

Multi-country evaluation of UNICEF's response to the Venezuela outflow crisis (2019-2021)



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Colombia Country Case Study

October 2022

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The data collection for this country case study was conducted in October 2021, and the reporting phase was finalised in October 2022. Although findings were not updated, recommendations were workshopped with the Colombia Country Office and regional office in September 2022.

Abbreviations & Acronyms

AAP	Accountability to Affected Populations
AGD	Age, Gender and Diversity
ACH	Acción Contra el Hambre (Action Against Hunger)
ALNAP	Active Learning Network for Accountability and Performance
AOR	Area of Responsibility
C4D	Communication for Development
CBI	Cash-Based Intervention
CCCs	Core Commitments for Children in Humanitarian Action
CEAP	Corporate Emergency Activation Procedure
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CENAF	Centros Nacionales Fronterizos (National Border Centres)
CERF	Central Emergency Response Fund
CFS	Child-friendly Spaces
CIDEMOS	Corporación para la Investigación y Desarrollo de la Democracia
CMEU	Child Marriage and Early Unions
CO	Country Office
CONPES	El Consejo Nacional de Política Económica y Social
CP	Child Protection
CPD	Country Programme Document
CRAS	Reference Centre for Social Assistance
CWC	Communication with Communities
CWD	Children with Disabilities
DFID	Department of International Development (now Foreign, Commonwealth & Development Office (FCDO))
DSE	Departmental Secretariat of Education
DTM	Displacement Tracking Matrix
EA	Espacio de Apoyo (Support Centre)
ECHO	European Commission Humanitarian Aid
EMOPS	Office of Emergency Programmes
EPP	Emergency Preparedness Platform
EQ	Evaluation Question
ERIC	Ethical Research Involving Children

ET	Evaluation Team
ETP	Estatuto Temporal de Protección (Temporary Protection Status)
FO	Field Office
GBV	Gender-Based Violence
GIFFM	Grupo Inter agencial sobre Flujos Migratorios Mixtos (Interagency Group on Mixed Migratory Flows)
GoC	Government of Colombia
HAC	Humanitarian Action for Children appeal
HACT	Harmonized Approach to Cash Transfers
HCT	Humanitarian Cash Transfer
HPD	Humanitarian Programme Document
HPM	Humanitarian Performance Monitoring
ICBF	Instituto Colombiano de Bienestar Familiar
IOM	International Organization for Migration
IP	Implementing Partner
IPPDH	Instituto de Políticas Públicas en Derechos Humanos (Institute of Human Rights Public Policy)
IR	Inception Report
IRB	Interview Review Board
IYCF	Infant and Young Child Feeding
JNA	Joint Needs Assessment
KI	Key Informant
KII	Key Informant Interview
LACRO	Latin American and Caribbean Regional Office
LCs	Learning Circles (círculos de aprendizaje)
LGBTIQ+	Lesbian, Gay, Bisexual, Trans, Intersex and Queer
MEN	Ministerio de Educación de Colombia (Colombian Ministry of Education)
NRC	Norwegian Refugee Council
NYHQ	UNICEF New York Headquarters
OECD	Organisation for Economic Co-Operation and Development
ORR	Other Regular Resources
PAHO	Pan American Health Organization
PARD	Proceso Administrativo de Restablecimiento de Derechos (Administrative Process for the Re-establishment of Rights)

PCA	Project Cooperation Agreement
PDET	Programas de Desarrollo con Enfoque Territorial
PPE	Personal Protective Equipment
BPRM	Bureau of Population, Refugees and Migration
PSEA	Prevention of Sexual Exploitation and Abuse
R4V	Response for Venezuelans
RCCE	Risk Communication and Community Engagement
RMRP	Regional Migration Response Plan
SDEs	Secretarías departamentales de educación
ToC	Theory of Change
ToR	Terms of Reference
TPS	Temporary Protection Status
UASC	Unaccompanied and Separated Children
UNCRC	UN Convention on the Rights of the Child
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNOCHA	UN Office for the Coordination of Humanitarian Affairs
UNV	United Nations Volunteer
VMC	Venezuela Migration Crisis
WASH	Water, Sanitation and Hygiene

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Executive Summary

The Government of Colombia (GoC) requested international assistance to address the Venezuelan Migration Crisis (VMC) in 2018. It is estimated that more than a million Venezuelans transited through Colombia in 2018 and 2019 en route to other countries. Approximately 42,000 pendular migrants enter the country daily for work, study, medical care, business or other activities. By October 2021, the number of Venezuelans crossing the Colombian border had risen to 1,842,390. Some 500,000 Colombians have returned from Venezuela in recent years due, among other things, to the labour force disruptions and employment generated by the COVID-19 pandemic and associated public health restrictions. In February 2019, UNICEF activated the Level 2 (L2) VMC emergency response, which coincided in 2020 with the unprecedented COVID-19 Level 3 (L3) emergency activation, which heavily impacted all the countries in the region.

All these population movements – transit, pendular, returnee and intention to take up residence in Colombia – present specific vulnerabilities to migrant children and their families and require a protective, rights-based approaches. GoC has maintained an open-door policy and implemented various mechanisms for socio-economic integration and access to rights and services for both migrants and host communities. Most recently the Estatuto Temporal de Protección (ETP)¹ was created with the intention of allowing Venezuelan migrants access to a range of government services.

This Country Case Study considers UNICEF's Response to the VMC in Colombia from both a humanitarian and long-term development perspective. As part of the humanitarian response, UNICEF participates in the Grupo Inter agencial sobre Flujos Migratorios Mixtos (the Interagency Group on Mixed Migratory Flows, GIFMM), it monitors the situation of children and families on the move, provides humanitarian assistance and channels efforts and resources to strengthen Colombia's capacities both as a transit country and one in which migrants are intending to remain. Over the period covered by the L2 Emergency (February 2019-June 2020) and well into 2021, UNICEF Colombia provided direct humanitarian assistance and sector coordination for populations on the move. Taking a long-term perspective, it also provided technical assistance to the GoC at various levels and through a number of key institutions to develop policies and capacities to receive and integrate this massive migrant population.

Evaluation purpose, objective and intended audience

The purpose of the evaluation and its five country Case Studies is to account for the results achieved by UNICEF's Response to the L2 Emergency activation, and draw out lessons learned and recommendations to guide UNICEF future strategic and programmatic priorities for children on the move. The primary objective is to provide evidence on whether the response to the VMC of the UNICEF Colombia Country Office(CO) has been appropriate, effective, coherent, adequately coordinated, efficient and connected. It seeks to understand the enabling and constraining factors and lessons learned t. The primary users of this evaluation are the UNICEF Offices in which country case studies were carried out (Brazil, Colombia, Ecuador, Peru, Trinidad and Tobago); UNICEF staff supporting the response in the Latin America and Caribbean Regional Office (LACRO) and in Headquarters (HQ); key partners, government counterparts and affected populations.

Evaluation methodology

The analytical framework of the evaluation was constructed combining the criteria used by the Development Assistance Community of the Organisation for Economic Cooperation and Development (OECD DAC) a with the international human rights framework. In terms of quality standards, the evaluation refers to UNICEF's *2020 Core Commitments for Children*² as well its *Six-Point Agenda for Children on the Move*.³ It is utilisation-focused, participatory and forward-looking with a view to shedding light on the results achieved so far and the approaches to enhance UNICEF's strategic and programmatic effectiveness for children on the move. The methodology consists of mixed methods including document and literature review, semi-structured interviews with key informants at national and local level, and field visits to consult with UNICEF field teams, partners, and representatives of both migrant and host communities. A country visit was carried out from 25-30 October 2021, allowing the evaluation team to take a route-based approach, visiting migrant settlements, host communities and service Centres for those migrants en route in key areas most affected by the VMC: Barranquilla, Norte de Santander, Arauca and La Guajira. For those stakeholders who could not be interviewed in the field, remote interviews were organised using a hybrid research approach.

¹ <https://www.migracioncolombia.gov.co/visibles>

² <https://www.unicef.org/emergencies/core-commitments-children>

³ <https://www.unicef.org/documents/global-programme-framework-children-move>

Key findings and conclusions

UNICEF Colombia has participated in a complex response to the VMC, which has unfolded in a context of diverse and multiple humanitarian needs and issues, not the least of which has been the effects of the COVID-19 pandemic. During this period, UNICEF Colombia has appropriately adapted to the increasing VMC influx by extending its presence, including by adding field offices, without which it could not have delivered a humanitarian response on such scale. UNICEF's emergency, sectoral and field teams must be given credit for their enormous efforts under very difficult circumstances – handling two emergencies simultaneously. At a regional level, the evaluation has questioned the overall rationale for a nationality-based response to the Venezuelan outflow. For ethically and practically, there have been other migrant populations in need of the same humanitarian response, services and advocacy from UNICEF. Using a gender analysis and gender equality lens it becomes clear UNICEF Colombia is lacking in staff resources to address the breadth and scope of the VMC from a gender perspective. The VMC raises specific challenges for children and adolescent girls and boys. While staff are doing their best, they are stretched to the maximum and there are many programming areas where UNICEF could improve.

Appropriateness

Overall, UNICEF Colombia has developed and adapted a number of response strategies, objectives and implementation modalities, which have been appropriate and relevant to the changing needs of migrant children and their families along the migration route and which have included adaptations to the pandemic. UNICEF significantly expanded its territorial presence through new field and satellite offices and engaging new staff to meet the needs of the emergency and enhance its ability to actively participate in the GIFMM's Response for Venezuelans (R4V) in key border and transit areas. Working within the framework of the GIFMM-R4V platform, it has invested in vital services, in particular around water, sanitation and hygiene (WASH) at the border, transit sites and rural settlements. Aligned with the GoC policies, it has provided support to those Venezuelans who want to remain in Colombia to register for the ETP, thus providing a pathway to local integration through access to work permits, health coverage and other key entitlements and rights.

In the context of the pandemic, UNICEF Colombia's extensive WASH expertise helped bridge two parallel humanitarian responses (L2 VMC and L3 COVID-19) as well as a straightforward bridge between responses in rural and urban settlements. However, in a number of cases, the appropriateness of and relevance of UNICEF strategies, objectives and implementation modalities could be reviewed and revised, at both national and regional level, in light of the scale and complexity of the VMC. As will be explored further in the Regional Synthesis report, in Colombia, as in all five Country Case Studies, the evaluation notes a lack of a fully operationalised, overarching regional strategy to address what was clearly a regional emergency. In its absence the Humanitarian Action for Children (HAC) appeal has been the main tool for harmonising implementation approaches between COs addressing the VMC.

UNICEF incorporated its policy on Accountability to Affected Populations (AAP) in all project cooperation agreements with its implementing partners. Yet, the evaluation found limited opportunities for affected populations to participate in programmes which affect their lives, and limited opportunities for UNICEF staff to validate the needs and priorities of affected populations in a way not mediated by its partners. UNICEF Colombia included migration as a key risk factor in its Emergency Preparedness Platform. However, in practice preparedness measures would be greatly enhanced by creating a regional early warning system to inform UNICEF teams along the migration route of significant population movements, giving them time to prepare. UNICEF's internal arrangements, including staffing, training, contracting, fundraising and managerial capacity could be strengthened with a view to better reflect the scale and complexity of the VMC.

Effectiveness

At the output level, UNICEF Colombia achieved many of its intended targets and in 2019 was able to exceed expectations in some areas. UNICEF and GIFMM-R4V partners were also able to show key results in terms of supporting and promoting social inclusion, through providing technical support to operationalise the open-door policy of the GoC. To a lesser extent, and somewhat unequally, some long-term results are also emerging in terms of access to rights and protection, empowerment of migrant children, adolescents, and their families and access to needed information and opportunities on their migratory journey. The evaluation team finds wide variations in the capacity of UNICEF Colombia to achieve its targets. The response has been under-resourced and hence spread thin, over many regions, many sectors, many different types of migrant and host populations, including Venezuelan migrants, Colombian returnees as well as a handful of migrants from other countries. It needs to be recognised that UNICEF Colombia has made strategic choices to focus its efforts on certain key border regions where it is able to show greater effectiveness. UNICEF Colombia contributed at the national level to put in place the pre-requisites for Venezuelan refugee and migrant children to enjoy their rights – in particular through the campaign to combat statelessness, measures to ensure accessible birth registration in hospitals, and the roll out of the ETP. UNICEF also

supported positive messaging around respect for the rights of Venezuelan migrant children in order to challenge xenophobic attitudes, which may have indirectly resulted in less targeting and discrimination against Venezuelan refugees and migrants. However, efforts at the international (regional) level of the Quito Process (the name given to the meetings and commitments established between Latin American countries to coordinate the VMC response) to ensure a regional child protection protocol have stalled. Local efforts to operationalise effective child protection monitoring and case management require strengthening.

Concerning education, UNICEF has not achieved the sector result formulated in its HAC 2019 or 2020 and, with current funding levels, will not achieve the sector result of full integration into the national education system. Data suggest that many children—both migrant and Colombian—continue to lack practical access to the national education system. While the main intervention, *círculos de aprendizaje*, Learning Circles (LCs)⁴, has had many positive aspects, it has not overcome systemic obstacles to access to formal schooling for children on the move. This is one example where humanitarian investments and policy advocacy are needed to ensure the rights of children on the move are respected. In the social protection sector, UNICEF rolled out a Humanitarian Cash Transfer (HCT) in the second half of 2020 in response to the extreme vulnerability of migrant families to the confinement and public health measures to control the spread of the COVID-19 pandemic. Future work on HCTs in Colombia can build effectiveness and efficiencies by working more closely and in coordination with other GIFMM partners also rolling out HCTs. In terms of long-term integration of children on the move, the *Programas de Desarrollo con Enfoque Territorial* (PDET) or the *Territorios Amigos de la Niñez* approach have been promising but need to be carefully monitored and evaluated to assess effectiveness for enhancing local integration and empowerment of migrant children and adolescents in UNICEF-prioritised municipalities.

WASH has been the most visible face of UNICEF during the VMC response, overlapping with the COVID-19 L3 Emergency response. WASH actors led a strong response in terms of both sector coordination and programmatic response, while linking humanitarian and development objectives. It was the bedrock upon which many other UNICEF and R4V services and measures relied, as well as the spearhead for entry into new communities and institutional relationships. Regarding health and nutrition, a common one package delivery strategy appears to be both effective and efficient, and mobile clinics enhanced outreach to vulnerable groups from both migrant and host communities. There could be stronger focus on Child Protection and gender-based violence (GBV) prevention and response. The GIFMM-R4V platform ensured the availability of primary health services to refugees/migrants at key border and transit points.

The Core Commitments for Children (CCCs) are one of the main UNICEF standards for measuring the effectiveness of humanitarian response. A finding from the evaluation is that the CCCs are difficult to apply in some sectors in Colombia and other UNICEF country responses as these operations align themselves with standards set by other actors and those of national governments, not necessarily or fully consistent with the CCCs. This suggests the need in Colombia and other countries in the region both for more training on how to locally apply the CCCs and clarification at LACRO and HQ levels about the extent to which UNICEF expects the CCCs to be applied where these are not aligned with existing national capacities and standards. In addition to the migration outcome indicators, Communication for Development (C4D) indicators suggest a good progress from short-term activities towards the longer-term sector result established in the 2019 HAC. The C4D/Communications strategy adopted by UNICEF Colombia appears appropriate for the scale and nature of the emergency.

Coverage

The evaluation explored the internal and external factors that enabled or constrained UNICEF's ability to provide the most vulnerable Venezuelan migrants and refugee children, their families and host communities with needs-based protection and assistances. Enabling factors were found to be UNICEF's territorial presence in the areas most highly affected by the VMC, and the quality of its staff and partners. Constraints include relatively low levels of funding given the scale of the emergency, failure to form key vulnerability profiles and lack of strategies and models designed to address vulnerabilities at scale given the geographical dispersion of children on the move. Coverage is found to be the weakest aspect of the UNICEF Colombia and wider regional response: challenges of resource mobilisation did not allow UNICEF to address vulnerabilities in line with the scale of the VMC.

The main factors affecting donor perceptions and willingness to fund UNICEF's appeal and projects include: 1) the ability to come up with innovative humanitarian initiatives and projects that address the needs of the most vulnerable; 2) the ability to involve more donors (the US, sees itself as having given a disproportionate share of VMC humanitarian financing); and 3) competition from other actors meaning that UNICEF has needed to demonstrate its value for money as a UN agency. Donors have considered that UNICEF in some cases lacks specific data and analysis needed to adequately target its programming towards those most vulnerable migrants and

⁴ For more information see section 7.1

children on the move, and to address serious protection risks, particularly those facing adolescent girls who fall victim to trafficking and networks of sexual exploitation.

Coherence and coordination

UNICEF Colombia played a key role in engaging local and national actors on children on the move, and built new capacities to address the rights of migrant children. Among the wide range of UNICEF VMC implementation partners, 25 are Colombian organisations and 11 are community-based. This constitutes a positive contribution to strengthening national capacity to address future emergencies and migration situations. The response continued to be closely tied to the priorities of various national ministries and institutions, such as the Ministerio de Educación de Colombia (Colombian Ministry of Education, MEN) and the Instituto Colombiano de Bienestar Familiar (ICBF) and their requests for assistance. The extension of UNICEF's presence through the opening of field office, enabled UNICEF to better balance national priorities with local needs. Going forward, it will be important for UNICEF to feed back to national institutions the gaps and barriers created by efforts to implement national policies at the local level, and to generate creative solutions to overcoming these.

Two key gaps are noted: one in information gathering/management, the other in coordination. The two go hand in hand. Effective coordination should put in place the mechanisms needed to generate information on vulnerabilities. This information in turn should allow additional actors, funds and programmatic response to be generated to provide complementary services to meet needs. In the VMC both functions are a patchwork - both by sector and by geographic area. UNICEF's field presence, while it has expanded, remains limited overall since the scale of the VMC is national. This can generate significant information gaps in terms of UNICEF's ability to perform its coordination role.

Efficiency

UNICEF's value added in the L2 response, and more generally for children on the move, is its mandate to defend and advocate for child rights, regardless of nationality and migration status. VMC donors and other actors look to UNICEF to set and uphold humanitarian standards for children on the move and their families while also providing technical advice to government and other agencies around issues that particularly affect children. UNICEF's multi-sectoral mandate is an advantage, but also leads to its resources being spread very thin on the ground. UNICEF's value added also manifested itself in strengthening the capacity of its implementing partners in the area of migration, which is a new issue which many civil society organisations have needed support to address. In general, UNICEF's programmatic interventions were designed based on its own mandate, strategic partnerships, including those with UN, central and local government, civil society and NGOs. Only a few cases of duplication were detected that should be easily corrected in the future. However, in a humanitarian situation like the VMC, it appears that gaps are unavoidable until UNICEF and other partners can develop more strategic, scalable approaches and attract needed donor support.

Connectedness

UNICEF Colombia's strength is building on long-term partnerships with the GoC, long-term models and favourable government policies to work on longer-term integration and capacity building. This is clearly articulated in UNICEF Colombia's new Country Programme, which identifies migration as one of its three components and adapts pre-existing strategies to include migration as an additional protection risk facing children and adolescents in Colombia. This is valid and well connected to UNICEF's longer-term work to build capacity of Colombian institutions to ensure inclusion and integration of migrant children and adolescents into national systems, social policies and protective mechanisms. However, as migration is a dynamic phenomenon and UNICEF has not fully invested in its humanitarian response capability, it is not clear that lessons learned from the VMC, including the importance of paying attention to the conditions of those returning to Venezuela, will lead to UNICEF Colombia being better prepared for future influxes and movements of returnees.

Good practices and lessons learned

Good practices noted in the UNICEF Colombia Case Study include:

- National roll-out of the ETP providing a multi-service registration opportunity for children and families
- The role of WASH as a strategic entry point to launch UNICEF's work in communities impacted by migration
- UNICEF supported a localisation agenda by selecting and building capacity of local, regional, and national NGOs without prior experience on migration issues
- Building Prevention of Sexual Exploitation and Abuse (PSEA) capacity among UNICEF partners
- Working with indigenous organisations in indigenous languages
- COVID-19 humanitarian cash transfer benefited families at a critical moment.

Lessons learned include:

- Field presence developed by UNICEF requires adequate consultation and engagement in the generation of new proposals, identification of partners and a stronger advocacy agenda.
- Field teams and implementing partners who are new to UNICEF and humanitarian work should be provided with training and support, particularly around the CCCs.
- UNICEF and GIFMM partners are learning that they need to invest adequately in information management systems that will help to pinpoint the most vulnerable groups and develop strategies to address their vulnerabilities.

Recommendations

Overarching recommendations at regional level

OR1- Senior management should go through an institutional reflection on whether nationality-based migration policies are here to stay for UNICEF and the UN system as a whole.

OR2- Since mass population movements are not likely to go away, but rather to increase in the future, UNICEF at country, regional and global level need to build capacity to ensure Early Warning Systems and Preparedness measures are in place.

Country-specific recommendations

CS1- Ensure adequate tools and processes for AAP beyond the currently established delegation to implementing partners (IPs).

CS2- Support the MEN and Departmental Secretariats of Education (DSEs) to develop a strategy to identify out-of-school children and provide adequate response resources.

CS3- Advocate for and promote the rights and empowerment of adolescents on the move in all its interventions, using a gender perspective and other differential factors to achieve better empowerment and integration outcomes.

CS4- Invest in data and evidence on situation analyses, needs assessments and mapping key gaps in coverage across sectors as a basis for future programming, while urgently addressing the gaps identified.

CS5- Update UNICEF Colombia's advocacy strategy through a solid, SMART advocacy plan to ensure that data and evidence generated from the field on the gaps in coverage and non-enjoyment of rights is translated into verifiable advocacy actions with authorities at appropriate levels.

1. Background and context of UNICEF Colombia's response to the Venezuelan Migration Crisis (VMC)

According to UNICEF⁵, in 2021 there were five million Venezuelans on the move, including 4.6 million who are moving within the region. Approximately 3.4 million Venezuelans, including indigenous populations, are settled in Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Trinidad and Tobago.⁶ These countries host the most vulnerable Venezuelans, including children and youth, with limited livelihood opportunities and poor access to health, nutrition, education, protection and Water, Sanitation and Hygiene (WASH) services. With limited access to safety nets, COVID-19 lockdowns disproportionately affected migrants and asylum seekers. Over the course of the migration crisis, many migrants have also returned to Venezuela due to the COVID-19 pandemic and related confinement measures and because they were unable to cover their basic needs. In 2021, UNICEF and R4V partners were expecting over 135,000 returnees in the coming months.⁷

The National R4V Platform in Colombia GIFMM's Joint Needs Assessment (JNA)⁸ conducted in June 2021 indicated that 77 per cent of Venezuelan refugee and migrant households surveyed lacked access to healthcare⁹; 26 per cent of children in surveyed households were not attending any type of school (online or in person); 24 per cent of households faced food insecurity and 25 per cent used poor quality water. According to the JNA, 26 per cent of refugees and migrants from Venezuela interviewed had experienced discrimination on the basis of their nationality during the year.

1.1 Rights holders and duty bearers

From 2015, Colombia began seeing a steady increase in both the number of Venezuelan migrants as well as the number of Colombians returning from Venezuela. Based on figures from Migración Colombia, of the 1,408,055 Venezuelan migrants who had settled in Colombia as of June 2019¹⁰, some 26.8 per cent were under 18 years of age. Migrant children and adolescents are especially affected by the migration flows due to limited access to education and health systems and are exposed to the risk of commercial sexual exploitation and GBV.

By October 31, 2019, however, the Coordination Platform for Venezuelan refugees and migrants - R4V - led in Colombia by the UN High Commissioner for Refugees (UNHCR) and the International Organization for Migration (IOM), was registering numbers much higher than those indicated by figures provided by the state agency Migración Colombia.¹¹

Geographically, Venezuelan migration has been concentrated mainly in the border departments (Norte de Santander, Arauca, and La Guajira), Bogotá and the Atlantic Coast.¹² In addition, many of the Venezuelan refugees and migrants, as well as Colombian returnees who were living in Venezuela after fleeing armed violence in their own country, arrive in marginalised areas. In these rural and peripheral areas there is low government investment and presence, poor infrastructure, poverty, endemic armed conflict, protracted internal displacement and vulnerability to natural hazards, in short exposure to what UNICEF Colombia refers to as "multiple affectations".

Colombia requested international assistance to address the crisis in 2018¹³. It is estimated that more than a million Venezuelans transited through Colombia in 2018 and 2019 en route to other countries and approximately 42,000 pendular migrants enter the country daily for work, study, shopping, trading, health care and other reasons. According to UNICEF Colombia's current Country Programme Document (CPD)¹⁴, approximately 1,825,687 migrants and refugees from Venezuela were in Colombia in early 2020.¹⁵ ¹⁶ According to the GIFMM, by October 2021, this number had risen to 1,842,390 Venezuelans.¹⁷ It is also estimated that some 500,000 Colombians or

⁵ UNICEF: Humanitarian Appeal for Children, Children on the move, including from the Bolivarian Republic of Venezuela, and people affected by COVID19, 2021.

⁶ R4V, 'Latin America and the Caribbean: Venezuelan refugees & migrants in the region', February 2021.

⁷ R4V, 'COVID-19 Flash Update October-November 2020', 14 January 2021.

⁸ GIFMM Joint Needs Assessment for population in destination (hereinafter JNA), Round 5, June 2021: <https://www.r4v.info/es/document/gifmm-colombiaevaluacion-conjunta-de-necesidades-junio-2021>.

⁹ The sample of 2,161 households surveyed via telephone was drawn from the databases of 20 participating GIFMM organisations. Since the households surveyed have access to humanitarian assistance, these results are not necessarily representative of all Venezuelan refugees and migrants in Colombia.

¹⁰ R4V, Sit Rep Colombia, June 2019 : https://www.google.com/search?q=Migracion+Colombia%2C+of+the+1%2C408%2C055&rlz=1C1GCEU_frCA927CA929&oq=Migracion+Colombia%2C+of+the+1%2C408%2C055&aqs=chrome..69i57.4101j0j15&sourceid=chrome&ie=UTF-8

¹¹ A total of 1,630,903, of whom 641,825 were regular and 911,714 had exceeded their authorised stay or had entered the country illegally.

¹² Other affected departments included Nariño, which reported a large backlog of migrants, and Vichada where, due to the limited capacity of the GIFMM and the government, the situation was critical.

¹³ https://www.cancilleria.gov.co/sites/default/files/FOTOS2018/v2._resumen_documento_conpes_3950.pdf

¹⁴ United Nations Children's Fund: Executive Board, Second regular session 2020 8–11 September 2020, Country programme document 2021–2024, Colombia. <https://sites.unicef.org/about/execboard/files/2020-PL13-Colombia-CPD-EN-ODS.pdf>

¹⁵ Of whom 799,373 possessed some form of regularisation mechanism or were within the legally permitted time frame to remain in the country.

¹⁶ CONSEJO NACIONAL DE POLÍTICA ECONÓMICA Y SOCIAL REPÚBLICA DE COLOMBIA, DEPARTAMENTO NACIONAL DE PLANEACIÓN: Documento 3950, «ESTRATEGIA PARA LA ATENCIÓN DE LA MIGRACIÓN DESDE VENEZUELA» 23 noviembre, 2018.

¹⁷ GIFMM Colombia, Support Plan, October 2021: https://reliefweb.int/sites/reliefweb.int/files/resources/Support%2520Plan%2520ETPV_DRAFT11062021_ENG_FV24062021.pdf

more have returned from Venezuela in recent years due, among other things, to the labour force disruptions and employment generated by the COVID-19 pandemic and associated public health restrictions. All these different types of movement scenarios – transit, pendular, returnee and intention to take up residence in Colombia – present a different set of vulnerabilities to migrant children and their families and require a distinct set of protective measures.

In the case of Colombia, the objectives of the request for assistance launched by the State in 2018¹⁸, were (1) to provide humanitarian assistance, and (2) to facilitate the social and economic integration of those migrants who intend to remain in the country and support host populations and Colombian returnees through comprehensive services.

The Government of Colombia (GoC) has maintained an open-door policy and has implemented various mechanisms for socio-economic integration and to provide access to rights and services to migrants and host communities. These include the *Strategy to Address Venezuelan Migration* (3950 (2018)) of the National Council for Economic and Social Policy; Joint Circular No. 16/2018 on educational services for Venezuelan children; Decree 64, enabling access to social security and healthcare services; Decree 117/2020, creating the Special Stay Permit for the Promotion of Formalization; and Decreto 216 of 1 March, 2021 to prevent statelessness.

The challenge in Colombia, as evidenced below, is not currently the legal or policy framework at the national level. Rather, it is the wide gaps in resources, staffing, awareness and institutional mechanisms and other inputs needed to operationalise national level policies at a local and practical level where migrants and refugees, as well as members of the host community, urgently require services and protection. There is need for protective mechanisms that empower, rather than constrain, those on the move and particularly adolescents seeking a better life for themselves and their families.

1.2 Object of the evaluation and country case studies

UNICEF's response to the Venezuela Migration Crisis (VMC) 2019-2021, both at country and regional levels, constitutes the object of the evaluation. Through a regional lens and five country case studies in Brazil, Colombia, Ecuador, Peru and Trinidad and Tobago, the overall evaluation will review the diverse ways that UNICEF has responded to the VMC, given the specific opportunities and constraints of national contexts, government policies, and through both its development and humanitarian interventions. The five case studies will shed light on good practices and lessons learned from the experience of UNICEF country offices of responding to this now protracted humanitarian crisis, and how UNICEF LACRO and HQ can better support COs in their response efforts. This report constitutes the country case study of the UNICEF Colombia response.

Overview of UNICEF Colombia's response to the VMC

This country case study explores UNICEF Colombia's response to the VMC, seeking to identify good practices and lessons learned that can shape future migration in the country and the region. Although the crisis was building up¹⁹ over a number of years, UNICEF's response to the VMC in Colombia was officially triggered in 2018 in response to the GoC's formal and official request to the whole of the UN system for VMC intervention. A document prepared in 2018 by the Consejo Nacional de Política Económica y Social (CONPES), *Estrategia para la atención de la migración desde Venezuela* (Strategy for the attention to migration from Venezuela)²⁰ sets out the national government's response to the needs of Venezuelan migrants and Colombian returnees in terms of health, education, family welfare, protection, food and nutritional security and habitability and enjoyment of favourable environments, coexistence and citizen security in reception municipalities and localities.

In 2018, the government itself committed approximately US\$ 136 million to the response²¹ and noted a parallel between Turkey's reception of Syrian refugees, and Colombia's reception of Venezuelan migrants in terms of the scale and significance of the population movement. CONPES produced an accompanying *Estrategia de Generación de Ingresos para la población migrante proveniente de Venezuela y las comunidades de acogida*²² (Income generation strategy for the migrant population from Venezuela and the host communities) that proposes

¹⁸ https://www.cancilleria.gov.co/sites/default/files/FOTOS2018/v2_resumen_documento_conpes_3950.pdf

¹⁹ Documento Conpes 3950 *Estrategia para la Atención de la Migración desde Venezuela*, November 2018, p. 15. The CONPES 3950 notes that although since mid-2012 there has been an increase in the number of migratory operations at migration checkpoints with migration operations at migration checkpoints with Venezuela, the increase was not very marked (Mejía, 2012; *Migración Colombia*; 2017). In August 2015, the Venezuelan president decreed the closure of the border with Colombia, citing security reasons with Colombia. This measure was accompanied by the deportation of around 2,232 Colombian nationals living in the border area and accelerated the voluntary return of more than 20,000 Colombians (Migration and Customs 20,000 Colombians (*Migración Colombia*, 2018). Following the Venezuelan government's announcement to reopen the border as of August 13, 2016, *Migración Colombia* recorded in just two weekends, the passage of 400,000 Venezuelans into national territory, mainly to buy food and basic necessities. The humanitarian response by the Colombian government began in 2016.

²⁰ https://www.cancilleria.gov.co/sites/default/files/FOTOS2018/v2_resumen_documento_conpes_3950.pdf

²¹ Documento Conpes 3950 *Estrategia para la Atención de la Migración desde Venezuela*, November 2018. P. 102

²² <https://www.apccolombia.gov.co/proyectos/apoyo-la-implementacion-de-la-estrategia-de-generacion-de-ingresos-para-la-poblacion>

alternatives for economic stabilisation and social integration for this population, This indicated why GoC requests the support of the UN. In Colombia, the humanitarian emergency response preceded LACRO's Level 2 (L2) emergency activation by a number of months.²³ The overall response is led by the GoC, with coordination provided by UNHCR-IOM and the newly created GIFMM-R4V coordination platform. UNICEF is currently part of the Grupo Inter agencial sobre Flujos Migratorios Mixtos (Interagency Group on Mixed Migratory Flows, GIFMM)²⁴, which periodically monitors the situation of the migrant population, both to provide humanitarian assistance and to channel efforts and resources to strengthen Colombia's capacities as a migrant receiving country – both as transit country and one in which migrants are intending to remain.

