional Office website page.

Special Considerations

The design and timing of the RTE will pay due consideration to the ongoing Formative Evaluation of UNICEF Haiti country programme 2017-2023¹¹. The design and planning of the RTE will factor in the diverse magnitude of the crisis in Haiti (including insecurity and displacement crisis as well as COVID-19). With the initial emergency phase covered by the revised HAC 2021, largely over at the time the RTE will be conducted, the emergency response and recovery efforts will be covered in equal measure by the exercise.

Evaluation Scope

The RTE will cover UNICEF's response in Haiti, starting from mid-August 2021, when the earthquake struck the Sud, Grand'Anse, and Nippes departments. Good part of these departments was affected also by the Tropical Depression Grace dumping heavy rains in southern Haiti, causing flooding in the same quake-affected areas. Areas of these 3 departments, where the impact of the earthquake was the greatest, will represent a relatively greater focus of the evaluation. Pre-emergency issues will be looked at only in relation to contingency planning and preparedness and the extent to which they affected UNICEF's response to the emergency. Given the real-time nature of the exercise, the timeframe will cover the ongoing response until the evaluation team is deployed to the field. The evaluation will assess UNICEF's humanitarian action across urban and rural locations affected by the earthquake, including areas of displacement (accommodation centres), return, relocation and resettlement, where present, and hard-to-reach areas, wherever possible. Along these lines, primary data collection from key informants will be prioritised in the most affected areas of the country including but not limited to the Sud, Grand'Anse, and Nippes departments. Programmatically, the evaluation will cover UNICEF's multi-sectoral interventions across the areas of WASH, health, nutrition, education, C4D, child protection and social protection. The RTE will cover UNICEF's role as cluster lead, as relevant, as well as its responsibilities to respond to the needs of affected populations in sectors where it has no cluster leadership obligations. The RTE will also assess, from an operational standpoint, the availability and management of supplies, human and financial resources and partnerships which feed into the response. Advocacy, communications and fundraising will also be assessed to the extent to which they were factors that affected (facilitated/hindered) the response. A Post Disaster Needs Assessment of any ongoing recovery programming that does not pertain to UNICEF's response to the earthquake is beyond the scope of this evaluation. The RTE will gauge the 'immediate effects' that UNICEF's humanitarian action contributed towards the affected population. Yet, given the nature of the exercise and context, it will not isolate the change and attribute it to UNICEF's specific intervention (or, in other words, evaluate 'impact'). As mentioned above, given the recurrent and cyclical nature of natural hazards in Haiti and more specifically the 2010 Haiti earthquake response and the Southern Provinces following Hurricane Matthew, the evaluation will try to reflect and gather evidence on the extent to which UNICEF has contributed, over time, to improving preparedness/resilience to rapid onset disasters - with the understanding that considerations on the specific impact of UNICEF's response to the 2021 Haiti earthquake on future preparedness levels pertain to future exercises. The RTE will also provide an analysis of UNICEF's coordination/cluster responsibilities and how well it balanced these with its more 'operational' role. Due to time limitations, the evaluation will *not* address the efficiency of UNICEF's response, which would imply a lengthy costing exercise and comparisons with alternative implementation approaches. The timeliness of UNICEF's action will nonetheless be addressed as a key facet of its effectiveness. The RTE will also assess whether or not UNICEF's Protection from Sexual Exploitation and Abuse (PSEA) has been effectively integrated into its programming in the context of Haiti 2021 earthquake response – however, it will not assess systematically the results of such programming, given that this would require additional time and different sets of competencies. As part of recovery efforts, it would be pertinent to consider how the Post Disaster National Assessment is planned and established based on the recovery needs, and the role played by UNICEF in this exercise.

- B. Indicative Evaluation Question** In line with the objectives outlined above, the following two tables list a set of general overarching questions and a more specific set of queries/sub-questions, respectively, that will drive the evaluation. They will be fine-tuned, revised and reduced, as deemed appropriate, to ensure relevance and utilization of the exercise once the evaluation team is onboard and the RTE Reference Group established.

Evaluation Criteria ¹¹	Overarching RTE Questions
Relevance/ Appropriateness <i>- whether the response is in line with local needs and priorities (as well as donor policy) and humanitarian activities are tailored to local needs, increasing ownership, accountability and cost-effectiveness accordingly</i>	1. How appropriate is UNICEF's response strategy (present and planned) in reaching the most affected populations at scale?

Effectiveness - the extent to which the response achieves its purpose, or whether this can be expected to happen on the basis of the outputs	2. To what extent has UNICEF achieved/is UNICEF achieving its intended results, and within the planned timeframe? (consider HAC, response plans, monitoring, adherence to CCCs etc.)
Coverage - the need to reach major population groups facing life-threatening suffering wherever they are	3. To what extent was the affected population, including vulnerable girls and boys, displaced persons and persons with disability, adequately identified, targeted and reached by UNICEF and its partners?
Connectedness - the need to ensure that activities of a short-term emergency nature are carried out in a context that takes longer-term and interconnected problems into account	4. To what extent is UNICEF's response contributing to longer-term goals of enhancing prevention of future emergencies, mitigation of negative effects of future natural hazards (resilience/sustainable solutions) and preparedness?
Coordination - the systematic use of policy instruments to deliver humanitarian assistance in a cohesive and effective manner	5. How effectively and efficiently has UNICEF coordinated its response both internally and externally (with key actors such as other UN Agencies, CSOs and developing partners, national and local governments)?
Equity - direct consideration of specific effects for poor, young women (and the most marginalised), in line with the nature of the intervention ¹²	6. To what extent have gender and disability dimensions been integrated in the needs assessment, planning, implementation, monitoring and reporting of the response, as well as in recovery planning?
Evaluation Criteria	RTE Sub-questions
Relevance/ Appropriateness	<p>4.1. To what extent is UNICEF's response aligned with and tailored to the needs of the most affected populations?</p> <p>4.2. What tools (i.e. methodologies, situation analysis, needs assessments, data systems etc.) were used to gauge these needs? / To what extent was the quality/appropriateness of these tools?</p> <p>4.3. To what extent have affected populations been involved in the needs assessment, delivery and management of humanitarian assistance?</p> <p>4.4. To what extent was the initial response by the CO and RO informed and enabled by elements of preparedness in place prior to the crisis?</p> <p>4.5. How internally coherent/consistent has the response been between the various sectors of UNICEF's response? / How integrated was UNICEF's approach across key sectors when addressing key priorities (e.g. WASH, Child protection, etc.)</p> <p>4.6. To what extent was the response designed to complement activities of other humanitarian partners operating in the most affected areas?</p> <p>4.7. How coherent is UNICEF's response with the priorities/responses of affected Government? How consistent has the response been with core principles of humanitarian action?</p>
Effectiveness	<p>4.1. How realistic/feasible are planned targets (e.g. in HAC) and to what extent are they based on situation analysis and updated as new information becomes available?</p> <p>4.2. What factors contributed to success and what factors constrained UNICEF's success? (HR surge; fundraising; communication w/donors and NatComs)/ What role have COs, the RO and HQ had in this?</p> <p>4.3. How timely was the response?</p> <p>4.4. To what extent did the emergency preparedness planning influence CO capacity to respond?</p> <p>4.5. How aligned was the supply component with the overall emergency response? What have been the specific and most significant contributions of supply to the response?</p> <p>4.6. To what extent has UNICEF been able to adapt its response to the changing needs on the ground?</p> <p>4.7. What role has innovation¹³ played in needs assessment and the response?</p> <p>4.8. Were there any unintended consequences of the humanitarian assistance (positive/negative)?</p>
Coverage	<p>4.9. How successful has UNICEF been in reaching the most vulnerable groups (communities in hard-to-reach areas; IDPs; people with disabilities; unaccompanied/separated children; pregnant women etc.?)</p> <p>4.10. How successful has UNICEF been in ensuring youth participation during the response?</p>
Connectedness	<p>4.1. How successfully have recovery considerations been incorporated into planning and relief interventions?</p> <p>4.2. To what extent is UNICEF's response specifically contributing to improving the resilience of local government systems and their capacity to prepare, respond and mitigate the effects of an emergency?</p> <p>4.3. To what extent has the response set the groundwork to contribute to the humanitarian development nexus?</p>

