



ICRC

# Evaluation Final Report: EcoSec Analysis & Evidence Strategy **2019–2022**



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Page 9, an ICRC staff member discusses with local residents as part of a survey aimed at assessing the needs of remote villages' residents in the fields of water, health, education, livelihood and weapon contamination, Sweida Governorate, northern area, Syria, photographer; Afaf Mirzo.

Page 10, ICRC and Syrian Arab Red Crescent staff members prepare parcels for distribution to the population, Latakia, Syria, photographer; Ammar Saboh.

Page 12, an employee of the Ukrainian Red Cross Society is asking a resident to sign a survey, Donetsk region, Nikishyno, Ukraine, photographer; Yuri Orlov.

Page 13, an ICRC staff member discusses with inhabitants from the area about the fighting, Sana'a, Sawan district, Yemen, photographer; Thomas Glass.

Page 18, survey to assess economic security, Ngozi province, Burundi, photographer; Thierry Gassmann.

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# Executive Summary

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This document is the evaluation report for the evaluation of the Economic Security (EcoSec) Analysis & Evidence (A&E) Strategy 2019–2022 (“the Strategy”) for the International Committee of the Red Cross (ICRC). The evaluation was carried out from August 2022 to January 2023 by Owl RE, research and evaluation consultancy.

In 2018, the A&E team was created as part of the EcoSec unit at the ICRC headquarters (HQ). That same year, the A&E team created the Strategy for the period 2019–2022. The mission of the A&E team, as defined in the Strategy, was to provide economic security and vulnerability analysis that guides and influences ICRC programmes and policy, while establishing EcoSec and ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector.

The Strategy consequently guided the creation and roll-out of an A&E structure, staffing and activities across the ICRC. As of late 2022, more than 60 staff are dedicated to A&E roles globally. In 2022, the A&E team received a mandate to expand the A&E from EcoSec to serve all services and activities of the department of Protection and Essential Services (P&ES).

The evaluation used a mixed-methods approach including a document review, an online survey of 208 EcoSec staff, key informant interviews with 36 ICRC staff, a comparative benchmarking of strategies of four comparable organisations and a self-assessment of A&E Strategy action plans.

## Findings

### ***Was the Strategy relevant and what are the key factors that will ensure its continued relevance or might undermine future relevance?***

The Strategy was relevant, ambitious and visionary. It has complemented EcoSec approaches and ICRC institutional strategies at different levels and provided a strong foundation for moving towards evidence-based programming. The relevance of the Strategy at the delegation-level was tempered by different factors including available A&E staff, the focus of EcoSec activities, complementarity (or not) with other similar tasks, and its visibility, use and support/interest from delegations. There was a concern that moving towards a Transversal A&E could slow down A&E implementation within EcoSec.

### ***What were the results of the Strategy?***

The mission and focus areas of the Strategy were primarily seen as having been achieved. The main achievement of the Strategy was introducing A&E more systematically and in a harmonised manner within EcoSec, supported by dedicated staff and teams. Areas of less achievement were concerning ICRC as an analytical partner and the inconsistency of A&E implementation across ICRC delegations. The perceived level of achievement also varied based on the role of the staff. The post distribution monitoring tool and the EcoSec Cookbook were the most used tools by delegations; 95% of all EcoSec Planning for Results indicators were now Cookbook indicators, indicating the use of more common and harmonised

indicators across operations. The Strategy was implemented efficiently, and it is anticipated that the resulting A&E activities will continue.

***What factors have affected implementation and results of the Strategy?***

The significant growth in A&E staff supported the implementation of the Strategy but was hindered by the inconsistency in investment by the ICRC to deploy A&E staff across all regions and contexts. The A&E leadership and regional specialist, the tools and guidance were all seen as enabling factors for the Strategy. Also were the commitments of the ICRC to evidence-based programming and transversality, even if ICRC departments/metiers remained siloed in many respects. Efforts had been made to make the Strategy visible to EcoSec coordinators and staff. The varied use of the A&E work and an underdeveloped institutional A&E culture were hindering factors.