UNICEF Colombia has provided technical assistance to the GoC in its response to the migrant population since 2018. There have been three key areas:

1. UNICEF exercises technical and programmatic leadership for the response to the mixed migratory flow in protection, education, WASH, health, early childhood care, among others.
2. UNICEF participates in the Migrant Children's Roundtable, which has made it possible to follow up on critical situations affecting migrant children and adolescents and coordinate concrete actions in the host territories. In addition, it co-leads the Education in Emergencies Cluster together with the Norwegian Refugee Council (NRC) and Save the Children, as well as the WASH Cluster which it co-leads with Acción contra el Hambre (Action against Hunger, ACH).
3. As co-lead agency, together with UNHCR, of the Communication for Development/Communication with Communities (C4D/CwC) Task Force, UNICEF has sought to implement an AAP strategy and develop messaging intended to address the needs and interests of the population in the migration process. The Task Force, which currently has 17 members, belongs to the Protection of National Humanitarian Response to the Mixed Migratory Flow from Venezuela group.²⁵

The Task Force has three fields of action: (i) ensuring the delivery of relevant information to the population in need, through available and meaningful communication channels; (ii) ensuring that humanitarian actors know, manage and disseminate key information for populations in need; and (iii) ensuring that communities in transit, with the intention to remain in Colombia and host communities, have access to accountability mechanisms that allow them to evaluate the humanitarian response, especially the treatment received from humanitarian workers.²⁶

As noted above, UNICEF's activities in response to the VMC have largely been carried out in key border areas: including Norte de Santander, the Atlantic region (Barranquilla and La Guajira), Arauca along the Venezuelan border, and Nariño on the Ecuadorian border. As will be further explored below this has been done through a rapid expansion of presence in key border areas and along key transit routes in collaboration with other R4V partners.

In terms of expected results, these are outlined and explored in detail by sector in the Findings section below. Here it is sufficient to note that response has placed a heavy emphasis on WASH – enabling R4V and communities impacted by the VMC to have access to adequate water and sanitation services – as well as Child Protection, Education, Health and Nutrition, C4D and Communications. A small pilot cash-based intervention under the Social Inclusion sector was added in response to the COVID-19 pandemic. For a more detailed list of 2021 Implementing Partners, see Annex 1.

UNICEF Colombia has worked closely with key government partners at national and sub-national levels. Among others, these have included Migración Colombia, Gerencia de Fronteras, Ministerio de Salud, MEN, the Instituto Colombiano de Bienestar Familiar (ICBF), the Registraduría Nacional (National Civil Registry) and the Procuraduría General de la Nación²⁷, a body charged with investigating irregularities in the function of GoC entities. Between 2019 and 2021, some 25 partners were engaged as implementing partners to participate in UNICEF's VMC response across sectors.²⁸

In its new CPD 2021-2024, UNICEF Colombia has developed a Theory of Change (TOC) to support its role with the GoC on the protection and inclusion of migrant and refugee children. This case study raises interesting questions about how UNICEF understands and interprets the meaning of the “humanitarian-development-peace²⁹ nexus”,

²³ LACRO activated the L2 Emergency in response to the VMC in February 2019, some months after UNICEF Colombia had started to work in an emergency response modality.

²⁴ Originally the GIFMM which was within the Emergency Humanitarian Platform structure and then changed to the R4V platform. This change has had consequences for the coordination of humanitarian response, since there are now two emergency humanitarian platforms in the country.

²⁵ UNICEF Colombia: Strategy Note (internal) as part of the development of the new CPD 2021-2014.

²⁶ Ibid.

²⁷ <https://www.procuraduria.gov.co/portal/>

²⁸ UNICEF Colombia. Migration Action Plan Templates 2019, 2020 and 2021 (internal documents)

²⁹ IOM: Lessons Learned from Operationalizing the triple nexus, 2019 <https://publications.iom.int/books/operationalizing-humanitarian-development-peace-nexus-lessons-colombia-mali-nigeria-somalia>

whereby a humanitarian and emergency context emerges within a long-standing development-oriented country programme.

Table 1. Timeline of the Emergency and Response in Colombia

Timeline	
From 2015 to December 2018	Over 819,000 are estimated to have entered Colombia through formal and informal border crossings ³⁰
2018	GoC makes formal request to UN to support the response April 2018 the UN Secretary-General provided direction for IOM and UNHCR to lead and coordinate the regional response to the situation of refugees and migrants from Venezuela UNICEF and other partners mobilised Riohacha sub-office opened
HAC 2018	Regional Response by UNICEF LAC including Colombia
2019	L2 Regional activation R4V platform operational Emergency manager appointed UNICEF Colombia Field Offices established in Arauca-Atlántico-Chocó-La Guajira-Nariño-Nte de Santander, scaled up staffing of a joint development/humanitarian response teams mainly UNVs. Learning Circles contracted to attend to needs of out-of-school children CP safe spaces are opened in August-September 2019
2020	COVID 19 pandemic, L3 activation Massive school closures and related protection problems New CDP developed and approved with migration component
2021	New CPD with migration component in place School reopening at 50% by October 2021, mostly completed by early 2022

Funding and partner mobilisation³¹

Frequent comparisons are made with the Syrian refugee crisis. Funding for the refugee operation in Turkey has been many times greater than for the VMC on a per capita basis, allowing for both better coverage and more comprehensive response. UNICEF requested US\$ 91.13 million through the regional HAC for the period 2019 to 2021. A summary of sector requirements and funding gaps for 2019, 2020 and 2021 is provided below.³² Colombia's HAC has been historically underfunded with a breakdown per sector showing that social inclusion, WASH, health, education and child protection are among the sectors with the largest funding gaps.

In 2020, UNICEF Colombia received an additional US\$ 5.5 million for the COVID response. For 2021, the HAC appeal was for US\$ 36,890,000 and constituted a combined appeal for both children on the move and pandemic response. Funding has been provided mainly by a handful of key donors: the Bureau of Population, Refugees and Migration (BPRM), ECHO, Sweden, Canada, the UN's Central Emergency Response Fund (CERF), internal UNICEF emergency funds and some private and public donations. For more detailed information of key donors and funding, see Annex 2.

³⁰ UNICEF LACRO Migration HAC 2018.

³¹ The totals are presented in US\$ without recovery costs. The amounts presented in this section are preliminary figures, as UNICEF presents its final amounts in its annual financial reports.

³² Figures provided by UNICEF Colombia, since there were some discrepancies in using the Regional Sit Rep reporting.

Table 2. Funding Requirements and Gaps by Sector – 2019 (US\$ millions)

Sector	HAC Requirements	Allocation	Gap	%Gap
Health	6.54	1.76	4.78	73%
Nutrition	0.5	0.51	-	-
Education	5.87	1.47	4.4	75%
WASH	7.56	2.03	5.53	73%
Child Protection	4.99	2.34	2.65	53%
Social Inclusion	0.69	0.03	0.66	96%
Advocacy/Comm	1.12	0.28	0.84	75%
C4D	0.85	0.32	0.52	62%
Cross Sectoral	1.03	1.08	-	-
TOTAL	29.14	9.81	19.33	66%

Table 3. Funding Requirements and Gaps by Sector – 2020 (US\$ millions)

Sector	HAC Requirements	Allocation	Gap	%Gap
Health	3	0.99	2.01	67%
Nutrition	0.83	0.31	0.53	63%
Education	4.53	0.77	3.76	83%
WASH	4.6	1.72	2.89	63%
Child Protection	4.37	1.13	3.24	74%
Social Inclusion	0.64	0	0.64	100%
Advocacy/Comm	0.94	0.03	0.91	97%
C4D	1.18	0.1	1.08	92%
Cross Sectoral	2.01	0.42	1.58	79%
TOTAL	22.1	5.46	16.64	75%

Table 4. Funding Requirements and gaps by sector – 2021 (US\$D millions)

Sector	HAC Requirements	Allocation	Gap	%Gap
Health	3.9	1.62	2.28	59%
Nutrition	3.34	0.9	2.44	73%
Education	9.26	2.14	7.12	77%
WASH	3.89	1.98	1.91	49%
Child Protection	8.67	3.13	5.54	64%
Social Inclusion	5.71	0	5.71	100%
Gender	0.18	0	0.18	100%
Advocacy	0.64	0	0.64	100%
C4D	4.3	0.54	3.76	87%
Cross Sectoral	-	0.9	-	-
Communication	-	0.12	-	-
TOTAL	39.89	11.33	28.56	72%

2. Purpose, objectives and scope of Colombia CO case study

2.1 Purpose

The purpose of the Venezuela Migration Outflow evaluation is to account for the results achieved between January 2019 and June 2021 and draw lessons learned and recommendations that will guide UNICEF's future strategic and programmatic priorities in the region and in Colombia, including the new Regional Office Management Plan and relevant Country Office (CO) Program Documents. The primary users of this evaluation are the UNICEF Offices in each of the countries, UNICEF staff in the regional office and in HQ supporting the response and LACRO, Government counterparts and targeted beneficiaries including children, adolescents and their families. Secondary users include UN agencies, civil society and other implementing partners, including other national and international organisations, donors, the private sector, host communities, and research agencies with interest in the evaluation findings.

For the purposes of the overall regional evaluation, this case study focuses on:

- The evolution of the Colombia Response from the activation of the L2 Emergency in February 2019 to the present, including the development of UNICEF Colombia's new CPD in 2020, development of migration Theory of Change, and the challenges and opportunities encountered in its approach to programming along the humanitarian-development nexus. Although there was no initial TOC for the migration response, there was a 2018 Strategy developed for the HAC. Based on this and other documents, the evaluation team has developed a TOC found in Annex 3.
- Colombia's efforts to ensure access to basic WASH, health, and education services, as well as child protection and GBV services, which have included capacity building and reinforcement of local structures.
- In terms of reaching the most vulnerable populations, a focus is how appropriate has been the response provided to the most vulnerable, including the *caminantes* (the term used to describe migrants on foot) and indigenous people in Venezuela in terms of age, gender and culturally appropriate instruments and strategies.
- UNICEF has avoided duplicating existing systems making it valuable to assess the challenges addressed, in terms of capacity building, linking emergency humanitarian and development actions and integrating them in long term planning processes.
- Of interest of the evaluation is the relationship between UNICEF Colombia response and key standards – including the CCCs and the application of the *Children on the Move* frameworks, the challenges and opportunities experienced and how they are factored in UNICEF COs as a new long-term paradigm.
- Explore upstream and downstream advocacy and capacity building, route-based approaches, key transit areas and border crossings services and protection, services and assistance in urban settlements, indigenous communities and social cohesion/tensions with local host communities.

2.2 Objectives

As per the evaluation Terms of Reference (ToR, see Annex 4), the primary objective of this case study is to evaluate the extent to which UNICEF is providing adequate, effective, and timely response to the crises generated by the outflow of migrants from Venezuela to Colombia since February 2019, and to better enabling and constraining factors and lessons learned.

Besides assessing the emergency response, the case study also investigates UNICEF actions to open opportunities to establish localised solutions, as well as more long-term solutions to the integration of migrants through institutions and systems of duty bearers.

It also seeks to analyse the extent to which changes in social norms, including those related to gender and xenophobia, are envisioned, what strategies are in place and the extent to which they are measurable. The evaluation has a strong gender and equity focus component, exploring how and to what degree UNICEF has been considering gender dynamics, such as socio-economic status, ethnic groups, and other relevant variables in its design, planning and implementation.

The evaluation identifies good practices, innovative approaches and lessons learned and seeks to develop, in a participatory manner, forward looking recommendations to strengthen UNICEF's results, with a special focus on reaching the most vulnerable groups. The evaluation provides evidence on whether UNICEF's Regional Response to the VMC has been and continues to be appropriate, effective, efficient, coherent, coordinated and connected.

2.3 Scope

Temporal Scope: This evaluation covers UNICEF's response to the Venezuela outflow crises in Colombia, from the time the Level 2 Corporate Emergency Activation Procedure (CEAP) was triggered in February 2019 to its deactivation in June 2020, as well as the overlapping period with the Global L3 CEAP activated in March 2020

following the COVID-19 outbreak (January 2019 to June 2021). As most field missions were carried out during the last quarter of 2021, it was agreed with LACRO to extend the timeframe beyond the deactivation of the L2 VMC Emergency until December 2021.

Criteria scope: The evaluation covers the evaluation criteria adapted to humanitarian interventions used by the Organisation for Economic Co-Operation and Development Development Assistance committee (OECD-DAC in line with guidelines developed by the Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)³³: appropriateness, effectiveness, efficiency, coherence and coordination, coverage and connectedness.

Geographic scope: The Venezuelan migration outflow evaluation has as its geographic scope the LACRO regional response, including five country cases studies of which Colombia is one. The evaluation has considered information and documentation from both national level (Bogotá) and subnational levels, and involved field visits to UNICEF sub-offices and regions heavily impacted by the VMC – including Norte de Santander (Cucuta and Villa Rosario); Barranquilla; La Guajira and Arauca.

COVID-19: the evaluation includes an assessment of UNICEF’s COVID-19 adaptations to the migration crisis response.

2.4 Stakeholders

As **primary stakeholders**, we include the affected population, as well as UNICEF staff and implementing and government partners engaged in the response. In addition, **secondary stakeholders** have been identified and included as external to UNICEF in the table below.

Table 5. Stakeholders

Level	Internal to UNICEF	External to UNICEF
Headquarters Level	- Sr. Management, Office of Emergency Programmes (EMOPS), Children on the Move (Geneva)	-UNHCR, IOM, the United Nations Population Fund (UNFPA) and UN Women - Donors (including United States Bureau of Population, Refugees, and Migration (BPRM), ECHO, and the Government of Canada)
Regional Level	- UNICEF Sr. Management, Emergency and Technical Advisors	-UN Partners: UNHCR, IOM, UNFPA, UN Women, UN Office for the Coordination of Humanitarian Affairs (OCHA) - Regional R4V Platform members - Donor representatives
National Level	-UNICEF Sr. Management and Section chiefs, sector specialists, Emergency and Technical teams (Migration technical team)	-UN Partners: UNHCR, IOM, UNFPA, UN Women - National government partners in key ministries and government agencies - R4V Coordination members - Implementing partners - Donor representatives - Partners in media and other opinion influencers
Sub-national level	- UNICEF Field-Office and satellite teams, including different sector specialists	-Municipalities -Implementing partners - Beneficiaries of UNICEF-funded - programmes -Representatives of Host – Communities, including by gender and ethnicity (women, men, indigenous) - R4V Coordination members under WASH, Education, Child Protection (CP) Area of Responsibility (AoR), C4D - local media/influencers

3. Evaluation criteria and questions

Using OECD/DAC and ALNAP criteria the evaluation has incorporated two cross-cutting approaches: a human rights approach (HR) and a gender perspective. The evaluation has assessed the extent to which the human rights, gender equality, equity and intercultural approach for girls, boys and adolescents has been incorporated into the implementation of the VMC response

The evaluation questions have been validated by the reference group and arranged in an evaluation matrix (see Inception Report and Annex 5 for a complete list of the evaluation questions). The evaluation team employed the same questions for all case studies to ensure harmonisation.

³³ ALNAP (2016), Evaluation of Humanitarian Action Guide

4. Methodology of the Colombia country case study

The methodology applied for this Country Case Study is the one approved in the inception report (IR) for the overall evaluation process. The evaluation has defined an analytical framework with all applicable standards of reference to children on the move, the core of the response to be evaluated. The analytical framework has been constructed combining OECD DAC criteria with the international human rights framework, in particular:

- *Minimum Standards for Child Protection in Humanitarian Action*³⁴;
- *Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action*³⁵;
- *The Global Compact for Migration*³⁶
- *UNICEF Guidelines on the Protection of Child Victims of Trafficking*³⁷
- The Inter-Agency Network for Education in Emergencies (INEE)
- UNHCR's *Framework for the Protection of Children*³⁸
- UNICEF's *Six Point Agenda for Children on the Move*.³⁹

Particularly relevant are the CCCs and the Global Humanitarian Standards. In terms of quality standards, the evaluation refers to UNICEF's 2020 CCCs as well a relevant policy guideline for children on the move.⁴⁰

The evaluation is utilisation focused and participatory, with an emphasis on learning. It is forward-looking with a view to shedding light on the results achieved so far and the possible strategic and programmatic priorities in the region in the search for durable solutions for migrants and communities.

For this Colombia case study, in the absence of a ToC for the VMC response in Colombia, the evaluation team reconstructed a ToC, covering both humanitarian and development dimensions, validated during the Inception phase (ToC for Colombia in Annex 3). The ToC has been used to explore the underlying theoretical aspects of the linkages between humanitarian and development aspects of the response.

The methodology consisted of mixing various methods as presented below. In particular, the country case study is based on extensive document and literature review, semi-structured interviews with key informants at national and local levels, and field visits to consult representatives of both migrant and host communities.

A country visit was carried out from 25-30 October 2021, allowing the evaluation team to visit different sites in Barranquilla, Norte de Santander, Arauca and La Guajira, meeting project participants (referred to in the ToRs as beneficiaries) and members of concerned institutions. In-person and remote interviews used a hybrid research approach (see agenda in Annex 8). According to the Administrative Registry of Venezuelan Migrants, nearly 80 per cent of migrants are concentrated in seven departments and municipalities, with Bogotá having the largest number of migrants, followed by Norte de Santander, La Guajira and Atlántico. For this reason, the evaluation focused field visits on UNICEF activities in the Venezuela-Colombia border areas of Barranquilla, Cucuta and Villa Rosario, Arauca and La Guajira, as well as investigating services provided to migrants along the main routes taken by *caminantes*. This subgroup of migrants is considered among the most vulnerable due to the risks to their physical safety and health that they incur undertaking a long and arduous journey on foot to cross Colombia to find work in other urban centres or further afield, in Ecuador, Peru or as far as Chile.

4.1 Document and literature review

In the data collection phase, the team conducted an extensive review of country-level, LACRO and other documentation on the coverage and quality of humanitarian assistance relevant for each country case study. The desk review included the information provided by LACRO and the CO, available in shared folders, sometimes internal and non-public documents, monitoring data, operational contracts and IP reports, contextual data of the RRMP, R4V platform, academia, GoC and other sources (see Annex 7). This in-depth analysis allowed the evaluation team to create a framework to measure progress on collective (regional or cross-border) and individual (country-level) efforts and capture lessons learned and good practices. The evaluation team also reviewed quantitative data sources to assess the effectiveness of the response and to determine the magnitude of protection and other challenges facing children on the move and their families. The (CCCs and UNICEF's *Global Programme Framework*

³⁴ <https://spherestandards.org/wp-content/uploads/CPMS-2019-EN.pdf>

³⁵ <https://gbvguidelines.org/en/>

³⁶ <https://www.iom.int/global-compact-migration>

³⁷ <https://gdc.unicef.org/resource/guidelines-protection-child-victims-trafficking>

³⁸ <https://www.unhcr.org/protection/children/50f6cf0b9/framework-protection-children.html>

³⁹ <https://www.unicef.org/children-uprooted/agenda-for-action>

⁴⁰ <https://www.unicef.org/documents/global-programme-framework-children-move>

on *Children on the Move*⁴¹ provided benchmarks against which the effectiveness and appropriateness of the response have been assessed.

4.2 Context analysis and timeline

During the data collection phase, the evaluation team conducted individual country-level context analyses as part of each country case study, to identify and analyse the different contextual factors, including the political response to the migration influx, the on-going armed conflict in Colombia, and the pandemic response among other factors impacting each country operation. This included the identification of challenges and adaptations, such as qualitative or quantitative description and analysis of the local economic, political, institutional, and socio-cultural context so as to understand how local factors might affect outcomes across the countries where UNICEF implements its activities.

4.3 Country visit

From October 25-30th, 2021 the evaluation team met UNICEF teams and partners in Bogotá, Barranquilla, Cucuta, Villa de Rosario, Arauca, Riohacha, Maicao and various informal settlements of migrants in La Guajira and one Wayuú community. The evaluation adapted a purposive sampling strategy, selecting field locations that allow the evaluation to capture key facets and maximise learning from the Response. As per the ToRs, the Evaluation Team (ET) took a route-based approach, which examines how UNICEF has responded at transit and border points as well as at destination areas (see Inception Report). Among criteria shaping selection of the locations and people to consult were learning potential, investment by UNICEF, types of populations assisted, location on the migration route, delivery modalities and access. The agenda of field visits is found in Annex 8.

4.4 Semi-structured key informant interviews (KIIs)

In total 53 semi-structured interviews (36 with females and 17 with males) were carried out (on-site and remotely) with key in-country informants (both at national and field level) based on the stakeholder analysis in the IT and adapted during the data collection phase in Colombia. Interviews were undertaken with UNICEF CO and FO staff, implementing partners, government counterparts, multilateral agencies, bilateral donors and civil society organisations (see Annex 6 for list of interviewees). This included 18 UNICEF staff, 15 government counterparts, 12 representatives of implementing partners and eight representatives of multilateral and donor agencies. Additionally, group discussions were held with field office staff in each of the areas visited to get their overview and identify challenges, gaps and lessons learned. Group discussions in the field were also carried out with parents and representatives of both migrant and host communities (see below). A generic interview guide (Annex 9) guided the Colombia case study. Interview guides were kept as simple and as brief as possible without compromising quality, giving the highest levels of sensitivity and respect for beneficiaries and communities, and staff, informed by the Age, Gender and Diversity (AGD) approach⁴². Qualitative evidence from the interviews was analysed according to emergent categories of analysis, such as similar themes or issues raised by multiple respondents and through an initial qualitative analysis.

4.5 Engagement with families of children on the move and host communities

Focus group and informal discussions with representatives of both migrant and host communities involved in UNICEF funded programmes and activities at sub-national level—including both female and male migrants and refugees, and adolescent girls and boys on the move—were carried out in all field locations visited. Group discussions with women representatives targeted specific issues. For example, in Cucuta a group discussion with pregnant and lactating women was organized to learn about perceptions of services supported by UNICEF. Group discussions with parents, children and adolescents were held, among others, about their experience in the *Círculos de Aprendizajes*⁴³ and CP for Venezuelan children. During the field visits, the evaluation team was able to conduct approximately 15 interviews and small group discussions with a total of 50 participants, including children and adolescents. The ET conducted age-disaggregated interviews, based on International Review Board (IRB) approved research protocols and interview guides (see Annex 10 and 11 for IRB approval and interview guides for discussion groups). All public health recommendations, such as masking and social distancing, as well as other ethical protocols, were respected.

4.6 Feedback loops and validation process of the case study

This report has been submitted to LACRO and the CO, and went through a validation process:

⁴¹ <https://www.unicef.org/documents/global-programme-framework-children-move>

⁴² Following our AGD approach the ET included a diversity of participants, including more than ten focus group discussions with beneficiaries from host and migrant communities, including a balance of both men and women, as well as children and adolescents in a range of settings along the migration route. See Annex 6.

⁴³ A means by which migrant children and adolescents, often alongside Colombians, may access formal education although not regularly attending a normal school. <https://www.unicef.org/colombia/historias/dentro-del-c%C3%ADrculo>.

- 1) LACRO and CO staff provided written feedback to this report, addressing inaccuracies, possible gaps in information or misinterpretations.
- 2) Validation workshop: the ET organised a workshop with CO and LACRO staff in September 2022 to further refine conclusions and recommendations and to address any remaining information gaps. This workshop allowed for recommendations and action plans to be validated and co-created, and to encourage learning and ownership of the evaluation results.

5. Limitations of the case study

Limitation	Action to minimise
Lack of a referenced ToC for the humanitarian response. A ToC exists for the new CPD after 2021.	The ET has outlined a provisional ToC to be validated through the evaluation process.
Lack of a formulated strategic plan for the VMC in Colombia or at LACRO level including objectives, longer-term intended outcomes and outputs with related activities and progress indicators ⁴⁴ . The fact there is no clearly identified gender strategy for the response makes it difficult to identify UNICEF's approach to gender equality as a cross-cutting issue.	The response is articulated as part of the R4V platform, the Regional Migration Response Plan (RMRP) and the UNICEF regional HAC and shares objectives and monitoring and evaluation (M&E) arrangements. The ET has reconstructed a working framework to assess progress to outcomes, based on the HAC and makes reference to the CCCs and UNICEF's Gender Action Plan as overarching frameworks.
Short field mission: the mission was limited to five days in Colombia by three team members, specifically to areas most affected by the VMC: Barranquilla in Atlántico region, Cucuta and Villa Rosario in Norte de Santander and Riohacha and Maicao in La Guajira.	To mitigate this risk, the ET comprised three senior consultants, all highly experienced with the Colombian context and institutional landscape. The team was able to split up and cover complementary aspects in multiple locations while following a common methodology.
Lack of quantitative data on the prevalence of key protection problems facing migrant and refugee children, comprehensive vulnerability analysis and assessments to determine the number of children most at risk at national level.	The ET has relied on other secondary data from government, R4V and other sources in an effort to gauge the magnitude of needs relative to programmatic responses and coverage of UNICEF programmes.
Concerns of staff around participating and sharing views frankly with the ET.	To protect key informants, the text below will be intentionally formulated at a high level, without providing details that might link informants to any specific situational information that might have been shared.
At regional level an online survey was carried out among UNICEF staff. However, sample size was limited at national level.	The survey results were analysed at regional level and reported in the regional cross-country synthesis report. Any results pertaining to Colombia are included in that report

6. Ethical and gender considerations

The Case Study design and implementation follows the standards set out in the *UNEG Ethical Guidelines*⁴⁵ for Evaluation (2008)⁴⁶ and the *UNICEF Procedure on Ethical Standards in Research, Evaluation and Data Collection and Analysis* (2021).⁴⁷ The ET has sought through its interviews, document review, focus group discussions and analytical frameworks to fully operationalise its obligations to demonstrate independence, impartiality, credibility, and accountability in accordance with UNEG ethical standards. The ET confirms it does not have any conflict of interest.

The evaluation team rigorously ensured that all participants were informed about research objectives, participation was voluntary, and privacy, confidentiality and wellbeing were respected. The ET robustly ensure girls, boys, women and men were allowed equal opportunity to participate in the assessment. In practice the evaluation had good participation from mothers and single mothers, with more limited participation from fathers of migrant and refugee children. Overall, as shown in Annex 6, more women and girls participated in focus group discussions than boys and men.

With respect to ethical approaches to managing evaluation participant data the evaluation methodology meets all ethical and UNICEF standards while collecting data with vulnerable groups. All research steps, processes and tools

⁴⁴ While the HAC contains many elements of an action plan, it is considered by UNICEF LACRO that the HAC is an appeal and cannot be considered as an approved strategic plan.

⁴⁵ https://www.alnap.org/system/files/content/resource/files/summary/UNEG_Ethical_Guidelines_for_Evaluation_2020.pdf

⁴⁶ <http://www.unevaluation.org/document/detail/2866>

⁴⁷ <https://www.unicef.org/evaluation/documents/unicef-procedure-ethical-standards-research-evaluation-data-collection-and-analysis>

received approval from an external IRB review (See approval in Annex 10). They are aligned with the recommendations of the initiative on *Ethical Research Involving Children* (ERIC).⁴⁸ This case study has ensured:

- Respect for dignity and diversity Differences in culture, local customs, religious beliefs, gender, disability, age and ethnicity were noted. We took steps to minimise any risk of disruption to the respondents, provided ample notice and respected privacy.
- Rights: We ensured that participants were treated as autonomous agents and were given the time and information to decide whether they wished to participate, and not pressured into participating. The participants were selected as per the defined sampling methodology (See Inception Report for further detail).
- Redress: Participants were provided sufficient information to seek redress and how to register a complaint.
- Confidentiality: We respected the respondent's right to provide information in confidence and made them aware of the scope and limits of confidentiality. Names and any other sensitive information have been anonymised.
- Data security: Data has been stored systematically and securely and in line with DARA's data protection policy, which has been updated to be fully compliant with the 2018 General Data Protection Regulation (GDPR)⁴⁹ standards. Data has been stored in a way that makes it available and clearly accessible only to the -ET. If requested and following appropriate anonymisation, the data will also be shared with UNICEF. Data will be retained for the period of the evaluation and then destroyed.

7. Findings

Findings are structured against evaluation criteria. Under each criteria the ET responds to related overarching and specific questions. Each criteria sub section ends with synthesising related strengths and challenges.

7.1 Appropriateness

UNICEF CO's presence within the response has been highly appropriate, important for advocating with partners and governments on behalf of Venezuelan children on the move and raising their profile within collective response efforts.

EQ1 To what extent did UNICEF's Regional Office develop and adapt an integrated intervention logic (i.e., Theory of change/strategy for the regional response) that was appropriate and relevant to the changing dynamics of the outflow and the needs of COs?' will be treated in the synthesis report as it refers to regional analysis.

EQ2. To what extent did UNICEF Colombia develop and adapt response theories of change, strategies, objectives and implementation modalities that were appropriate and relevant to the changing needs of migrant children/families, opportunities, capacities and circumstances in border, transit and urban/rural settlements, including adaptations to the COVID-19 outbreak.

Summary of key findings:

- Overall, UNICEF Colombia has developed and adapted a number of response strategies, objectives and implementation modalities, which have been appropriate and relevant to the changing needs of migrant children and their families along the migration route, including adaptations posed by the COVID-19 pandemic.
- UNICEF has significantly expanded its territorial presence to enhance its ability to actively participate in the GIFMM-R4V response in key border and transit areas. Working within the framework of the GIFMM-R4V platform, it has invested in vital services, in particular WASH, at border, transit and rural settlements.
- Aligned with the GoC policies, UNICEF is providing specific support for ETP registration for those Venezuelans wishing to stay in Colombia.
- In the context of the pandemic, UNICEF Colombia's extensive WASH expertise has served well as a bridge between parallel two humanitarian responses (L2 VMC and L3 COVID 19 response) as well as a link between humanitarian and development modalities in rural and urban settlements.
- In a number of cases the appropriateness of and relevance of UNICEF strategies, objectives and implementation modalities could be reviewed and revised, at both national and regional level, in light of the scale and complexity of the VMC.

Appropriateness of the territorial strategy and enhanced presence of UNICEF Colombia

The nature of the migration flows in Colombia have changed and evolved over time and UNICEF's response has endeavoured to keep pace with the changing needs of migrant children and their families. UNICEF adopted a

⁴⁸ <https://childethics.com/>

⁴⁹ <https://gdpr-info.eu/>

strategy to expand its presence that was appropriate and relevant, enabling UNICEF Colombia to engage at local and departmental levels and to establish a permanent field presence. However, this strategy has not been without its growing pains.

In 2018, UNICEF Colombia had three offices: its national office in Bogotá, as well as two field offices (in Quibdó, Chocó, and in Riohacha, La Guajira). UNICEF Colombia began its response activities in February 2018 in three departments along the eastern border (Arauca, Norte de Santander and La Guajira) that were initially most affected by the migratory influx. The agency gradually expanded its geographical reach until it covered a total of eight departments at the end of 2018 (Bolívar, Atlántico and Magdalena, Nariño and Putumayo were added). The Ministry of Foreign Affairs urged inclusion of urban areas of departments along the Caribbean coast so as to address the growing phenomenon of in-transit migrants and *caminantes*. In 2019, UNICEF Colombia further added the urban areas of Bogotá, Medellín and Cesar department. As a result, four new field offices opened (Norte de Santander (Cucuta), Atlántico (Barranquilla), Arauca, and Nariño (Pasto)). Furthermore, activities were rolled out in three other locations (Vichada, Amazonas, and Putumayo)⁵⁰ with support of focal points to accompany implementing partners. The rapid expansion and scaling up of UNICEF's presence involved hiring a large contingent of new staff and consultants, mainly UN Volunteers (UNVs). Colombia office staff grew from 50 in 2017 to 117 in 2021. The expansion, as explored below, also led to the engagement of 25 new implementing partners.

KIIs and documents reviewed, at different times and in different urban and rural contexts, show Colombia has required a response that includes humanitarian interventions, resilience programming and protection of migrants at the border, in transit to other countries and at destinations. In practice, as migrants tend to move freely between these different migratory spaces, it is not always easy to distinguish services for each group. Pendular movements between populations living along the border itself, and larger movements of Venezuelans returning to their country due to the pandemic, together with public health restrictions, further complicated processes of planning a timely and appropriate response at all points along the migration route. In urban centres, such as Medellín, Cartagena, Barranquilla, and Bogotá (where nearly one quarter of all Venezuelan migrants have settled), there is less need for traditional humanitarian activities. Accordingly, UNICEF Colombia has placed emphasis on protection actions like prevention of recruitment into armed groups in Arauca, Nariño, Putumayo and Norte de Santander. In communities nearer to the Venezuelan and other border areas, where government presence and services have historically been scarcer, UNICEF and partners, in agreement with local authorities, have endeavoured to do more to meet the basic survival needs of migrants and host communities.

Map 1. UNICEF Colombia geographic scope of work, 2021



Although according to KIIs, without expanding its territorial presence UNICEF Colombia would not have been able to achieve the results it has shown to date, there are opportunities that could have enhanced the appropriateness of UNICEF's field presence:

- Enhance capacity to deliver a quality, principled humanitarian response at scale: Increased territorial presence has enabled UNICEF to actively lead and participate in local level coordination processes and support to local government and civil society institutions. Nevertheless, according to KIIs, field staff are stretched by the magnitude of the task at hand, the need to take on multiple roles, and also by operating under COVID-19 constraints. Newly recruited teams have not benefited from extensive orientation and training on what UNICEF considers are the needs of a principled humanitarian response, and what makes a humanitarian response

different from a longer-term development modality.

⁵⁰ There was never an intention to open offices in these three departments but to have specific activities and to have a focal point that could enable work of implementing partners.