Coordination/ Partnership (at national/decentralised levels)	<p>5.1. How effectively has UNICEF balanced its 'internal' operations with cluster coordination/leadership responsibilities?</p> <p>5.2. To what extent are considerations of comparative advantage applied in designing and implementing the response and, as applicable, recovery efforts?</p> <p>5.3. How well did UNICEF support the Government at different levels (districts, city, provincial, central) in coordinating the response? And clusters/national nongovernmental partners?</p> <p>5.4. How effective was the CO in coordinating the setup of and delivery of new stations at the heart of crisis?</p>
Equity (Gender anddisability)	<p>6.1. What are/were the specific gender and equity dimensions of the emergency?</p> <p>6.2. What particular challenges or good practices have arisen in working withvulnerable groups?</p> <p>6.3. Were activities and practices (including assessments, innovations etc.) implemented based on ethical principles (respect for autonomy, beneficence,non-maleficence, justice)?</p>

Approach and Methods

The RTE will adopt a mixed-methods approach, including a desk review of existing secondary data and documentation (e.g. relevant findings from parallel inter-agency evaluations/ reviews; SitReps; HAC; needs assessments; monitoring indicators and reports; funding information; HR data; supply data; COs preparedness and contingency plans reflected in the Emergency Preparedness Platform (EPP); focus group discussions and key informant interviews with a purposive sample of stakeholders (i.e. affected community members and leaders; UNICEF staff at country/regional/HQ levels; Government representatives (national and subnational); implementing partners; development and humanitarian partners and other UN agencies); and observation. To guarantee inclusion, accuracy and credibility of the evaluation's findings, primary data collection and subsequent analysis will be sex and age-disaggregated, to the extent possible. Data collection should furtherattempt to gather the views of the diverse universe of stakeholders/social groups affected by the intervention, particularly the most vulnerable (e.g. displaced population; people with disabilities; hard-to reach communities; populations who have not moved from places of origin despite loss but have encountered significant destruction of assets and livelihoods; unaccompanied/separated children; returnees; resettled communities etc.). Data and information collected will be triangulated to ensure soundness and cross-validated at key points intime, as deemed relevant by the evaluation team, through in-country briefings with stakeholders. Without compromising the independence of the exercise, RTEs are by design participatory in nature and built aroundthe regular interaction with key stakeholders. Along these lines, prior to the departure of the evaluation team from each country, an exit workshop will be arranged as an opportunity for the evaluators to share findings and recommendations at the country level and for stakeholders, in turn, to validate such findings prior to the finalization of the evaluation report.

Limitations and anticipated Challenges

Key limitations will include the typical time constraints affecting RTEs, access and availability of data in emergency contexts and the need to balance timeliness with depth of information and well-substantiated findings. Further challenges that can be anticipated relate to UNICEF's humanitarian response in Haiti whichdoes not only focus on the earthquake response (insecurity, Government instability, access to some areas).

The potential limitations of the RTE as well as the mitigation strategies identified by the assessment team are presented below:

Table. Limitations and Mitigation Measures

Limitations	Mitigation measures
Limitation 1 Context: The diversity of stakeholders, in particular beneficiaries, national and sub-national levels may require more time and resources than originally planned when designing and conducting the RTE to ensure that its objectives are aligned with expectations.	It should be ensured that in addition to primary data collection, secondary sources to enrich analysis and capture the experience of the response.
Limitation 2 COVID-19: The context of the pandemic has caused challenges to agencies staff, many of which continue to be working from home and may impact the response of key personnel to the tasks of the evaluation. Furthermore, the pandemic continues to involve public health restrictions such as school closures which affect the ET in-person access to beneficiaries.	The activities will be programmed respecting the time possibilities of the Country Office team, and clear criteria will be set for carrying out hybrid country visit
Limitation 3 Availability and Access to information and informants: It is possible that there will be challenges in terms of informants accessibility or information availability, so some data may be difficult to collect.	This situation is anticipated by making contact with UNICEF or other staff and trying to follow up access to information and staff through remote consultations/interviews.

Norms and Standards

- United Nations Evaluation Group (UNEG) Norms and Standards for Evaluation in the UN System 2016;¹⁴(including impartiality, independence, quality, transparency, consultative process);
- Ethical Guidelines for UN Evaluations;¹⁵
- UNICEF Ethical Guidelines and standards for research and evaluation¹⁶;
- NEG guidance on integrating human rights and gender equality and UN System-Wide Action Plan (UN-SWAP) on gender equality;¹⁷

- Relevant ALNAP guidance for evaluation and real-time evaluations of humanitarian action;¹⁸Results Based Management principles (Theory of Change applied in the emergency should be determined by the Evaluation Team)

Management and governance arrangements

LACRO Regional Office:

The RTE will be managed by UNICEF's LACRO Regional Evaluation Advisor. This is in line with UNICEF's Evaluation Policy which prescribes that the Regional Offices are responsible for the management of evaluations L2 emergencies. The Regional Evaluation Advisor will provide the overall guidance to the evaluation.

Evaluation Reference Group:

An RTE Reference Group will be established to ensure ownership from relevant stakeholder groups of the RTE process, provide expert advice, inputs and support to the RTE as the evaluation unfolds. The RTE Reference Group should include representatives from EMOPS, the Evaluation Office, the Programme

¹⁴ UNEG Norms and Standards for Evaluation, 2016. Available at: <http://www.unevaluation.org/document/detail/1914>

¹⁵ UNEG Ethical Guidelines, 2008. Available at: <http://www.unevaluation.org/document/detail/102>

¹⁶ UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis, 2015.

https://www.unicef.org/supply/files/ATTACHMENT_IV-UNICEF_Procedure_for_Ethical_Standards.PDF

¹⁷

<http://www.unevaluation.org/document/detail/1452>

¹⁸ <https://www.alnap.org/system/files/content/resource/files/main/lnap-evaluation-humanitarian-action-2016.pdf>

https://evaluation.msf.org/sites/evaluation/files/real_time_evaluations_of_humanitarian_action.pdf

Division, Supply Division, Regional Office and Country Office. The reference group will have the following responsibilities:

- a. Provide inputs in the inception phase to influence the approach of the evaluation, and, where necessary, provide information and institutional knowledge as key informants.
- b. Support the work of the evaluation team by facilitating connections with key informants and ensuring the team has relevant reference documents.
- c. Review selected evaluation products (inception report and final/penultimate report) and providing written comments to the evaluation team through the evaluation manager; and,
- d. Where feasible, contribute to the post-evaluation management response, action plan and dissemination strategy.

The Country Office will be responsible for hosting the evaluation team and providing a workspace, and providing documentation, data and materials that is not readily available within the Regional Office. The CO will appoint a focal point for this evaluation who, in liaison and strong coordination with the LACRO, will provide logistical support and act as resource staff for the exercise, including helping to arrange for interviews with key stakeholders.

