

German Red Cross

Global Projects I and II Phase 2 Mid-term Evaluation

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Executive Summary

Overview of the Global Projects

The German Red Cross and the German Federal Foreign Office (FFO) have been cooperating in the framework of two Global Projects (GP) since 2019, which are now currently in their second phase (2023-2025). A key aim of this cooperation is to allow for a more flexible approach towards meeting priority humanitarian needs in case of crises and disasters, implemented through GRC's Sister Red Cross and Red Crescent National Societies. Also central to this aim is strengthening the Sister National Societies'¹ technical and material preparedness and operational capacities to allow for the fulfilment of their respective mandates.

The two Global Projects have complementary aims of supporting operational response and strengthening the humanitarian system. Governed by an overarching theory of change, the two project have the following aims:

- GP1: to contribute to the reduction of negative impacts of sudden onset disasters and crises and protracted crises for the affected populations.
- GP2: to strengthen and further develop international humanitarian aid and the international humanitarian system.

GPI, with its focus on operational response, supported 103 projects in 46 countries during its first phase (2019 to 2022) and, at the time of this evaluation, had supported 40 projects in 32 countries in the second phase. These include Immediate Emergency Aid, Medium-Term Emergency Assistance, and Humanitarian Disaster Preparedness. GPII is thematically focused, seeking to strengthen the RCRC Movement and wider humanitarian system in the key areas of Anticipatory Action, Disaster Risk Reduction and Health. Humanitarian Assistance in urban contexts, climate change, and information management are cross-cutting themes of GPII.

Key Evaluation Questions

Arup was commissioned by the GRC to conduct a mid-term evaluation of the Global Projects with an overall focus on how the GRC, through the Global Projects, has contributed to strengthening locally led action. The purpose of the evaluation is:

- (i) to analyse the contribution of GRC through the Global Projects towards strengthening “locally led action” via the different partnerships and approaches with Host National Societies implemented in the frame of the Global Projects of GRC and GFFO, and
- (ii) to generate learnings from the different approaches implemented with a view of improving the Global Projects' general programming and impact on locally led action

The evaluation was designed to focus on the following areas and sub-areas:

1. Equal partnerships with Host National Societies
 - a. Decision-making on operational and programmatic support
 - b. Readiness and Preparedness for Effective Response (PER), including Cash and Voucher Assistance (CVA)
 - c. Thematic priorities: Disaster Risk Reduction (DRR), Health and Anticipatory Action (AA)
2. Promoting a Reliable GRC
 - a. Surge mechanisms
 - b. Risk Management
3. Movement commitments
 - a. Accountability to affected populations
 - b. Co-ordination and complementarity.

¹ While the term Sister National Society is used in the Terms of Reference, the term Host National Society is used hereafter. This is explained in section 2.1.

Within each of these sections, more detailed questions focus on how GRC's support through the Global Projects have contributed to improving locally led action, empowering Host National Societies and contributing to the RCRC Movement and wider humanitarian system. The focus is on how the GPs have supported HNS and how this contributes to locally led action, rather than on the how the projects have impacted communities.

Methodology

The methodology involved:

1. A review of key GP Phase II documentation.
2. A survey with HNS staff whose countries were supported by the GPs eliciting 37 responses.
3. A survey with GRC HQ staff, eliciting 17 responses.
4. A combination of FGD and KII were used to engage 10 GRC HQ staff, 6 country delegates, and 11 HNS members.
5. Two research trips to GP-supported countries – Türkiye (17 KIIs) and Uganda (15 KIIs).
6. Data analysis, coding and report writing.
7. A validation workshop with 20 GRC staff from HQ and from country offices.
8. Report finalisation.

The evaluation took place between the 5th June 2024 and the 15th November 2024.

Findings

The findings are summarised, according to each of the areas and sub-areas in the research questions. These are presented as successes and challenges within each section reflecting how the Global Projects are contributing to locally led action, but also the challenges that remain. Hyperlinks are provided to the text in bold, linking to the relevant success or challenge in the main document.

1. Equal partnerships with Sister National Societies

1a) Decision-making on operational and programmatic support

The GPs have had a significant contribution towards supporting locally-led action in terms of how they have facilitated locally-led decision making. HNS regularly reported that GRC took a **collaborative approach in decision-making**, while allowing the HNS to take the lead, thus supporting the HNS to focus on their strategic priorities. At the same time, the design of the GPs supported this as the **flexibility of the funding** allowed the GRC to adjust its focus according to HNS priorities. GRC has, to an extent, been able to provide more predictable funding with multi-year projects, which also contributes to supporting **financial autonomy** and local decision making. In addition to the financial support, GRC has supported **capacity building** and the provision of necessary **core positions** within HNS. Such improved capacity again contributes to locally-led action.