- **Develop new and locally relevant models that meet local needs and can be brought to scale by other actors.** KIIs showed a territorial approach is relevant as UNICEF utilises its presence to build its programming efforts around local partnerships, opportunities and needs. However, in general, interviews with field staff suggest that the appropriateness and relevance of maintaining a strong territorial presence is contingent on further decentralisation when drafting funding proposals.
- **Utilise the information and evidence drawn from the field to enhance advocacy at the national level:** a clear advantage of the expanded presence at field level is gathering evidence that can then be translated into advocacy for policy and normative changes at the national level. Unfortunately, according to KIIs, small group discussions and document reviews, over the course of the humanitarian response, information gaps⁵¹ continue to exist that impede effective advocacy on public policy at the national level.⁵² There have been however several examples of field interventions feeding into national level advocacy efforts, such as drop-in centres, the route activations in GBV and ETP registration.
- **Feed into a localisation agenda:** The extended territorial presence developed through the response has in some cases allowed for the identification and capacity development of local partners, such as the Corporación para la Investigación y Desarrollo de la Democracia (CIDEMOS) and others who have been working in the regions affected by the migration flows and whose capacity to respond to similar future emergencies has been enhanced.

Appropriateness of the route-based approach

The route-based approach⁵³ developed via the GIFMM-R4V appears to be highly appropriate and relevant to the context, with some exceptions that are explored here. UNICEF participates in the border areas largely through its participation on R4V established *Espacios de Apoyo* (EAs). EAs started as a regional initiative to provide accurate information, orientation and basic services in response to urgent physical, emotional and psychological needs of Venezuelans on the move.⁵⁴ EAs provide services for pendular migrants, *caminantes*, those who have entered Colombia and intend to remain in a particular area and Venezuelans returning home, for example due to the pandemic or in the run-up to Christmas holidays.

Border areas: R4V *Espacios de Apoyo*

The ET visited three EAs (Puente Francisco de Paula Santander; PISB-CENAF and Paraguachón in La Guajira) and observed that each of these formal border crossings provides a comprehensive range of services around WASH, rehydration, primary healthcare, vaccination, family planning, nutritional assessment, psycho-social support, protection case management, legal clinic, humanitarian transport and child friendly spaces. UNICEF contributed to the supply and maintenance of WASH infrastructure: toilets, showers, handwashing, and rehydration stations. These WASH installations are central to the entire migration response. According to interviewees each agency that occupies a space at the EAs covers its own share of the cost of the upkeep of the centre.

The ET noted most EAs were also equipped with Child Friendly Spaces providing such activities such as singing, dancing, play and workshops about parenting). Informants reported, however, that these spaces do not provide day-care services. If parents are not present children are not allowed to attend, thus preventing mothers from undertaking other tasks.

UNICEF partnership with implementing partners such as Significarte and CIDEMOS in La Guajira and Norte de Santander, respectively has developed a strategy to prevent violence arising from the prevalence of Venezuelan street children. Drop-in centres function as violence prevention spaces where families can leave their children aged between six and 17 in the care of a team of professionals, experts and trained by UNICEF. Families participate in the spaces at pre-arranged time. The ET became aware of adaptations to this model in response to the pandemic when several support centres were closed. UNICEF continued to implement one in Riohacha and opened two more, one in Maicao and another in Villa del Rosario. This is a demonstration model of prevention and approach to violence, including GBV and family separation for unaccompanied or separated children and adolescents with

⁵¹ Key information gaps can be attributed to a number of factors: lack of data on the scale of child protection and other phenomena at a national level; lack of partners actively sharing case information and lack of data collection processes and analysis of this data. These gaps exist regarding the numbers and locations of out-of-school children, as well as on UASC by region, among other areas, see text below.

⁵² UNICEF: Informe Final Evaluación Programa de Cooperación UNICEF COLOMBIA (2015-2019) p.51

⁵³ Among the first to use the concept of the route-based approach is the International Federation of Red Cross and Red Crescent Societies (IFRC) which defines it as “an important complement to the overarching migration approach, which is based on needs, informed by rights and bound to the Movement’s Fundamental Principles. A route-based approach informs a deeper understanding of the humanitarian and protection needs of migrants by analysing the vulnerabilities arising from the geographical and human dimensions along migration routes, relevant contextual elements, and their interactions with vulnerabilities factors related to a migrant’s profile and status. This allows the IFRC to better assist and protect vulnerable migrants and to adapt their interventions to fast-evolving operational realities”. See <https://ifrcgo.org/africa/img/Sahel/IFRC%20route-based%20approach%20-%20EN%20-%20final.pdf>

⁵⁴ <https://www.refworld.org/es/pdfid/5e5d62194.pdf>

specific protection needs. It can be noted however that as with the EAs these initiatives have not addressed the needs of parents in terms of providing a safe space in which under-fives can be left.

The ET noted the absence of actors with a specific focus on child protection such as the case of the ICBF. UNICEF partners reported that cases of *refoulement*⁵⁵ children are not uncommon. This adds to protection problems as minors unable to enter Colombia at an official border crossing are forced to use *trochas*, the name given to the myriad trails or footpaths by thousands of irregular crossing points have been created along the long Venezuela-Colombia border. UNICEF staff told the ET that UNICEF has tried unsuccessfully to convince ICBF to staff an office at the EAs. While there are *Comisarias de Familia* or *Defensores de Familia* and ICBF sub offices asked to deal with CP cases informants reported they are overwhelmed by demand for services and UNICEF is working to strengthen their capacities. There are protection UNVs who regularly visit these EAs but are not permanently stationed at them. The ET was made aware of cases of at least one minor *refouled* by Colombian migration authorities and where the presence of UNICEF or CP partners would have been helpful to help remind authorities of their obligations under international law.

As explored further below, a number of partners, including donors, identify UNICEF's dual role a humanitarian actor and a development actor supporting longer-term processes of institutional capacity building. UNICEF Colombia sees its role, quite rightly, as being to strengthen institutional response capacity and promote a focus on the rights of migrant children while seeking to complement and support state actions and those of other cooperating partners. Whereas state CP systems can take years to develop capacity to handle a significant influx of new child protection cases, actions are needed today to ensure that children's rights and protection are guaranteed. UNICEF Colombia has taken steps towards this particularly through implementing drop-in centres.

UNICEF's presence at *Puntos de servicios* along the *caminantes* route

In addition to the EAs, the GIFMM-R4V Coordination Platform has also established a series of *Puntos de servicios* as part of the response to the *caminantes*. In comparison with many of the first to leave Venezuela subsequent migrants have among the most vulnerable generally exhausted resources and have thus been unable to buy airline or bus tickets and travel in greater comfort and safety. Among them are the poorest Venezuelans from the most vulnerable and marginalised communities but alongside them are also highly educated former middle-class families who have lost their jobs and homes due to hyperinflation and economic collapse. The *caminantes* phenomenon originated in Venezuela and has spread to Colombia where the poorest migrants and refugees try to make their way to areas of employment and/or to reunite with family members that have gone ahead. It has spread across Colombia and further to Ecuador, Peru, and as far as Chile.⁵⁶ While there are several different routes taken by the *caminantes*, one of the main ones is from Cucuta to Bogotá along which there are reportedly 17 recognised *puntos de servicios*.

The ET visited a the *Punto de Servicios* at Chinacota called La Don Juana. This s provides a range of services to migrants and refugees, including hot meals, primary healthcare, accommodation, hygiene kits, a small child friendly space and lactation room, washrooms and showers, Wi-Fi, GBV response, child protection, psychosocial support and spiritual accompaniment. One of UNICEF's main contributions to La Don Juana is maintaining the washrooms and showers, which were found to be clean and functional. However, at the time of our visit these WASH facilities were not being used extensively as the number of *caminantes* had been greatly reduced over the course of the pandemic. This space also showed UNICEF's work and added value in bringing unaccompanied children closer to the protection system and promoting institutional response by bringing the protection needs of children on the move to the attention of the local *Comisarias de la Familia*.

In Arauca the ET visited service points at the bus station and on the *caminantes* route (La Antioqueña) and in Tame (La Milagrosa), where UNICEF provided Child-Friendly Spaces, information, CP, C4D and Psychosocial Attention (PSA) mechanisms defined with the implementing partner. The existence of the EAs and the *Puntos de Servicios* along the main migration routes demonstrates one facet of how the GIFMM-R4V platform has sought to meet the changing needs of migrants. According to UNICEF and implementing partner informants the network of reception and service centres has capacity to serve migrants both leaving Venezuela as well as migrants as they return to Venezuela from other urban centres in Colombia or elsewhere.

A particular challenge identified by partners has been management of cases of unaccompanied and separated children (UASC) along the migration route. The CP system in Colombia was, prior to the VMC, already stretched and in rural areas responsibility for case management in the case of an UASC falls to the Commissioner of the

⁵⁵ Non-refoulement is a fundamental principle of international law that forbids a country receiving asylum seekers from returning them to a country in which they would be in likely danger.

⁵⁶ In Brazil, by contrast, *caminantes* is less noticeable as the Brazilian government provides voluntary aerial relocation programmes to resettle families throughout the country, thus reducing the number of families having to walk long distances.

Family who is named by the mayor or the Defender of the Family, who is a staff member of ICBF. Additionally, the law states cases must be resolved and closed within a specified amount of time. According to UNICEF partners, the experience with *caminantes* highlights the weaknesses and under-resourcing of the system. A adolescents on the move want to avoid being included within El Proceso Administrativo de Restablecimiento de Derechos (the Administrative Process for the Re-establishment of Rights, PARD) because this likely means they will be prevented from proceeding to their destination,. The overworked Commissioners and or Defenders of the Family may be loath to open new cases because they are under pressure to resolve them quickly despite not having the personnel and financial resources to do.⁵⁷ Overall, the protection system for the *caminantes* and network of service centres is inconsistent due to the fact that COVID-19-related and other sporadic border closures have forced migrants to use *trochas*. Through observations, informal conversations and KIIs the ET learned that a significant informal economy has grown up around these irregular crossing points. *Caminantes* themselves and response partners at different locations cite the advantages of using the *trochas* over regular crossing points. With *trochas* no official documents are demanded and the costs of crossing are lower. It is evident that the scale of irregular crossings can be assumed to be many times more than those at regular crossings. According to informants, once a person with the intention to transit to other countries has crossed irregularly into Colombia, their motivation becomes to reduce contact with the Colombian authorities because of fear of unnecessary delays and other consequences. Therefore, protection measures and service points set up to assist the *caminantes* from GBV and other forms of violence or risks to health and security, which can be monitored by the local police and migration officers, may be avoided by the very people they have been set up to serve.

Presence in urban and rural settlements

As with other GIFMM-R4V partners, UNICEF has also established a limited presence in urban and rural settlements in border areas where Venezuelan migrants and Colombian returnees have established themselves. The ET was able to see various CP spaces – one in Villa del Rosario called *Espacio Alternativo de Cuidado y Acogida para la Niñez y Adolescencia* (EACANNA) operated by the regional NGO CIDEMOS, another in Riohacha operated by the Bogotá based NGO Significarte, as well as one in Barranquilla where child-friendly spaces (CFSs) were provided and adolescent mobilisation allowed for awareness, increased coverage and addressing structural challenges in a particularly deprived neighbourhood. These spaces have been created by UNICEF and other partners to deliver services to children at risk and to offer emergency accommodation for UASC and children impacted by the pandemic. In Riohacha and Barranquilla, the ET interviewed mothers and children participating in UNICEF-sponsored activities. For parents, these involved workshops on parenting and the need to prevent violence against children. For youth, these had to do with prevention of GBV, leadership, and communications.

Appropriateness of UNICEF Colombia's preparedness measures

UNICEF Colombia, having worked for decades on issues of internal displacement as a result of the armed conflict, has been more prepared than other COs to adapt to the migration outflow. UNICEF Colombia's entries into the UNICEF Emergency Preparedness Platform (EPP)⁵⁸ indicate the extent to which, prior to the L2 being activated, the CO had identified and were prepared to respond to the threat of a migration crisis similar to the VMC. It is important to remember that by 2018, the VMC itself was well underway, and Colombia had already been significantly impacted. The 2018 Colombia entry in the EPP briefly analyses migration from Venezuela as a serious risk. While no specific sector response scenarios were laid out, it appears that UNICEF Colombia had met 18 out of 25 of UNICEF's Minimum Preparedness Standards. UNICEF Colombia's EPP scenarios are currently being reviewed and updated.

Appropriateness of emerging Results Framework on Migration in the CDP 2021-2024

Initially the L2 response to the VMC did not have a ToC to guide its overall implementation at CO or Regional Levels, and UNICEF does not typically build ToCs in the context of its emergency responses. Rather, emergency responses are guided by humanitarian and programming standards, such as the CCCs, and in this case, UNICEF's *Global Programme Framework on Children on the Move*.⁵⁹ As the context evolved and given the scale of migratory influx and the nature of the request from the Government of Colombia for UN agencies to address migration as a factor of development within the United Nations Sustainable Development Cooperation *Framework* (UNSDCF) framework, UNICEF Colombia defined specific results (outcome and outputs) as part of its 2021-2024 Country Programme (see Box below).

⁵⁷ See the discussion above on the need for UNICEF to develop creative solutions that do not undermine the authority and obligations of the State, but find ways to supplement its capacities in the context of a large-scale migration crisis or other humanitarian response. As described above, in other country contexts this is where UNICEF has promoted the engagement of other child protection actors which might be engaged by government to temporarily supplement its capacities and to help resolve cases in a timely manner.

⁵⁸ <https://www.unicef.org/media/122581/file/Fact-Sheet-UNICEF-Emergency-Preparedness-Funding-Initiatives.pdf>

⁵⁹ <https://www.unicef.org/documents/global-programme-framework-children-move>

The creation of a migration pillar within the new CPD facilitates the linking of humanitarian and development actions and ensures that humanitarian responses to the VMC will be sustained and developed over the coming four years. This is very positive from the point of view of transitioning from humanitarian modalities towards sustained activities for integration of migrant populations into Colombian society, social systems and economic activity. However, as explored in the sections below, it may be an opportunity for UNICEF to reconsider some of the strategic approaches that have been adopted since the L2 VMC activation to ensure that CPD outcomes and results will eventually be achieved in the most effective and efficient way (see Section on Effectiveness and Efficiency below).

EQ3: To what extent were UNICEF's plans, actions and key decisions informed by the active participation and voice of affected populations? Were different types of beneficiaries consulted and included in the response?

Summary of key findings:

- UNICEF has made significant efforts to build feedback loops into the work of implementing partners as a form of AAP and UNICEF has also led and positioned AAP within the RMRP and HRP at the request of the lead agencies.
- While the ET finds that UNICEF Colombia has created valuable tools and training for IPs to help them understand and implement AAP, there is no evidence that UNICEF itself has carried out systematic consultation with affected populations with the purpose of informing UNICEF's planning processes and key decisions. UNICEF staff members interviewed rather assert that UNICEF is not set up for such a process of participatory response planning.
- UNICEF Colombia, and also other regional COs, may need to improve mainstreaming accountability to affected populations into its programme planning and decision-making, if it is to align itself with the CCCs, particularly around participation of women and girls and conformity with global AAP guidance.
- Some participation of community leaders has been promoted by implementing partners in Barranquilla, Arauca, Riohacha, Norte de Santander among other locations. KIIs, discussions and focus groups with beneficiaries suggest that UNICEF's programming approach often leads to gaps and needs identified by affected populations not being addressed.

To the credit of UNICEF Colombia, it has invested heavily in interpreting and contextualising UNICEF's global guidance on AAP.⁶⁰ Currently all Project Cooperation Agreements (PCAs) indicate the responsibility of partners to ensure AAP, gender equality, prevention of sexual exploitation and abuse (PSEA) and C4D are transversal elements in any UNICEF intervention. Based on its experience with the response to the VMC to date, in May 2020, UNICEF Colombia's C4D section published helpful guidance to its implementing partners on the principles and practice of AAP and undertook extensive measures to incorporate AAP into all PCAs with implementing partners. As stated in UNICEF Colombia guidance:

As a humanitarian principle, it is a priority to generate a culture of Accountability to the Affected Population in all processes, agreements, and contracts with implementing partners in order to ensure feedback mechanisms and strengthen participation in all territories. On the one hand, through the sensitization of decision makers and those who define indicators and components in the processes, in order to guarantee the obligatory nature of the actions carried out by all the Implementing Partners. In this way, inclusive and participatory processes are generated, with dignified treatment for the entire affected population⁶¹

UNICEF's C4D team identified a number of cases where direct consultation with the population led to changes in the way that services were delivered. In UNICEF Colombia's 2020 guidance⁶², two cases are cited:

- The Family Orientation Point is located in the municipality of Los Patios (Norte de Santander). The migrant population receives food packages, including fresh produce intended to be consumed immediately. When asked for feedback beneficiaries said as *caminantes* in transit, they would prefer non-perishable food that would last for several days and be consumed along the way. When this information was presented to UNICEF it was agreed to change the food package.
- The NGOs 5ta con 5ta and Horizonte de Juventud, in the municipalities of Puerto Santander and Villa del Rosario, respectively. These NGOs oversaw implemented FGS and making of participatory videos. They served as catalysers to organise more relevant schedules to ensure attendance and to carry out community

⁶⁰ UNICEF: Accountability to Affected Populations: A Handbook for UNICEF and Partners. June 2020.

⁶¹ UNICEF Colombia: Rendición de Cuentas a la Población Afectada/Accountability to Affected Populations – AAP Lineamientos para su implementación. P.11

⁶² Ibid

integration activities with children, adolescents, and youth.

In addition, UNICEF Colombia has created a PCA with the *Fuerza de mujeres Wayuu (Force of Wayuu Women)*⁶³ which enables them to have direct input into project design and delivery.

UNICEF Colombia also established a very comprehensive AAP reporting matrix for partners. The example that was shared with the ET only contained positive comments. None require any action on the part neither for the implementing partner nor UNICEF.

The ET was able to confirm that implementing partners (IPs) understand AAP as a responsibility given to them as part of the PCAs. UNICEF's work with a number of partners, including with indigenous organisations, has also included the production of content to deliver relevant information in the appropriate language of both host and migrant communities. However, the essence of AAP is that adherence does not only apply to partners, but also applies to UNICEF as an international humanitarian actor. AAP should not be considered as only, or mainly, a partner's responsibility.

UNICEF's global guidance on AAP suggests that accountability and participation of affected populations is not only a matter of concern for UNICEF IPs but should also be reflected in UNICEF's own programming choices and decision-making). Within the CCCs, Gender Equality commitment 2 makes clear the importance of direct engagement with women and girls on project design and delivery:

Community engagement and AAP with girls and women: Adolescent girls, women and their respective organizations are actively engaged in the design and delivery of programmes.

The ET finds that at country level, this aspect of AAP seems to be difficult to operationalise. Interviews with UNICEF staff indicate that this is simply not realistic and not the way that UNICEF designs its programming. In the words of one staff member:

There are really two or three main factors that affect UNICEF's programming in the humanitarian response. These are the budget, having partners to implement and having the existing models that we have worked with before. By the time we get to meet the affected population, most of the elements of our programme are already set and funded.

It appears that UNICEF's planning processes are not structured to require or encourage participatory planning processes and the direct participation of beneficiaries. Some level of participation by community leaders exist in informal settlements (invasiones). The ET found this has helped to identify more vulnerable household specific vulnerabilities.

UNICEF and its IPs continue to use suggestion boxes and other satisfaction measurement tools and are working to ensure more extensive opportunities for feedback from project beneficiaries, in all places visited by the ET. Evidence suggested limited participation of affected populations at the planning stage and in key decision-making within the VMC response. This significantly limits the scope, utility, and relevance of consultative and participatory processes in terms of allowing affected populations to be part of the process of defining programmes and services that are most needed in a manner that benefits the greatest number of migrant and refugee children and families. While the current efforts are valid, it appears according to KIs from UNICEF and partners, that affected populations are only in a position to suggest minor adjustments to existing programmes once these are already up and running.⁶⁴ Further, the current process of putting the main responsibility for dialogue and gathering feedback from beneficiaries onto IPs does not take into account existing power differentials between service providers and beneficiaries that might make people feel afraid, shy or otherwise reluctant to give critical comments on service delivery.⁶⁵ It is recommended that UNICEF should follow the lead of UNHCR in introducing a procedure of participatory assessment with affected populations in order to ensure that its own staff and programme personnel do not lose touch with the lived experiences and perceptions of affected populations.

⁶³ <https://www.forestpeoples.org/en/partner/fuerza-de-mujeres-wayuu>

⁶⁴ This finding is also reflected in UNICEF 2020 Humanitarian Review, which states: "Accountability to affected populations (AAP) is critical to effective UNICEF humanitarian responses, to ensure that crisis-affected populations receive accurate information, provide actionable feedback and participate in programme design. Despite recent improvements, AAP is still not central enough or sufficiently coherent in UNICEF's humanitarian work...UNICEF often only engages with affected populations once programmes are running. While complaints and feedback mechanisms do exist to cover programmes, these also need to ensure that feedback is acted on" p. 13

⁶⁵ Under the Harmonized Approach to Cash Transfers (HACT) framework, programme visits are included to ensure that UNICEF staff can independently verify work of IPs and gauge satisfaction of beneficiaries. However, in discussion with UNICEF teams, it is clear the project visits allow little time to be spent with direct beneficiaries of programmes, and that this is not their main focus. During COVID-19 restrictions, project visits were more limited, with even less time spent in direct consultations with affected populations.

EQ4: Did the design of interventions take into account specific barriers linked to gender and societal expectations, challenges faced by minorities (for example indigenous migrants), vulnerable groups (for example unaccompanied children or children with disabilities, women and pregnant women, etc.)?

Summary of key findings:

- The design of interventions, in some cases, specifically targets pregnant women and lactating women, and includes children with disabilities and UASC.
- In response to COVID 19 restriction measures, UNICEF adapted programmatic and humanitarian responses to address specific barriers.
- Some UNICEF interventions do not appear to have documented whether and how they helped to overcome barriers faced by gender, minorities, and other vulnerable groups because there has not been sufficient analysis or consideration given as to how to reach them. Data on this has not been provided to the ET.
- The scale and complexity of the emergency, including the COVID-19 pandemic and its public health restrictions, have generated significant gaps in coverage that have not been overcome within the timeframe and resources provided for within the L2 Response to the VMC.
- Overall, there are major information gaps that seem to prevent UNICEF from designing specific measures to overcome barriers to access to key interventions and services. There is little to no information on how UNICEF has addressed specific barriers facing children with disabilities, indigenous and afro-Colombian children, LGBTQ+ adolescents and other marginalised groups.
- Vulnerability criteria and analysis would allow UNICEF to target specifically those most at risk.

Overcoming specific barriers to enhance access to services and information by vulnerable groups

Below are a few examples of how UNICEF Colombia has sought to pragmatically overcome barriers to access to services and information by vulnerable groups.

Mobile Health Services – community health campaigns and outreach activities

Mobile clinics have allowed health teams to go to Venezuelan migrants and host communities in key affected communities, providing improved access for children with disabilities for example. A further positive step has been the focus on services to pregnant adolescents and teenage mothers. Other VMC studies have reported women being too overwhelmed with basic survival needs and income generation to find time to see a doctor, either for their own needs or those of their children. These mobile health services were designed to combine detection of malnutrition as well as setting up comprehensive workshops for new lactating mothers. One informant told the ET that “mobile clinics could and should have also been designed to give a more comprehensive intersectoral response, including GBV prevention and response to maximise effectiveness for vulnerable groups.” Unfortunately, the ET did not have a chance to see the mobile health centres in action since by the time of the ET visit the methodology had already been revised. (see Sections on Effectiveness and Efficiency below).

Additional child helpline services

In 2020 in response to increased CP and GBV risks associated with families forced to remain at home due to the COVID-19 pandemic, UNICEF increased support to ICBF’s existing child helpline. This enabled it to better respond to increased demand. While not specific to the VMC, UNICEF’s support increased the capacity of new and existing actors to respond and provide proper follow up within the national CP system. While it is beyond the scope of the ET to verify the extent to which Venezuelan refugee and migrant children at risk may have benefited from this measure, it is not unlikely that some did. According to the ICBF three out of four calls received request psychosocial support for children and families, one in four relate to critical situations. About 53 per cent of the calls are from girls and 47 per cent from boys. UNICEF has also engaged in capacity strengthening, providing training to ten child helpline operators on CP, child rights, child safeguarding, PSEA, corporal punishment, mental and psychosocial support, responding to violence, talking to adolescents and suicide prevention.

Small-scale initiative in cash-based intervention for families through Learning Circles (LCs))

As a measure to overcome barriers to accessing online learning and to keep children from dropping out during the pandemic a small-scale initiative was carried out to provide cash to families registered in UNICEF-funded LCs. The project was designed to take into account the emergency needs of vulnerable families, as well as the characteristics of the LC programme. The goal was initially to reach 779 families, made up of migrants and hosts in Arauca, Cúcuta, Riohacha, Fonseca and Barranquilla providing them with resources to meet their basic needs and to prevent school abandonment in response to pandemic shocks. However, due to duplications with other cash transfer programmes operated by other GIFMM partners, the target was changed to 769 families, also including families in Bogotá. With this measure, coverage was provided everywhere that LCs were being implemented. In the end, 731 CA families benefited from cash and other services, including data units for children’s online learning, kits for nursing and

pregnant women and Covid-19 Prevention Hygiene kits. They had a total value approximately equivalent to US\$ 408.12

C4D: Communications in indigenous languages

One approach to re-programming in both programme and humanitarian interventions has been an expanded C4D strategy – in Spanish and five indigenous languages - focused on ensuring that communities have access to relevant and meaningful information. This was designed to help minimise VMC and the COVID-19 rumours and promote safe behaviours. The emphasis on diversity led to outreach activities to people without digital literacy or access to either the internet or electricity. These enabled families to identify risks, symptoms and make informed decisions on COVID-19 prevention and other aspects of violence, mental health and distance learning.

WASH and survey of needs for school reopening

As a joint initiative between the emergency and WASH working groups, eight Secretariats of Education were supported by UNICEF and other partners to carry out a survey of educators and administrators of educational institutions to understand their requirements regarding to WASH for school reopening. This has been a measure to overcome the barriers to access to education experienced due to pandemic related school closures. WASH and Education sectors are collaborating to support the Secretariats of Education to gather information needed to advance school opening. While this survey provides a reconfirmation that a major gap exists in terms of access to education, it does not provide the detailed evidence needed by authorities (such as specific numbers of out-of-school children, localities, and households) to address it. WASH has played a critical role in supporting a number of schools to meet the requirements needed to reopen safely and according to standards set by MEN.

On-going critical barriers identified to be overcome

Despite efforts undertaken by UNICEF Colombia to design and redesign intervention strategies that addressed pandemic and other barriers for vulnerable groups, overall, the evaluation finds little information on how UNICEF has addressed specific barriers facing adolescent girls and boys, children with disabilities, indigenous and Afro-Colombian children, LGBTQ+ adolescents and other marginalised groups. There are important information gaps and limited vulnerability analysis of specific needs and barriers faced by these groups. Lack of information and analysis appears to prevent UNICEF from designing specific measures to overcome barriers to accessing services.

Hence it is important to identify the barriers which Venezuelan migrants face in accessing services provided by UNICEF and other response providers and how these barriers might be overcome. During conversations with affected populations, UNICEF staff and partners, the following barriers to accessing basic services and rights have been identified:

Barriers accessing the right to education

Informants reported that the lack of documentation or knowledge of how to access the educational system combined with real or perceived lack of school spaces to create barriers accessing the public education system in 2018 and 2019. These constraints intensified as a result of the pandemic, compounded by the inability of parents to provide devices needed in response to the switch to on-line learning. The pandemic has dramatically increased the number of out-of-school children, both migrant and Colombian.

In July 2021 UNICEF with NRC started to try to quantify numbers of children out-of-school. Surveys carried out with NRC support indicated that there continue to be significant numbers of Venezuelan children out-of-school. Their vulnerability is compounded by the inability of their parents to know how to enrol them in an official or alternative learning programme. A major barrier that will be explored in greater detail below is the access to formal schooling – both prior to and during the pandemic. Conversations with parents in the LCs, together with other KIIs, indicated that access to education for many Venezuelan migrant children remains out of reach. Despite the lack of legal impediments for Venezuelan children to register in Colombian schools, there are long-term systemic access now multiplied by the VMC: lack of adequate classrooms, insufficient teachers, lack of documentation for migrant children, lack of information as to which schools have spaces available, xenophobia and lack of funds to pay for school uniforms and books. This is compounded by lack of awareness among teachers and school administrators regarding the right to education accorded by the GoC to Venezuelans.

Colombian education policy establishes preschool as compulsory for five-year-old children. A UNICEF informant reported that, many children do not start school on time due to such factors as cultural beliefs or the geographical location of the school. This results in overage school entry creating a potential dropout risk. This particularly impacts children and adolescents on the move from Venezuela, who may have been out-of-school for some time while waiting for an available school space. UNICEF is not yet systematically addressing some of the fundamental

barriers to accessing education, which begins first and foremost with having information on who is out-of-school, and where and what the actual barriers are.⁶⁶

Now, three years into the L2 Emergency, evidence suggests there are still large numbers of children out-of-school (see section on Effectiveness – Education below). A 2021 IOM-led study⁶⁷, co-authored by UNICEF, of street children in Riohacha, Cucuta and Villa de Rosario found some 40 per cent of those between the ages of four and ten were not attending school. A more detailed study by the Danish Refugee Council⁶⁸ adds another dimension by analysing differences between newly-arrived migrants and those who came from Venezuela more than five years ago. This evidence clearly shows that the newly-arrived, those who came during the period corresponding to the L2 emergency, were experiencing much more difficulty accessing education than were those who had arrived more than five years earlier.

This analysis identifies the significant differences in vulnerability between the needs of newly-arrived migrants in comparison with migrant families who are by now much better established. It should help UNICEF and other actors to focus their attention and humanitarian investments at scale, including advocacy for the implementation of government policies which allow for universal access to education, including for vulnerable children on the move. This should be tailored to new arrivals (less than one year in the country) with strategies designed to overcome their specific and documented vulnerabilities in terms of lack of access to healthcare, education, housing, and other basic services. To date the ET has seen no vulnerability criteria created by UNICEF that reflects evidence generated by these studies.

Barriers for vulnerable groups, including adolescent mothers, pregnant and lactating women, indigenous, children with disabilities and other groups

While there are specific programmes for pregnant and lactating mothers around ante natal care, a barrier to access is lack of childcare options for small children so that mothers can have the time and space to get the care that they need. This topic was raised in several FGDs with mothers during the course of the ET visit. In addition, a number of barriers to access are documented in the literature.⁶⁹ These include lack of documentation, child labour, trafficking and sexual exploitation and limited access to housing or evictions during the pandemic. Unfortunately, it is not possible currently, based on data received, to assess the extent to which UNICEF' response has assisted these specific groups to overcome multiple barriers that can exist to their participation.

There is a lack of formulation of specific interventions for children with disabilities (CWD). During field missions it was observed that there are ongoing barriers for these children across rural and urban settlements and on the route of the *caminantes*. UNICEF has promoted some initiatives targeting indigenous communities. For instance, in La Guajira, UNICEF has co-led the education working group advocating for a differential approach with the indigenous population. UNICEF has carried out ethno-education activities (including travelling backpack and translations into Wayunaiki) to reach these indigenous populations. Furthermore, UNICEF has implemented C4D activities providing information in indigenous languages. There has also been a GIFMM initiative to support the binational indigenous community in Cucuta to develop their own school in response to the migration influx of several of their community members from the Venezuelan side of the border. This is the type of concrete action on access to education for indigenous communities that UNICEF could be promoting in other communities.

EQ5: How appropriate were UNICEF's internal arrangements at RO and CO levels for the management/staffing/leadership/capacity development/technical support (including human resources, tools, protocols, fundraising and managerial capacity/surge capacity, etc.) to address the context, scale and complexity of the Venezuelan outflow?

Summary of key findings:

UNICEF's response to the VMC required the development of new methodological proposals, the implementation of rapid humanitarian actions in prioritised areas and management of an increased volume of resources in a very short time. The demands of this response generated a great deal of individual and institutional stress, exacerbated by the COVID-19 pandemic and public health restrictions. UNICEF's internal arrangements including staffing, contracting, fundraising and managerial capacity could be strengthened with a view to better reflect the scale and complexity of the VMC.

This question considers some of the inputs required to generate outputs and outcomes of the reconstructed ToC

⁶⁶ According to UNICEF, it is important to complement this statement with the reasons why this information was not available. In order to have a census of out-of-school children, it is necessary to have a universe of the population, which in the period under evaluation did not exist due to the lack of official data on the migrant population.

⁶⁷ <https://dtm.iom.int/reports/colombia-dtm-focused-refugee-and-migrants-children-long-stay-or-street-situation>

⁶⁸ <https://www.r4v.info/en/node/88868>

⁶⁹ <https://dtm.iom.int/reports/colombia-dtm-focused-refugee-and-migrants-children-long-stay-or-street-situation>

for the response (see Annex 3). UNICEF Colombia's response to the VMC, given available resources, has required a rapid adaptation of the CO's capacity to ensure high-level expertise and advocacy on key issues. This has included the opening of new sub-offices and deploying teams in other new geographical areas. In 2018 the Riohacha office was opened, followed by Cucuta in 2021, with deployment of teams in Barranquilla, Nariño and Arauca. In order to staff this rapid expansion, the staff contingent grew from 50 in 2017 to 117 in 2021⁷⁰, largely in response to the demands of the VMC. See Annex 12 for more detailed information about UNICEF Colombia personnel.