Annex n°2: Itinerary of the mission

Segment terrain

Mardi	Mercredi	Jeudi	Vendredi	Samedi	Dimanche	Lundi	Mardi	Mercredi	Jeudi	Vendredi	Samedi
19-avr	20-avr	21-avr	22-avr	23-avr	24-avr	25-avr	26-avr	27-avr	28-avr	29-avr	30-avr
Arrivée à Port au prince	Depart pour les Cayes			RCO						Trajet les Cayes Miragoane	
breifing UNICEF OPS/PAHO	Réunion à l'UNICEF		Vistes dans le département Sud	Voyage vers Jérémie		Visites dans le département de GrandAnse			retour terrain vers Les Cayes	Visites de terrain dans le département des Nippes	
									Rencontres avec les services et les ONG à Miragoane		
									debreifing avec l'équipe Sud		

Port au Prince segment

Jours	Dimanche	Lundi	Mardi	Mercredi	Jeudi	Vendredi	Samedi	Dimanche	Lundi	Mardi	Mercredi	
N'Jours	01-mai	02-mai	03-mai	04-mai	05-mai	06-mai	07-mai	08-mai	09-mai	10-mai	11-mai	
Heures												
8	retour sur Port au Prince par la route	Planification programme des réunions PauP			RCO				RH UNICEF	Visite des entrepôts IOM	Voyage retour	
9		MNEFP		Bruno Maes	DRR ME							
10			PAM 10h	9h30	Réunion ME/ table ronde			Session avec UNICEF Rep				
11		Ministre Santé	DINEPA	UNFPA 12h30	DGPC Chandler	Travail sur le rapport en équipe		Ambassade de France	Atelier Restitution	test COVID		
12		IBSER			OCHA							
13		DG Santé	PNUD		Atelier Education DRR/ Min. Educ			Michele Oriol				
14												
15		Réunion LACRO	COUN									
16	OPS/PAHO											
17		WASH	medecin équipe d'urgence		Nutrition MSPP						Voyage retour	
18												
19												

Annex N°3 List of people met

UNICEF

UNICEF Port au Prince

Bruno Maes, représentant

Edou Muhima, Deputy Representative Operations

Sara Brownlow, HR Specialist

Alejandro Escalona, responsable M&E

Hiro Yagami, M&E Officer

Naoko Hosaka, responsable secteur éducation

Taz Phiri, CoordinatriceUrgence

Lara Chlela, Responsable PSEA

Erline Mesadieu, Responsable nutrition

UNICEF Les Cayes

Jean Bosco Huluté, chef de bureau ai

Réginald William, M&E, les Cayes

Joseph Beneche, responsable WASH

Alexis , technician WASH

Ingénieur McKenzie, responsable construction CAYES + 2 collègues

UNICEF Jerémie

Jean Max Milien, Coordinateur ai

Marla, Santé Nutrition

Henry, Nutrition

Chumwey, Protection

Esther Olave Casseus ,Protection

UNICEF Miragoane

Dickson, Equipe UNICEF Miragoane

Esther Equipe UNICEF Miragoane

Woodline, Equipe UNICEF Miragoane

Anasthase Heroldson Ureport Miragoane

Selena Charles, Ureport Miragoane

OPS/PAHO

Dade Claudelson. OPS OMS

INSTITUTIONS HAITIENNES

Protection civile

Sylvera Guillaume, Coordinateur COUD, Département du Sud

Christine Monquelle DGPC Jeremie

Fidèle Nicolas Directeur Protection Civil COUD Miragoane

Municipalités

Anne Marie Ilina Philogène, Maraisse de Chantal

Robenson Jean-Louis, DG, Mairie de Chantal

Yves Rose, Mairesse de Jérémie

Germain Jean Alix, Directeur Générale Mairie Jeremie

Santé

Dr Février, Directeur DDS, Département du Sud, Les Cayes
Dr Azor, Directeur de l'Hopital St Antoine, Jérémie
Dr Angelo Duvelson, Directeur Départemental de la Santé, Grand Anse, Jérémie
Dr Patricia Mascari, Responsable des Cliniques mobiles, DDS Grand Anse
Duvelson Angelo 25 avril 2022 Jérémie P
Patricia Macari (coordinatrice équipe mobile)
Dr Aldor Directeur Hopital Saint Antoine
Dr Lajeau Nathanaël, Directeur centre santé Agnes de Beaumont
Donald Francois, directeur adjoint de l'Hopital de Miragoane
Ertius Jeanne Sirin, Direction Sanitaire des Nippes. DSNI Vaccination
Exant Anne Denise, DES les Nippes, Nutrition.
Géraldine Chery, Médecin urgentiste, Hôpital communautaire de référence de l'Azile,

DINEPA

Hypolithe Oswald, Chef technicien, OREPA-Sud
Mr Paris Kesnel URD/OREPA Sud
Laborde Louisson CAIPA, L'Azile, section Nan Paul

Education

Jean Désir Sylvain, directeur DDE Sud, Les Cayes
Jean Marcel Jeanty Directeur Départemental Education, Jérémie
Shélo Pierre Louis Mr, Planificateur, Jérémie
Jean Nelson Pierre, Direction Départementale Education, Jérémie
Jeanne Alisé Germain, directeur général, Ecole nationale Catherine Flor
Noel claudine Joseph, Directrice adjointe DDE, les Nippes
Jean Gerald Altidor, Administrateur DDE, les Nippes
Wilfrid hanor, chef comptable, DDE, les Nippes
Germain Monod, Coordinateur, DDE, les Nippes
Cherlus, Nester, Planificateur, DDE, les Nippes

IBSR

Monsieur Méridien, directeur IBSR pour le Sud

ONG et organisation de la société civile**AVSI**

Annalisa
Joseph Eddy, Psychosocial
Junior Ingénieur
Madame Canot, Nutrition

CARE

Lesly Charles, Coordinateur Urgence CARE Haïti
Fenel Paul, Technicien Protection
Dominique Germaine, assistante urgences
Danika, Responsable Nutrition
Akus Danas, Facilitatrice

Berlie ASCP PCNB Canon,
Yanick Lagrenade, ASCP Plaine Gommiers
Esten Jean Marie ASCP Plaine Gommiers

CFRAPS

Enel André, Coordinateur pour le Département du Sud
Commission Épiscopale d'éducation catholique (CEEC/BDE)
Janel Bourdeau, Directeur bureau d'éducation de Jérémie
Alexis Ancheska, coordinatrice de projet
Pierre Lionel, Ingénieur

IDEJEN

Grandile, coordinateur éducation
Abraham Joseph , responsable IBESR

Fondazion zami timoun

Richard Joseph Fortune Daphka batiste responsable programme.
Marie Edouard coordination terrain,
Prisma Manaoach point focal dans les nippes.