While there are clear successes, challenges remain. There have been **reductions in funding commitments** from the FFO which has meant it is more challenging for the GRC to provide clarity to HNS regarding future funding. Similarly, there have been **delays in commitment of funds** from FFO to GRC, which in turn creates delays in funding HNS. Such delays do not build trust with communities and government, thus compromising the effectiveness of HNS. FFO regulations regarding **time-bound funding** which cannot be transferred across financial years mean HNS cannot easily adjust when unexpected challenges arise, while **limitations on flexibility within funded projects** also create challenges in adjusting to changes in context. While these are challenges related to FFO grant conditions, **administrative processes within the GRC** have also been raised as creating delays at times. The challenges feed into the recommendations that have been developed.

1b) Readiness and Preparedness for Effective Response (PER), including Cash and Voucher Assistance (CVA) preparedness

As with decision-making, **capacity building** for HNS in areas of readiness, PER and CVA was seen as contributing to their preparedness, while support to develop **operational and logistics capacity** was also recognised. All of these contribute to HNS' ability to lead local action. In addition to training and knowledge transfer, capacity building included support in **using tools and frameworks** that were either developed by GRC or other Movement partners. While many offices recognised this improvement in readiness at the national level, there was also recognition that **readiness support extended to branch and community levels**. A further success was seen in how GP-supported projects **enhanced government relations**, contributing to changing the perception of government and other in-country partners regarding an HNS. While not attributable solely to the GPs, these changes in perception allow HNS to position themselves better for future action.

In many ways the challenges seen in the area of readiness reflect that the successes are not universal across all HNS, and hence there is need for greater consistency. At times there have been concerns regarding **insufficient institutional capacity**, and that training and technical support will have a lesser impact if there are insufficient core roles to lead an initiative. Similarly, while some offices noted the success in building capacity at branch level, others highlighted that there are times when GP support is too much **focused at HNS HQ level** and not enough at branches. Equally while the approaches and tools are recognised as a success, there are occasions where HNS have had concerns regarding the **complexity of the tools**. All of these are reflections of varied capacity across the Movement. A more structural challenge, however, is that GP-supported work is project based, hence there are concerns regarding **institutional memory** when a project finishes. Building institutional memory, and having **consistent lessons learning** processes to support this, will position HNS better for future action.

1c) Thematic priorities: Disaster Risk Reduction (DRR), Health and Anticipatory Action (AA)

GRC is recognised as having often been the lead proponent of AA within the Movement, and has been credited with **introducing and institutionalising AA** within HNS. In some cases this dates back to before the GPs began, but GP support enabled GRC support to continue. While not as well established as AA, the GPs were also recognised as **incorporating new ideas in Health** programming. As with the previous two sections, **strengthening capacity** has been a key success, whether through training, technical support or ongoing coaching, while the **development of toolkits** has also been a benefit, particularly in the area of DRR. In addition to supporting the capacity of HNS to lead local action, GP work in these themes has **contributed to the wider humanitarian agenda** in-country, with HNS reporting leadership in technical working groups and enhanced engagement with government and other partners. At the same time, this has extended to **community levels**, with processes engaging local government and communities. Specific examples were also evident of how **GPI and GPII were mutually supportive** in these themes.

As with the Readiness section, challenges often reflect the varying experience across the Movement, with an aspect being seen as positive in some HNS, but a challenge in others. While new concepts and capacity building support are recognised, at times there have been challenges that **greater hardware support** is requested by communities, and HNS would like to be able to respond more to this. Similarly, ensuring HNS have **access to the right technical expertise** has, at times, been a concern. New ideas appreciated, but there have been challenges with the **absorption of new concepts** within existing programmes, and **operationalising innovations** has not always had as much community involvement as would be optimal. As the GPs continue, they should be able to address many of these challenges, ensuring consistency of experience across the Movement.

2. Promoting a Reliable GRC

2a) Surge mechanisms

The GPs have contributed to the provision of a **dedicated Surge Unit**, which in turn has enabled support to HNS, including the **provision of immediate response personnel and material resources**.