According to UNICEF records, most of these staffing increases have been among UNVs. This has generated additional work in contracting and retaining for a small number of staff at the management level. This rapid expansion overlapped with the pandemic. In line with UNICEF's pledge to stay and deliver in humanitarian crisis, the CO faced additional risks and stress in responding to the emergency in accordance with the CCCs while also implementing a comprehensive duty-of-care policy. UNICEF Colombia could review the balance between newly recruited junior staff and the management positions needed to supervise and orient them.

Need for orientation and training on humanitarian principles and practice

As noted, the expansion in coverage has been positive in terms of positioning UNICEF Colombia to have a presence as a relevant actor in the response, something that according to UNICEF Colombia team members and partners could not have been achieved by having staff from Bogotá operating from a distance. On the other hand, informants reported that UNVs have been hired with short-term contracts, and some lack prior experience either with UNICEF or in humanitarian operations of this scale. While UNICEF Colombia has made the strategic choice to not have specialised emergency teams at field level (but, instead, to have both emergency and development responses carried out by the same personnel) this strategy depends for success on thorough induction into humanitarian principles and approaches, and how and when these might be different from those around a longer-term development approach (see Effectiveness section below).

This context would normally require significant levels of training, accompaniment and orientation in the hiring process. However, according to KIIs, this has been taking place in an internal and external organisational context in which responsibilities are often unclear and overlapping. Those familiar with UNICEF's own internal standards, such as the CCCs, believe they are not sufficiently guided on humanitarian principles, humanitarian coordination, and institutional expectations around an emergency response. Perceptions gathered from UNICEF teams in the field are echoed in the 2020 Office of Internal Audit and Investigations (OIAI) Internal Audit:

There were opportunities for improving ongoing channels of communication and support between the field teams and the Bogotá country office, as well as more visits to support UNVs in the field. In the survey of the UNVs, the audit also noted concerns were raised regarding the definition of their roles and recognition of their contributions.

Constrained emergency capacity to support in humanitarian delivery

UNICEF Colombia has a small emergency team at CO level⁷¹ to oversee a growing number of field offices, staff and complex emergencies, programmes, donors and logistics. This includes two fixed-term emergency staff members (National Officer- NOB and NOA).⁷² According to a UNICEF KI, the Colombia Office added the NOA position to create additional capacity for emergency response and support emergency preparedness, using Other Regular Resources (ORR) instead of emergency resources to improve funding stability.

As will be explored in greater detail in the Regional Synthesis report, UNICEF LACRO and HQ share responsibility for the limited funding and related staffing constraints that have impacted the VMC response.

Technical support, expertise and sharing of good practices at CO and RO levels

KIIs have identified that more technical support on emergency response is needed and would be valued both from CO and regional level sector specialists. The ET was able to identify that technical support is needed in key areas such as Education in Emergencies (EiE) and Child Protection in Emergencies. Regarding the latter, UNICEF Colombia received an experienced international Head of Section whose past experience in emergencies will likely be of great value to the CO. From the point of view of LACRO, EiE officers from the regional office have been in constant communication with education management in Colombia CO and have given technical advice and support since the beginning of the crisis. This has included EiE capacity development training and interexchange meetings with other national education coordination mechanisms. UNICEF's Education Section would benefit from an injection of new ideas and approaches that could address learning needs at scale and at the same time resolve long-standing challenges in the education sector, building on the opportunity presented by the VMC to

⁷¹ This team is comprised of three: two fixed term (1 NOB and 1 NOA) and a UNV.

⁷² In UN jargon NOA refers to a staff member appointed with no work experience required and NOB to somebody with a minimum of two years work experience.

generate evidence and policy recommendations to support the sector (see section on effectiveness below).

Capacity for gender analysis and programming

UNICEF Colombia has identified a wide range of gender issues related to the VMC including, among others, GBV, trafficking, sexual exploitation and early unions that pose specific protection risks to women and girls. These issues are signalled repeatedly in UNICEF's appeals and documents. UNICEF Colombia has also firmly committed to analysing the migration response through a gender lens. In 2018, the CO developed a ToC to transform social norms related to GBV against children. This was based on the study results "social norms prevalence related to GBV against children". This ToC was adapted in 2021 to be implemented in Villa del Rosario during the migration response. KIIs feel that UNICEF at CO and LACRO level has not invested adequately in ensuring there is staff capacity for integrated gender analysis, gender equality and a gender transformative approach in all VMC sectors into the humanitarian and development aspects of the response to the VMC across sectors. This is also expressed in UNICEF's evaluation of Gender Action Plans in 2020, in which UNICEF Colombia participated. Colombia CO also conducted a gender analysis of children on the move in 2021. However, to the ET, KIIs expressed that there are too few UNICEF team members with gender expertise.

UNICEF Colombia's gender officers' role is very broad and their responsibilities are too wide. In terms of Gender and PSEA, the gender officers have supported interagency coordination, GBV prevention, capacity building, SOPs development and strengthened access to services as well as institutional strengthening. As UNICEF has brought on numerous new IPs, much time has been dedicated to helping strengthen the capacity of partners to meet UNICEF's PSEA requirements for contracting purposes. While this is an important task it limits their role in capacity building and the development of gender strategies for both the humanitarian and development response. Since last year, the CO has conducted an analysis of the management of the PSEA system and established a strategy for its sustainability. This implied designing or adjusting the system's processes: to strengthen the roles and responsibilities of the actors involved, to establish measures to finance human resource needs, to strengthen institutional capacities among partners and develop institutional and programmatic guidelines for PSEA.

Partner contracting mechanisms and limited resource mobilisation

During KIIs both government and NGO partners described challenges they face in participating as partners in UNICEF's VMC response. These are not new and have to do with the very short funding cycles of humanitarian funding. IPs noted that it is not possible to deliver a year's worth of activities in the short, three-month window between the time that funds are disbursed (in May, June or July for example) and the time they are expected to begin reporting on outputs.⁷³

Appropriateness	
Key Strengths	Key Challenges
Establishment of field offices in key border areas allows UNICEF access to new opportunities for evidence gathering and generation as a basis for improving its response	Limited information and evidence generation as a basis for influencing public policy in key sectors and addressing specific needs and barriers
Preparedness: In 2018, UNICEF Colombia had identified migration as a key risk factor and had met 18 out of 25 Minimum Preparedness Standards, according to the EPP	Limited funds to expand the response further.
Route based approach operationalised through participation in GIFMM-R4VCentros de Apoyo and Puntos de servicios along the migration route providing support to <i>caminantes</i>	Limited consultation and participation of affected communities in project design and implementation.
Anchoring of migration response within longer term development process as per CPD 2021-2024 allows humanitarian response to be transitioned into longer-term development planning.	Confusion about UNICEF's definitions of system strengthening and nexus programming and current approaches for linking humanitarian response with long-term development modalities.

7.2 Effectiveness

The evaluation of the effectiveness of UNICEF's response is guided by the following overarching question: To what extent did UNICEF's response to the VMC achieve, or can be expected to achieve, its objectives and results,

⁷³ According to UNICEF staff, it is important not to lose sight of the fact that UNICEF globally has a HACT framework and procedure for partnering with IPs and therefore the procedures established by the organisation for resource transfers must be complied with.

including any differential results across groups, (including by gender/age/ethnicity) across border, transit, urban and other settlements? This section will address the different specific evaluation questions under this overarching question, systematically reviewing achievements by sector.

EQ6. To what extent did UNICEF's response to the VMC achieve, or can be expected to achieve, its objectives and results, including differential results across groups (including by gender/age/ethnicity) across border, transit, urban and other settlements?

EQ7: How effective has UNICEF been in responding to the influx of Venezuelan migrants with regards to:

- a) Supporting UNICEF- bolstered access to their rights and protection: child and social protection, education, prevention of GBV, early childhood development, health, nutrition and WASH services for migrant, refugee and host community children**
- b) Supporting and promoting inclusion and integration by ensuring access to national social services and humanitarian/social cash transfers; the regularisation of children's and families' legal status; strengthened social policies and national/local integration capacities.**
- c) Generating a sense of empowerment for migrant children, adolescents and families in terms of having access to information and opportunities.**

Summary of key findings:

At the output level, UNICEF Colombia has achieved many of its intended targets and in 2019 was able to exceed expectations in some areas. At the outcome level, based on the reconstructed ToC at the regional level, UNICEF and GIFMM-R4V partners have been able to show key results in f supporting and promoting social inclusion, through providing technical support to operationalise the open-door policy of the GoC. To a lesser extent, and somewhat unequally, some long-term results are also emerging in terms of access to rights and protection, as well as the empowerment of migrant children, adolescents, and their families to access needed information and opportunities on their migratory journey.

- On a sector-by-sector basis, the ET finds wide variations in the capacity of UNICEF Colombia to achieve its targets.
- The response has been spread very thin, over many regions, many sectors, many different types of migrant and host populations, including Venezuelan migrants, Colombian returnees as well as a handful of migrants from other countries - all with limited funding. UNICEF Colombia has chosen to focus its efforts on certain key border regions where it is able to show greater effectiveness.
- Regarding CP UNICEF Colombia has contributed at the national level to put in place the pre-requisites for Venezuelan refugee and migrant children to enjoy their rights – in particular through the campaign to combat statelessness, measures to render accessible birth registration in hospitals and the roll out of the ETP. UNICEF has also supported positive messaging around respect for the rights of Venezuelan migrant children in order to challenge xenophobic attitudes which may have indirectly resulted in less targeting and discrimination against Venezuelan refugees and migrants. However, efforts at the international (regional) level as part of the Quito Process to ensure a regional CP protocol have stalled. Efforts at the local level to operationalise effective CP monitoring and case management require strengthening.
- As far as education is concerned UNICEF has not achieved the sector result formulated in its HAC 2019 or 2020 and with current funding levels, will not achieve the sector objective of full integration into the national education system. Education is waiting. KIs, field observations and document reviews suggest that many children continue to lack practical access to the national education system, and to the main intervention, LCs. Current resourcing constraints inhibit a sufficient and effective response given the scale of the VMC.
- Regarding social protection, there was a sector result formulated for Social Inclusion in the 2019 HAC, but it was not until 2021 that a specific indicator was put in place. UNICEF first rolled out a Humanitarian Cash Transfer (HCT) in the second half of 2020 in response to the extreme vulnerability of migrant families due to the confinement and public health measures to control the spread of pandemic. This was seen by beneficiaries and UNICEF as a very positive experience, but, due to funding limitations, one that was too limited in scale in relation to the needs. It was not adapted for families in transit (as per the sector result), but rather for families who were established and already benefiting from other programmes as they were registered in UNICEF-Funded LCs. Future work on HCTs in Colombia can build effectiveness and efficiencies by working more closely and in coordination with other GIFMM partners also rolling out HCTs. The Programas de Desarrollo con Enfoque Territorial (PDET) or the *Territorios Amigos de la Niñez* approach is also promising, in terms of its potential for bringing about long-term integration of migrant children and adolescents in priority communities.
- Analysing WASH compared to performance against targets in 2019, it appears that UNICEF Colombia's WASH Sector results were significantly impacted by the pandemic. Nonetheless, the ET finds that WASH

has been the most visible face of UNICEF during the VMC response, and also as it overlapped with the COVID-19 L3 Emergency response. The WASH sector led a strong response in terms of both sector coordination and programmatic response, while linking humanitarian and development objectives. It has been the bedrock upon which many other UNICEF and R4V services and measures have relied, as well as the entry point for new community and institutional relationships.

- On health and nutrition it became clear to the ET that a common strategy to deliver health and nutrition services as one package appears to be both effective and efficient. The mobile clinic concept has enhanced outreach to vulnerable groups from both migrant and host communities. In addition to the mental health elements proposed for the clinics, there could be stronger focus on CP and GBV prevention and response. The GIFMM- R4V platform has ensured the availability of primary health services to refugees/migrants at key border and transit points. Health services provided in transit and at border points are not covered by UNICEF Colombia. UNICEF's programming is mainly directed to refugees and migrants in rural and urban settlements.
- On the centrality of the CCCs to UNICEF humanitarian responses the ET finds that CCCs are difficult to operationalise in parts of the response. These operations have to be aligned with standards set by other actors and those of national governments, which are not necessarily or fully consistent with the CCCs. At the very least, this suggests the need in Colombia and other countries in the region for more training on how to apply the CCCs in the national context and clarification about the extent to which UNICEF at global and regional level expects the CCCs to be applied
- In addition to the migration outcome indicators, C4D has indicators that carry over from one year to the next. These indicators suggest a good progress from short-term activities towards the longer-term sector result established in the 2019 HAC. The C4D/Communications strategy adopted by UNICEF Colombia appears appropriate for the scale of the emergency.

This section will address EQs 6 and 7 as a continuum as they complement each other. Achievement of results at the output level is gauged through the level of achievement of the intended objectives through the progress of measurement indicators as well as alignment between results and UNICEF's own standards, particularly in relation to CCCs and the *Programme Framework for Children on the Move*. The ET in its reconstructed regional ToC has also proposed three longer-term outcomes. Document reviews, field visits and KIIs were utilised to establish the extent to which UNICEF's programming is likely to lead to these three longer-term outcomes:

- children on the move have access to rights and protection;
- children on the move are included and integrated through access to national services and programmes, the regularisation of children's and families' legal status; strengthened social policies and national/local integration capacities and
- children on the move have a sense of empowerment in terms of having access to improved information and opportunities.

Regarding the meeting of shorter objectives for the L2 Response, the ET relies on LACRO's Humanitarian Performance Monitoring (HPM) indicators. A challenge is that these are not consistent by year, as HPM indicators change year to year. Changing indicators makes it difficult to compare progress in the response from one year to the next.

Child Protection

The output level result formulated in the HAC 2019 is as follows:

<i>Sector results formulated as in HAC 2019</i>
<i>Children on the move are protected from violence, exploitation, and abuse in Colombia through direct interventions, as well as awareness and campaigns (indirect interventions)</i>

This results formulation from the 2019 HAC suggests that in order to evaluate the extent of its achievement we need to consider both the direct role of CP interventions on the part of UNICEF and those indirect interventions which have been mainly led by C4D and Communications to counteract xenophobic attitudes and create positive messaging in favour of integration of refugee and migrant children. This section first explores direct CP interventions the contribution of C4D and communications functions to the indirect interventions to address xenophobic attitudes and create awareness about the needs of children on the move will be reviewed in the C4D section below.

The table below shows that the specific targets and indicators for the sector have changed each year of the response, making any kind of comparison difficult. However, it is clear that the effects of the pandemic, among

other factors, have significantly reduced UNICEF Colombia's ability to reach its target. The pre-pandemic reporting shows a significant level of over performance, whereas the two subsequent years show a concerning, but understandable, level of under-performance.

Table 6. Protection targets and indicators (2019, 2020, 2021)

Protection	2019		2020		2021	
	Target	Achieved	Target	Achieved	Target	Achieved
# of children benefiting from programmes to prevent and address violence, abuse and exploitation (including GBV), being mobilised and strengthened	130,000	180,620				
# of children, adolescents and women accessing GBV risk mitigation, prevention and response			148,000	6722 (5%)		
# of children accessing mitigation, prevention or response interventions to violence, abuse and exploitation			120,000	13,917 ⁷⁴ (12%)		
# of children and caregivers accessing mental health and psychosocial support					179,477	27,310 (15%)
# of unaccompanied and separated children accessing family-based care or suitable alternative					750	316 (42%)
# of children identified in need of specialised services who are referred to health, social welfare and justice services					360	1363 (379%)
# of children, adolescents and women received GBV response services, including risk mitigation interventions and prevention					5290	6535 (123%)

Protection-related challenges and access to services and rights have been addressed at a number of different levels by UNICEF. At the international level there have been efforts to build transnational agreements on CP through the Quito Process and at the national level legislation, promoted by UNICEF, UNHCR and IOM, in favour of enhanced protection and rights.

Quito process and the Regional Protocol for Children on the Move

At the Quito V meeting, the GoC with technical support from UNICEF, IOM, UNHCR, and Instituto de Políticas Públicas en Derechos Humanos (IPPDH), presented a motion to prepare a Regional Protocol for Children on the Move. This was adopted and the commitment was included in the Quito V resolution, mandating the creation of a technical governmental task force to work on drafting the Regional Protocol. In 2019⁷⁵, UNICEF's support and leadership to promote this protocol was seen as critical to ensure that international standards related to the children on the move were included and that the proposal provided a comprehensive policy framework based on international standards for the protection of children, including the Six Policy Asks as found in UNICEF's Programme Framework for Children on the Move.⁷⁶ Unfortunately, over the period covered by this evaluation, it appears that UNICEF's technical leadership on this regional protocol has proven difficult to maintain. While UNICEF Colombia's leadership for the regional protocol was very strong, when the presidency of the Quito Process passed from Colombia to Peru, the capacity and commitment to following through with this initiative at the CO Peru level encountered difficulties. The issue of reduced UNICEF leadership on this ambitious agreement will be explored in the context of the evaluation's Regional Synthesis Report. This clearly both has to do with UNICEF's leadership at the regional level, and also the declining level of governments' commitments to the process.⁷⁷

Advances in national legislation for regularisation and prevention of statelessness

⁷⁴ According to UNICEF, for 2020 only GBV is reported, not the total number of children and adolescents targeted in the protection HAC (prevention against all types of violence). In 2019 the report was only a few. Hence the difference.

⁷⁵ UNICEF Colombia, Country Office Report, 2019.

⁷⁶ UNICEF: Programme Framework for Children on the Move, year 2017

⁷⁷ UNICEF Staff have clarified that the GoC and UNICEF Colombia, as well as LACRO have championed the protocol and have not waned in their support and technical leadership. However, some governments in the region did not support this initiative, so now the plan is to develop guidelines which could have more political support. These political processes depend to only a limited extent on UNICEF's leadership and advocacy and to a much greater extent on governments in the region.

UNICEF Colombia – in partnership with UNHCR and IOM – has been effective in supporting Colombia’s open-door policy to the reception of Venezuelan migrants with the intention of settling in Colombia with needed mechanisms and legislation to prevent statelessness of Venezuelan children born on Colombian soil, as well as to develop the framework for an ETP which in theory allows Venezuelan migrants access to basic health and other social services.

In August 2019, the GoC extended the right of nationality to all children at risk of statelessness born to Venezuelan parents between January 2015 and September 2021. UNICEF-IOM-UNHCR joint advocacy and technical assistance during the process of design of this administrative measure was recognised by the government and set the basis for a fruitful joint partnership during the roll-out phase. In 2020, despite the pandemic, UNICEF continued to support timely birth registration through the government-led initiative *Primero la Niñez* to prevent statelessness with support from IOM, UNHCR and UNICEF. UNICEF supported the National Registry Office (*Registraduría Nacional del Estado Civil*) and Ministry of Health to strengthen the training, staffing, and equipping of public hospitals in border provinces with high birth rates of Venezuelan children. Issuing registration during the pandemic, ensured that migrant children could obtain the civil registry status immediately upon discharge from the hospital. As of 27 December 2020, 50,741 children were granted Colombian nationality, of whom, 21,454 were born between August 2019 and December 2020, according to the National Registry Office. All partners consider these interlinked interventions as a very successful approach to the prevention of statelessness among Venezuelan refugee and migrant children.

In February 2021, the GoC announced a new initiative to provide a ten-year ETP to Venezuelans with the intention to remain in the country. The ETP provides access to basic services including the national health system and COVID-19 vaccination plans, and regularisation of the status of many Venezuelans who had entered the country illegally. According to UNICEF and IP informants, the ETP represents a major milestone as it allows for longer-term solutions, including access to formal employment which in turn serves to reduce the need for humanitarian assistance and pave the way to Colombia’s post COVID-19 economic recovery. These measures on prevention of statelessness and the development and roll-out of the ETP are directly contributing to UNICEF’s short-term humanitarian and longer migration outcomes on access to rights and inclusion in national protection systems for migrant children and their families.

During field visits, the ET observed that UNICEF was collaborating effectively with other agencies to facilitate the roll-out of the ETP through *jornadas de inscripción* (registration days) at various locations where mobile teams provide support to the registration process. They help Venezuelan migrant families complete an online pre-registration procedure followed up in 2022 by a formal appointment. Discussions with beneficiaries highlighted that the process is quite long, and the waiting time significant and growing. Those conducting their pre-registration in October, at the time of the ET visit, were having to wait six months or more for a follow-up appointment to proceed further along the registration process. This implies that effective protection offered by the ETP in terms of access to regularisation and other forms of social service coverage is still for the future unless UNICEF and other partners invest in the expanding the capacity of Migración Colombia to process pre-registrations more quickly. A lesson learned from the process, according to UNICEF partners, is that initial pre-registrations and those done by individuals were often not done by family groupings. This meant that one or both parents could be pre-registered without any or all their children, leading to gaps and disparities within the same household. GIFMM-R4V partners participating in registration events highlighted that they are trying to overcome weaknesses in the system by ensuring that all family members are registered together. This is where accompaniment of families in the registration process is contributing to better outcomes for children.

Local protection challenges and issues

The major advances on the regularisation of the status of migrant children and their families and measures to prevent statelessness at the national level are not systematically mirrored in terms of access to rights and protection at field level. Here CP risks are many and the capacity of institutions to address them are highly limited. GIFMM partners have identified a number of trends – including sex trafficking and sexual exploitation of Venezuelan children, rising rates of early marriage/unions and teenage pregnancy, child labour and recruitment into street gangs and armed groups. All these risks largely fall below the radar and are difficult to detect by all agencies. UNICEF as lead agency in this area of responsibility, is looked at to provide guidance and reinforce the overall response and coordination between CP and humanitarian actors. Through document review, interviews and informal discussions with Venezuelan migrants, the ET notes that pandemic a restriction measures, including school closures and periods of confinement, increased numbers of children in the streets and caused rising rates of evictions of Venezuelan families in the border areas due to job losses and collapse of local economies.

A gap identified by the ET and UNICEF partners is the lack of an experienced CP presence apart from Child Friendly Spaces by ICBF and/or UNICEF at key border crossings where highly vulnerable UASC might be identified. The Centros de Apoyo and Puntos de Servicios are shared by a large number of GIFMM-R4V actors who are each

providing different types of support and facilitating a range of services, including humanitarian transport, counselling, health and nutrition. Various actors commented that they were unsure or reluctant regarding the referral of cases of youth who they suspected could be unaccompanied children. In some cases, NGOs providing services and support see their role as facilitating that young migrants reach their destination. It is clear from group discussions and KIIs in Cucuta that there are differences between UNICEF and ICBF on the one hand and some R4V partners on the other regarding whether it is always in the best interest of the child, particularly in the case of adolescents, to refer the case to ICBF when they can be handled more quickly and effectively by humanitarian partners.⁷⁸ According to some partners, the ICBF process of restitution of rights is slow, cumbersome and could be considered punitive to adolescents on the move who are clear about their destination and want to get there as quickly as possible. There is clearly a need for UNICEF to generate evidence to address this tension, to document the challenges and benefits of the PARD process for children and adolescents and make the case for how it can be improved in the case of children and adolescents on the move.

This ambivalence of GIFMM partners reporting CP cases to the authorities and ICBF is reflected in the wide gap between case counts reported by GIFMM partners in R4V reporting on CP cases and the statistics provided by ICBF on cases where a restitution of rights (or PARD) process has been carried out. ICBF statistics show that the number of CP cases managed by ICBF over the period of the VMC rose from 300 in 2017 to more than 3,000 by the end of 2021. Currently ICBF has 3,700 open CP cases across the country of Venezuelan refugee and migrant CP requiring PARD. The vast majority of these cases are for cases of parental neglect due to the complete or temporary absence of adults responsible for the care of children or children spending a lot of time in the streets. These are all conditions that are likely exacerbated by pandemic-related school closures and the fact that Venezuelan parents often have to bring their children to work with them, leave them with older siblings or to their own devices for long periods.

All these protection risks have been well documented by GIFMM partners. However, these cases are relatively few when compared with the reporting provided by GIFMM partners in coordination platforms. According to UNICEF, which consolidates CP reporting for only three Departments of the country, in Arauca alone, in 2021, GIFMM partners reported 1,329 UASC – 650 unaccompanied and 679 separated.⁷⁹ These are far more than the 244 cases for the whole country that were referred and processed by ICBF. Arauca is the only Department for which UNICEF was able to provide consolidated figures. According to UNICEF, these results and discrepancies, have made ICBF aware. Joint actions to be undertaken involve searching for and strengthening of foster homes as a family-based protection modality, support for the identification of unaccompanied children, technical assistance so that the PARDs are open, and the protection measures lead to family reunification. The enormous challenges are acknowledged, and actions have been implemented to reduce the gaps. However, what is mainly lacking is the resources needed to address the scale of the CP challenges.

This differences between the figures and discrepancy between ICBF and GIFMM statistics highlights the great challenge of collecting data and. GIFMM partners are reluctant to refer CP cases to ICBF, both because they believe that they can handle cases better and more efficiently on their own, and also because they are concerned that ICBF's processes will not ultimately lead to a solution that is in the best interest of the child. Furthermore, there is no comprehensive overview of CP cases as a basis for coordination planning and programming.

According to ICBF officers at the local level, despite the fact that they are mandated by law to handle all CP cases of Venezuelan refugee and migrant children, they simply do not have the practical means to do so. In Cucuta, an ICBF staff member took a somewhat rigid attitude on the support for UASC children, regardless of their age:

For ICBF, a child is a child. If we cannot trace their family, we have to find a place for them where they can be safe. That is normally in a group home, institution, or alternative arrangement. They will remain under the care of the Colombian state until they reach the age of majority.

While in Cucuta the subject of non-referral of cases to ICBF is a matter of conflict within the Working Group on Child Protection (*Mesa de la Niñez*) in La Guajira ICBF officials took a less doctrinal attitude, seeing it as a relief if GIFMM partners found their own solutions and only referred to ICBF those cases that they could not handle on their own. Whatever the pragmatic solution found at the local level, there are evident challenges and gaps that UNICEF has endeavoured to address.

- UNICEF, in the framework of emergency response, seeks to apply the CCCs, although ultimately the

⁷⁸ According to UNICEF staff, an example of the above is the creation of para-statal routes or procedures. UNICEF has taken a strong position for identifying bottlenecks in order to strengthen the response capacity of those jointly responsible for child protection (including humanitarian and development actions), not for promoting parastatal responses.

⁷⁹ Source: UNICEF/GIFMM: This includes 623 girls and 706 boys. UNICEF should verify if boys are getting the attention that is needed, as in many migrant crisis boys are more at risk of being allowed to go off on their own.

fulfilment of those commitments lies more with state actors than it does with UNICEF.

- Actions and training and technical assistance processes have been developed for the application of the CCCs with staff, members of the area of responsibility for CP, the protection cluster, UNICEF partners and institutions.
- Colombia has a protection system defined in national norms, including the Code of Childhood and Adolescence, Law 1098 of 2006. It establishes the competencies, roles and functions of public servants, including the Administrative Authorities (Defensoría del Pueblo, Family Commissariats and Police Inspectorates), and of actors co-responsible for the protection of children.
- UNICEF sees that the system has multiple challenges and gaps that have increased with the migration crisis including lack of technical and financial capacities. The ET recommends that UNICEF explore with ICBF an approach to creating partnerships with civil society organisations that will allow the state to meet its obligations.
- Since 2018, UNICEF Colombia has proposed and developed a strategy to strengthen institutional capacities and improve the response of State institutions. UNICEF has provided:
 - Technical assistance for the design of the care route for migrant children.
 - Technical assistance for the adaptation of the route for the care of unaccompanied migrant children.
 - Actions to promote the identification, access and accompaniment of migrant children and adolescents at risk or with violated rights, such as unaccompanied migrant children.
 - Local protocols to operationalise the routes.
 - Technical assistance for the consolidation of information on unaccompanied children identified in Arauca and Norte de Santander (areas where UNICEF leads the migrant children's roundtable).
 - Conferences, workshops and preparation of technical documents to strengthen the administrative authorities and other civil servants.

In 2022, an agreement was reached with ICBF to include in UNICEF's technical assistance actions a component to review the information system, so that it includes the variables for identifying cases that are being handled by the members of the local GIFMM. It seeks to ensure that children who do not access the protection system do not continue to be made invisible. This is the most important step which the ET recognises that UNICEF needs to embrace at an earlier point in the response.

In addition, UNICEF has a training course for public servants to promote the comprehensive protection of migrant children. It has a module on children's access to the protection system, as part of the strengthening of the case management strategy.

UNICEF Colombia recognises there is still a long way to go in terms of achieving the integrated case management system as outlined in the CCC. While referral pathways exist and UNICEF has actively encouraged their use, they are not systematically being followed. Multiple information or case management systems exist, but they are not integrated, and each actor appears to be maintaining their own.

Child Protection Centres / Safe Spaces and the introduction of home-based, foster care arrangements

According to UNICEF and other partners, a key challenge has been to address the need for temporary housing and accommodation for children and migrant families who are in transit or in the streets due to poverty, evictions and other risks highlighted during the pandemic. According to UNICEF reporting, at the beginning of the pandemic, one drop-in centre for unaccompanied children and street children in La Guajira was converted into temporary shelter for exceptional emergency situations, for a maximum 15-day period, under ICBF supervision. Biosecurity protocols for the centres were developed in collaboration with health authorities and the Pan American Health Organization (PAHO). Self-care measures were taught to children and their families and health care routes were designed and activated as needed. With Government of Canada support, a new drop-in centre operated by EACANNA in Villa del Rosario, Norte de Santander was created. A total of 638 migrant children and their parents were accommodated by these CP care centres in 2020.

In October 2021, the ET was able to visit two such centres: the EACANNA Centre in Villa del Rosario, Norte de Santander, and a similar centre created in Riohacha, la Guajira, operated by Fundación Significarte. By the time of the ET visit, there were no longer any place to stay in the EACANNA centre, which had been turned over for use by the Learning Circles programme and was now functioning mainly as an alternative learning centre. At the same

time, the ET was told that temporary accommodation for UASC and families continues to be insufficient.⁸⁰ A question which arises is why spaces designed to provide temporary accommodation are no longer in use for that purpose. Part of the explanation provided to the ET is that UNICEF is following the guidelines issued by the Alliance for Humanitarian Action on not creating institutional care during the pandemic, and so needs to move away from institutional accommodation towards home-based foster care situations. However, it is clear that this transition has been extremely difficult. According to available 2021 reporting in the first quarter of 2021 only 11 children were accommodated in foster care. Donors also highlight the high cost of maintaining these Safe Space Centres and the need to identify a longer-term exit strategy for UNICEF.

Evidence generation and advocacy around child marriage and early unions (CMEU)

In the border areas, a phenomenon of concern to many actors in the VMC is what they perceive as increasing rates of child marriage/early unions among Venezuelan, girls primarily but also boys in some cases.⁸¹ UNICEF and IP field staff report seeing rising numbers of young girls forming unions with older males, as a basis for survival and stability. This is a pattern well known in Colombian society, but poverty, lack of access to education and vulnerability of Venezuelan adolescents can place them at higher risk of entering unions at an early age. Gender experts point out that in Colombia, early marriage as young as 14 years old, is permitted by law with parental consent. A 2021 ruling by the Supreme Court upheld the notion that those as young as 14 may form unions and be considered as married even without parental consent. Here UNICEF along with government institutions, civil society and UN agencies submitted technical notes to advocate for the articles to be declared unconstitutional in line with the UN Convention on the Rights of the Child (UNCRC) and the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW).⁸² UNICEF staff highlighted other advocacy and technical assistance efforts around CMEU:

- i. inclusion of specific measures on CMEU in the current National Development Plan;
- ii. specific interventions made by UNICEF in the Congress to discuss two of the of bills to eliminate the exceptions of the civil code on CMEU;
- iii. convening since 2018 a round table with government institutions, UN Women, UNFPA and Plan International, to address and eradicate CMEU;
- iv. Colombia CO undertook the first study on CMEU (2010-2019) in the country, to be published in 2022.

According to agencies such as UNFPA, UN Women and other UNICEF partners, early unions are impacting Venezuelan migrant girls in a wide range of ways, blocking access to education, and putting at risk their health, lives and futures. Maternal mortality is one of the leading causes of death for girls aged between 15 and 19 in Colombia. Risk of maternal death doubles in mothers under the age of 15. However, adolescent pregnancy is not just a public health issue but an issue of rights, CP and social protection. It is recognised as one of the main factors that perpetuate poverty in developing countries, since it increases the gender gap, socioeconomic inequalities and vulnerability and exclusion.

Inattention to the prevalence of street children

It appears that the vast majority of child rights violations are happening in the streets. Some key protection risks are simply related to the fact that so many children are out-of-school and lacking the skills and opportunities to earn a living later in life. At the time of the ET's visit in October 2021, depending on the region, between half and three quarters of schools were still closed. This was largely because MEN requirements for social distancing and hand washing were so high that schools could not make the investments in improved infrastructure (washrooms) needed to meet them. Being out-of-school, according to many respondents is a key factor which leads to children being unprotected, spending time in the streets where they are exposed to violence, drug use, sexual exploitation, and other risky behaviours.