DDENI

Cherilys Nester Planificateur des DDENI,
directive adjointe,
Germain coordinateur fondamental + 2 autres personnes

REFANIP

Lila Zephirin , Reseau femme des Nippes

Annex N°4: Evaluation Matrix related to the CAD evaluation criteria:

Evaluation meta criteria ¹¹	Overarching RTE Questions	RTE Sub-questions (SQ)	Synthesis of the response to the SQ	Sources
48. Relevance / Appropriateness - whether the response is in line with local needs and priorities (as well as donor policy) and humanitarian activities are tailored to local needs, increasing ownership and accountability	1. How appropriate is UNICEF's response strategy (present and planned) in reaching the most affected people at scale?	1.1. To what extent is UNICEF's response aligned with and tailored to the needs of the most affected people? 1.2. What tools (i.e. methodologies, situation analysis, needs assessments, data systems etc.) were used to gauge these needs? /What was the quality/appropriateness of these tools? 1.3. To what extent have affected people been involved in the needs assessment, and in the delivery and management of humanitarian assistance? 1.4. To what extent has UNICEF been able to adapt its response to the changing needs on the ground? 1.5. How were CCC taken into account in shaping the assessments?	To a large extend A large range of systems were used. The key elements are the timeliness of the information flow and access to the field was a key constraint In a limited manner. UNICEF proved to be relatively flexible, largely due to the absence of stick response plans Not in a strategic way as the CCC are only known superficially	Documentation, interviews with UNICEF staff at different levels, Interviews with other stakeholders, report analysis Documentation, interviews with UNICEF staff at different levels, Interviews with other stakeholders, report analysis Documentation, interviews with UNICEF staff at different levels Interviews with other stakeholders, report analysis Documentation, interviews with UNICEF staff at different levels Interviews with other stakeholders, report analysis Documentation, interviews with UNICEF staff at different levels Interviews with other stakeholders; report analysis

49. Effectiveness <i>- the extent to which the response achieves its purpose, or whether this can be expected to happen on the basis of the outputs</i>	2. To what extent has UNICEF achieved/is UNICEF achieving its intended results, within the planned timeframe? (consider HAC, response plans, monitoring, adherence to CCCs etc.)	2.1. How timely was the response?	The health and WASH response was relatively timely in some areas, less in others.	Documentation, interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis
		Haiti UNICEF RTE Evaluation report	Septembre 2022	
		2.2. How realistic/feasible are planned targets (e.g. in HAC) and to what extent are they based on a situation analysis that is updated when new information becomes available?	The process was highly reactive and linked to rolling information flows rather than on plans	Documentation, interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis
		2.2. How effective was the support for HQ and LACRO in mobilising human resources and financial means to respond to the urgent needs (impact of the L2 declaration)	Timeliness of surge and financial support (in line with L2 procedures) was extremely appreciated	Documentation, interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis
		2.3. What factors contributed to the success of UNICEF's operations and what factors limited this success? (HR surge; fundraising; communication w/donors and NatComs) What role have COs, the RO and HQ had in this?	Level of knowledge of L2 & CCC procedures relatively limited in HCO but the support by LACRO and HQ very strong	Documentation, interviews with UNICEF staff at different levels; interviews with other stakeholders, report analysis
		2.4. What monitoring systems were put in place to ensure that the response was effective?	MEAL systems in place were largely oriented towards reporting to HQ and donors and less to operation steering. It made them quite heavy and burdensome.	Documentation, interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis
		2.5. How have the main parameters of sector-based commitments (CCC) been used?	Most of the time non formally as not really perceived as operational	Interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis
		2.6. How have the main parameters of cross-sector commitments been used?	Most of the time non formally as not really perceived as operational	Interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis
		How have humanitarian principles, standards and guidelines been respected? How have key issues related to AAP, PSEA, and child protection guidelines been used?	Very often not really used, as their knowledge is very theoretical Efforts in AAP were significant by "discrete". PSEA efforts relatively significant	Documentation, interviews with UNICEF staff at different levels; interviews with other stakeholders; report analysis

<p>50. Efficiency - measures the relations between outputs (qualitative and quantitative) and inputs. This generally requires comparing alternative approaches to achieving the same output, to see whether the most efficient process has been used</p>	<p>3. To what extent has UNICEF achieved/is UNICEF achieving its intended results, within the planned timeframe? (consider HAC, response plans, monitoring, adherence to CCCs etc.)</p>	3.1. How efficient was the work through the national institutions in the context of Haiti ?	Not always as efficient as needed as there are a lot of internal "red tapes" in the Haitian system.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis
		3.2. What factors contributed to the efficiency of UNICEF's response? (HR surge; fundraising; communication w/donors and NatComs)/ What role have COs, the RO and HQ had in this?	Timeliness of implementation of L2 and CCC procedures were key. Level of confidence with national authorities was high Presence of UNICEF in the field critical factor	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis
		3.4. To what extent did the emergency preparedness planning influence the CO's capacity to respond?	Unfortunatly not that much. The Level of development of DRR procedures in HCO was relatively low and most of it focused on cyclone and not on earthquake. Level of knowledge of DRR procedures in HCO relatively low	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis
		3.5. How aligned was the supply component with the overall emergency response? What have been the specific and most significant contributions of supply to the response?	Timeliness of the arrival of the supplies affected by the Martissant blockade and the Jeremie bridge issue	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis
		3.6. To what extent was the initial response by the Country Office and Regional Office informed and enabled by preparedness activities implemented prior to the crisis?	Level of knowledge of DRR procedures in HCO relatively low	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis
		3.7. What role has innovation played in needs assessment and the response?	The main one was the use of the U-Report system	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis
		3.8. Were there any unintended consequences of the humanitarian assistance (positive or negative)?	The creation of un met expectations created significant frustrations.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders, report analysis

<p>51. Coverage : the geographic, socio-economic and societal out-reach of the programmes, including their capacity to address the needs of the most vulnerable areas and groups according to their needs</p>	<p>4. Responding to the need to reach major population groups facing life-threatening suffering wherever they are</p>	<p>4.1 To what extent was UNICEF able to reach the population in the different affected areas in view of the security and logistical constraints?</p>	<p>Good in urban contexts in le Sud, much more difficult in rural areas in the 3 departments</p>	<p>Interviews, report analysis</p>
		<p>4.2. How successful has UNICEF been in reaching the most vulnerable groups (communities in hard-to-reach areas; IDPs; people with disabilities; unaccompanied/ separated children; pregnant women; etc.?)</p>	<p>Good in urban contexts in le Sud, much more difficult in rural areas in the 3 departments</p>	<p>Interviews, report analysis</p>
<p>52. Connectednessand Cohérence - - the need to ensure that activities of a short-term emergency nature are carried out in a context that takes longer-term and inter-connected problems into account in coherence with plans, policies and strategies</p>	<p>5. To what extent is UNICEF's response contributing to the longer-term goals of preventing future emergencies, mitigating the negative effects of future natural hazards (resilience/sustainable solutions) and preparedness?</p>	<p>5.1. What has UNICEF contributed to post-earthquake rehabilitation?</p>	<p>Number of rehabilitated services</p>	<p>Lists of rehabilitated services</p>
		<p>5.2. What was the role of UNICEF in disaster preparedness and how will the lessons learnt from the earthquake be integrated in future disaster preparedness efforts?</p>	<p>Level of development of DRR procedures in HCO</p>	<p>List of DRR measures seen as important</p>
		<p>5.3. How successful has UNICEF been in ensuring youth participation during the response?</p>	<p>Level of awareness of the importance of DRR among HCO staff</p>	
<p>53. Coordination - the systematic use of policy instruments to deliver humanitarian assistance in a cohesive and effective manner</p>	<p>6. How effectively and efficiently has UNICEF coordinated its response both internally and externally with national and local governments and with other key actors, such as other UN agencies, CSOs and development partners? And how has it contributed to sector-based coordination</p>	<p>6.1. How successful was UNICEF in supporting the coordination of sectoral response at the central level.</p>	<p>The satisfaction of the partners was in general very high</p>	<p>Documents, interviews of UNICEF staff, Interviews of other stakeholders</p>
		<p>6.2. How successful was UNICEF in supporting the coordination of sectoral response at the local levels</p>	<p>All interviews have underlined a high level of satisfaction of the partners</p>	<p>Documents, interviews of UNICEF staff, Interviews of other stakeholders</p>
		<p>6.3. Was UNICEF role in coordination sufficiently recognised?</p>	<p>UNICEF has been systematically mentioned as a key player in coordination and a key support to governmental leads.</p>	<p>Documents, interviews of UNICEF staff, Interviews of other stakeholders</p>