As with the findings in equal partnerships, there has been significant **capacity building** which enhances HNS' readiness for response, and there has been a particular success in the support to the **regionalisation of the Americas surge capacity** in the area of WASH. Given the nature of how the Movement responds to emergencies, the Surge Unit has also been able to contribute to **developing global surge tools** and mechanisms, **policy-level action** regarding local-led action, and improving **collaboration within the Movement**. All these create the framework for HNS to take greater leadership in emergency response situations.

While there are examples of good **Movement co-ordination**, there are also examples of where this could be improved, with the Surge Unit recognising that there are new protocols being developed that may need to be further. Internal challenges within the GRC relate to **logistics capacity** which can restrict the speed of response, while better **information management** could aid the Surge Unit in better communicating its work both within the GRC and the wider Movement. An external challenge remains that of **access in fragile and security-affected areas**, though this is often beyond the control of the GRC and, at times, the HNS.

2b) Risk Management

Risk management discussion focused on organisational risk rather than disaster risks. Areas of success and challenge often linked to other elements that were highlighted during the evaluation. **Systems to mitigate risk**, such as robust financial and procurement systems, assist HNS in managing financial risk, and also contribute to capacity building where they are more rigorous than a HNS' normal procedures. The development of standard operating procedures, manuals and policies enhance **organisational readiness**, which in turn enables HNS to manage risk. **Strong collaboration and trust** between GRC and HNS have enabled them to manage risks together, while **community engagement and accountability** systems facilitate input from communities, enabling HNS to manage risks that may emerge from community levels.

With risk management systems there needs to be a balance between a rigour and efficiency, and there are times when the **complexity has led to delays**, which is an area for improvement. Other areas of challenge in risk management relate to ensuring non-programmatic concerns are addressed, such as a **security framework for volunteers**; and ensuring sufficient **organisational capacity in key roles**, including in **logistics and fleet management**.

3. Movement commitments

3a) Accountability to affected populations

Effective accountability to affected populations has enabled HNS to be more responsive to community needs, thus facilitating locally led action. Successes have seen the **utilisation of CEA mechanisms and the introduction of new CEA approaches**, enabling HNS to understand community views, while **communities have been involved in both design and implementation**, contributing to **greater trust-building**. GRC has supported the roll-out of CEA systems in HNS by **investing in MEAL capacity**, both within HNS, and within the GRC to provide support. The **flexibility of the GP funding** also contributes to this accountability, allowing HNS to design programmes according to community priorities. In addition, the investment in MEAL capacity has also enabled issues of **inclusion** to be integrated with CEA support.

As with other sections, the challenges reflect the mixed experience across the Movement. While CEA systems have been introduced in many HNS, there are concerns regarding the **relevance of standard CEA approaches**, and the **utilisation of CEA systems**. Similarly, while **community involvement in design** is often a positive, there are times when HNS view this as being insufficient. Equally, flexible funding is seen as a contributor to accountability but, at times, the **limits to this flexibility** mean HNS feel they cannot be responsive to communities. All of these point to the challenge of ensuring a consistent experience throughout the Movement, which in turn is challenging given the varied capacity. A final challenge in accountability relates to **cultural sensitivities** which limit HNS opportunities to work on gender and diversity.

3b) Co-ordination and complementarity

Successes in co-ordination and complementarity often link to successes in other areas. The **flexibility of GP funding** has allowed GRC to co-ordinate with other PNS and to “plug the gaps” in funding, thus supporting HNS to provide a more comprehensive response in emergencies. Equally, **the flexibility to not respond** helps to minimise duplication. **GRC delegates**, often funded by the GPs, assist in this co-ordination, particularly when there is a large response. Co-ordination across the Movement is a larger issue than the GPs, but GP support **enables GRC and HNS to participate** in co-ordination events, which positions the HNS to take a greater leadership role.

Challenges equally link to other elements of the evaluation. **Complexity of relationships** within the Movement, particularly with ICRC, create challenges in unified support, and there have been instances reported of **duplication between Movement members**. **Regular co-ordination for the benefit of the HNS** is somewhat inconsistent, while there is currently not a **unified indicators framework** across the Movement, creating additional reporting requirements for HNS. These do not support efficient local leadership on the part of the HNS.

Recommendations

A total of 26 recommendations are made. These largely follow the patterns of addressing the challenges that have been documented. Challenges and recommendations were discussed during the validation workshop with key GRC staff, which led to the identification of 7 as key recommendations for which practical action can be taken in the remainder of the current phase of the GPs. These are marked with an asterisk (*). Other recommendations are relevant, but may be less of a priority at present, or may be ones for which practical action in this phase is challenging.