Effectiveness – Child Protection	
Strengths	Challenges

⁸⁰ UNICEF staff agree with this analysis. There has been a reduction in places or quotas for accommodation because the conditions of the pandemic facilitated the return to the new normal and because the service was specialised to meet the requests for support from the administrative authorities and the ICBF - another example of the search for complementarity in the state response.

⁸¹ <https://data.unicef.org/resources/profile-of-child-marriage-and-early-unions-in-latin-america-and-the-caribbean/>

⁸² <https://www.un.org/womenwatch/daw/cedaw/>

Legislation and development of capacity in hospitals to ensure birth registration and nationality to children of Venezuelan parents	Ongoing gaps and tensions around the handling of CP cases, particularly for UASC. While UNICEF is trying to strengthen the capacity of the GoC it should be acknowledged that one of the biggest challenges is the lack of diplomatic relations between Colombia and Venezuela. Hence UNICEF also works with the International Committee of the Red Cross (ICRC) on cross border issues.
UNICEF support for roll-out of the ETP	Lack of integrated and inter-operable case management information system
Articulation of the Ruta for UASC that includes child's decision regarding whether to enter an administrative process	Institutional presence of UNICEF should be reinforced at CAs to provide orientation to GIFMM partners, Migración Colombia and ICBF on the best interest determination and handling of UASC, particularly adolescents
Partnership with Fundación Renacer, specialised in tourism-related sexual exploitation of children.	Insufficient and inadequate protective services/spaces for street children
Evidence generation and advocacy on child marriage and early unions	

Education

<i>Sector results formulated as in HAC 2019</i>
<i>Children on the move and from host communities are integrated in the national education system</i>

Table 7. Education Targets and Indicators (2019, 2020, 2021)

Education	2019		2020		2021	
	Target	Achieved	Target	Achieved	Target	Achieved
# boys and girls on the move, including adolescents accessing non-formal learning activities	40,000	30,758 (76%)				
# children and adolescents accessing formal and non-formal learning activities			17,500	20,088 (115%)		
# under fives benefitting from early childhood development activities			79,618	44,473 (56%)		
# children accessing formal and non-formal education, including early learning					111,449	53,540 (48%)
# children receiving individual learning materials					39,624	1919 (5%)

As can be seen above, there is no indicator that can be tracked for the full period of the evaluation. The closest is the indicator on children accessing formal and non-formal learning activities in 2020, which is then mixed in 2021 with children also accessing early learning. Furthermore, the conceptual link between sector results in the 2019 HAC, which clearly focuses on integration in the national education system, and the various HPM education indicators is not particularly strong. HPM indicators cover a wide range of different types of activities, some which are the distribution of learning materials and early learning activities that do not directly translate into actual integration into the national education system. In fact, a significant part of UNICEF's investment in education in emergencies falls outside the formal education.

UNICEF has undertaken a range of interventions in education, such as giving out educational supplies and at home learning resources during the pandemic. As highlighted by UNICEF staff, it is important to add that the delivery of educational materials contributes to the ability of children to continue learning by providing access to Although access to education is a fundamental challenge to the GoC for the inclusion of the migrant population, pandemic related dropouts are also a challenge

Barriers to access to formal education

Since the beginning of the VMC various documents have highlighted the challenges around accessing schooling for Venezuelan refugee and migrant children. There has been mainly anecdotal evidence and local surveys as a basis for determining the extent of the problem. In 2018 and 2019, UNICEF began to seek out educational alternatives to address the growing concern that children of the VMC were falling more and more behind in their studies. In its 2019 humanitarian action plan, UNICEF Colombia sought to raise US\$ 5,835,000 for two activities:

- maintenance of 50 alternative learning spaces and the establishment of new alternative learning spaces (including distribution of educational kits, psychosocial support, teacher training in GBV prevention)
- provision of educational services to children on the move via the " or flexible learning models to integrate them in schools.

The reason for this was that although the Colombian Constitution and national normative frameworks ensure access to education for all children, nationals or otherwise on Colombian soil, in practice Venezuelan refugee and migrant children and their families have experienced a series of difficulties to register in the system (lack of documentation, information on paperwork involved, lack of school spaces, of funds to pay for registration, uniforms, books, discriminatory attitudes on the part school administrators, etc.) Furthermore, Colombian regulations specify that children who are two years or more older than the appropriate age cannot integrate in to a normal classroom, thus creating the need for children severely behind in their studies to be brought up to the grade level that corresponds to their age group.

Over the three years of the response, various publications have offered estimates of the large numbers of Venezuelan migrant children not registered in school, spending much of their days in the streets where they are exposed to a range of protection risks.

The decentralised nature of the Colombian education system coupled with the persistent lack of hard data on the actual numbers of children not registered in school generates an obstacle to effective advocacy for more educational resources (mainly staff and classrooms) by Departmental and Municipal Secretariats of Education within MEN.⁸³ All of these factors create a perfect storm of lack of access which over time is leaving children behind.⁸⁴

Creation of alternative learning spaces and *Círculos de Aprendizaje* (LCs)

UNICEF Colombia's main response to this situation has been to reintroduce, adjust and adapt a model that was first developed some 20 years ago to address the needs of children forcibly displaced by the long-standing armed conflict. The *círculos de aprendizaje* model was developed by the NGO, Fundación Escuela Nueva.⁸⁵ It involves the creation of alternative learning spaces with specially trained teachers administered by UNICEF's IPs. The purpose of these spaces has been to provide an intensive catch-up period to enable students after six months to be integrated into a regular class at their appropriate age group. Thus a child assessed to have a grade four level but who is 12 or 13 years old needs to complete the grade levels required to function in a grade six class. Needless to say, this kind of intensive learning, in small groups of no more than 15 learners, is expensive and requires much personal attention from teachers. Although the LC model has existed for more than 20 years and is an approved methodology of the MEN, the ET understands it has not been financed by the Secretariats of Education themselves, due to the fact that per student costs are so high.

Since 2020, which was the first full year of implementation, the LCs have not been functioning at capacity, but rather using remote/online modalities. In part this has been due to school closures during the pandemic and other delays. By the time of the ET visit in October 2021, some of these centres had been reopened as allowed for by the guidelines provided by the Secretariats of Education.

A full evaluation of the LC model in terms of its impact, effectiveness, efficiency, and appropriateness as a response to the VMC would be an important contribution from UNICEF, but this is far beyond the scope of this evaluation. Here we can consider only a few dimensions of the effectiveness of the model. According to the CCCs, the strategic result from humanitarian interventions is that children and adolescents have access to inclusive, quality education and learning in safe and protective environments. In terms of key CCC benchmarks set the ET finds the following:

- **Children and adolescents have equitable access to inclusive and quality learning opportunities**

While the ET only has limited information observations and discussions with partners of children in the LCs would

⁸³ According to UNICEF staff although it is true that there are no resources being made available at the national level for the expansion of teaching staff, the education secretariats in each Department do have within their functions to generate alternatives to respond to the demand for education according to their administrative and contextual particularities.

⁸⁴ According to one KI: "Producing evidence of the need for teaching staff does not guarantee a solution. There are many cases where this is already in place and the teaching staff have not been made viable. Likewise, the migrant population is one of the most mobile in the country and, consequently, the studies of children outside the system become obsolete in a short period of time".

⁸⁵ <https://escuelanueva.org/>

suggest that the quality of education received is good. Small groups of learners (the ET witnessed groups as few as four or five due to social distancing requirements) with a lot of individual attention from their teachers is a good indication that the method is effective for strong progress of learners within the Colombian curriculum. Very limited data provided by the World Bank also suggests that in some cases, the progress of learners in LCs was greater than for learners within normal classrooms. Teachers have received training from *Escuela Nueva* to ensure that they are well aware of the programme methodology. During the pandemic, LC learners were provided with a number of added supports that learner sin local schools may not have had data packages to ensure they could connect to online learning, home delivered packages of learning materials, and regular follow up calls from teachers to assess programmes and learning difficulties. There is little doubt that the quality of education received by LC learners was as good, if not better than that received by children participating in the national school system. The model is inclusive in the sense that it receives both Venezuela migrant and Colombian children. However, it is not inclusive in the sense that few spaces are available, and there is a long waiting list for learners who want to access the services. Furthermore, UNICEF's education response does not provide an educational option for continuity of education for adolescents.⁸⁶ The LCs are for children up to 14 years of age. After that, adolescents are essentially on their own- Informants reported that there are only adult learning centres, for which there are virtually no spaces available. There are limited services available for children with disabilities. In particular the needs of children with autism and other learning disorders were mentioned by parents as not having been addressed.

- **Safe learning environments/mental health and psychosocial support**

Overall, the spaces visited by the ET were safe, respecting key security and COVID-19 requirements. Services were available if needed for gender and age-appropriate psycho-social support.

- **Continuity of Education for all children ensured/children on the move and from host communities are integrated in the national education system**

The weakness of the model in relation to the VMC is that it is only available to a small number of learners, in specific locations, under the assumption that learners can be quickly transitioned to new a regular classroom. Under the present conditions in Colombia, this does not seem to be a valid assumption. Small group discussions with parents in two LCs in October 2021 showed that most of them had children who had been in the programme for a while and had not yet transitioned to a regular school. There are various explanations for this from the parents – either that the child is having difficulty being brought up to the level of their age group, or that even if they are up to the right level, there is no space available for them in a local school.⁸⁷ Also some parents prefer for them to stay as they may have older or younger siblings at the centre. Clearly, LCs are too few, with too few spaces and have been too slow to transition to provide an effective response to the VMC.

Data shows that by early 2020 some 489 learners had transitioned to other schools. This was lower than expected due to the pandemic. But by the end of 2021, there were 1,109 in LCs and 680 in transit to other schools. Some of these are new learners, but as we have seen above, many of them are carried over from year to year. The ET considers that overall numbers are too small to have had a significant impact on number of children and the rate of turnover for the previous LC circle would need to be significantly increased.⁸⁸

The LC model also does nothing to enhance the capacity of the GoC to address the structural challenges that have hindered access of Colombian children to the educational system for generations. One of the main bottlenecks is non-availability of sufficient spaces to meet the needs of all learners and providing the additional resources in terms of teaching staff and classroom space to ensure that all children have a place in a school, even if this means having multiple shifts in the same school. The nature of the Colombian school system and the creation of new schools depends largely on private initiative, rather than state leadership.⁸⁹ UNICEF, together with other organisations during the period under evaluation, has made the educational situation of migrant children visible locally through the education in emergencies roundtables and nationally through the education in emergencies cluster and in the needs mapping for the formulation of the RMRP.

Under the leadership of the Education Working Group, NRC with UNICEF and the Departmental Secretariat of Education in Norte de Santander developed a survey for teachers and school administrators so as to understand the needs of schools prior to their reopening after the pandemic. This was later replicated in eight other departments. One of the 100 or so questions on the survey attempted to understand how many children in the

⁸⁶ According to UNICEF, the largest demand in the early period was for primary education, and demand from education of adolescents has grown over time.

⁸⁷ According to UNICEF, during the pandemic many schools blocked the transfer of Venezuelan students.

⁸⁸ According to UNICEF, there are multiple variables during the pandemic that need to be factored in. The impact in development and learning also needs to be carefully considered, rather than looking mainly at coverage. For this reason the ET is recommending an impact evaluation of the model, to understand both the benefits and constraints of the LC model under current conditions.

⁸⁹ This is not to discount some limited investments supported by MEN's Fondo de Infraestructura.

areas surrounding each school did not have access to the school system. Given that these schools are in a border region, it is likely that many of these children are Venezuelan migrants, but the survey did not ask about nationality. The survey indicates that in some municipalities, educators are aware of significant numbers of children who are not registered in school. These are mainly areas where no LCs are established. Such information is anecdotal and not systematic enough to motivate the MEN to take the urgent action needed to ensure integration into the national system for all children who need it.⁹⁰

There is an evident and urgent need to respond to the needs of out-of-school Venezuelan and Colombian children. While it can be said that UNICEF is currently providing a small part of the response, according to KIs and observers, this is not sufficient.⁹¹ The educational strategy promoted by UNICEF could be an interesting contribution for a national or international NGO but does not correspond to the type of information generation and strategic intervention that is needed, given the scale and nature of the VMC. UNICEF Colombia and LACRO should maximise sharing of experiences by countries within the region to determine the role that UNICEF can play to assist the MEN to develop an online system, and how to meet needs through rationalising the use of existing and new donor resources in a manner that will ensure that every child who needs it is able to find their place in a school at the appropriate level, without waiting.

Specific vulnerabilities: risks associated with out-of-school adolescents and children in transit

As the EQ6 refers specifically to the effectiveness of the response for Venezuelan children and families in transit, it is noteworthy that UNICEF's response in education has not endeavoured to address the needs of children on the move in transit to other countries. The ET considers this as a concern, because every day, week, month, or year that a child is out of school has direct consequences for their longer-term development and realisation of their potential. It is also noteworthy that since much of the L2 Emergency service delivery was being carried out in parallel with the COVID-19 school closure and confinement measures, it might have occurred that just as regularly schooling could be carried out online, that children in transit might also have been given access to online learning services. In this case, it will be of interest to consider how education for Venezuelan children in Trinidad and Tobago was provided despite access to the formal school system, and uniquely through online means.

The LCs only serve children up to the age of 14 after which there they have no formal educational solutions for them. A child who has been out-of-school for years and is trying to catch up to integrate in the formal educational system to complete her/his secondary studies, in theory could be abruptly cut off. There are few if any options for integration into adult educational settings and without a secondary school certificate and exams, their route to higher education is cut off. According to several KIs, this is where UNICEF needs to harmonise a protection and education strategy – because out-of-school adolescents who do not have access to learning programmes and work-related training opportunities become more vulnerable to recruitment by gangs and armed groups and trafficking networks. Adolescents on the move are also vulnerable because they are often seeking out employment and income generating opportunities and require supportive and protective networks in order to do so in a manner that ensure their physical and social protection.

According to several KIs, it is important for UNICEF to consider solutions that can be implemented at scale to ensure that education is available in a reasonable timeframe to all learners. The ET was shown a small encampment where GIFMM partners were assisting a bi-national indigenous community that has seen its numbers swell from the VMC to develop a school for around 200 hundred learners.⁹² This required MEN to accredit a number of indigenous teachers who were not formally trained or certified thus generating more functioning classrooms and ensuring indigenous content is incorporated into the curriculum. This type of solution could be scaled up to allow temporary schools to be created to absorb the large numbers of children currently out of school. These might in time become permanent. This is the essence of a humanitarian response. Services are needed today. Education cannot wait.

Effectiveness – Education

⁹⁰ According to UNICEF staff, although MEN is aware of the large gaps in access that exist for the migrant population, increasing educational spaces involves recurring expenses, which in turn require an adjustment to public expenditures in Colombia, so this is not a policy change that will be implemented in the short term. From the ET's point of view, it is important for UNICEF to demonstrate that it is carrying out the needed advocacy to have these spaces created, and looking for creative solutions with GIFMM partners to help the state finance, on a temporary basis, the missing educational spaces, until adequate public expenditures can be mobilised. This would be required if the 2019 desired outcome for integration of children on the move and host community into the public school system is to be achieved.

⁹¹ According to UNICEF staff, it is important to contrast this statement with the percentage of funding in the education sector and from the perspective of HAC (humanitarian response) and compare it with the education sector (other actors). UNICEF's funding for education falls below what is received by other partners.

⁹² UNICEF has pointed out that this response was introduced within the framework of protecting the rights of ethnic peoples, which does not necessarily work for the rest of the population. The ET sees that creating sufficient educational spaces should be a priority for UNICEF and all humanitarian

Strengths	Challenges
Strong collaboration with Departmental and Municipal Secretariats of Education in border areas	Too many children are still unable to access to public education, particular challenges for adolescents
Strong NGO partners like NRC and Escuela Nueva	Lack of information needed to mobilise additional resources from MEN
The mandate to generate evidence about what is needed in a particular context, to propose new models suited to the humanitarian needs.	Slow and limited response, given the scale of the VMC - UNICEF's role in the LC could be left to NGOs to focus on new strategies

Social inclusion:

Sector results formulated as in HAC 2019
<i>Migrant children and their families benefit, during their transit, from social protection initiatives that allow them to continue their route toward their country of destination in a safe manner.</i>

In the LACRO HAC 2019 and 2020 there were no indicators established for HCTs and only in 2021, for the first time, did UNICEF Colombia participate with an indicator on social cash transfers. Therefore there is currently no way to assess progress against objectives set. It is noteworthy that the indicators do not allow the ET to measure progress to the identified result.

In 2020, with support from BPRM), and as a measure to keep children enrolled in alternative learning programmes and to overcome barriers to accessing online learning, a four-month small-scale initiative was implemented to provide cash to families registered in LCs. The project was designed to take into account the emergency needs of vulnerable families, as well as the characteristics of the CA programme. The short-term objective was to keep learners in this alternative learning programme in school and benefiting from online learning so as to address the risks of dropping out due to hardships imposed by the pandemic. In the medium-term it was expected that the cash-based intervention (Lesbian, Gay, Bisexual, Trans, Intersex and Queer, LGBTIQ+) would strengthen the role of UNICEF Colombia to advocate for the inclusion of migrant children in the parallel systems of humanitarian transfers and their harmonisation with the social protection system. The goal initially defined for the component was 779 families, drawn from the migrant and host population in Arauca, Cúcuta, Riohacha, Fonseca and Barranquilla with resources to meet their basic needs. However, due to duplications with other cash transfer programmes operated by other GIFMM partners, the target was changed to 769 families with the inclusion of the city of Bogotá. With this measure, coverage was provided in all the territories where LCs were being implemented. In the end, 731 families benefited from cash and other services with total value of approximately equivalent of US\$ 408.12, including data units for children's online learning, kits for nursing mothers and pregnant women and COVID-19 Prevention Hygiene kits.

This limited experience with HCTs provided UNICEF and partners with a great deal of information and insight into the day-to-day lives of Venezuelan migrant families, based on an intake survey and exit survey at the end of the project. This allowed UNICEF Colombia to conclude that the measures put in place were to some extent effective in maintaining LC learners' engagement with the programme despite the move to online learning. This information, it is hoped, can be effectively utilised by UNICEF Colombia as a basis for ongoing advocacy within the GIFMM network, with donors and also with Colombian state actors.

The end-of-project survey also indicated a high degree of beneficiary satisfaction. The ET notes that in all conversations with parents in other locations, they appear to be extremely dedicated to ensuring educational continuity with or without support from UNICEF and other partners. Respondents requested more information or notifications about fixed dates of disbursement, if possible, at the beginning of each month so as to enable them to plan to payment rent. Survey respondents estimated that the number of hours dedicated by learners to their studies increased. During the pandemic, between the baseline and the end of the project, there was an average increase of 13 per cent increase in both the time spent studying and the time spent accompanying the child's learning by parents and/or caregivers.

According to KIs and UNICEF reporting there were a number of lessons learned from this rapid roll-out of the HCT. These are detailed in Annex 13:

Social inclusion	
Strengths	Challenges
UNICEF rapidly rolled out a COVID-19 appropriate HCT programme reaching 731 households	Scope of programme was very limited, not necessarily targeting the most vulnerable
UNICEF gained valuable experience in the development of HCT programmes	The CBI scope was re-defined as a result of coordination that identified potential duplications and the new design took this into consideration.
Effective, for the most part, in keeping children already registered in LCs engaged	UNICEF to focus on preventing school abandonment, rather than on duplicating CBI where other actors are already engaged.
Engagement with local authorities (e.g., indigenous leadership)	Future iterations of the CBI component should include GBV risk assessment and mitigation measures, as well as increased access of women and girls to a range of needed services and skills training (cash plus).
Targeting women as key recipients for the HCT	
Longer-term work on social inclusion at the municipal level through PDET.	Taking into account the intentions, contexts, and timeframes for the different iterations of the Hemos y Derechos/TAN strategies, that UNICEF carry out an evaluation of the impacts and results of its engagement with municipalities in order to assess and identify the successes and opportunities for improvement.

Health and Nutrition:

Sector results formulated as in HAC 2019
<p><i>Health: Boys and girls, adolescents, and women on the move and in host communities equitably access essential health services with sustained coverage of high-impact preventive and care interventions</i></p> <p><i>Nutrition: Pregnant and nursing women and girls and under-five boys access nutrition in emergency services (micro-nutrients and care for acute malnutrition).</i></p>

Reported below are the different HPM indicators on which UNICEF Colombia report between 2019 and 2021. It should be noted that in UNICEF Colombia's HAC workplan there are a number of indicators that are not taken up in the LACRO level HPM Indicators.

Targets have been established in light of the RRMP and UNICEF Colombia calculates them on the basis of population estimation for the persons of concern (# of women, children adolescents, etc.). They are consistent with the ones retained by all partners in the R4V instruments. However, this raises some questions on its variability over time, and whether there has been overlapping reporting, leading to an inflation of the numbers. For example, is the number of children vaccinated against measles a subset of Indicator 1 on # of boys and girls accessing at least the minimum set of vaccines? It is important that the use of two very similar and potentially overlapping indicators does not lead to double counting of beneficiaries.

Table 8. Health Indicators and Targets (2019, 2020, 2021)

Health	2019		2020		2021	
	Target	Achieved	Target	Achieved	Target	Achieved
# of boys and girls accessing at least the minimum set of vaccines	31,250	42,259 (135%)	n/a	n/a	36,912	5,290 (14%)
# of children (aged 6-59 months) vaccinated against			11,066	3,424 (31%)	5735	2,676 (47%)

measles						
#. of children and women receiving primary healthcare in UNICEF-supported facilities			127,114	24,837 (20%)	40,683 ⁹³	21,206 (52%)
# of health workers reached with personal protective equipment					1,140	240 (21%)

In the 2019 HPM, UNICEF Colombia only reported on the results of vaccination, but vaccination was part of a broader strategy to reach migrant children and women through UNICEF-funded mobile health units⁹⁴ in seven different locations prioritised by the Ministry of Health in areas heavily impacted by the VMC. These units worked as an expansion of existing services in public hospitals and provide primary health and nutrition services to under-five children, pregnant and lactating mothers, and pregnant girls under 14 as well as adolescents who also required access to the protection system. Services included: vaccination, growth and development monitoring, pre-natal care, nutritional triage, outpatient treatment for acute malnutrition, micronutrient supplementation of pregnant and lactating women and adolescents, de-worming, psycho-emotional support, follow-up care and rehabilitation (SSR), nutrition and breastfeeding counselling and educational activities to prevent illness aimed at patients, families, and caregivers. According to KIIs, UNICEF Colombia was able to outperform its humanitarian targets in the area of vaccination by complementing a GoC-led vaccination campaign designed to address a serious measles outbreak. That campaign allowed UNICEF to reach more children than expected through support to a pre-existing vaccination roll-out.

By 2020, the COVID-19 pandemic had significantly slowed the pace of delivery of the response. Both humanitarian and development-oriented interventions related to the VMC response were re-programmed considering both the need for heightened biosecurity and emerging vulnerabilities seen in migrant and host populations resulting from the economic downturn. Health interventions for children and pregnant women through mobile and health clinics in border areas continued but included provision of Personal Protective Equipment (PPE) to health workers and training developed according to Ministry of Health guidelines. In response to the pandemic UNICEF also developed guidelines on pregnant women, postnatal and new-born care tailored to different care modalities. These include mobile, telemedicine and institutional services. Understanding the concerns related to COVID-19 transmission in hospitals, UNICEF adapted the health strategy to outreach to children, pregnant and breast-feeding women in border towns with Venezuela on access to essential health services, through house-to-house visits and in health centres. This included measles vaccinations for 2,765 children and the delivery of micronutrients for 7,548 pregnant women. These were necessary pandemic responses. It is important to note that UNICEF was able to make needed adjustments to ensure the safety of both patients and health practitioners. However, as seen from the table above, 2020 targets were seriously impacted by the pandemic, as, it is likely, were those for 2021.

Throughout the VMC Response the health strategy has required various adjustments based on lessons learned. From the outset the contracting of the health service provider was done based on estimates of market costs and provided for additional staff hired by the service provider to carry out outreach services to Venezuelan migrants. According to KIIs, this method was more costly for UNICEF, but generated more targeted services for migrant communities. After a visit of UNICEF's Internal Audit Office, it was advised that UNICEF Colombia should change the manner of contracting health services providers to ensure that UNICEF Colombia was paying a fair price per patient and move to a fee for service contract with rates that are comparable to those paid by other institutional clients. This approach opens the door for the Entidad Promotora de Salud/ Institución Prestadora de Servicios (EPS/IPS) to serve the migrant population at any service delivery point. It does not depend on the capacity of a single team. The EPS/IPS can increase its teams with the resources it receives. However, according to UNICEF staff, the challenge of this method is that health service providers were no longer compelled to hire additional staff, and often used the overstretched team to serve an expanded number of patients.⁹⁵ This implies a trade-off between quality of services and greater efficiency (further discussed under Efficiency below).

A further challenge is that UNICEF is providing a very basic package of primary care services, which does not take into consideration the range of health needs of refugee/migrant children and their families. In the course of field

⁹³ Based on the combined programme for migrant- and conflict-affected populations.

⁹⁴ See UNICEF: Situation of Maternal and Child Health Services among Venezuelan Migrants and Refugees in the context of COVID-19 in Colombia, January 2022

⁹⁵ One interviewee noted that "At the outset, UNICEF was covering the cost of the staffing and other inputs for the clinics. When we moved to the fee for service model, the health center had to make its own decisions about how to use its resources – this did not always improve the quality of services and may have led to longer wait times and more frustration on the part of the host community that felt now the pressure added by having to wait in line with migrants."

interviews and small group discussions, parents noted that no form of specialist care for chronic illnesses was provided. UNICEF clarified that IOM and UNHCR manage much larger resources for health services and can identify partners that may have resources for the treatment of chronic illnesses, such as HIV/AIDS. UNICEF's financial capacity to provide health coverage is considered very small in relation to the scale of the needs and coverage that can be provided by other GIFMM-R4V partners. UNICEF should endeavour to address the coordination/overlap with other partners, while providing technical capacity building and oversight on key areas of the health response which relate to children under five primary care, immunisation, and nutrition as well as pre- and ante-natal care.

During field visits the ET learned that a common strategy to deliver services of health and nutrition as one package appears to be both effective and efficient. These could also include CP and GBV prevention and response. The GIFMM-R4V platform has ensured the availability of primary health services to refugees/migrants at key border and transit points. UNICEF's programming is mainly directed to refugees and migrants in rural and urban settlements, with the exception of border crossings in Arauca, Villa del Rosario and Ipiales.

Table 9. Nutrition Indicators and Targets (2019, 2020, 2021)

Nutrition	2019		2020		2021	
	Target	Achieved	Target	Achieved	Target	Achieved
# Targeted caregivers (men and women) of boys and girls 0-23 months with access to Infant and Young Child Feeding (IYCF) counselling for appropriate feeding	33,000	136,939 (415%)				
# of caregivers of children under five reached with IYCF counselling			84,738	42,506 (50%)		
# under fives screened for malnutrition			13,903	5256 (38%)		
# children aged 6 to 59 months with severe acute malnutrition admitted for treatment					520	302 (58%)
# primary caregivers of children aged 0-23 months received IYCF counselling					36,238	12,722 (35%)
# of children aged 6 to 59 months screened for acute malnutrition					22,215	5920 (27%)

UNICEF's programming in the area of nutrition was generally designed as an add-on to UNICEF's primary health programming, covered by the same contracts with public hospitals and involved parenting workshops provided in conjunction with ICBF. In the area of nutrition, a question that arrives again is around the value of changing HPM indicators every year. This makes monitoring of progress and results challenging and appears to add very little of substance to the information being gathered. As a general recommendation, it would be of greater value to tie HPM indicators to the CCCs, rather than modifying the wording of the indicator with each new HAC⁹⁶ while allowing room for context/country specific and quality indicators.

In practice, the nutrition response changed little over the period. In 2019, activities were based out of locally contracted public hospitals in the main border areas in which UNICEF was working. In the public hospitals, UNICEF provided for primary level care in maternal-child health and nutrition, through mobile health teams for primary health care in prioritised municipalities.⁹⁷ There was special emphasis on girls and adolescent mothers between 10 and 14 years of age as well as strengthening ICBF and local health service providers aiding nursing mothers and young children through a series of post-natal workshops for mothers and caregivers. In 2020 and 2021 activities appear to have remained much the same. However, two new ones were added specific to the humanitarian response. Efforts were made to systematise information on the nutritional situation (prevalence of malnutrition with an emphasis on girls, boys, adolescents, pregnant and lactating women) and identify lessons learnt to adjust the response according to the humanitarian situation. Additionally, there was strengthening of local coordination spaces, providing technical assistance to local authorities, contributing to training of NGO teams and institutions

⁹⁶ While 33,000 was established as the target for these activities in the 2019 HAC, there UNICEF reports more than 4 times as many people benefited. Here it is suspected that the indicator used has something to do with this discrepancy. It would be good to identify what this indicator is really measuring - is "access" interpreted as being all users of these public health structures or all caregivers of infants in all municipalities? By 2020, for a very similar indicator which specifies caregivers reached, the result is more realistic, but now only have of the targeted population for that year.

⁹⁷ These being Arauca (Arauca), Norte de Santander (Villa del Rosario) Nariño (Ipiales), La Guajira (Maicao y Uribia), Cesar (Valledupar, Pueblo Bello), Magdalena (Santa Marta), Bolívar (Cartagena), Atlántico (Barranquilla y/o Soledad).

that participate in emergency nutrition response- The overall aim was to develop interventions in accordance with public laws and long-term sustainability.

Along the migration route, particularly at the CAs and *Puntos de Servicios* UNICEF also had PCAs with implementing partners for nutritional screening of children and supplements. For the ET, UNICEF's precise contribution in these settings is unclear, due to the fact the same donors both support UNICEF's humanitarian programming as well contracting directly with the same partners, such as Acción contra el Hambre (ACH). It is therefore challenging to disaggregate the impact of UNICEF's contribution to nutrition vis a vis that of other actors contracted directly by donors or working as IPs for other UN agencies such as UNHCR, IOM or UNFPA. What is known is that various lessons have been learned regarding the distribution of food and nutritional supplements in the context of human mobility.

Effectiveness: Health and Nutrition	
Strengths	Challenges
Outreach to communities through mobile units	Risks of duplication with other UN and GIFMM partners
Development of relay system for nutritional supplements for underweight children along the migration route.	Limited referrals and management of Chronic and complex conditions
	Need for UNICEF and other partners to offer nutritional support in response to human mobility via use of electronic vouchers

WASH

<i>Sector results formulated in UNICEF Colombia HAC 2019</i>
<i>WASH: Boys and girls, adolescents, and women on the move and in host communities equitably access essential WASH services.</i>

The formulation of this result from the 2019 HAC appears as an explicit focus on the CCCs and establishes the concept of accessing water, sanitation and hygiene in a context specific way. This is a positive linkage that the ET considers would be good for other sectors to emulate. As already mentioned, WASH's HPM indicators have also changed over time, making progress towards results challenging to assess.

Table 10. WASH Indicators and Targets (2019, 2020, 2021)

WASH	2019		2020		2021	
	Target	Achieved	Target	Achieved	Target	Achieved
# of people (men, women, boys and girls) with daily access to WASH services at service delivery points (health centres, shelters, migration points and transit points as per agreed standards (according to context)	13,000	37,032				
# of population with daily access to WASH service in settlements	15,000	16,502				
# of people with access to clean drinking water at community level, including access to water through water filters			17,186	7,327 (43%)		
# of persons accessing key hygiene items			42,226	11,589 (27%)		
# of persons accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene					73,800	26,824 (36%)
# of people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services					73,800	66,569 (90%)

Thanks to KOBO monitoring data shared by UNICEF, it is clear that significant effort has been made in WASH over the years of the response. In 2019, UNICEF signed eight agreements with IPs to implement WASH initiatives in rural, urban, and peri-urban settings. There were five additional agreements in 2020 and a further three in 2021. Between 2020 and 2021, UNICEF and partners recorded some 780 site visits to service and maintain WASH installations. It included actions in 51 municipalities and some 260 rural, urban, and peri-urban localities.

The sheer number of WASH points created and maintained during this period speaks to a very high level of activity. The ET was able to visit several of these sites. The WASH strategy and installations are highly appropriate, effective, and necessary as one of the key pillars that enable the entire migration response. The UN, government, and NGOs who carry out the R4V response activities could not be operational without WASH. The COVID-19 pandemic has also highlighted the importance of WASH in order to prevent the spread of the virus, but also secondarily to ensure that schools, other public spaces and service points for migrants have been able to reopen or continue to serve the public. As further described below, KIs confirm that UNICEF Colombia is seen by partners to have a strong value added as a technical partner and sector lead in WASH. The agency is acknowledged to have developed effective tools for costing and planning WASH infrastructure that is valuable both for the GIFMM as a whole, for individual sector partners, also for host communities and local government partners.

The ET visited a number of WASH installations at the *Espacios de Apoyo*, which appear to be well constructed, clean and in good working order, with separate toilets for women/girls and men/boys that were well lit and had adequate security. In general, the facilities meet and/or exceed UNICEF's and other humanitarian minimum standards. The significance of WASH installations at border areas are well adapted and aligned with needs related to the COVID-19 pandemic, including hand washing stations upon entrance and exit. While the ET notes that most of the CCC standards are met, there are some CCCs that could present problems given the nature of the VMC. For example, the CCC which notes that "a maximum ration of 20 people per functioning shared toilet"⁹⁸... does not seem relevant or attainable in the current context. According to UNICEF, it is preferable to refer to installed capacity rather than a specific number of users.⁹⁹ In particular, school toilets and those in the *Centros de Apoyo* may receive many more than that in a given day. It would be helpful for the WASH sector at HQ level to review the CCCs and other sector standards in light of the scale and type of services provided in such a mass migration situation.