***What elements of the Strategy will remain relevant in the face of institutional developments, such as the Transversal A&E scoping phase?***

The Strategy was seen as remaining relevant in the face of institutional developments. EcoSec staff emphasised the need to focus on the use of A&E work in moving to the next phase of the Strategy. The experience of implementing the Strategy provided insights for the transition towards the Transversal A&E, including; developing complementarities between departments/metiers and their frameworks, products and technical capacities, incentivizing use of A&E work, introducing an incremental roll-out, supporting champions of good A&E practice, securing resources and focusing on achievable A&E results for all P&ES departments/metiers.

## **Conclusions and Recommendations**

This evaluation found that the Strategy was ambitious and ultimately proved to be a fundamental step and solid basis for launching A&E within EcoSec globally. Key to its success was securing a core HQ and regional team, dedicated field A&E staff and the development of practical tools and guidance that were widely used. The success of the Strategy was a key contribution to the A&E team being able to propose a broader transversal role for A&E within P&ES. Ultimately, all field programming and activities could benefit from transversal A&E.

The Strategy was hampered in its implementation by factors that were largely outside of its control. Firstly, there was an absence of systematic institutional investment in A&E, which has led to inconsistent resourcing across contexts. Delegations seem to have budgeted for A&E according to the interest of the EcoSec coordinators rather than as part of a structured institutional push. Given this situation, the A&E team have done well in securing the A&E resource to date. Secondly, the development of the A&E function has not yet been accompanied by an institutional transformation of cultural change to foster evidence-based decision making and adapt processes and incentives to enable A&E (and other evidence-based processes) to influence ICRC strategies and interventions.

As the A&E moves to a transversal role, there is still an impression that there is work to be done to consolidate A&E for EcoSec; this evaluation believes a focus is still needed on completing implementation of A&E within EcoSec across delegations. A&E does not yet have the position and role it should have for EcoSec in all delegations. Further, where it is present, there is a perception that A&E focuses too much on the monitoring aspects that does not reflect the full scope of A&E as laid out in the Strategy.

The following conclusions and recommendations are both focused on A&E within EcoSec and the Transversal A&E.

**Conclusions and recommendations for Transversal A&E:** The new Transversal A&E Strategy is already quite advanced in its development, with a final draft in circulation in December 2022. Therefore, these recommendations focus on key points that this evaluation believes need to be emphasised in the new Transversal A&E Strategy, either in the document itself, its implementation or support needed.

**A. Institutional Investment for Transversal A&E:** The experience of the implementation of the A&E Strategy illustrates that its implementation was hampered by the lack of a structured and systematic investment in the A&E role at the delegation level. For the Transversal A&E Strategy, the lack of an institutional investment plan is a risk that will hamper its implementation; a key learning from this evaluation that should be taken into account.

**Recommendation A:** It is suggested that P&ES management should develop an institutional investment plan to accompany the Transversal A&E Strategy, setting out where resources will be dedicated to A&E at the field, regional and HQ levels, ideally with a projected timing.

**B. Cultural change to foster evidence-based decision making:** Within the ICRC, there has been an incremental shift to foster evidence-based decision making given the various policies and initiatives in place, including A&E. However, this evaluation saw that a threat to the implementation of A&E and other evidence-based processes is the lack of a supportive institutional culture for conducting and enabling associated activities. This is further compounded by the absence of incentives on the consistent use of evidence for decision making. Furthermore, as the A&E strategy and its deliverables was mostly provided within EcoSec, better communication of findings and uses of evidence generated through A&E activities needs to be shared and utilised for operational planning where available.