Recommendations are listed below according to each of the 7 areas of evaluation. Brief explanations are provided, with greater detail in the full report. Hyperlinks are provided to the relevant recommendation in the main report

1. Equal partnerships with Sister National Societies

1a) Decision-making on operational and programmatic support

- 1a.R1. Review procedures for funding commitments – to avoid situations of delays in commitments which affect the ability of HNS to manage effectively.
- 1a.R2. Review the potential for funding across financial years – to enable HNS to respond to delays. Recognising this is likely to be a challenge in the current phase due to FFO grant conditions, work with HNS to build in buffer times to accommodate delays.
- 1a.R3. Build understanding of change process during implementation – to ensure HNS are able to be responsive to changes in context, using the flexibility allowed within the grant conditions.
- 1a.R4. Review administrative procedures, including CBA levels – to improve efficiency in operations.

It is recognised that, particularly for the first three of the above, these are limited by the grant conditions of the FFO. This does not mean they are not relevant, as addressing these will support the HNS in better leading local action. However, it does mean that they are not practical to address in the remaining period of the GPs.

1b) Readiness and Preparedness for Effective Response (PER), including Cash and Voucher Assistance (CVA) preparedness

- 1b.R1. Consider the balance and focus of funding for capacity development* – recognising that at times capacity development might be better served by funding key positions, or focusing on the branch level.
- 1b.R2. Make specific plans for how GP projects can contribute to external relations – recognising that external relations is not just a by-product, but can be planned for, to maximise impact.

- 1b.R3. Plan for institutional memory* – to ensure that learning from projects is not lost, and that HNS are positioned to replicate actions in future emergencies.
- 1b.R4. Consider the complexity of tools and processes – to ensure complexity matches the need.
- 1b.R5. Ensure more systematic lessons learning within GP projects* – to ensure that lessons are documented, shared, and contribute to learning within and across HNS and the Movement.

1c) Thematic priorities: Disaster Risk Reduction (DRR), Health and Anticipatory Action (AA)

- 1c.R1. Consider the contribution to the humanitarian agenda in-country – as with 1b.R2, make deliberate plans for how actions can contribute to the humanitarian agenda.
- 1c.R2. Continue to focus on community involvement* – building on the successes thus far, but ensuring greater consistency throughout the Movement.
- 1c.R3. Consider the balance of hardware and software support – to ensure an appropriate balance given community needs.
- 1c.R4. Review how to address absorption capacity concerns – to ensure that new concepts and ideas can be effectively introduced to HNS and programmes.

2. Promoting a Reliable GRC

2a) Surge mechanisms

- 2a.R1. Enhance co-ordination and simplify reporting within the Movement – to ensure that surge support is provided efficiently and in a complementary manner. GRC have limited influence on this, but can continue to work with other Movement partners as protocols are refined.
- 2a.R2. Further invest in logistics capacity – to ensure logistics is not a bottleneck.
- 2a.R3. Consider how to build further capacity of HNS across regions – building on the success of the WASH Hub in Central America.
- 2a.R4. Consider IM and AI tools for improving communications – as a means to providing accessible summaries and case studies of surge support.

2b) Risk Management

- 2b.R1. Minimise complexity, or support HNS to accommodate it – to reduce bureaucracy, and to balance rigour with efficiency.
- 2b.R2. Consider a focus on specific areas such as logistics, security risk management, and fleet management – as these have been raised as issues of particular concern.
- 2b.R3. Ensure responsiveness to HNS needs beyond programming* – recognising that there are HNS needs at the organisational rather than programmatic level.

3. Movement commitments

3a) Accountability to affected populations

- 3a.R1. Consider a broad range of CEA systems* – recognising that existing CEA systems are not always well used, or may not be sufficient for the context.
- 3a.R2. Build understanding of change processes during implementation – this replicates 1a.R3, recognising the impact it has on accountability to communities.
- 3a.R3. Consider developing additional gender and diversity guidelines for restricted contexts – to provide guidance on how to approach diversity in restricted contexts.

3b) Co-ordination and complementarity

- 3b.R1. Clarify protocols with ICRC – to address co-ordination challenges, given the new nature of this relationship.
- 3b.R2. Improve regular co-ordination across PNS* – to contribute to improved complementarity in how PNS work together for the benefit of the HNS.
- 3b.R3: Review alignment with global indicator frameworks – to minimise additional work created by the HNS having to respond to multiple different PNS frameworks.