VMC response and preparedness

It is clear from KIs that the usage of WASH facilities has varied extensively over time as waves of migrants have waxed and waned. The visit of the ET corresponded with a very low period when there were few migrants utilising the spaces and services. However KIs informed the team about periods when the *Espacios de Apoyo* were filled with migrants seeking a safe place to spend the night. The situations were described as very extreme: families sleeping on the floor, open defecation and urination because there were insufficient toilets to meet the demand of the thousands of migrants arriving within a few hours. A particular example was shared about the convergence of migrants at Rumichaca, at the border crossing with Ecuador as migrants arrived desperate to cross the border before new visa restrictions were introduced. UNICEF and IPs working in the WASH sector have responded heroically to accommodate migrants and to maintain services through moments of high demand. As one KI noted:

We were simply not prepared for the arrival of 10,000 migrants overnight at Rumichaca. We needed to be provided a bit of lead time to know what to expect and to be organised with the right level of infrastructure once they began to arrive.

Interviews and informal discussions suggest that an effective WASH strategy for a route-based approach to migration requires a good planning and an early alert system to inform service centres along the migration route, which is something that did not exist when it was needed most and still has not been placed either by GIFMM leadership or UNICEF (see discussion on Coordination below). According to a KI the different sectors together with GIFMM put in place contingency plans in December 2020 for COVID-19. On their own, the UNICEF WASH sector team and other R4V partners put in place an informal WhatsApp group to communicate between themselves about numbers of migrants on the move. It is somewhat alarming that in the context such a massive population movement, neither GIFMM nor UNICEF at LACRO level has seen fit to create a formal early alert system to ensure that within countries and across borders, all operations and key partners were provided with information needed

⁹⁸UNICEF. Core Commitments for Children in Humanitarian Action, June 2020. P. 62

⁹⁹ Aquí el referente de capacidad instalada <https://colombia.immap.org/capacidad-instalada-wash/>

to effectively plan and prepare for various waves of population movements as seen in the VMC. The lack of an early alert system emerges as one of the key strategic gaps in this operation at CO and regional levels.¹⁰⁰

WASH and community engagement

WASH is one of the main sectors and mechanisms for community engagement and participation, through direct engagement of community WASH committees. This is a good practice of sector coordination, where the C4D sector successfully coordinated, accompanied and coordinated community engagement and participation activities. The WASH sector has a good track record where IPs and community actors come into direct and frequent contact, allowing UNICEF to have better insight into broader community dynamics, problems, and solutions through the structuring of community committees responsible for maintenance, repair, and payments for WASH services. This is a contribution that would merit more study and evaluation to understand the many dimensions of WASH as an entry point of migration settings.

Who doesn't like a clean washroom? Leveraging WASH to achieve other strategic and operational objectives

UNICEF Colombia teams clearly understand the strategic role that WASH can play both in emergency response as well as in the transition to development where longer-term integration of Venezuelan refugee and migrants will require significant investments in water, sanitation and hygiene, particularly in rural and peri-urban areas where they are settling areas such as La Guajira. In such places rainy and dry seasons lead to intense period of flooding and water shortages. Water management is one issue, if not handled properly, that has the potential to become a point of conflict between host communities and migrants. Therefore, WASH's role and strategic importance in paving the way to effective and peaceful integration of Venezuelan refugees and migrants should be made even more explicit in UNICEF's new CDP and the continuation of the emergency response.

According to KIs, this investment has a cost. Among UNICEF Colombia investments in WASH are those made in common R4V spaces: the *Centros de Apoyo* and *Puntos de servicios* where UNICEF has been present from the beginning of the emergency. After three years, according to KIs, the cost of this investment is being felt: maintaining activities and points of attention in many different locations is costly in terms of supplies and labour. There appears to be no clear exist strategy in place or any national level actor to whom these installations will eventually be turned over. According to UNICEF KI, there have been attempts to make the shift, for example Paraguay in Guajira and La Antioqueña in Arauca, but the authorities and other actors do not want to get involved precisely because of the costs. There is also a desire to return to a more long-term strategy and refocus UNICEF investments in communities and settlements where it can bring a more integrated approach – working across sectors towards common objectives, as proposed in its new CPD.

The ET also had the opportunity to visit a number of schools where UNICEF's WASH capacity was mobilised to assist in the school reopening process, because many schools did not meet MEN standards in terms of toilets and hand washing facilities to allow them to reopen. This was seen as a positive and much appreciated step by beneficiaries, school leadership and administrators, allowing schools to open without having to make significant investment in new infrastructure.

Effectiveness WASH	
Strengths	Challenges
Hygiene promotion and response to COVID-19	High Cost of maintenance and no exit strategy for UNICEF
Well connected to standards, such as CCCs	Lack of strong linkages between WASH and other operational and strategic objectives, such as inclusion of Venezuelan children in educational system
Participatory processes and WASH committees established	

Communication for Development (C4D):

¹⁰⁰ According to UNICEF staff, this is an important factor. The dynamics of the migration flows are continuously changing and depend on political factors (such as the opening and closing of borders) and economic and social factors (such as the increase in conflict in border areas). The ET agrees and sees these factors as precisely those that UNICEF along with other migration actors should be monitoring to inform on-going modelling, planning and preparedness for future massive population movements. As shown below, UNHCR and the World Bank have invested in global modelling and monitoring of such movements, which UNICEF can and should be privy to.

<i>Sector results formulated as in HAC 2019</i>
<i>Children and their families have access to life saving information and protective practices on access and use of services</i>

Table 11. C4D Indicators and Targets (2019, 2020, 2021)

C4D	2019		2020		2021	
	Target	Achieved	Target	Achieved	Target	Achieved
# of affected population in targeted areas actively participating in accountability mechanisms supported by UNICEF	8,000	11,112	10,980	6,491 (59%)		
# people reached in affected areas with messages on life saving skills and protective practices and behaviours, as well as on information on access and use of services.	100,000	234,150	67,570	167,357		
# of people in host communities participating in community activities on the prevention of xenophobia, promotion of inter-cultural dialogue or inclusion			18,000	10,506 (58%)		
# of people reached with messages on access to services					40,633	126,248 (311%)

C4D has been supporting the VMC Response in a number of ways, suppling messages to Venezuelan migrants, providing a broad communications strategy and outreach to Colombians to address the potential rise in xenophobic and discriminatory attitudes. This was seen to be an important risk factor facing the response, as was misinformation – both for migrants as well as for Colombian host communities. In 2019, in response to these risks, UNICEF rolled out C4D activities that were intended to raise awareness about risks for the migrant population; and, to track and address rumours and misinformation among migrant families.

It also rolled out a robust accountability strategy to ensure feedback from migrants and host communities participating in UNICEF funded programming (See discussion on AAP above). With the support of the then UK Department for International Development (DFID), UNICEF introduced KOBO so that IPs can gauge the real-time opinions of migrant families regarding quality of services, information and the treatment received from humanitarian workers. Such reporting continues to be mediated to some extent by partners themselves. C4D actions reportedly reached over 88,000 individuals in 2019 throughout a coordinated approach with UNICEF Venezuela. The ET may have raised some concerns above about the roll out of the AAP by UNICEF Colombia, but this does not detract from the significant investment that this sector has made both in messaging around the migration crisis as well as messaging during the COVID-19 public health crisis.

According to UNICEF Colombia, one of the key lessons learned around COVID-19 response in 2020 relates to the importance of local content development for Risk Communication and Community Engagement, enabling community media to provide locally produced and accessible messaging around the pandemic. Among other things, UNICEF Colombia designed the C4D strategy *Somos Enlace* (We are link) based on community radios and alternative communications platforms to ensure families have access to relevant information on COVID-19 prevention. The radio is the platform with the most reach in Colombia, according to the Ideas para la Paz Foundation, and community radios are the only media available in half of Colombia's municipalities. UNICEF partnered with five local, community and youth-based organisations, two of them indigenous, to roll-out a communication strategy with locally produced information available and meaningful to the communities and reflecting their culture and values. This information was produced in a participatory way, involving radio, printed and social media and face-to-face interactions for remote indigenous groups. The strategy included 40 community radios and alternative media in 19 departments, reaching families with key-life saving information to address the

COVID-19 public health emergency.¹⁰¹

This appropriate combination of communication channels allows UNICEF to reach families in remote zones who speak and read different languages and who lack internet access or electricity. This has been through indigenous, Afro-Colombian, migrant, rural, youth, and LGBTIQ radios and alternative platforms.

Effectiveness - C4D	
Strengths	Challenges
AAP incorporated in all programmatic documents and IPs operational projects	AAP mechanisms established are not necessarily affecting or engaging UNICEF in its own accountability to affected populations
Engagement with community mobilisers and media producers in 19 Departments	
Social media and radio channels for information and awareness raising	

EQ8: To what extent did UNICEF's situation monitoring, monitoring of the quality of the service, real-time monitoring, accountability mechanisms at the migrant/host community/ and government service levels, lead to improved effectiveness of the response at CO/RO levels

Monitoring and reporting on the humanitarian response relies on HPM indicators. The ET finds that there are many areas in which inaccuracies can be introduced as the system is currently designed. The HPM system also does not fully allow for issues of quality and inclusivity of services to be monitored

UNICEF has established systems for accountability to affected populations which involve ensuring that partners are gathering beneficiary feedback on existing programmes. The ET considers that this system is a good first step in AAP but does not include sufficient analysis to capture why potential services users may be unable to access or utilise the services as they are currently designed.

It is recommended that UNICEF and other partners are able to access and utilise data generated by the ETP registration process to monitor and measure gaps in services and protection to the Venezuelan migrant population.

Accountability mechanisms

As highlighted above, UNICEF has taken responsibility for implementation of its AAP policy. UNICEF provides technical and methodological support and monitors the quality and effectiveness of how the mechanism is applied. Contractually, AAP is passed on to implementing partners through partnership agreements, and it appears that most of the monitoring data gathered, including via Kobo, is provided via IPs. It has provided good quality tools and presentations and has provided training to IPs on the importance of AAP and approaches to carrying it out. This has been led by the C4D section area and has effectively demonstrated that there are cases where programme adjustments and improvements have been made based on surveys carried out by IPs and feedback from beneficiaries. The ET has reviewed a number of IP generated documents related to these tools and approaches and considers all to be of good quality.

However, based on discussions with KIs and beneficiaries interviewed, there are concerns that some key principles of AAP are being lost. Here the M&E function can play a vital role, in carrying out independent consultations with programme beneficiaries to ensure that that beneficiary feedback is not filtered by IPs. UNHCR has a strong policy and commitment to carrying out such consultations, participatory assessments, and surveys with beneficiaries in various parts of the country. UNICEF appears not to be fully engaged in these exercises, at times participating and at times not. The reasons for this are not clear, but KIs confirmed that AAP is an area that is relatively new for UNICEF and not one where it yet has adequate processes in place.

Monitoring the quality of programming and advocacy role

Monitoring of the response is established through the framework of HAC and HPM monitoring systems This

¹⁰¹ This included a number of pillars: a first pillar focused on strengthening capacities of community and local alternative media; fostering resilience, empowerment, and community integration; and ensuring AAP mechanisms. The capacity strengthening pillar includes thematic guidelines about UNICEF priorities, technical communication guidance and equipment, in order to enhance relevance and sustainability. The second pillar consists of participatory media production, with children, adolescents, teachers, parents, and caregivers involved in production. It also includes a community rumour tracking where media producers identify rumours that negatively affect their communities. This helped inform the capacity building sessions as well as editorial boards, where producers prioritise production. The third pillar, AAP mechanisms, refers to ensuring community feedback to evaluate the relevance of the information produced and response to additional demands.

includes establishment of indicators for specific activities, based on estimated targets. As mentioned above, HPM indicators have changed over time in the different HACs reflecting subtle differences that can lead to confusion and cannot be compared over time. These changes may reflect adaptation of activities to the context of the response and the changes in the short-term projects with IPs. They also reflect the instructions made by RO and UNICEF New York Headquarters (NYHQ), related to the type and set of available (or recommended) indicators that COs must use when planning the HAC. But in some cases, they only lead to questioning: for example, in the health sector reporting – does the indicator on “vaccination against measles” duplicate the indicator on “vaccinations which comply with national health standards”? If so, why are both indicators being used?

In KIIs and conversations with UNICEF Colombia team members, the ET realised that it is not always clear how HAC targets are set, as they vary significantly over the years of the response (see previous Sections on Targets versus Achieved above). In practice, UNICEF staff referred the ET to LACRO, in some cases not understanding themselves how targets were set. As identified by an OIAI visit report from 2020¹⁰², it would be helpful for UNICEF Colombia to provide more detailed reporting on cases in which targets set have been exceeded as these may indicate a hidden good practice that could be shared regionally. Additionally, there should be focus on identifying reasons for target under-achievement as these may reveal gaps in strategic planning at CO level and some weaknesses in the definition of targets. However, it is clear that COVID-19 was a major factor that dramatically affected the achievement of targets in 2020 and 2021.

The ET finds that HPM indicators have clear limitations in terms of capturing the quality of outputs and outcomes and this requires an additional effort by the M&E teams. Most of the indicators are standard measurements recommended by NYHQ and LACRO on a year-to-year basis, or related to the CCCs. According to LACRO, these are set annually, in a planning process that seeks consistency with previous years’ activities. Each year indicators are set as if independent from the activities and measurements taken the previous year. The scope for a CO to modify, add or maintain certain types of indicators is very limited. These indicators are made up often of a wide range of different types of inputs and activities and do not help UNICEF to understand which activities are most effective in terms of contributing to the achievement of key medium- and longer-term outcomes. This is particularly so with such generic concepts as “empowerment of migrants” and “effective integration in national systems” which have been suggested as the long-term goals of UNICEF’s work on migration.

It is difficult to track the results of UNICEF’s advocacy role at the national level, to understand what the strategy for advocacy is, with whom and what have been the results. Some of this advocacy, for example on the ETP, has been very successful. However, UNICEF’s *Global Programme Framework on Children on the Move* sets out six policies seen as key to creating the conditions needed for children on the move to enjoy short-term protection and longer-term inclusion. This area of advocacy is one that would merit improved monitoring and impact evaluation by UNICEF.

Further, the ET finds a great deal of confusion in terms of what is actually being measured by UNICEF and the potential for over-reporting in the HPM indicators appears significant. A few examples identified in the field include:

- The same activities feeding into different indicators: for example, in 2020, Health and Education both report on activities to maintain the same child friendly spaces.
- A third example is based on the services provided by the *Espacios de Apoyo*. In discussion with management, it was made clear that what is reported in GIFMM reporting as the number of beneficiaries is actually the number of services provided. One refugee or migrant might use two or three services in a visit, and be counted as two or three beneficiaries, since there is no tracking of individual users, only the number of services delivered.

These are just some examples of factors that can unconsciously act to inflate numbers of reported beneficiaries.

According to KIIs, there are areas where additional monitoring and evaluation could provide valuable information and guide UNICEF’s operations and strategies. Among those identified are:

- Increased emphasis on impact evaluation of programming for children on the move, across sectors.
- Education in Emergencies: Impact assessment of the LC methodology and comparative cost-benefit analysis of different/complimentary strategies. Given that the LC methodology has existed for the past 20 years in the context of forced internal displacement, where there are relatively small groups of children on the move, it would be an opportunity to analyse the suitability of this model as a response to such a large-scale population movement as the VMC.
- Territorios Amigos de la Niñez/ Strategy: After many years of use and adaptation of a similar strategy for

¹⁰² <https://www.unicef.org/auditandinvestigation/documents/2020-oiai-audit-report-colombia-country-office>

local inclusion and participation of children and adolescents at the municipal level, what are the long-term benefits and effectiveness of these strategies to support municipalities to include children and adolescents more effectively?¹⁰³ What are the bottlenecks and how have UNICEF's investments over two decades changed the human and financial investment of local actors to effectively address community level CP, empowerment and related programming?

- GBV from a cross sectoral approach: A key area that has been highlighted by KIs that requires deeper inquiry is the effectiveness of UNICEF's response to GBV and the extent to which domestic violence and GBV are being addressed across sectors and whether established routes for response are being followed. KIs see that UNICEF's own internal tracking and tools, as well as those of partners, could be better aligned to ensure UNICEF and IPs across sectors have management information systems to strengthen capacities and ensure identified cases are effectively and efficiently managed.

Introduction of KOBO and use of real-time monitoring tools

A positive development has been the introduction of real-time monitoring, using KOBO as a tool for distance monitoring in a range of sectors. The ET has had the opportunity to review WASH Kobo entries which provide detailed information about the interventions carried out over the period and could also be adapted in the future to include a number of qualitative indicators and beneficiary feedback mechanism.

M&E	
Strengths	Challenges
Introduction of real-time, distance monitoring using KOBO	Frequent changes in indicators. Some indicators not logically linked to high level results
Introduction of AAP to all PCAs with IPs	Quality of the intervention: need systematic tools and indicators for monitoring the quality and impact of UNICEF interventions as part of the VMC response ¹⁰⁴
	Monitoring systems should try to reduce/eliminate duplications or double counting of beneficiaries
	UNICEF, GIFMM and national/departmental Institutional data weaknesses. Lack of evidence and data.

EQ9: To what extent have internal (within UNICEF, between countries and sectors) and external coordination mechanisms been effective in enhancing the quality of the overall response and advocacy on behalf of VNZ migrant children and their families?

EQ16: How coherent were coordination mechanisms at the CO and Regional level?

Summary of key findings:

- Despite significant challenges and tensions, the GIFMM platform coordination has generated some effective action for enhancing the quality of the overall response. A key example has been inter-agency efforts to advocate for, support and roll-out of the ETP.
- Some sectors, such as WASH have had more effective coordination from UNICEF than others in terms of enhancing coverage. UNICEF's Emergency Team has been effective at documenting lessons learned from the GIFMM coordination mechanism.
- Having two parallel coordination mechanisms going at the same time – the GIFMM for the migration response and the OCHA Cluster system for COVID-19 – has been very challenging for all agencies to sustain. It may soon be time to look at phasing out the former.
- The GIFMM is seen to have reduced the visibility of non-lead agencies such as UNICEF, but yet has not provided the needed support required through its annual appeals and fundraising efforts. The result of the

¹⁰³ According to UNICEF, an evaluation of the strategy is scheduled for next year as is part of our Costed Evaluation Plan of the current CPD.

¹⁰⁴ UNICEF follows the HACT framework which includes the implementation of periodic assurance activities to determine the efficiency and effectiveness of programmatic actions (in both development interventions and humanitarian action.) Such activities include "programmatic visits" to assess the achievement of results in the field (including quality), as well as spot checks or even audit procedure to monitor the use and effects of resources used by partners. Unfortunately, during the pandemic such programmatic visits were more limited.

GIFMM leadership of the CP AOR is a porous patchwork without meaningful coordination or a shared information system to help identify where the gaps and which areas to prioritise.

- UNICEF Colombia's new CDP is designed to facilitate sectors to come together around thematic, rather than sectoral approaches, which can help cross-sectoral programmatic coordination. Internal coordination has experienced challenges according to KIs. These have included horizontal coordination between sectors, as well a vertical coordination between field and CO, and CO and LACRO. However, LACRO has facilitated with Colombia more than with other countries in the region a coordinated effort with the UNICEF Venezuela office.
- At Regional and CO level, there is a broader questioning of the coherence with humanitarian principles and a 'do no harm' approach of taking a nationality-based approach to the migration response coordination. This is not specific to Colombia but an overall reflection on the R4V appeal and coordination structure.

The GoC is the lead organisation on the VMC response with coordination led by UNHCR and IOM. The R4V platform is made up of NGO partners, UN Agencies, and government institutions to coordinate and implement the response. The platform in Colombia is divided by location and also by sector: with 75 member organisations, local platforms in 10 departments¹⁰⁵ and with seven sectors (WASH, Education, Integration, Multi-sector, Protection, Health, Food Security and Nutrition) and two working groups on Cash-based interventions and Information Management and Reporting. According to UNICEF Staff, the R4V platform does not cover the cost of time devoted to coordination incurred by agencies such as UNICEF.

While UNICEF has a dual mandate in Colombia it is much more focused on its long-term development role and moving into and out of humanitarian modality is challenging. At field level, UNICEF teams are working in the context of many different needs or "multiple affectations" – those of communities simultaneously affected by armed conflict, natural disasters, Colombian returnees and Venezuelan refugees and migrants.

COVID-19 was the unexpected factor that many, especially those inside UNICEF, consider made the dual humanitarian coordination incoherent and inefficient. Many of the same actors met once as the R4V platform and then met again under the OCHA Cluster system on issues which, at field level, are very much mixed and overlapping.

Coordination of external GIFMM partners – something of a patchwork

KIs from various agencies indicated that the GIFMM coordination mechanism came as a surprise for most agencies already very familiar and comfortable with the OCHA-led humanitarian cluster system. No sooner was this GIFMM coordination system becoming operational, than the COVID-19 pandemic hit and the cluster system was activated to handle the public health emergency. This meant two coordination systems operating simultaneously, taking up precious time and resources for participating agencies in endless meetings. The solution found by the GIFMM and GIC was very practical: the "Back-to-back" strategy - meetings of the GIFMM and Cluster sectors, first the GIFMM, then the Cluster. One informant noted that "since we are almost all the same agencies participating in both meetings, this allowed us to save time and ensure good participation at meetings and sharing of information". Despite the practicality of this solution, according to KIs, at that stage, it was likely time to reconsider the role of the GIFMM, and to merge the GIFMM migration coordination mechanism into a more comprehensive humanitarian coordination led by OCHA.

As highlighted above, there have been a number of very evident successes in terms of the coordination between UNICEF and the GIFMM lead agencies, UNHCR and IOM. There have been a good number of shared and successful advocacy and communications campaigns, most noteworthy being the advocacy for and support of the roll out of the ETP, the campaign against statelessness and shared messaging to prevent xenophobia and generate a supportive social attitude towards migrant children and families. UNICEF Colombia's emergency team has been effectively recording lessons learned from GIFMM related coordination over the course of the VMC.

According to KIs, the GIFMM is seen to have reduced the visibility of non-lead agencies such as UNICEF but has not provided the needed support required through its annual appeals and fundraising efforts. In one example from WASH, resource mobilisation by the GIFMM in 2021 had not even reached ten per cent of the assessed need, a figure that sharply contrasts with the effectiveness of UNICEF's leadership and support role in the response on behalf of all humanitarian actors and where the cost of equipment and maintenance in border regions is very high. UNICEF is finding itself holding the responsibility for on-going costs of repair and maintenance of WASH systems, without corresponding support from the GIFMM coordination platform. Looking to the future, UNICEF will need to consider an exit strategy or other strategies to those utilised to date to enable other actors to take over the maintenance of some of the key WASH infrastructure along the main migration routes. For UNICEF staff, the

¹⁰⁵ R4V website specifies 10 local GIFMMs: Antioquia, Arauca, Bogotá and region, Cesar, Caribbean Coast, La Guajira, Nariño, Norte de Santander, Santander, and Valle del Cauca.

processes for prioritisation on the use of GIFMM funding remains unclear.

There have also been tensions generated between GIFMM partners. Some have to do with different approaches between the agencies and understandings of the nature of the crisis and approaches to be used. As highlighted above, partners have expressed a lack of presence of UNICEF in the *Centros de Apoyo* and *Puntos de Servicios*, where apart from providing WASH facilities, UNICEF is not seen to play a predominant role in child protection. As commented by many, while field teams and emergency staff have gone above and beyond to work effectively in coordination with others, there have been many KIs, both partners and donors, who perceive that UNICEF's senior management could be doing more to support UNICEF's emergency response capacity.¹⁰⁶

Lack of resources affect UNICEF's capacity to coordinate among GIFMM/Cluster partners

According to UNICEF KIs the demands of coordination have effectively doubled with the introduction of the GIFMM platform on migration and the Cluster on the COVID 19 response. This has dramatically increased the time that staff need to spend on coordination.¹⁰⁷ As one noted: "The agency simply does not have the funding, personnel and capacity to provide needed leadership and coordination of actors in the current context". According to UNICEF team members, not only does this detract from their original jobs, because the coordination role is so time consuming, but coordination also suffers.

A further point is evidence generation and information management is suffering because this is a sub-aspect of coordination that requires a special skillset. UNICEF Colombia has engaged consultants through a PCA with IMMAP¹⁰⁸ to provide support in generation of information for the education cluster, WASH, assisting the staffer in La Guajira who helps with the leadership of the local *Equipo Local de Coordinación*. This support has been key for information management, needs assessments, tools, figures, factsheets, and information products beyond the responsibility of the M&E team. However, It is not yet sufficient. As one example CP during the course of data collection, the ET was unable to find any consolidated lists of CP cases that had been identified by GIFMM partners either at local or national level as a basis for understanding the prevalence of GBV, domestic violence or other CP risks. In the GIFMM, there is a CP coordination mechanism. CP t the national roundtable it is co-chaired by IOM and UNHCHR and UNICEF co-leads those of Norte de Santander, Arauca, and Atlántico where it has field offices. It appears that in other localities, different agencies assume leadership on a case-by-case basis. These local roundtables have different levels of progress. Although they are concerned with sharing information on child protection cases, not all of them keep monthly clear statistics. Nor do they have standard reporting format or partners reporting on the status of their cases. According to KIs, in some regions, there are partners who take action to activate protection route. This lack of coordination in some parts of the country constitutes a major gap, which UNICEF cannot address because it lacks presence.

Among those areas where UNICEF is present, only Arauca generates consolidated reporting from partners on unaccompanied or separated children with cases identified by the local partners of the *Mesa de la Niñez* during 2021. The lack of consolidated information among GIFMM partners on UASC and CP cases in the other two localities also constitutes a concerning information gap and shows the coordination system is not working for children on the move. The fact that there are no statistics or information generated at these lower levels, explains why there can be no national reporting on CP issues, other than that provided by ICBF (see above section on CP). Therefore, UNICEF and partners have only the slightest idea of the actual number of cases and their profile. These are the cases that finally make their way to be treated within the formal Colombian child protection system.

At national level, only IOM and UNHCR receive resources for coordination and reporting on CP. This significantly limits UNICEF's capacity to take on a role which in most contexts is aligned with its mandate. Currently, the resources UNICEF receives only allow it to co-lead the local roundtables in the three aforementioned territories, not at the national level where GIFMM leads the CP AOR.

The current situation presents many challenges: one is the lack of standardised reporting tools, in order to capture CP information in a uniform way from all partners, and the other is related to the opportunity that could be given to articulate and coordinate actions, combining mandates and perspectives, around the promotion of the rights of migrant children and adolescents. Currently, each agency or organisation structures its response plan and shares it but does not necessarily coordinate at the local level. UNICEF, for its part, is trying to reach areas where there is no one else, to broaden the scope of GIFMM's actions, to bring added value where services are the weakest. The result of the GIFMM leadership of the CP AOR is a porous patchwork without meaningful coordination or a shared information system to help identify where the gaps and which areas to prioritise.

¹⁰⁶ Lack of UNICEF senior management experience in and commitment to emergency response is also highlighted in UNICEF's 2019 Humanitarian Review.

¹⁰⁷ Funding for coordination depends on resources and the HAC is largely underfunded. This is obviously outside UNICEF's control. The CO has made every possible effort to raise funds.

¹⁰⁸ An NGO that provides information management services to humanitarian and development organizations. See <https://immap.org/>

Improving coordination on COVID-19 CBI programming

Document review and KIs suggest that communication with all GIFMM partners engaged in HCT programmes is lacking. According to one KI:

Particularly where IOM and UNHCR were implementing large CBIs, it is necessary to coordinate in order to avoid duplication of efforts, to agree on eligibility criteria of the beneficiaries, to ensure that the most vulnerable households are prioritised, reached and to send accurate and consistent messages to the community.

CBIs offers a great opportunity to enhance work on women's empowerment and to introduce GBV mitigation measures. According to UNICEF Colombia and IP informants the GIFMM working group on CBI should be a more dynamic and strategic space. More horizontal coordination and collaboration in the CBI working group is needed at the national level while also ensuring vertical coordination – in terms of ensuring access to the same information at the national level is shared at the local level.

Internal coordination in UNICEF CO – horizontally by sector and vertically between field and CO

UNICEF Colombia's new CDP is designed to break down UNICEF's traditional silos and facilitate sectors to come together around thematic, rather than sectoral approaches. This is a very positive step to remedy a situation in which partners see the 'silo' approach inherent to some of UNICEF's programmes hinder the potential for multisectoral programming and geographic convergence. In some cases this leads to inefficiencies and reduced quality of interventions. Much of UNICEF's effectiveness seems to lie in its long-standing experience in sectoral interventions (e.g.: health, nutrition, education, protection and WASH), which are supported by decades of experience, strong technical expertise, and logistical capacities. In some cases, sectoral interventions operated with little interaction or integration with other sectors which KIs observed as a challenge. Limited integration also occurred outwards, i.e., with local partners working with UNICEF. KIs further suggest that experiences from the field could be better translated into needed advocacy at CO and LACRO levels on behalf of Venezuelan migrant children and their families.

Coordination between UNICEF CO and LACRO

According to KIs, the coordination between UNICEF COs of the region, and with LACRO, on the response strategies and modalities has been limited. Early in the emergency, CO Colombia enjoyed a privileged position in terms of special meetings with UNICEF Venezuela, with LACRO working to create communications channels between the Representatives from both countries. Technical support was also provided by the Emergency Section of LACRO at the outset of the response. However, no formal coordination arrangements exist between Colombia, Venezuela and all other COs involved in the response. Further, it is perceived that during the pandemic, technical support from LACRO to Colombia disappeared and has yet to be reinstated, leaving a significant gap in support and guidance to the different sectors.

Coordination	
Strengths	Challenges
LACRO support at the outset of the L2	R4V platform has generated a patchwork with large gaps in coordination at field and national level
Effective leveraging of R4V to rapidly roll out the ETP	
LACRO supported engagement with VNZ CO	Lack of resources, dedicated staff and insufficient investment in information management aspects of coordination
UNICEF Colombia used its limited resources to enhance coordination where it had a territorial presence	Gaps in internal coordination between sectors

EQ10: To what extent did the activation of the UNICEF Level 2 emergency procedure in 2019 in Colombia, and later L3 designation of COVID-19 emergency, allow for more effective scale-up of UNICEF's support (from all levels) and response to address the critical needs and provide increased protection and services to Venezuelan migrant children and their families? To what extent did the L2 designation facilitate/change/simplify procedures at CO/RO/HQ levels?

Summary of key findings:

The L2 designation at LACRO level did not significantly impact UNICEF Colombia operations. The main benefit of the L2 designation appears to have been the ability of UNICEF to raise the profile of the VMC and mobilise

additional funds for the Response, as did the L3 designation for UNICEF's COVID-19. UNICEF Colombia effectively combined the needs of both responses to ensure efficiencies (see section on Efficiency below). However, according to key informants, the L2 designation did not significantly change, facilitate or simplify procedures at CO level. UNICEF Colombia emergency staff continued to face a number of administrative and contracting challenges to mount the L2 response in a timely manner. Opening new field offices appears to have been a decision of CO that was not directly linked to the Regional L2 Activation.

According to informants, the main value of the L2 regional emergency activation has been to attract humanitarian funding to the response, although, as will be discussed in the Regional Synthesis Report, this despite the fact that some countries in the region never declared themselves to be in a state of emergency. This matter will be further explored and validated at a later stage with UNICEF LACRO and EMOPS but perceptions of both donors, partners and UNICEF Colombia reflect the following views.

In Colombia, UNICEF KIs did not see that the L2 had led to a significant simplification of procedures. In terms of scale up of the response, the geographic expansion through, among others, the opening of new field offices, already started in 2018 before the L2 activation in 2019, and therefore the L2 activities did not influence this decision.

While the L2 designation is supposed to allow for more rapid, flexible, and simplified contracting methods in order to allow for a timely response, it appears that in Colombia, these simplified procedures have not been applied nor did they help lighten the heavy administrative weight of the emergency response. Some specific matters that could have been facilitated but were not include:

- **Procurement and warehousing of supplies:** the response has depended heavily on partners capacity to assist UNICEF with the procurement and distribution of goods and supplies. UNICEF's response has involved the distribution of kits of various types – hygiene kits, school kits, nutritional kits, and PPE among others. Several field teams commented on having to relocate offices and suffering from inadequate transportation to cover the areas under their responsibility.
- **Project Cooperation Agreements:** Contracting of partners, which was intended to be rendered speedier and more flexible under the L2 was not particularly adjusted, although additional partners were brought on board. As highlighted above, partners have continuously highlighted UNICEF's contracting and payments measures did not allow for a needed cashflow to enable them to work steadily and show results throughout the year.
- **Contracting of UNICEF staff for scale up of the response:** As highlighted above, a main challenge for the emergency response has been to recruit, hire and retain staff required by the response. UNICEF Colombia has a small but competent emergency team. All staff, but in particular emergency staff and those in the field, have been stretched to a maximum, as they have faced both the L2 and L3 emergencies simultaneously. It appears from staffing tables and key informants that international surge capacity was not used in the L2 response – even though it might have been very helpful to put in motion the response during the first six months. The arrival of a senior international CP officer with experience in emergency response will likely support the office to a great extent.
- At the level of LACRO and EMOPs, it is unclear whether there was sufficient support provided over the period of the L2 and L3 to assist UNICEF Colombia to develop proposals, identify partners and simplify procedures to ensure a high-quality response in a timely manner. What is clear is that the COVID-19 pandemic dramatically reduced technical visits from LACRO and EMOPS to provide technical support to the two emergencies when these were needed most. It is also unclear whether LACRO has followed all the emergency procedures verifications as required (see box above): while a OIAI verification mission was carried out in 2020,¹⁰⁹ it is not clear that any real-time monitoring of the L2 was initiated by LACRO or EMOPS.