		6.4. What were the weak points and constraints affecting UNICEF coordination role?	Constraints identified are often linked to the weak capacity of the governmental leads at the Department level.	Documents, interviews of UNICEF staff, Interviews of other stakeholders
54. Equity (specific to UNICEF and not in DAC criteria - direct consideration of specific effects for poor, young women (and the most marginalised), in line with the nature of the intervention¹²	7. To what extent have gender and disability dimensions been integrated in the needs assessment, planning, implementation, monitoring and reporting of the response, as well as in recovery planning?	7.1. To what extent was the affected population, including vulnerable girls and boys, displaced persons and persons with disability, adequately identified, targeted and reached by UNICEF and its partners?	Very limited, as it is difficult to discriminate users of water points or health post. Yet, dedicated programmes targeting women were visited. Preventive protection programmes do not permit the disaggregation.	Documents, interviews of UNICEF staff, Interviews of other stakeholders
		7.2. What were the constraints hindering the road to equity in the Haiti earthquake response ?	Not really relevant as in emergency response, equity is less an issue than addressing the needs of the most vulnerable	Documents, interviews of UNICEF staff, Interviews of other stakeholders
55. Accountability to Affected People (AAP),	8. To what extend did UNICEF manage its accountability to affected people	8.1. How what extend was AAP included in the response strategy	One full fledged AAP exercise done, and a U-Report	Documents, interviews of UNICEF staff, Interviews of other stakeholders
56. PSEA	9. to what extent did UNICEF respect PSEA	9.1. What was the level of knowledge of PSEA	Level of knowledge relatively good	Documents, interviews of UNICEF staff, Interviews of other stakeholders
		9.2. What were the interventions in case PSEA issues were identified	As there is a privacy issue there, numbers are not known with precision. Although they are probably quite high. Only a limited number of documented cases are known with precision	Documents, interviews of UNICEF staff, Interviews of other stakeholders

Annex N°5: Evaluation judgment in line with the L2 declaration process

A dedicated L2 evaluation framework was used during the mission. It is presented as annex N°6 of this report.

Criteria	Evaluation judgements	Sources of information /triangulation
1. Rapidity of the assessment	Early assessments for life saving activities and initial relief were carried out fast. Additional assessments were carried out in the following weeks as part of the PDNA.	UNICEF Reports, OCHA sitreps, Interviews with UNICEF HCO, Interviews with Haitian institutions.
2. Effectiveness of the communication to HQ and the RO and timeliness of the decision to activate L2	Fast despite the fact that the quake took place during holidays period, L2 declaration 4 days after the quake.	UNICEF reports, interviews with UNICEF HQ, LACRO and HCO.
3- Timeliness of the support from HQ and the RO (technical and managerial staff deployment, etc.)	Part of the surge arrived very fast, others were slower as language skills became an issue (need for francophone staff).	UNICEF reports, interviews with UNICEF HQ, LACRO and HCO.
4- Rapidity of resource mobilisation, in particular preparation of the Emergency Appeal by EMOPS	With the capacity of the Rep to decide on fast allocation, the Emergency Response Funds and the capacity to get advance on loan made resources available rapidly. The Appeal was prepared fast and launched on 18/8/2021.	UNICEF reports, interviews with UNICEF HQ, LACRO and HCO.
5- Management of business continuity and the capacity to continue existing operations in areas not affected by the crisis	Part of HCO staff continued to work outside of the Haiti earthquake response, in order to pursue existing programmes, although the focus on the earthquake took significant part of the HCO energy.	UNICEF reports, interviews with UNICEF HCO.
6- Accountability to the affected population, other agencies, national and local institutions, as well as to donors	UNICEF's activity in interagency coordination was widely appreciated, resulting from good relations with national, local institutions and NGO. AAP variable, with good component with U report and the AAP study	UNICEF Reports, NGO reports, interviews with UNICEF HCO, interviews with Haitian institutions, interview with U reporters, newspapers.
7- Modality for withdrawal of external support and return to normality for the CO	Date of departure of surge staff varied from a few weeks to three months, but return to normality in programmes was not achieved in view of the continuation of the rehabilitation phase.	UNICEF Reports, NGO reports, interviews with UNICEF HCO, interviews with Haitian institutions.

Annex N°6: Evaluation judgment in line with the Core Commitment for Children

The primary operation framework of UNICEF is the Core Commitment for Children (CCC), such that it was important to assess UNICEF earthquake response in relation to the CCC.

Global standards & principles	Evaluation judgments	Sources of information and triangulation
Humanitarian principles :	Humanitarian principles are not really known and used as they have been mostly designed for conflicts rather than for natural disasters. Limited knowledge of Disaster law and Core Humanitarian Standard (CHS)	Documentation, interviews with UNICEF staff at different levels.
Humanitarian advocacy	Mostly not known, as situation with the gangs, requiring negotiations, is rather recent.	Documentation, interviews with UNICEF staff at different levels.
Global humanitarian standards and Guiding principles	Global humanitarian standards such as SPHERE have been largely designed for refugee and IDP camps. In view of the specific context of Haiti, they had to be replaced by Haitian standards. It is interesting to note that the CHS is largely unknown.	Documentation, interviews with UNICEF staff at different levels, interview with Haitian Institutions.
Centrality of protection	Child protection is central to UNICEF Haiti's programming process and was a very important component of the earthquake response.	Documentation, interviews with UNICEF staff at different levels, interview with Haitian Institutions.
Accountability to Affected Populations (AAP)	AAP was a key issue for the HCO and specific measures were taken. This comprises the support to U reporters and the launch of an AAP survey were key milestones in that direction.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions.
Child safeguarding Protection from Sexual Exploitation and Abuse	PSEA was a key cross cutting element of UNICEF activities and in its relations with its national and international partner, with trainings and dissemination efforts.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions.
Ethical evidence generation and data protection	Evidence generation was in line with the protection of cases and with the respective Haitian Institutions in charge (ISBR, Police, Justice). Special attention was paid to data protection.	Documentation, interviews with UNICEF staff and with affected populations.
Institutional responsibilities		
Commitment to deliver on the CCCs	There are large amounts of evidence that CCC were upheld largely, although not necessarily using that name.	Documentation, interviews with UNICEF staff at HCO, LACRO & HQ, interview with NGO, interviews with Haitian Institutions.
Emergency procedures	Emergency procedures were largely unknown. The response was largely facilitated by the adaptation of the procedures that were permitted by the L2 declaration.	Documentation, interviews with UNICEF staff at HCO, LACRO & HQ, interview with NGO, interviews with Haitian Institutions.
Risk management	Efforts on risk management have been important in relation to staff security. They were less obvious at the project level, such as, for example, in the analysis of the repercussions of delays and seasonal events.	Documentation, interviews with UNICEF staff at different levels.
Roles and responsibilities	The absence of key staff at the time of the earthquake, the incomplete HCO organigram during part of the response and the fast turn-over of surge and even HCO staff, made the allocation and visibility of responsibility somewhat blurred.	Documentation, interviews with UNICEF staff at different levels, interviews with UNICEF partners.