It has been suggested by some informants, including donors, that UNICEF Colombia could have been more supportive of the humanitarian response implied by the L2, including at LACRO and HQ levels, and that resources were not mobilised in a timely manner to develop the types of proposals that were of interest to humanitarian donors. And at field level, there are also questions as to whether the formulation of an L2 Emergency that is nationality-based, and only applies to the Venezuelan refugees and migrants, was really an appropriate response from the outset. A large number of KIs have raised concerns that here, UNICEF and other R4V partners are contributing to xenophobic attitudes towards Venezuelan migrants by building a humanitarian response that mainly applies to them.

According to a KI, "The VMC is just a large-scale migration that should be calling our attention to the bigger issue

¹⁰⁹ <https://www.unicef.org/auditandinvestigation/documents/2020-oiai-audit-report-co>

of children on the move, not their nationality. The L2 as a nationality-based response may be doing more harm than good.”

7.3 Coverage

The evaluation of the coverage of UNICEF’s response is guided by the following overarching question: ***To what extent were the most vulnerable Venezuelan refugee/migrant girls and boys and their families reached with needed protection, assistance and empowerment?*** This section will address the different specific evaluation questions under this overarching question.

EQ11: What were the internal and external factors that enabled or constrained UNICEF’s ability to provide the most vulnerable Venezuelan migrants and refugee children, their families and host communities with protection and assistance according to their needs?

Summary of key findings:

- Factors that enabled were UNICEF’s territorial presence in the areas most highly affected by the VMC, and the quality of partners.
- Factors that constrained include the lack of key vulnerability profiles being identified, and the lack strategies and models designed to address these profiles given magnitude and geographic dispersion of the VMC phenomenon, the lack of resources both human, technical, and material.
- The ET finds that the issue of coverage is the weakest aspect of the UNICEF Colombia and Regional response: challenges of resource mobilisation did not allow UNICEF to address the scale of the VMC.

Coverage is primarily affected by the ability to identify those in need, their location, profile and vulnerabilities, and the capacity of the agency to address these with practical measures that correspond with their rights and protection needs. Overall, it implies that the response, and its programmes, are designed to correspond with the scale of needs identified. These EQs are difficult to answer, since vulnerability profiles and needs of the most vulnerable Venezuelan children have not yet been clearly identified, some three years into the response. This represents a major gap in the response. While UNICEF can list many different vulnerabilities, there are limited specific strategies in place to ensure the most vulnerable are reached with needed protection, assistance, and empowerment.

In field visits, focus group discussions and key informant interviews, it has been widely acknowledged that enabling factors are UNICEF’s field presence in key areas affected by the VMC, as well as the engagement of strong local partners, many of which had no previous experience on migration issues. Among these, KIs are CIDEMOS and Fundación Significarte on child protection and Fundación Renacer on addressing sexual exploitation and other forms of GBV. These partners and their knowledge acquired on issues around migration are an important resource that UNICEF needs to value and retain.

- UASC have been addressed through activation of institutional routes, such as for GBV survivors. No evaluation or follow up of the adequacy of the measures adopted, typology of the victims, outcomes and numbers has been made available. Apart from Arauca, UNICEF field offices are not compiling statistics of CP cases from among GIFMM partners. As there are no common reporting formats that can be shared between humanitarian actors there is no information management system for CP cases. For UASC in Arauca, the ET was informed of 31 cases supported by UNICEF partner in 2021 and that creation of 116 places in foster families is in the process. But the total number of UASC cases identified by GIFMM in 2021 is 786. Similar information is not available for either Norte de Santander or La Guajira since this data is not currently being consolidated.
- Pregnant women have been effectively referred to health services supported by UNICEF. Save the Children, UNHCR and IOM have additional agreements as do other NGOs. To be noted is the lack of paediatric care available for migrant children, and limited reproductive health services for adolescents and women.
- While adolescents at risk of early marriages/unions have been identified as a highly vulnerable group, they do not seem to be considered through any specific UNICEF programming at field level.¹¹⁰ KIs report that while UNICEF Colombia was working to support the *Global Programme to End Child Marriage*¹¹¹ with field

¹¹⁰ Colombia CO participate in the Interagency Regional Program on CMEU since 2018. Among the specific results of this process are:

i) inclusion of specific measures on CMEU in the actual National Development Plan 2018-2022.

ii) Specific interventions made in the Congress to discuss two bills to eliminate the exceptions of the civil code on CMEU.

iii) The creation of a round table with government institutions (Ministry of Health, Ministry of Education, National Department of Planning, Colombian Family Welfare Institute, UN Women, UNFPA, Plan international) since 2018.

iv) Colombia CO undertook the first study on CMEU (2010-2019) in the country. This study will be published in 2022.

v) Contributions on CMEU have been made to the social policy document which the National Department of Planning is elaborating to protect children against all forms of violence

¹¹¹ <https://www.unicef.org/documents/unfpa-unicef-global-programme-end-child-marriage-phase-i-country-profiles-2016-2019>

information, it was never provided with any resources to participate in this platform and so has had to abandon this task. UNICEF Colombia has concentrated its advocacy agenda and technical assistance on positioning CMEU in the legal and public policy framework at the national level, as a basis for working with local administrations and to develop mitigatory approaches to address this harmful practice. Although the CO has carried out very specific work in areas such as Atlántico, the entities require a clear framework for their action. For example, they do not know how to act in terms of protection against matrimonios y uniones tempranas since the guideline on GBV is very weak in this issue. Civil society actors have pointed to the need for a clear understanding of this problematic and the government responsibilities in order to duly and mainly protect girls and adolescents from this form of violence.

- Early Childhood Development activities for under fives are not included in education activities. This age range is only targeted occasionally through Child Friendly Spaces along the route and through mobile teams (Chiquivan)
- Access to education remains limited both for migrants and host communities. LCs have been established to bring learners up to a level at which they can integrate into regular classrooms, but evidence suggests that this happening much more slowly. For those families fortunate enough to have their children in an LC, their vulnerabilities have been taken into account through specific measures such as psychosocial support and cash transfers in specific cases.
- PSEA is strongly integrated as an institutional issue that has been strengthened in PCAs with IPs. However, other than the gender analysis which took place in 2021, LGTBI specific channels for identification and attention are missing. On PSEA, there is a specific strengthening capacity developing process with ethnic organisations acting as implementing partners in La Guajira, Chocó, Amazonas and Cauca departments among others. Similarly, children with disabilities are unaccounted for, not captured and weakly addressed in the overall design of the response. WASH is an exception as UNICEF WASH facilities are mainly adapted for children with disabilities. However in many cases access to services in transit hubs and in settlements is impossible for these children, and parents in learning centres also commented on the lack of specialist attention to children with autism for example.

Exploring new models that lend themselves to scalability

It is possible to compare approaches taken in other VMC affected countries that are in fact scalable. In Peru, UNICEF has supported the Ministry of Education to pilot a (now) national level platform for registration of children in Peruvian schools. First piloted in Lima, the platform was quickly expanded to other regions of the country. This school registration portal allows the Ministry of Education to immediately access critical information regarding where demand for education is beyond local capacity, and where there exist resources that are not being used to their full capacity. The system can generate critical data needed by educational authorities to map needs against resources and to mobilise new resources where necessary.¹¹² When the ET proposed that this might be a tool of value in the Colombian context, informant reported this was problematic due to lack of internet access- Despite this fact on the ground the entire roll out of the ETP registration is carried out online with support of numerous partners on the ground, including UNICEF. The two processes could be inter-operable. In other countries, such as Trinidad and Tobago, the pandemic was an opportunity to explore the advantages of access to online learning platforms which can be highly effective for adolescent learners who do not have access to in-person learning. These options do not even seem to have been considered or explored in Colombia.

Limitations on institutional capacity building as a response to large scale emergencies

While the pathway to scalability in the long-term is expanded capacity by the state to address the needs of the most vulnerable will not happen overnight. It is for this reason that a humanitarian response is needed, to compensate for the lack of state capacity to address critical protection needs at scale. In other words, capacity building and complementary humanitarian actions are not mutually exclusive. It is critical to addressing the needs of the most vulnerable that UNICEF find an appropriate balance. In Colombia, UNICEF's approach favours supporting capacity building of government institutions to provide health services, CP and education, but state entities have limited capacity to absorb the high level of demand of the Venezuelan migrant outflow. Institutions such as ICBF and key actors at departmental and municipal levels have raised the concern that they simply do not have the staffing and resources in place to respond to the broad range of CP issues arising as part of the VMC- This means many vulnerable cases fall through the cracks. KIs note particularly a lack of coverage of marginalised groups not accounted for, the illegal flows including adolescent girls, victims of sexual exploitation and trafficking, all of which go below the radar of overstretched CP systems.

¹¹² Critical information needs include how many children in specific localities are newly registering or re-registering, which can enable the authorities to determine where additional teaching staff and other resources are needed.

To compound the issue, both UNICEF and partners have identified the rapid turnover of staff as being a key challenge. One noted that: *“As soon as they are trained, they change jobs leading to a new person comes in who requires the same training”*. After decades of capacity building in Colombia it appears to be time to focus on building the capacity of governmental institutions to ensure their own training needs are sustained internally, rather than continuing to rely on external actors.

COVID 19 is expected to have increased illegal migration flows

COVID-19 has also played a role in impairing needed coverage. Border closures and lockdowns have limited access to regular administrative processes. The pandemic has pushed migrants to use the illegal routes that are rife with trafficking and exploitation, which circumvent the formal assistance mechanisms and areas where humanitarian actors are present.

Limited and short-term funding of the humanitarian response

KIs highlight limited and short-term funding as a key factor affecting the response and the consolidation of UNICEF teams and the engagement of partners needed at scale. Lack of experienced partners has been an additional factor and time and resources have been invested in upgrading IPs reporting capacity and adherence to humanitarian standards, including around gender issues, PSEA, and AAP. Lack of sufficient resources, particularly for UNICEF’s coordination role, has impacted effectiveness of coordination platforms and reduced UNICEF capacity for leverage in some key institutional and humanitarian working groups.

According to UNICEF Colombia, a major issue that has limited coverage has been the lack of funding of its appeals. Frequent comparisons are made with the Syrian refugee crisis. Funding for the refugee operation in Turkey has been many times greater than for the VMC on a per capita basis, allowing for both better coverage and more comprehensive response.¹¹³ The VMC, or more broadly migration of children on the move in the Americas, has become one of the world’s forgotten crises.

EQ12: What factors have affected donors’ perceptions and willingness to fund UNICEF’s programmes and appeals in line with assessed needs/targets?

Summary of key findings:

Donors’ perceptions have been affected by multiple factors both internal to and external to UNICEF. The main factors affecting donor perceptions and willingness to fund UNICEF’s appeal and projects include:

- the ability to come up with innovative humanitarian initiatives and projects that address the needs of the most vulnerable
- the ability to involve more donors: the US, sees itself as giving a disproportionate share of the humanitarian financing for the VMC
- competition from other actors in which UNICEF needs to demonstrate its value for money as a UN agency, because there are many other reputable response agencies proposing to achieve comparable outcomes for less money.

Donors consider that UNICEF in some cases lacks specific data needed to adequately target its programming towards those most vulnerable migrants and children on the move, and to address the protection risks particularly facing adolescent girls who fall victim to trafficking and networks of sexual exploitation.

The ET relied heavily on feedback from donor representatives interviewed as part of the evaluation inception and data collection phases. Donors suggested that in addition to interview data, the ET should request copies of Donor Visit Reports to have a comprehensive and systematic view of donor perceptions based on their own field visits and analysis. However, UNICEF CO and RO both informed the ET that they do not have or could not find copies of these reports.

The ET had the opportunity to interview a range of donors to UNICEF Colombia, including ECHO, BPPRM and Global Affairs Canada. All share similar perspectives on the role that UNICEF is currently playing in the response, the rationale for supporting UNICEF and their expectations of UNICEF as a UN agency. They highlighted the following points:

- For donors, UNICEF’s value-added consists in its ability to mobilise a wide range of actors, not least government partners, around key CP issues to enable a rapid and effective humanitarian response at scale.
- UNICEF has a high degree of credibility and global expertise. UNICEF is not an NGO, and it is more costly than donating directly to international or national NGOs. Donors consider that this added cost is worth it where

¹¹³ This, according to UNICEF, would suggest that the VMC has been somewhat lower on the international agenda than was the Syria Refugee situation – for obvious reasons that these refugees are effectively being absorbed by LACRO countries, rather than being at the doorstep of Europe or North America.

UNICEF is able to generate evidence from the field and international experience, and influence government and other actors to adopt actions and policies aligned with humanitarian standards and best practices.

- For smaller donors with less personnel and capacity, it is often easier to pass larger sums through UNICEF, rather than contracting directly with smaller partners, even though smaller partners are increasingly competitive in many fields, as well as being more cost effective. In Latin America there are a growing number of competent NGO partners who have a national or international reach. A localisation agenda suggests that donors should be supporting these local and national partners, just as UNICEF is doing. In this sense, the funding context is more competitive than elsewhere.

Based on these expectations and realities, informants suggest that their assessment of UNICEF Colombia's performance is mixed.

UNICEF's technical support and partnerships on child protection issues: UNICEF is seen to have been able to identify strong IPs with a good reading of the context and broad CP expertise. These partners have allowed UNICEF to solve complicated situations. Generally, CP donors spoke well of UNICEF Colombia's Emergency Team and specific interventions and have in some cases requested UNICEF's support in other places on UASCs and CP but where UNICEF does not have a permanent presence, such as in the Darien with other migrant populations. WASH is also considered to be an added value of UNICEF among humanitarian donors.

Capacity to mobilise a broader range of donors: Some important donors want to see UNICEF being more proactive and seeking funding further afield. The USA in particular is providing some 80 per cent of the total funding for the VMC humanitarian response, which it considers is imbalanced. According to the interviewed donor representatives, UNICEF has a role to play in attracting a more diverse group of donors. This is where the CO, regional offices and HQ all need to work in coordination to ensure that UNICEF is reaching out to diverse donors-from the public and private sectors. UNICEF maintains a significant corps of fundraising staff at various levels, and this could be more effectively mobilised for the VMC.

Lack of comprehensive needs assessments linked to programming and reporting: Donors, like other informants, find themselves somewhat bewildered by the fact that three years into the VMC, much of the information regarding the needs and specific vulnerabilities of refugee and migrant children remain anecdotal. They highlight that UNICEF's targets and strategy need to be based on evidence of the actual numbers of children at risk and their needs. However, specific figures vary wildly from one partner to another, and many times cannot be pinned down. This lack of solid needs assessments produced in a timely manner frustrates donors considerably. According to one donor representative:

UNICEF tells us: there are high numbers of children out-of-school, there is a lot of human trafficking, there is a lot of GBV and early marriage, but they never tell you concretely how they know this, what are the figures, what percentage of Venezuelan children are or are not in school, and where exactly the problem or bottleneck lies and how to fix it. I do not know why it is so difficult to find ways to generate and manage information - to have registry systems to register the percentage of children in or out-of-school or to have more solid data to be able to make this type of analysis and then to push for the resources that are needed. The Norwegian Refugee Council has done this baseline survey on school reopening, which is very good, but it comes very late in the operation and could be extended to more areas and have an impact that would then allow us to see what the needs are and meet them as a first step.

This type of observation shows that donors lacking confidence in the lack of tangible data as a basis for HAC appeals and overall humanitarian programming.

Need for innovation and scalable, timely humanitarian solutions: Linked to the above, while a major challenge for UNICEF has been lack of funding for its existing programmes there is a willingness by donors to provide funding for initiatives that can be brought to scale. Donor representatives assess that some programmes of UNICEF are very costly and can only be delivered on a small scale, whereas a humanitarian crisis of the scale of the VMC requires initiatives that can address the needs of the many, including the most vulnerable among Venezuelan refugees and migrants.

Supporting GoC openness to accepting assistance: Lessons can be learned from a more detailed comparison between the VMC and the Syrian refugee flight. Some informants have noted that a significant difference was that Turkey has been willing to receive funding on a significant scale to assist it to meet both immediate humanitarian and longer-term social integration objectives, which led to the creation of the EU Facility for Refugees in Turkey.¹¹⁴

¹¹⁴ Although often characterised in the media as a large sum of money given by the EU to Turkey, the EU Facility for Refugees in Turkey was established to fund projects for the benefit of refugees in Turkey. General budget support or sector budget support were not proposed or used by the Facility, neither were these modalities requested by the Republic of Turkey. Rather the Facility was used to fund a number of humanitarian and development projects that were agreed to between the Turkish government and various EU contribution mechanisms.

This could be a model for the GoC and donors to explore. However, a major obstacle has been the GoC's ambivalence about receiving assistance that clearly it so badly needs. As has been observed by many informants there are many sectors in which Colombia has struggled to fulfil the needs of its own citizens, let alone absorb the needs of an additional 1.7 million Venezuelan migrants and Colombian returnees. Here informants consider that UNICEF should continue to play a more active role in helping the GoC to identify key structural reforms that will allow it to considerably strengthen its ability to serve both Venezuelan migrants and ultimately better serve its own citizens.

Coverage	
Strengths	Challenges
Outreach activities for health, WASH and C4D	Definition of adequate targets
UNICEF's role in institutional strengthening	Limited Institutional capacity to absorb Venezuelan migrants under emergency and COVID-19 conditions
Development of UNICEF's COVID-19 CBI response	Short term funding
	Failure to address major bottlenecks such as data on availability on school spaces and CP
	UNICEF's COVID-19 CBI response (very small scale)

7.4 Coherence and Coordination

The evaluation of the coherence and coordination of UNICEF's response is guided by the following overarching question: What are the main factors that have led to internal and external coherence and coordination of UNICEF's response or lack thereof? This section will address the different specific evaluation questions under this overarching question.

EQ13: What factors led to or detracted from UNICEF's ability to balance its response to local needs and national priorities?

Summary of key findings:

UNICEF response was originally linked to the 2018 GoC request for assistance to address the VMC, so was very much tied to national level priorities. Prior to the VMC, UNICEF was in a long-term development modality, and was in close cooperation with GoC ministries on jointly agreed upon workplans. The response has continued to be closely tied to the priorities of various national ministries and institutions, such as the MEN and ICBF, and their requests for assistance and technical support. The wider extension of UNICEF's presence through the opening of field offices has led to UNICEF's ability to better balance national priorities with local needs. Going forward, it will be important for UNICEF to reflect back to national institutions the gaps and barriers created by efforts to implement national policies at the local level, and to generate creative solutions to overcoming these barriers.

The initial response of UNICEF was to support the needs expressed by the national government in 2018. Subsequently UNICEF linked its actions to the R4V- GIFMM platforms, also articulated based on national priorities and agreements. Based on KIIs and field visits, it appears that on balance the response is heavily tailored to alignment with national priorities regarding migration as a factor of national development. This means that the GoC is much more interested in those Venezuelan migrants with the intention to remain and settle permanently in Colombian than those Venezuelan migrants who are transiting to other countries, returning to Venezuela or engaged in pendular movements in and around border areas. Following this approach and interest of the national government, UNICEF has generated internal coherence and coordination through the design of its new CPD, which aligns actions on migration along thematic, rather than sectoral lines, closely linked to agreements and specific government requests at the national level.

A key factor that has led to UNICEF's ability to balance its response to local needs and national priorities has been the process of establishment of field offices in areas most affected by the VMC (see section on Appropriateness above). This has allowed UNICEF Colombia to have direct engagement with local actors from civil society and municipalities and departmental authorities, and also to be more aware of the gaps and bottlenecks that block national level police and which inhibit inclusion of Venezuelan migrant children and their families at the local level.

UNICEF Colombia has not yet found the needed balance and coherence between local needs and national priorities, where local needs are so massive and resources – of the state, civil society and other response actors – are so limited. UNICEF will be working most strategically when it develops a clear advocacy plan that draws on well documented local realities and ensures that these are effectively shared with national authorities. The national government cannot act without required evidence and in some cases, may require strong and united UNICEF/R4V advocacy to impel it to do so.

EQ14: What is UNICEF's added value in the Venezuela Outflow response?

Summary of key findings:

UNICEF's value added in the L2 response and more generally, for children on the move, is its mandate to defend and advocate for child rights, regardless of nationality and migration status. Donors and other actors look to UNICEF to set and uphold humanitarian standards for children on the move and their families in the context of the VMC, while also providing technical advice to government and other agencies on issues that particularly affect children, across sectors. UNICEF's multi-sectoral mandate is an advantage, but also leads to its resources being spread very thin on the ground.

Of the sectors that stand out for partners and beneficiaries is UNICEF's contribution to WASH, which has strongly come to be associated with UNICEF's contribution to both the R4V presence and its own programmatic interventions.

UNICEF's value added has also manifested in strengthening the capacity of its implementing partners in the area of migration, which is a new issue which many civil society organisations needed support to address.

When key informants in the field were asked about UNICEF's added value in the VMC Response, the response was clear and emphatic: WASH! UNICEF partners repeatedly highlighted WASH as UNICEF's most valuable contributions – through its high level of technical expertise in the area and the competence of its partner organisations. The COVID-19 pandemic has highlighted the importance of WASH as a key pre-requisite for any and all humanitarian and development interventions. Handwashing stations, for example, have taken on an unprecedented value which can be recognised by all. UNICEF staff repeatedly noted that UNICEF Colombia utilises WASH sector activities as the spearhead to enter and get to know new communities and as a basis for other sector programming initiatives. WASH is also seen as an uncontroversial contribution within the humanitarian response which both local and national governments welcome. It does not challenge government capacities, resources, and procedures, but brings a contribution which municipal budgets are hard pressed to cover. UNICEF's leadership in this sector allows for a seamless transition from the needs of the humanitarian crisis to those of longer-term development.

Across other sectors, the value added of UNICEF's contribution is less visible to partners and donors. The view of its cluster leadership within the GIFMM-Platform – in other areas such as education and CP is more variable. UNHCR and IOM lead the CP working group in GIFMM at the national level. UNICEF leads the OCHA-led cluster CP AOR which was created in 2020 and tackles other emergencies than migration.

UNICEF staff and partners tend to see that its value added derives from its mandate (children's rights), its work across sectors which should, in theory allow it to take a comprehensive and holistic approach, and also the specificity of its areas of coordination leadership: education, CP and WASH. UNICEF's multi-sectoral mandate is an advantage, but also leads to its resources being spread very thin on the ground. Furthermore, a number of partners and donors signalled that UNICEF's added value as a UN agency could be strengthened in some instances, in terms of spearheading sector leadership, advocacy and innovative, evidence-based, scalable models that enhance the overall response and orient other partners in a meaningful way.

Where better resourced and more technical partners such as IOM, UNHCR, UNFPA and PAHO (vaccines) are also providing some overlapping services and coverage directly to migrant children and families, it is important for UNICEF to consider where the cost incurred by rolling out its own programming might be better used to complement/combine programmes developed and rolled out by other partners. On the other hand, UNICEF's investment in supporting the National Civil Registry to establish birth registration units in hospitals receiving a high number of births of migrant children is particularly well aligned with UNICEF's mandate. Overall, the efforts to prevent statelessness among refugees and migrant children appears particularly impactful, both in the short-term humanitarian response and in longer-term development planning for a child rights-based approach by the GoC.

In the education sector the added value of UNICEF consists in the implementation and promotion of the *Círculos*

de Aprendizaje model to address the needs of children displaced by the internal armed conflict, in order to facilitate enrolment of children to the public schools. While this model in itself is valid, it does not require UNICEF to implement it. UNICEF could be setting its sights higher, aspiring for measures that would transform the situation and overcome current bottlenecks by providing both evidence needed for sound decision making as well as resourcing of the education sector. This would support both the VMC response, and also help the MEN and SDEs to rationalise the allocation of resources to ensure coverage of children in the educational sector.

Colombia's new CPD offers a key opportunity for UNICEF to boost its value added by building synergies between its work at the level of the PDET Strategy – to develop models for the integration of migrants in local level municipal development plans and processes – while ensuring that migrants experience at field level is transformed into advocacy positions for improvements in resourcing and policy at national level.

EQ15: To what extent were meaningful partnerships and/or coordination mechanisms established with other key actors (e.g., government at national and local levels, civil society, NGOs, academia, private sector, other UN agencies etc.), to assist, include and empower the most vulnerable Venezuelan children and their families?

Summary of key findings:

UNICEF Colombia has played a key role in engaging local and national actor on the topic of children on the move and has built capacities to address the rights of migrant children among a wide range of partners. Of UNICEF's VMC IPs, 25 are Colombian organisations and 11 are community-based. The ET considers this a positive contribution to strengthening national capacity to address future emergencies and migration situations by building capacity of civil society organisations, on migration, emergency and humanitarian response.

In terms of meaningful partnerships, UNICEF is generally seen to have added value through identification of and capacity development of good implementing partners. In the case of Colombia, this includes strong partnerships with local, national and regional NGOs and government authorities.

The emergency response to the VMC called for an increased field presence in peripheral and hard-to-reach border areas where GoC presence has been historically limited. It has also necessitated strong linkages with development workstreams. To achieve this, UNICEF Colombia has sought to work with a wider array of partners with a solid track record who also help ensure relevance of interventions, smoothing transition to longer-term development work.

PCAs were tailored by including key aspects relevant for UNICEF as gender, AAP, PSEA and C4D. In terms of what makes partnership with UNICEF meaningful, partners appreciated that UNICEF brings a strong technical capacity for them to learn and strengthen their own practices. But partners also highlighted that there could be areas for improvement. For example, in the transition from a development context to emergency/humanitarian work, they would have liked to receive more support from UNICEF – to receive training for example on UNICEF's humanitarian standards and the CCC, which were never fully described to them; to have more opportunities to share their lessons learned and to learn from each other. While UNICEF maintains that IPs are far more than sub-contractors and are full partners, it appears that there could also be more sharing and listening to IP voices when developing response strategies.

UNICEF has also developed capacity building initiatives on administrative and financial processes, to strengthen local teams and networks, and also to strengthen partners in their ability to meet UNICEF procurement standards, particularly in terms of the internal measures to prevent and address cases of sexual exploitation and abuse.

UNICEF depends heavily on unrestricted private sector fundraising (PSFR) for implementation of its CPD as well as for advocating child rights among the private sector and it maintains a significant fundraising staff to carry this out. UNICEF developed business-friendly materials and strengthened partnerships with major and medium-sized companies, including Banco de Bogotá, Banco de Occidente, CLARO, NEXA and Kimberly Clark, as well as business platforms. In the future, it is expected that these partnerships may enhance the migration component of UNICEF Colombia's new CPD.

UNICEF has also relied on the experience and capacity of other international NGOs, such as NRC in Education and for the CBI, World Vision. For CP, UNICEF relied mainly the GoC *rutas* to address UASC and GBV, with very limited case management by ICBF. It signed agreements with public hospitals and health service providers to ensure access of migrants (mainly pregnant women and children under five) to health services in some locations.

UNICEF has collaborated effectively on key campaigns and advocacy with IOM and UNHCR. UNICEF Colombia is the UN Agency leader at country level on CMEU strategy along with UNFPA, UN Women and together with the participation of GoC institutions and Plan International has enabled a strong advantage point on CMEU.

Strengths	Challenges
High quality partnerships with local, regional and national civil society and private sector organisations	Limited training of partners and staff on humanitarian modalities and standards/migration (CCCs and GPF for COM)
WASH as a spearhead and bedrock for humanitarian and development responses	New and less experienced field staff occupying multiple coordination positions ¹¹⁵
Focus on areas where GIFMM partners are less present (i.e., Tibu in the Northeast)	Dysfunctional, inefficient and incoherent coordination mechanisms
Leadership in key sectors	

7.5 Efficiency

Key informants and UNICEF partners consider that the response overall has been slow to match the scale of the emergency. This does not only apply to UNICEF. In an ideal world, institutional intelligence should have allowed all UN agencies, particularly those with a presence in Venezuela, to predict and prepare for the imminent massive exodus. Why did UNICEF Venezuela not sound the alarm earlier, so that preparedness measures could be taken by UNICEF LACRO, COs and other UN partners?

EQ17: Were UNICEF strategies and programmatic interventions designed taking into account the activities, capacities and efficiencies of other UN agencies, local governments, central governments, civil society organisations, NGOs, private sector?

EQ18: When did coordination with national Governments, UN agencies and other major respondents avoid overlaps and bridge gaps? If any, what are the reasons for the gaps and what is needed to close them?

Summary of key findings:

UNICEF's programmatic interventions were designed based on its own mandate, strategic partnerships, including those with UN, local government, central government, local government, civil society, and NGOs. There have only been a few cases of duplication detected that should be easily corrected in the future. However, in a humanitarian situation like the VMC, it appears that gaps are unavoidable until UNICEF and other partners can develop more strategic, scalable approaches and attract needed donor support.

Strategies and programmatic interventions:

A number of key strategies and programmatic interventions have been effective and efficient because they have drawn on the resources and mandates of a range of UN, NGO and government actors. Among those worthy of note:

- The joint advocacy carried out between UNICEF, UNHCR and IOM for the establishment of the ETP in early 2020 and the roll out of the large-scale registration process through *jornadas de inscripción*, engaging many partners to ensure that as many Venezuelan migrant and refugee families as possible could be officially registered. Key gaps in the process have been the fact that families have not always been registered together, leaving some parents and children in separate files, and different timeframes. However, efforts are currently being made to correct these problems. A key synergy that should be sustained is working together to provide human and financial resources to maximise the speed and efficiency of the registration process, in particular reducing the current lag of more than six months between the pre-registration and second phases of the ETP registration process.
- Other highly complementary experiences have included the collaboration of UNICEF with IOM and UNHCR on the campaign to address statelessness, as well as a mass media campaign to address xenophobic perceptions which were led by UNICEF's communications teams in collaboration with the two other R4V lead agencies.
- UNICEF's PDET strategy has clearly sought to build on the specific role of municipal authorities and their obligation to include all children and adolescents and generate specific projects and programmes to address their needs. This has been expanded and will be increased under the CPD to ensure that the rights and needs of migrant children and adolescents are also addressed with municipal development plans in key migration affected areas identified by the GoC.

¹¹⁵ At the outset, the Emergencies section received the support of experienced personnel from the Regional Office who supported the training of UNV team members, as well as a Standby Partnership Programme (SBP) staffer from the Global Cluster.

- A highly efficient and effective initiative has been to support the Registraduría General de la Nación in the creation of birth registration units in hospitals in the border areas where many Venezuelan mothers are giving birth, ensuring easy access to birth registration documents. It is important to note that of the 36 civil registry units created by the time of the evaluation, only six had requested transitional support for staffing. UNICEF has not covered any staff time. The cost of new positions has generally been absorbed by the hospitals themselves. This is a positive contribution to long-term sustainability.
- Another cost-effective initiative has been to support civil society organisations to set new legal precedents for treatment of children through for example, supporting the legal case of a boy who needed special support to go to school. This strategy could be extended to declare Colombia in a state of unconstitutionality due to the number of children that are unable to find a place in school.
- UNICEF has seen one of its main roles as building the capacity of State actors in relation to CP, WASH, and other services areas. This strategy has at times reached limits due to the limited capacity of government institutions to absorb both the technical support on offer from R4V partners as well as the capacity to take action on behalf of Venezuelan migrant children and their families.

Potential areas of duplication

In the course of the evaluation KIs and the ET have identified a few areas where duplications exist. These could generally be addressed by putting in place appropriate information management systems:

- **Health care coverage provided through various UN and other agencies**

The ET learned that health coverage has often been provided by various agencies to somewhat overlapping populations. Some larger agencies with bigger budgets, such as IOM and UNHCR, have been able to negotiate better rates or more comprehensive packages for health services than UNICEF. Coverage provided by these different health programmes has allowed the same households to register for more than one package. It is the understanding of the ET that UNICEF is addressing this potential overlap by withdrawing from providing primary health coverage in its programming in the new HAC. The ET identified some challenges in the health sector where OPS and IOM can eventually overlap with UNICEF sponsored services.

Some inconsistencies in coordination of nutrition case management for Venezuelan migrants and different solutions in different locations led to inefficiencies of the intervention, such as supply and accessibility of PumpyNuts. Overall, coordination mechanisms need to be strengthened to improve inter-agency arrangements to ensure less duplication of the same type of services.

- **Rationalising field presence around the country**

Inherent in the context of multiple needs over a widely dispersed geographic area and multitude of partners, the VMS, like responses to earlier crises across the globe, has brought out the risk of too great a concentration of partners in particular locations and not enough in others. During the ET visit to Colombia, UNICEF teams were in the process of exploring a move from Cucuta where there are many NGO and other actors present, to Tibu where the needs of migrants are great but there are far fewer NGOs and other actors. Such openness of UNICEF to adjust its strategy to go to more inaccessible places (with the risk of less visibility) is commendable.