Overarching commitments		
Preparedness	In several programmes, preparedness was a significant component, but largely focused on cyclones. At the HCO office, preparedness efforts were less developed.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions.
Coordination	UNICEF's engagement in coordination of its different sectors of responsibility was seen as good to very good by most of the stakeholders. The role of the Les Cayes office during the early days has been regularly mentioned. The situation is very different in Jérémie and Miragoane, where UNICEF's footprint is minimal. Yet some areas for improvement have been identified in the relation with WFP (the integration of WFP cantines in UNICEF schools) and with WHO (MCH in global Health approaches).	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions.
Supply and logistics	Supplies and logistics have been variable. They were significantly affected by the rains during the early days (tropical storm Grace) and then by the Gang blockade in Martissant. The Jérémie bridge was also a significant constraint for the operations in Grand'Anse. Procurements through Haitian institutions like DINEPA was also affected by slow bureaucratic procedures.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, discussion with OCHA, RCO and ECHO, interviews with Haitian Institutions.
Humanitarian access	Uneven. With the gang conflict affecting the southern exit of Port au Prince, access had to be negotiated. But rapidly, it became necessary to use sea routes or mountainous tracks to bring supply and vehicles to the Grand Sud.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, discussion with OCHA, RCO and ECHO, interviews with Haitian Institutions.
Protection from Sexual Exploitation and Abuse	A lot of efforts in training and dissemination have been made by that sector, making UNICEF a key player in this field.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions.
Accountability to Affected Populations (AAP)	Significant efforts were made, in particular through the U reporters system, which represents a significant and unique resource for AAP.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions Interviews with other stakeholders, interviews with the populations.
Programme approaches	Programme approaches to respond to the earthquake were largely designed under the pressure to act fast. Most of the process of integration and LRRD took place progressively and in an ad-hoc manner.	Documentation, interviews with UNICEF staff from HCO LACRO and HQ, interview with NGO.
Quality of programmes	Good in general, but variable due to uneven implementation due to major delays in supplies and rough field conditions. Many of these programmes are the degraded mode of the normal development programmes.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions Interviews with other stakeholders, interviews with the populations.
Multisectoral and integrated	The main areas where there is real integration is the work at the school level, where there was an attempt to link soft contents, relief components (kits), rehabilitation, health, nutrition, child protection and WASH components. Linking health, nutrition and child protection in the nutritional programmes was also a great success.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions, interviews with other stakeholders.
Programming	This was relatively haphazard as the flow of information on the needs was erratic during the first days and week. Programming had to remain extremely flexible, largely based on the "no regret principle". Later on, as the situation became clearer, proper programming could take place in line with the CHA and the PDNA.	Documentation, interviews with UNICEF staff from HCO LACRO and HQ, interview with NGO, interviews with RCO.

Equity	Variable In emergency response, the key element was to ensure proper “gender mainstreaming” (which was an area for key efforts), rather than “equity”, which is a political agenda.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions, interviews with other stakeholders.
Linking humanitarian and development	The phasing of an emergency response followed by a recovery phase is a good example of LRRD. This is nevertheless difficult when the key player of LRRD should be national institutions, which are largely without means, even if they have good will.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian institutions, interviews with other stakeholders.
Environmental sustainability and climate change	Haiti is so frequently hit by extreme climate events that climate change is very present in everybody’s mind. For UNICEF, the first effort was related to making the HCO use solar energy. The challenge now is to 1) extend the effort to other areas (green procurements, etc.) 2) to decentralize this effort.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian institutions, interviews with other stakeholders.
Localization	UNICEF works permanently with national and local actors, which have less capacities but a better proximity with the field. The establishment of partnership with local organizations in nutrition, child protection, dissemination and information collection, bring UNICEF in a relatively good place in the fulfilling of the Localisation commitment of the Grand Bargain.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian institutions, interviews with other stakeholders.
Community engagement for behaviour, social change	In general weak. Although efforts to engage with communities for the management of water points and SAEPI, the understanding of how Haitian communities work, and the partnership with them, is still a largely untapped area.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian institutions, interviews with other stakeholders.
Humanitarian cash transfers	UNICEF is only a small player in cash transfer. It lacks know-how and a clear strategy to cover the very specific targets it wants to support: families of vulnerable children, teachers, etc.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders.
Sectoral commitments CCC		
Needs assessments, planning, M&E	Despite efforts made in the needs assessment for the emergency phase and the recovery (PDNA), the links between assessment and the rest of the project cycle was globally relatively weak. This was partly linked to a lack of time, but also largely to the lack of resources, which means priorisations had to be made. On LRRD, the processes goes largely beyond UNICEF (PDNA). There is also a confusion between “monitoring as a reporting tool” and “monitoring as a tool for project steering” with an overly important weight given to the first one.	Documentation, interviews with UNICEF staff at HCO and field, with LACRO and with HQ, interview with NGO, interviews with Haitian Institutions, interviews with other stakeholders, including donors.
Health	The first part of the response, with the support to the deployment of Haitian medical doctors and mobile clinics, was innovative and appropriate. The key issue now is the next step, in particular the recovery of Mother and Child health services.	Documentation, interviews with UNICEF staff at HCO and field, with LACRO and with HQ, interview with NGO, interviews with Haitian institutions, interviews with WHO and UNFPA.
Nutrition	The approach to support breast feeding, including the special projects targeting unaccompanied small children, were extremely appropriate. The engagement of UNICEF against chronic malnutrition, which is widely prevailing in Haiti, was also very relevant. The strategy to use as much as possible locally produced food was extremely relevant as well.	Documentation, interviews with UNICEF staff at HCO and field, interview with NGO, interviews with Haitian Institutions Interviews with WHO and WFP.
HIV/AIDS	In the context of response to a natural disaster, HIV/AIDS activities are not the priority during the acute emergency response. The issue was more with the resumption of these activities in the recovery phases. At this stage this is largely non-existent.	Documentation, interviews with UNICEF, interview with NGO, interviews with Haitian Institutions, interviews with WHO and UNFPA.
Education	The emergency response with the distribution of kits, tents, etc, to ensure fast resumption of education was good. The recovery phase with school reconstruction is much more complex and so far largely incomplete. The issue of ensuring risk resilient education system is at the heart of the ongoing and future efforts. Coordination with other players needs to be improved.	Documentation, interviews with UNICEF, interview with NGO, interviews with Haitian Institutions, interviews with WFP.

Child protection	Significant efforts have been made in child protection both as a stand-alone programme and as a cross-cutting issue. Efforts to support the national institutions involved remains largely insufficient.	Documentation, interviews with UNICEF, interview with NGO interviews with Haitian Institutions.
Water, Sanitation and Hygiene (WASH)	Very good during the first part of the response (water tracking, water treatment, distribution of hygiene kits) with a very important coordination role. The rehabilitation of SAEP is more complex and takes time, due to logistical and bureaucratic issues with DINEPA. The establishment of water committees will be critical to ensure maintenance.	Documentation, interviews with UNICEF staff at HCO and field, with LACRO and with HQ, interview with NGO, interviews with Haitian Institutions, interviews with other stakeholders, including the population.
Social protection/ Cash transfer	Relatively weak. This sector is already largely occupied by other agencies and UNICEF's niche is very specific with specific packages for parents and teachers, and requires know-how which was not present at HCO level.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders.
Cross-sectoral commitments		
Gender equality/ empowerment of girls/ women	Gender issues were tackled by ensuring that projects were really benefiting women and girls. In the Haitian NGOs supported by UNICEF, women are very active.	Documentation, interviews with UNICEF, interview with NGO, interviews with Haitian Institutions.
Disabilities; Early childhood development (ECD)	At the time of disaster response, these issues were largely sidelined. It is important to ensure that they are back in the reconstruction agenda.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders.
Adolescent development and participation	At the time of disaster response, these issues were largely sidelined. It is important to ensure that they are back in the reconstruction agenda.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders.
Situation-specific commitments	Evaluation judgment	Sources of information /Validation
Public health emergencies (PHE)	As UNICEF was a key player in the fight against cholera and thanks to the L3 declaration to fight the COVID-19 pandemic, it gained an important role among the actors of PHE in Haiti.	Documentation, interviews with UNICEF, interview with NGO, interviews with Haitian Institutions, interviews with WHO.
Large-scale movements of refugees, migrants IDP	Dealing with displacement in Haiti started as part of the support to Martissant IDPs and returnees from US and Dominican Republic. There were some displacements after the quake, which were not welcome in the national policy. Yet, UNICEF had to intervene on WASH issues in the few identified sites.	Documentation, interviews with UNICEF staff at different levels, interviews with other stakeholders including OCHA, RCO and donors.