- **Rationalising fundraising appeals**

A further area for rationalisation and seeking efficiencies is the process of fundraising and the production of the R4V Regional and RMRPs as well as UNICEF's own HACs. It is understood that there may be some overlap between the HAC and the RMRP, where the RMRP funds raised go in part to fund the HAC. These areas of overlap need to be clarified, while the RMRP process needs to be made more efficient. Key informants suggest that it does not make sense to have a ballooning RMRP, as more and more humanitarian actors join the response, while the donors are still the same with more humanitarian needs, and more crises in the world which require their funding.

It is suggested by some KIs that three years into the VMC response, there should be a transition to a multi-year RMRP that helps move from humanitarian to more social and economic integration actions. Annual RMRPs are considered highly inefficient, especially as they take place alongside HRP with less and less humanitarian and more integration actions. UNICEF it seems has now accepted the idea of extending the period for the HAC appeals to two years. This should significantly reduce the workload of staff and provide a longer-term planning horizon.

Key gaps identified by UNICEF teams and partners

- **Gaps in coordination and information gathering/management**

There seem to be two significant gaps. One is in the area of information gathering/management, the other in coordination. The two go hand in hand. Effective coordination should be put in place the mechanisms and reporting formats that are needed to generate information on a vulnerability or gap. This information in turn should allow additional actors, funds and programmatic response to be generated to meet the need. However,

both functions are done spasmodically, by sector and by geographic area. UNICEF's field presence, while it has expanded, remains limited overall since the scale of the VMC is at a national level. This can generate gaps in terms of UNICEF's key areas where, in the cluster system, UNICEF would normally play a coordinating role. This appears to be the case in CP and education – where UNICEF is trying to coordinate in areas where it has a field presence, but GIFMM has the national responsibility for CP AOR Coordination. This gap is also generated by the fact that there appear to be limited resources to carry out all the coordination that the scale of the VMC would require. This would require advocacy at LACRO and HQ levels to see how UNICEF's coordination role could be extended and associated costs covered which relate to its particular areas of expertise such as a WASH, Education, and the Child Protection Area of Responsibility (AoR).

- **Gaps generated by the absence of models and mechanisms**

There are also gaps created by the lack of solutions or models. This has been explored above, particularly in education where UNICEF as a key actor needs to play a more ambitious and transformational role to identify how the VMC can serve as an opportunity for Colombia to overcome historic bottlenecks that have disadvantaged generations of Colombian children.

Efficiency	
Strengths	Challenges
Effective partnerships with UNHCR and IOM on key CP campaigns to ensure rights of migrant children and their families	Duplication of efforts and programming in some areas – health, nutrition and CBI
Institutional support to local and national government institutions	Gaps in information and coordination
Willingness to change locations to avoid overcrowding/duplication of actors	Gaps in UNICEF leadership in some of its key sectors of expertise in some key locations along the migration routes.
	Need to plan a transition from an annual RMRP to a multi-year plan, more focused on social and economic integration, with UNICEF developing its own medium-term strategy

7.6 Connectedness

The evaluation of the connectedness of UNICEF's response is guided by the following overarching question: To what extent is UNICEF Colombia's response to the Venezuelan Outflow linked to other key institutional planning and policy processes? This section addresses how the needs of the Venezuela migrant and refugee populations are effectively being addressed by linking the two specific evaluation questions formulated under this overarching question. The two EQs are answered together because they are related.

EQ19: How is the new country program of UNICEF Colombia adjusted to the new context and needs of the Venezuela migrant and refugee populations effectively being addressed by linking the emergency response to longer-term development goals in each country? What are the difficulties, including opportunity costs, if any, encountered internally and externally (i.e., UNICEF internal structure and processes, donor requirements)?

EQ20: To what extent has UNICEF adopted a whole-of-migration cycle approach which provides longer-term solutions for migrants, refugees and returnees including preparedness for new influxes, support to access social services in host countries as well as when returning and reintegrating in their home countries (the nexus)?

Summary of key findings: UNICEF Colombia's strength is building on long-term partnerships with the GoC, promoting models and favourable government policies to work towards longer-term integration and capacity building. This is clearly articulated in the new CPD which identifies migration as one of its three components and adapts pre-existing strategies to include migration as an additional protection risk facing children and adolescents in Colombia. This is valid and well connected to UNICEF's longer-term work to build capacity of Colombian institutions, ensuring inclusion and integration of migrant children and adolescents into national systems, social policies and protective mechanisms.

However, as migration is a dynamic phenomenon and UNICEF has not fully invested in its humanitarian response capability, it is not clear that lessons learned from the VMC, including the importance of paying attention to the

conditions of those returning to Venezuela, will lead to UNICEF Colombia being better prepared for future influxes and movements of returnees.

Understanding of the humanitarian-development nexus within the VMC

The ET feels that UNICEF seems to struggle with capacity and understanding of the framework of a humanitarian response. For example, some staff did not appear to be able to articulate how a humanitarian modality would be different from a normal development context, what would be the limits to building institutional capacity in an emergency, and where direct interventions of humanitarian actors might be required to ensure that affected populations can enjoy their rights today, rather than awaiting a distant future.

While many UNICEF staff and partners believe that continuing to utilise development modalities in an emergency context is the same as doing nexus type programming, the ET suggests that UNICEF needs to reassess this assumption. The nexus refers to a transition from a humanitarian modality towards a full development modality. But if UNICEF teams remain in development mode, despite an emergency, this should not be considered a nexus approach, for it is neither coherent nor connected. An emergency, humanitarian context requires rapid deployment that may well exceed the capacity of state institutions, and which requires a response which meets needs and rights at scale. This is the reason for the presence of additional international actors and donor resources. In at least two areas of education and CP, a full humanitarian modality and coordination mechanisms to ensure rights today have yet to materialise. The lack of reference to and training on the CCCs, the *Global Framework for Children on the Move* and other key policies and standards for partners and staff limit the coherence in the operation at CO level. UNICEF teams are small and their framework for articulating a response is mainly development oriented.

UNICEF Colombia's new CPD integrates migration as a key programme component and aligns well with the GoC's approach, as a factor of development and long-term integration. The migration component of the new CPD arises from the GoC's desire to move beyond humanitarian action to respond to the social emergency generated by the mixed migratory flow from Venezuela, with longer-term development proposals aimed at promoting and facilitating the integration of the migrant population (in this case both Colombian returnees and Venezuelans) into the social and economic dynamics of the host communities.

This migration component in the CDP responds to the GoC's priorities included in CONPES Document 3950 of *Estrategia para la atención de la migración desde Venezuela* (Strategy for the attention of migration from Venezuela)¹¹⁶ which sets out the basic parameters that define the type of attention that the Venezuelan migrant population and the Colombian returnee population should have in terms of health, education, family welfare, protection, nutritional security, enjoyment of favourable environments, coexistence and citizen security in the receiving municipalities. It contains an income generation strategy for the migrant population and host communities that proposes alternatives for economic stabilisation and social integration. This is why the GoC requests the support of the United Nations to work together for this purpose within the new Country Programme.

UNICEF proposes to reintroduce many of the same approaches it has been implementing over several decades: flexible learning models, health system monitoring and strengthening and strengthening capacities in priority municipalities to incorporate children and adolescent participation through the *Territorios Amigos de la Niñez* strategy. However, this is limited to specific municipalities targeted by the GoC for special attention, mainly adjoining the Venezuelan border. While the ET questions the objectives of the education component, the other two strategic elements appear well adapted to the needs of those migrants who are more or less permanently settled within the urban and peri-urban communities in the border areas prioritised by the GoC.

UNICEF Colombia's strengths appear to play to the longer-term development strategy. Among other things, the ET was told that a further spatial extension of UNICEF presence would be to Tibu, due the fact that there are few social actors there and UNICEF can have a significant and longer-term influence. In this sense, UNICEF Colombia is showing itself to be an agile player interested in longer-term strategies in those areas that most require its support.

What UNICEF's new CPD strategy does not fully take into account is what has become known as the whole of migration approach, the influx of migrants on the move to other regions within the country, mainly urban areas that are not currently being prioritised by government, as well as the return dynamics to Venezuela. These are significant components, and the porous nature of the border also offers a scenario of regular pendular movements. UNICEF has until now mainly focused on the influx and integration components. The returning flux

¹¹⁶ <https://www.migrationportal.org/resource/conpes-strategy-attention-migration-venezuela/>

to Venezuela is very relevant and no information is available of any coordination with UNICEF Venezuela CO on what are the conditions for reception of Venezuelan returnees. This point should remind UNICEF of its declared six policy asks: the one that is never mentioned, but has significance in this context is the first, which relates to the need to understand and address the conditions that force children and families to move from Venezuela in the first place, and to which some families find themselves returning. There is a need to strengthen advocacy and strategies to address the original cause of the VMC and the likelihood that vulnerable families may be returning to these conditions.

Indigenous communities, particularly binational communities have very specific needs. These needs could be better articulated and addressed in the new CDP to help preserve and support the cultural diversity of the country.

Connectedness	
Strengths	Challenges
Consolidated Migration Component of new CPD aligned with government priorities	Short term nature of contracts and funding ¹¹⁷
Adaptable, standard modalities that can address settled, migrant integration	Need to review objectives of the Education component of new CPD
Willingness of UNICEF to establish new field presence in underserved areas (i.e., Tibu)	Lack of specific programming for binational indigenous communities impacted by migration flows
	Lack of consideration of return migration of Venezuelans as a result of COVID-19 and economic downturn
	Need to strengthen understanding and practice of the humanitarian-development nexus.

7.7 Cross-cutting: gender, equity, conflict sensitivity and accountability

The evaluation examines some cross-cutting dimensions of UNICEF's response and is guided by the following question: To what extent has UNICEF's response to the Venezuelan outflow taken a gender, equity, conflict sensitive and accountability approach at all levels? Cross cutting issues have been treated throughout the report in different EQs. To summarise main aspects identified:

- Of the five country case studies in our sample, UNICEF Colombia's approach is the most conflict sensitive, as the country have been living and dealing with armed conflict for the past 50 years. Conflict sensitivity, understanding of how the dynamics of population movements can spark local tensions and ignite conflict is strongly reflected in UNICEF Colombia's analysis, strategies and approaches which permeate all aspects of its programming.
- On AAP, the evaluation found initial steps and a learning attitude by UNICEF and IPs to find solutions for affected population participation and to find adequate accountability mechanisms. Challenges remain and are notoriously problematic in areas where irregular migrants gather or in informal settlements, where lack of beneficiary engagement, insecurity, poor information, and absence of standards affect AAP. In transit centres and shelters the situation can provide an adequate context for AAP if clear information is provided, participation promoted and adequate standards ensured. However, AAP requires more direct engagement from UNICEF to overcome power dynamics between IPs and the beneficiaries who rely on their services. AAP is not seen to be present at the beginning of the project/programme cycle, where its consultations could inform UNICEF programming. According to KIs the concept of direct consultations of UNICEF teams with beneficiaries is not part of its organisational culture, although its WASH experience shows that this can be meaningfully accomplished.
- On gender analysis it is noted that UNICEF undertook a gender analysis in 2021 and this is generally contained within funding proposals but the ET observes that its translation into programming and monitoring can be strengthened (although CO stakeholders have indicated that the analysis formed the basis for advocacy actions with key government and civil society actors to recognize, characterize and address the needs of LGBT

¹¹⁷ This is not the case for ORR funding.

adolescents and youth affected by migration).¹¹⁸ has not been carried over in terms of programming and monitoring. Migration is a phenomenon that may have different and specific risks, opportunities and drivers for girls and boys. It is important to understand these to arrive at gender appropriate programming that does not minimise the risks and issues facing children and adolescent girls and boys. The VMC is characterised by a hyper-sexualisation of the Venezuelan adolescent and women. Many interviews and focus groups with beneficiaries show that women and adolescent girls feel particularly vulnerable to being perceived as sexually 'available'. This creates a high potential risk to Venezuelan migrant girls and women that has not been adequately acknowledged or integrated into the protection work of UNICEF and other partners, nor challenged through C4D and other communications processes.

- PSEA are core aspects of the response from a contracting point of view, and UNICEF has been active in raising the profile of those issues, ensuring visibility in all assessments and information tools, providing training, (PSEA surge) and monitoring means for those aspects.
- Through the Canada-funded project held by LACRO, and with the support of UNICEF colleagues in Colombia, Ecuador and Peru, UNICEF has developed a research paper on the different situations faced by unaccompanied or separated adolescent girls and LGBTIQ+ adolescents on the move who had no choice but to leave Venezuela and on how this affects them differentially. In addition, protocols and guidelines for the identification and protection of unaccompanied or separated adolescent girls and LGBTI adolescents on the move were analysed from a gender perspective. From this analysis UNICEF developed *Adolescent girls and LGBTIQ+ adolescents unaccompanied or separated : an invisible migration?*¹¹⁹
- On GBV, adolescent marriages, early pregnancies and UASC: The involvement of local authorities and social services in case management is not yet an adequate strategy. The ET notes the lack of specific monitoring to follow up of the cases identified by GIFMM partners, UNICEF and ICBF.
- The evaluation has identified weaknesses in the overall response where it comes to children with disabilities, not only on the part of UNICEF. Shelters and transit spaces have little adaptation for persons with disabilities, although UNICEF WASH facilities do in most cases take this into account. An additional challenge for UNICEF and partners is to define a clearer differentiation of disabilities.
- The engagement of adolescents in both migration and COVID-19 response has been already mentioned as an example of good practice in C4D work.

8. Good practices and lessons learned

8.1. Good practices

Although there are doubtless more, some good practices identified include:

National roll-out of the EPT and multi-service *jornadas de inscripción*: UNICEF has worked closely with UNHCR and IOM on the advocacy and technical assistance which put in place the EPT. This has marked a major advance in ensuring the rights of Venezuelan migrants and asylum-seeking children on the move and their families in the longer-term. UNICEF has played a valuable role in supporting *Jornadas de Inscripción* for the EPT which included multi-sectoral services and programming, including medical and dental care, vaccination, and a number of other services not provided by other R4V partners. UNICEF should continue to support the roll out of the EPT through the *jornadas de inscripción* and other strategies to ensure that the maximum number of families and children are identified, registered, and enabled to benefit from access to government programmes, protection, and services. UNICEF can support this registration by advocating to ensure that processes include all family members, so that children are taken into account as their parents are registered, and thus that no child is left behind.

WASH as an entry point for entering into communities impacted by migration: taking a community-based approach and allowing UNICEF to gain insight into other aspects including education, CP, health and other community dynamics. UNICEF can build on this strategy to allow for a deeper engagement on AAP, one that involves UNICEF staff and partners together to implement participatory and consultative processes to ensure feedback that is not tainted by power dynamics between frontline service providers and affected populations.

UNICEF supporting a localisation agenda by selecting and building capacity of local, regional, and national NGOs on emergency, humanitarian responses to migration.

¹¹⁸ The gender analysis had the purpose of establishing - from primary and secondary information - the different protection risks faced by LGBT adolescents and youth affected by migration, given the limited information available.

¹¹⁹ [Adolescent girls and LGBTIQ+ adolescents unaccompanied or separated | UNICEF](#)

Capacity to prevent PSEA has been strengthened among UNICEF partners: UNICEF has supported all its partners through PCAs to build their capacity to prevent and address issues of sexual exploitation and abuse. CO Colombia has also supported PSEA interagency coordination, development of SOPs and strengthening of services.

Working with indigenous organisations in indigenous languages: UNICEF Colombia has learned through its partnerships with indigenous organisations about the importance of creating documentation in local indigenous languages as a basis for learning and developing a clear inter-cultural understanding of UNICEF's policies and procedures, their rationale and how to adapt them to the culture of indigenous communities.

COVID-19 humanitarian cash transfer benefited families at a critical moment when help was needed most: A positive adaptation to the COVID-19 pandemic was UNICEF Colombia's HCT, recognising that refugee/migrant families were particularly vulnerable and did not have access to alternative government support programmes. This was a positive response, although one that could potentially have been better coordinated with similar investments made by other GIFMM partners to avoid overlapping support, to push back on a policy requiring that 30 per cent of beneficiaries should be Colombian since alternative programmes were available, and used to target the most vulnerable, which may not have been the LC households.

8.2. Lessons learned

A key learning from the evaluation has been that the transition from a highly centralised operation to one with a significant field presence is not one without challenges. Areas for improvement are:

- ensuring that the field presence developed by UNICEF is adequately consulted and engaged in the generation of new proposals, identification of partners and development of an advocacy agenda that enriches and feeds into UNICEF's advocacy role at the national level;
- that field teams and IPs who are new to UNICEF and humanitarian work are provided with needed training and support. In particular, that they are training on UNICEF's humanitarian standards, in particular the CCCs, and examples of how these standards might be applied in their context. This is seen to be something very much lacking, leading to the belief among field staff that humanitarian standards do not apply, due to the fact that the GoC and state institutions are taking the lead on the response;
- that field staff and IPs are provided with needed support and backstopping from senior management. This evaluation echoes the recent findings of the 2019 Humanitarian Review in suggesting that senior management in UNICEF Colombia would benefit from also receiving training, support and experience on humanitarian response modalities. UNICEF at global level should give clearer guidance regarding the extent to which humanitarian standards are understood to apply in this context, or whether there is something special and different about the Latin American context that requires a distinct approach on humanitarian standards.

UNICEF and GIFMM partners in general are learning that they need to invest adequately in information management systems that will help to pinpoint the most vulnerable groups and develop strategies to address these vulnerabilities. While many issue areas have been identified and communicated to donors and the public at large, donors are looking to UNICEF for more targeted, specific, and responsive programmes that address the urgent and structural issues that allow tens of thousands of children to fall through the current cracks in programme coverage.

9. Conclusions

We propose here a number of conclusions, grounded in the findings reported above. We will follow the evaluation criteria to facilitate understanding of the rationale and the supporting evidence behind our recommendations.

Appropriateness

UNICEF Colombia has participated in a complex response to the VMC, one which has unfolded in a context of diverse and multiple humanitarian needs and issues, not the least of which has been the effects of the COVID-19 pandemic. During this period, UNICEF Colombia has appropriately adapted to the increasing VMC influx by extending its presence, among other by adding field offices, without which it could not have delivered a humanitarian response to the extent that it did. UNICEF's emergency, sectoral and field teams must be given credit for their enormous efforts under very difficult circumstances – handling two emergencies simultaneously. Most of the field teams are comprised of young professionals hired on short-term UNV contracts, provided with limited resources in terms of office space, vehicles, and equipment. They were on a steep learning curve and have performed admirably under the circumstances. The same can be said for UNICEF's implementing partners who have carried the operation using their knowledge of the field and technical skills.

UNICEF Colombia has been the strongest among the five Cos evaluated regarding preparedness of a migration-type emergency. In 2018, UNICEF Colombia had identified migration as key risk factor and had met 18 out of 25

Minimum Preparedness Standards. In 2021, migration was highlighted again in 2021 EPP.

The evaluation notes limited consultation and participation of affected communities in project design and implementation phases.

UNICEF staff and partners at CO level have noted the lack of an overarching Regional Strategy and Framework for the VMC response and similar responses to Children on the Move. A regional strategy was developed and drafted in 2018 and, to LACRO's credit, work was reinitiated in 2021 after having been delayed by several years.

On gender analysis and use of a gender equality lens: The ET has concluded that UNICEF Colombia is lacking in staff resources to address the breadth and scope of the VMC from a gender perspective. The VMC raises specific challenges for adolescent girls and boys, women and men, and current programming is not sufficiently set up to take gender seriously as a variable impacting the risks nor to effectively mitigate barriers associated with gender identities, although some actions have been taken.¹²⁰ While staff are doing their best, they are stretched to the maximum.

Effectiveness

The ET commends UNICEF's relatively rapid mobilisation of technical capacity in the field, to accompany partners and understand first-hand the way the VMC has impacted host communities. UNICEF has been effective in building local capacity of government and civil society partners to take action on migration, which is a new phenomenon in a country used to seeing itself as generating, rather than receiving, migrants. The COVID-19 public health emergency significantly affected UNICEF's and its IPs' ability to deliver on results in the short term. Across sectors, performance on humanitarian targets prior to the pandemic was generally strong, compared to a sudden drop in capacity with the onset of the pandemic. This was due to the added workload and significant adjustments in programme delivery modalities in order to continue to reach beneficiaries during and despite public health restrictions. UNICEF Colombia was gradually able to adapt. This was possible thanks to the strength of its WASH sector community-based interventions. Additionally, UNICEF was able to simultaneously respond both to the VMC influx and the pandemic by building synergies between these two responses – specifically in the areas of WASH, healthcare, vaccination and CP. UNICEF took courageous steps to keep CP spaces open even during the pandemic, when many partners were shutting down these vital spaces.

On Child Protection: UNICEF Colombia has contributed significantly at the national level to put in place the pre-requisites for Venezuelan refugee and migrant children to enjoy their rights – in particular through the campaign to combat statelessness, measures to ensure birth registration, positive messaging around respect for migrant rights to challenge xenophobic attitudes, and the roll out of the ETP for Venezuelan refugees and migrants. Following joint advocacy between UNICEF, UNHCR and IOM with the GoC the EPT must be recognised as a game changer in terms of the response. UNICEF's support to the EPT in terms of facilitating registration of children and whole families should be sustained. However, efforts at the international (regional) level of the Quito Process to ensure a regional CP protocol appear to have stalled and efforts at the local level to operationalise effective CP monitoring and case management require strengthening.

On Education: UNICEF has not achieved the sector result formulated in its HAC 2019 or 2020 and with current measures in place will not achieve the sector result of full integration into the national education system. Education is waiting. Many children continue to lack practical access to the national education system, and to the main intervention, LCs. This intervention, while having many positive aspects, is not, on its own and with current resourcing, sufficient to provide an effective response given the scale of the VMC. It is focused uniquely on children whose families are settling in Colombia and does not respond to the learning needs of children on the move in transit nor of adolescents above the age of 14.

On Social Protection: UNICEF first rolled out a HCT in the second half of 2020 in response to the extreme vulnerability of migrant families to the confinement and public health measures to control the spread of the pandemic. This was reportedly seen by beneficiaries and UNICEF as a very positive experience, but one that was too limited in scale in relation to the needs. The ET finds this to have been an important and timely response, but one that did not necessarily target those who were the most vulnerable, as those with their children in the LCs are generally considered to be less vulnerable than those newly arrived in the country. Future work on HCTs in Colombia can build effectiveness and efficiencies by working more closely and in coordination with other GIFMM partners also rolling out HCTs. The PDET approach is also promising in terms of its potential for bringing about long-term integration of migrant children and adolescents in priority communities. It would be helpful to carry out an impact evaluation of this programming. In 2022, UNICEF began to offer technical support in designing independent living modalities for older children and inclusion in social protection programmes.

¹²⁰ For example, gender analysis about the situation of LGBT migrant children and adolescents.

On WASH: Like other sectors, it appears that the WASH sector results were significantly impacted by the COVID-19 pandemic, among other factors. Nonetheless, WASH has been the most visible face of UNICEF during the VMC response, and also as it overlapped with the COVID-19 L3 Emergency response.

On health and nutrition: A common strategy to deliver health and nutrition services as one package appears to be both effective and efficient. The mobile clinic concept has enhanced outreach to vulnerable groups from both migrant and host communities. These services could also include CP and GBV prevention and response. The GIFMM- R4V platform has ensured the availability of primary health services to refugees/migrants at key border and transit points. These health services provided in transit and at border points are not covered by UNICEF Colombia. UNICEF's programming is mainly directed to refugees and migrants in rural and urban settlements.

Special concerns regarding adolescents on the move: On case management systems, UNICEF understands its role as being to uphold government SOPs, even where these might not be fully aligned with the best interests of the child on the move. This is particularly the case for adolescents on the move, who may see their own interest very differently than does the host country, leading to a pattern of avoidance of CP and other authorities. UASCs, adolescents with partners and children, for example those used to living on their own or seeking work or other types of opportunities, must be given special consideration.

There is also a tendency among staff, which has evolved within the organisational culture of the UNICEF Colombia operation, that humanitarian standards like the CCCs, are intended for other contexts than Colombia as a middle-income, Latin American country. That such contexts are somehow different and governed by different rules than countries in Africa, Asia or other parts of the world is a mindset which needs to be challenged.

At the very least, this suggests the need in Colombia and other countries in the region for more training on how to apply the CCCs and further clarification about the CCCs being a mandatory policy across the globes.

Coverage

UNICEF was swift to expand its zone of operations to better respond to the influx of Venezuelan migrants and refugees. A key challenge facing the operation – both at the level of the GIFMM and UNICEF Colombia – has been the lack of investment in or analysis of data and evidence as basis for targeting the most vulnerable through programming and coordination. The scale and wide geographic dispersion of the migration phenomenon appears to have overwhelmed the capacities and resources of humanitarian actors and the GoC. Mass migration is a specific phenomenon whose characteristics need to be taken into account to improve future responses: it is dynamic, not localised like floods, earthquakes or other natural hazards. It ebbs and flows according to specific social, economic, and political factors (human generated) rather than those of that natural world. In this sense, it should be something that UNICEF and other actors can better model and plan for. The push and pull factors can be monitored and analysed and likely consequences for human population movements can be modelled. Early warning systems, at local, national, and continental/regional levels, are needed to improved preparedness.

Coherence and coordination

UNICEF has provided leadership and coordination in its core areas of competency, particularly in CP, WASH and education. However, the evaluation findings have documented various levels of incoherence and lack of coordination that should be addressed by UNICEF at CO, Regional and Global level. As highlighted above, the design of an L2 activation and humanitarian response built around one national population movement - the VMC – has led to its own inconsistencies. While this is not specific to CO Colombia, it has created an entire coordination mechanism that is uniquely dedicated to one population group, potentially ignoring the needs of other children on the move. It may, indirectly, also have led to an increase in xenophobic attitudes and resentment where Venezuelans are singled out as a group perceived to be getting some type of preferential treatment by national and international actors

Efficiency

For the most part, UNICEF's interventions have been found to be relatively efficient and designed to avoid duplication. In particular, the combined efforts and partnerships with UNHCR and IOM on key CP campaigns to end statelessness and to ensure rights of migrant children and their families (EPT) have been effective and efficient. The ET has noted only a few areas of duplication of efforts and programming in some areas – health, nutrition and CBI and these are currently being corrected.

Institutional support to local and national government institutions through systems strengthening approaches and *Territorios Amigos de la Niñez* are seen as efficient, but often not on a scale that enable adequate coverage given the scale of needs in both migrant and host communities. UNICEF has also shown agility - to change locations to avoid contributing to overcrowding of response actors in areas where too many NGOs and UN agencies are already present.

The ET has identified areas where gaps in information and coordination should be addressed. In particular more harmonisation of interventions and information sharing between CP actors to increase coordination and coverage is required. UNICEF Colombia has also identified the inefficiencies associated with annual planning processes in what is clearly a protracted migration context.

The ET also considered the question of timeliness of the L2 regional activation in relation to needs. From the reconstructed timeline, the ET concludes that the L2 should normally have been activated in 2018, when it was evident in Colombia and other countries that governments were signalling the need for assistance and the UNICEF at CO level were entering emergency modalities without the necessary support from Regional and HQ levels.

Connectedness

The VMC has clearly put migration front and centre of the national agenda. At the outset of the emergency, as many KIs have noted, Colombia did not see itself as a destination for refugee/migration movements, but rather as a point of departure for those fleeing violence and armed conflict. UNICEF's Colombia response to VMC has been anchored in its longer-term development process in its CPD 2021-2024. This allows humanitarian response to be effectively transitioned into longer-term development planning. UNICEF Colombia has, in an apt and timely manner, seized the opportunity to integrate this shift in paradigm into its new CPD. One of three programme components is on Migration as a Factor of Development, seeking ways to integrate all UNICEF Sectors under a set of thematic and programmatic outcomes. This is a bold and positive move for UNICEF. It is one which will require much closer internal coordination between sector activities and plans in order to ensure that this thematic approach to the CPD benefits from potential synergies and cross-sector learning that can make the programme most effective and efficient.

10. Recommendations

The recommendations have been debated by the Colombia CO staff in a workshop carried out on September 15, 2022, and adapted in order to align them to an eventual management response plan. The result of the workshop is included below:

Recommendation (as retained by the CO)	Action points	Whom	Timeframe
R1 Develop complementary tools and processes for AAP in projects, in addition to the mechanisms currently implemented by IP.	<ul style="list-style-type: none"> Strengthen - with the technical approach of AAP - UNICEF coordination and territorial teams through technical training and transfers of the national protocol. This strengthening will allow UNICEF to improve the information it collects directly, both for programmatic improvements and for the establishment of early warnings, through first respondent teams. 	SBC Officer (focal point in AAP)	12 months
	<ul style="list-style-type: none"> Ensure the systematization of the information collected by UNICEF coordination and territorial teams through the development and implementation of a CO common tool. Territorial teams should be trained to use this tool. 	SBC Officer (focal point in AAP)	6 months
	<ul style="list-style-type: none"> Pilot direct dialogues - from the national and territorial team - with participating communities, through at least two (2) joint missions from the areas of M&E, Gender and Social and Behavioral Change. 	M&E Officer	12 months
R2 UNICEF Colombia must provide technical assistance and advocacy to the Colombian State so that it allocates - effectively and efficiently - the financial resources to guarantee children	<ul style="list-style-type: none"> Advocacy with the Colombian government to ensure that resources are allocated for the implementation of actions aimed at children and adolescents in the Migration CONPES. 	Education specialist	18 months
	<ul style="list-style-type: none"> Technical assistance to the Ministry of National Education for the interoperability of national information systems that make it possible to identify deficiencies in educational quotas at territorial level. 	Education specialist	24 months

Recommendation (as retained by the CO)	Action points	Whom	Timeframe
and adolescents access of education	<ul style="list-style-type: none"> Technical assistance to the Ministry of Education in the definition of instruments for the active search and management of quotas at the territorial level, which considers the ethnic, rural and gender gaps in access to education for girls, boys and adolescents. 	Education specialist	24 months
	<ul style="list-style-type: none"> At the level of Secretaries of Education, start the processes of active search and management of quotas with an inclusive approach of ethnic, gender, disability, and rural conditions. 	Education specialist	18 months
	<ul style="list-style-type: none"> In coordination with the Education in Emergencies Cluster and the local education working groups, implement supply and demand analysis processes for educational places at the community level, in at least two territorial sub-offices. 	Education specialist	12 months
R3 Promote the rights and empowerment of adolescent migrants and host communities, in all programmatic interventions of UNICEF's Cooperation Program in Colombia, with a gender perspective and other differential factors	<ul style="list-style-type: none"> Technical assistance to the National Government and local authorities in the design and implementation of tools to promote adolescent participation skills and favor their empowerment in different environments, including schools and community settings. 	ADAP Officer	12 months
	<ul style="list-style-type: none"> Strengthen protection modalities of children and adolescents of the ICBF, based on the identification and exchange of experiences in the promotion of their progressive autonomy. 	CP Officer (migration)	12 months
	<ul style="list-style-type: none"> Design and implement a tool to mainstream the gender approach in emergency interventions and UNICEF Cooperation Program, with special emphasis on LGBTIQ+ adolescents and the protection of girls and adolescents against early unions (with IP and their staff). 	Gender Officer	12 months
R4 Optimize the processes of information management, situation analysis and needs assessment, as a basis for both the strategic planning of the CO, and for evidence-based advocacy with government and humanitarian actors.	<ul style="list-style-type: none"> Improvement and implementation of processes and tools for: <ul style="list-style-type: none"> ➤ The function of analysis of the situation of children and adolescents and their integration in the strategic planning and monitoring of humanitarian action. ➤ Assessment of the needs of children and adolescents with a differential and territorial approach for strategic planning 	M&E Officer	6 months
	<ul style="list-style-type: none"> Generation of (updated) evidence regarding the violations and bottlenecks that affect the rights of children and adolescents, with an intersectoral approach. 	Emergency coordinator	12 months
	<ul style="list-style-type: none"> Advocacy in humanitarian coordination spaces (led or co-led by UNICEF) to improve the connection between the available evidence around the needs of the population, and the planning of humanitarian action. 	Emergency coordinator	18 months

Recommendation (as retained by the CO)	Action points	Whom	Timeframe
	<ul style="list-style-type: none"> Guarantee that activities and budgets oriented towards information management, assessment of needs and situation analysis are incorporated in HAC planning processes. 	Emergency coordinator	6 months
R5 Update UNICEF's advocacy strategy – and its monitoring scheme – based on the Evaluation's recommendations, taking into account the CCC frameworks; Children on the Move, as well as recent evidence on the multiple impacts on childhood and adolescence.	<ul style="list-style-type: none"> Include actions and expected results in UNICEF's advocacy strategy to improve the articulation between humanitarian and development institutional architectures; as well as integrating it in the National Development Plan, Disaster Risk Management with a focus on children. 	Social Inclusion Specialist	6 months
	<ul style="list-style-type: none"> Provide technical assistance to local governments to ensure the inclusion of migrant children in local policies, plans, programs and actions. 	Social Inclusion Specialist	12 months
	<ul style="list-style-type: none"> Define and implement a knowledge management agenda around effective interventions for the inclusion of migrant children. 	M&E Officer	12 months