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Annex N°8: Guidelines for the interviews, RTE UNICEF in Haiti

Tour de table/introduction

Issues for us:

- Understanding the organisation of the office before, during and after the August 2021 earthquake:
 - Situation before the earthquake
 - During the earthquake
 - During the two weeks that followed
 - Afterwards
- Understand the constraints encountered:
 - Before the earthquake
 - During the earthquake
 - During the two weeks after the earthquake
 - Afterwards
- Understand the functioning of the UNCT/HCT and UNICEF's role in it, but also the challenges encountered
- Understand Bruno's vision of the relationship issues with the Government in complex conditions
- To understand the learning issues:
 - For him
 - For the HCO
 - For LACRO
 - For HQ
- Understand the funding issues:
 - Before the earthquake
 - During the earthquake
 - During the two weeks following the earthquake
 - Afterwards
- Understand the challenges of strengthening UNICEF to meet the challenges of multiple issues:
 - Business continuity in a crisis
 - Fundraising
 - Monitoring-assessment-redeemability
 - Interagency coordination
 - Advocacy with the Government

Annex N°9: Workshop Lessons learned Les Cayes 7-9 Feb 2022

Workshop: Lessons Learned of EQ Response and Planning, Agenda

Day / time	Activity, Facilitators, Methodology	Details, Resource docs
Mon 7th Feb – Day 1, Les Cayes Suboffice		
7:30 am	Transfer from Hotel to UNICEF suboffice – Coffee	
8:00 – 12:00	Welcome to LACRO and HQ visitors – Presentation of the workshop's objectives <ul style="list-style-type: none"> Opening Remarks (Welcome) – 15 min, (Bruno Maes) Introduction of participants - 30 min <ul style="list-style-type: none"> Security briefing – 10 min, (Henry Claude) Training session on the new CCCs: <ul style="list-style-type: none"> Presentation of CCCs, tailored to Haitian context (2h), (Carole Vignaud) Briefing on UNICEF Emergency Procedures (1h 30 min), (Pablo/EMOPS colleagues (remote)) <p><i>Coffee break (30 min) during the session</i></p>	All HCO's Pgm and Ops sections are represented in Les Cayes suboffice: Sections Chiefs + one f.p. + South f.p. Recommendation to participants: Read the CCCs + take CCCs Training (Agora).
12:45 – 13:45	Lunch	
Workshop: LL of EQ Response & Planning- 1st day		
Facilitators: Michele Messina, REA LACRO Pablo de Pascual, Desk LAC HQ Jean Stenio Pierre, CFO,		
Alejandro Escalona, Chief PME, Francoise Chandler, PME Spec. Jean Ernst, PME Specialist Reginald Williams, HACT Spec.		
Hiroaki Yagami, KM/M&E Officer Jin Iwata, Res. Mobilization Spec. Saurel Dorelus, Budget Specialist Toni Marro, Chief Emergency,		
15:00 – 15:30	Welcome and Introduction <ul style="list-style-type: none"> Overview of objectives – Agenda, methodology – 15 min, (Pablo/Michele) Presentation of the Real Time Evaluation (RTE) – 15 min, (Jean Luc Poncelet) 	
15:30 – 16:45	Stock Taking and Lessons Learned – Part 1 <ul style="list-style-type: none"> Summary presentation of Emergency Response achievements – 20 min, (Stenio/Toni) 	Analysis of the ongoing UNICEF response to EQ in the South: results, challenges, LL. Resource docs: Initial LL done in Dec 2021
16:30 – 16:45	Wrap-up of day 1 (Alejandro)	
17:00	Back to the Hotel – Dinner and night	
Tue 8th Feb – Day 2, Les Cayes Suboffice		
8:00 am	Transfer to UNICEF suboffice - coffee	
Workshop: LL of EQ Response & Planning – 2nd day		
8:30 – 10:30	Stock Taking and Lessons Learned – Part 2 <ul style="list-style-type: none"> Comparative advantage & what we are doing well – 20 min Presentation and plenary exchange (Francoise) Presentation of the AAP survey's main findings – 30 min, J. Ernst What we did well & what needs improvement, in Programme and Ops –60 min: Group work (4 groups): (Michele/Pablo) <ol style="list-style-type: none"> Preparedness (conting. PCAs, pre-positioning, training, etc.), Needs analysis/assessments/data (EDAB, MIRA), First response, Sectoral coordination/Govt & CSO, Inter-sector coordin./COUD, Inter-agency coordin./ response, RO/HQ support on L2 (surge, etc.), Supplies/ Logistique, HR, Finance. 	Analysis of the ongoing UNICEF response to EQ in the South: results, challenges, LL. Resource docs: AAP survey results CCCs (Pocket version, FR)

Day / time	Activity, Facilitators, Methodology	Details, Resource docs
	<i>Methodology: Group work and Plenary + Notes in the flip charts</i>	
10:30 – 10:45	Coffee break	
10:45 – 12:45	<ul style="list-style-type: none"> • Presentation of group work results – 60 min (Pablo/Michele) • SWOT Analysis Exercise – 45 min (w.g. + plenary) (Alejandro) <i>Methodology: review of the flip chart and plenary discussion</i> • Discussion on the lessons we are learning (Programme and Ops) based on the CCCs – Plenary: exchange views and share thoughts/reflections – 30 min, (Michele/Pablo) <i>Methodology: Analysis of the SWAT with CCCs and Plenary</i> 	Analysis of the ongoing UNICEF response to EQ in the South: results, challenges, LL. Resource docs: Initial LL done in Dec 2021
12:45 – 13:45	Lunch	
13:45 – 16:30	<ul style="list-style-type: none"> • Summary of the 1st part of LL and importance of the corrective actions, 30 min (Bruno) • What changes/corrective actions we need to take, in order to scale-up & accelerate the response and to do better in future crises – Key action points – 1hr 30 min (Jean Luc, RTE/ Pablo/Michele) <i>Methodology : Group work, restitution and plenary discussion</i> 	
17:00 – 17:30	Back to the Hotel – Dinner and night	NOTE: debrief with Bruno, back to PaP for HCT retreat
Wed 9th Feb – Day 3, Les Cayes Suboffice		
8:00 am	Transfer to UNICEF suboffice – Coffee	
Workshop: LL of EQ Response & Planning - 3rd day		
8:30 – 11:30	Resume of Day 2 – 10 min, Hiro <ul style="list-style-type: none"> • Consolidation and wrap up of action points/ corrective actions (and responsible sections) to improve / do better and scale up, for this and future responses – 60 min, Toni/Stenio <p>UNICEF Programming and Prioritisation – identify priority actions and programme strategies vis-a-vis the current EQ response and the situation of children in the Southern Departments.</p> <p>Situation update: Setting the Scene, the landscape – Presentation and Plenary:</p> <ul style="list-style-type: none"> • Political Update / Situation in the Southern region – 30 min, Stenio • Situation of Children in the Southern Departments. Overview, including key fact/figures, demogr. data – 30 min, Jean Ernst <p>Short term planning:</p> <ul style="list-style-type: none"> • Nexus and LHD: linking the current humanitarian response and the longer-term planning – 30 min, Michele • Gaps and residual needs of the population to be fulfilled – 30 min (ongoing response + next 3-4 months, CERF, etc.) - J.Max, Floraine, Dickson • Review of the EQ Response Plan focusing on next 3-4 months, based on CCCs (2022: ongoing response, CERF UFE + other funding) – 1 hr, (Michele/Pablo) <i>Methodology: Group work and Plenary</i> 	Based on the results of day 2, review of UNICEF programming in the South, both for the ongoing EQ response and the residual humanitarian needs (2022, short term), and for the longer term (new CDP, 2023 – 2027).
11:30 – 12:45	<ul style="list-style-type: none"> • Resources available for planning and Fund raising for next months, 15 min. Jin / Saurel • Coordination with other agencies / intervention of WFP, IOM, UNFPA, 40 min. Stenio/Floraine/Dickson 	Guests: WFP, IOM, UNFPA Resource docs: PDNA
12:45 – 13:45	Lunch	
13:45 – 16:15	<ul style="list-style-type: none"> • Mid-term planning: Review of the existing South Work Plan vis-a-vis the identified priority actions (1st part) • Presentation of the South Work Plan developed in May 2021 (excel) – 30 min, Stenio/Reginald W./Hiro 	PME section and Stenio Share the South Work Plan (2021)

Day / time	Activity, Facilitators, Methodology	Details, Resource docs
	<ul style="list-style-type: none"> Beyond the EQ response: recovery phase and PDNA planning – 15 min, Jin Suboffice structure in the system and decentralization framework looking at the future. 20 min. Reginald W./Saurel Based on prioritisation, identify what needs to be updated/ added/ changed – 45 min, (Pablo/Michele) <i>Methodology: Workgroup (by section / subject)</i> Presentation of groups' outputs & discussion in plenary – 40 min 	
16:15 – 17:00	<ul style="list-style-type: none"> Summary of key findings/ agreed key actions points and next steps + responsible persons – 30 min, Toni/Hiro/Pablo <ul style="list-style-type: none"> Survey on the workshop methodology, 15 min (Francoise) 	Chief PME Projection of findings/agreed action points
16:45 – 17:00	Concluding Session , (Armand and Michele)	
17:00 – 17:30	Back to the Hotel – dinner ad night	
Thu 10th Feb – Day 4, Les Cayes		
8:30 – 9:00	Transfer from Hotel to DGPC office / Office	
9:30 – 10:30	Meeting with DGPC , other Govt partners (MoE/DED, OREPA) and NGO partners : analysis of EQ response' achievements and challenges 6 months after the EQ.	Michele, Pablo, Toni, Stenio, Sections Chiefs, South Emerg. f.p.
10:30 – 13:00	Field visit in Les Cayes zone – Area affected by the EQ and UNICEF response (WASH / Education) - Camp Perrin / Chantal (TBC) <ul style="list-style-type: none"> Semi-permanent school rehabilitation model – Water system rehabilitation 	Idem
13:00 – 13:45	Lunch (with NGO partners, TBC)	
13:45 – 15:00	Debriefing of the mission with the Chief of SO and his team. Les Cayes Suboffice	Michele, Pablo, Stenio, Suboffice Team, Sections Chiefs
15:00	Transfer to Les Cayes airport	Michele, Pablo, HCO
16:00 – 16:30	Flight from Les Cayes to PaP – Sunrise Air	Sunrise Air
16:45 – 17:30	Transfer from PaP airport to Hotel	Michele, Pablo
Fri 11th Feb – Day 5, PaP		
08:00	Transfer to HCO office, Debussy	NOTE: ensure Covid Test
8:30 – 10:30	Working Session with HCO management/CMT on PaP Urban response intersectoral strategy , based on the CCCs	Participants: all Programme sessions (chiefs + designed f.p.), M&E, Soc. Policy, Comms, Dep. Rep and Representative
11:00 – 12:30	Meeting on Access with the remote participation of EMOPS/Access colleagues, 1h, 30 min <ul style="list-style-type: none"> OCHA to present the Access w.g. – Q/A (30 min) Exchange with UN sister agencies and ICRC on coordination for humanitarian access 	Michele, Pablo, Toni, Patrick, Chief M&E, Dep. Rep., Representative
12:30 – 13:30	<i>Lunch</i>	
15:00 – 16:00	Final debriefing with Representative/HCO management on the visit and the LL/ planning workshop. Agree on next steps/ action points (at the hotel)	Michele, Pablo, HCO management
16:00	Transfer Hotel Marriott –	Michele, Pablo

Annex<N°10 Presentation of the team

Presentation of the team

Team Leader - François Grünwald: As an agronomist, François has been working in the solidarity sector for over 35 years. After working for the UN, the ICRC and NGOs, he managed Groupe URD (www.urd.org) for 20 years. Groupe URD is a research, evaluation, methodological and training institute specialised in crisis management, humanitarian action and reconstruction. He has extensive experience as a team leader in complex evaluation missions in difficult environments. He has conducted a wide range of studies on disasters (including research and evaluation of humanitarian programmes, risk management preparedness in Africa, Latin America, Caucasia, Asia, and the Middle East) for donors, the Red Cross movement, the UN and NGOs. As a former associate professor at the University of Paris XII, he also teaches at various institutions in Europe, Canada and the United States. He has written numerous articles for specialist reviews and has edited several books, including "Entre Urgence et développement", "Villes en Guerre et Guerre en Villes"; "Bénéficiaires ou partenaires : quels rôles pour les populations dans l'action humanitaire" published by Karthala Editions. <https://www.urd.org/fr/projet/observatoire-covid-19/>. F. Grunewald was responsible for the quality of the process, coordination of the team's activities and the preparation of the different documents required by the contract. He also linked with UN agencies and the national authorities.

Jean Luc Poncelet, MD, MPH, has 35 years of experience in disaster management capacity building, and public health emergency response especially in Latin America and the Caribbean, but has also worked in Yemen, Mali and Burundi. He started his disaster management career in 1986, comparing the public health status of refugee versus recipient populations in Central America. He then became involved in the rapidly growing field of disaster risk reduction, recovery and resilience. He has contributed to post-disaster needs assessment guidelines developed by OCHA (cluster), WB- PNUD-ECLAC (PDNA) and WHO. He has been involved in a large number of missions in Haiti since 1990 including casualty management plans, the creation of the Civil Protection department, and recovery and resilience projects. He actively participated in the 2010 Haiti earthquake health sector response and the cholera epidemic response (2014-2017). He was in charge of dialogue high level authorities, assisted 35 countries, among other with funding of EU/ECHO, USAID, CIDA, UN/CERF and others at responding efficiently to humanitarian crises. He is presently the Natural Hazard Disaster Management associate at John Hopkins University and a Senior Health Advisor and Researcher at Groupe URD. Jean-Luc assisted the team leader and analyse different issues related to health, disaster management, information management and M&E.

Woodline Taverne is a lawyer with a Master's in Public Administration. Since 2009, she has been working on programmes with a strong gender and child protection component in Haiti. In 2016, she also worked on education in the Dominican Republic. She works for a Canadian NGO in the Chantal Commune (South Haiti) on how to better respond to the needs and conditions of girls and women in the community. Woodline was in charge of the child protection and gender equity issues as well as the links with the Haitian civil society organisations who are partners of UNICEF.



Photo n°14: UNICEF education kits



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