**Recommendation B:** ICRC management responsible for evidence-based processes should place a higher priority on fostering a more supportive institutional culture for A&E and similar activities. A series of measures should be developed to create incentives to encourage the use of evidence for decision making such as including this within delegation management and coordination job descriptions and performance frameworks. This should integrate a discussion with the outcome-based approach (OBA) initiative. A culture of reflection and learning on a programmatic level can be fostered, which the evidence can provide for.

**C. Champions for the Transversal A&E:** The draft Transversal A&E Strategy refers to the buy-in and sponsorship needed for Transversal A&E, supported by a communication and change management plan. What this evaluation believes is also needed is a more targeted approach to nurture and support staff within delegations that will be key to the successful implementation of the Transversal A&E; this includes the Heads of Programmes (equivalent to Deputy Heads of Delegations) who will likely manage the transversal A&E positions in the delegations and the P&ES delegation-level coordinators (i.e. health coordinator, protection coordinator, WATHAB coordinator, etc.), whose cooperation and buy-in will be important for the successful implementation.

**Recommendation C:** It is suggested that the A&E unit develop a set of complementary actions in the delivery phase to nurture and support Heads of Programmes and P&ES coordinators, such as targeted briefings; identification of locations and programmes for which A&E will be piloted; timetable the specific actions/focus areas for A&E support; and define when and how A&E support will be provided by regional A&E specialists.

**D: Prioritising actions of Transversal A&E:** Within the draft Transversal A&E Strategy, there are over 50 actions within the action plans. The experience of implementing the Strategy showed that certain actions were key to encouraging the uptake of A&E amongst EcoSec, for example the production of guidance and tools, such as the indicators Cookbook and the post-distribution monitoring (PDM) tool. This evaluation would encourage that certain actions be prioritised, particularly with the view to roll-out actions that can provide rapid support to delegations and gain their confidence.

**Recommendation D:** It is suggested that the A&E unit prioritise the actions of the Transversal A&E Strategy, setting this out in a timetable, and giving priority to those actions that will provide practical support and guidance to delegations, such as tools and guidelines (i.e., indicators cookbook for P&ES).

**E. Similar functions within delegations:** Within delegations there was a concern that the planned A&E transversal roles will face challenges in complementarity with other similar roles as described in the evaluation findings. The draft Transversal A&E Strategy does mention it will be guided by a detailed collaboration framework that defines synergies and boundaries between the different roles of A&E and “Accountability to Affected Populations (AAP)”. However, this evaluation believes this could be complemented by a “bottom-up” approach to understand how these similar functions are already working together at the field level.

**Recommendation E:** The A&E unit in collaboration with AAP and other similar functions, should consider further how they will work together at the field level, using the existing examples, such as Yemen, for good practice examples for the Transversal A&E roll-out.

**F. Measurable strategy:** A limitation identified of the implementation of the A&E Strategy was that it was not accompanied by a formal measurement plan that tracked its associated activity rollout. Although annual implementation plans were produced, they did not track the progress towards achieving the actions of the action plans. The draft Transversal A&E Strategy also sets out priorities with actions that would lend itself to a simple measurement plan.

**Recommendation F:** It is suggested that the A&E unit adopt two simple measurement actions to accompany the Transversal A&E Strategy:

- a. Create a tool to measure progress annually to achieving the actions of the action plans. The tool used for this evaluation to measure actions could serve as a template (see annex 1).
- b. Create a measurement table to accompany the four strategic priorities and action points.

## Conclusions and recommendations for A&E within EcoSec:

**G. A&E EcoSec role in delegations:** Based on the feedback received by this evaluation, the role of A&E staff within EcoSec is currently mainly centred on monitoring, particularly PDM. The vision and focuses of the Strategy was far wider than monitoring and efforts may be needed to ensure that A&E staff within EcoSec are fulfilling this broader role, but also that coordinators are fully aware of the scope of delivery and enable more robust A&E deliverables.



**Recommendation G:** It is suggested that on the basis of the results of the existing self-assessment tool, the A&E unit identify actions to encourage A&E staff within EcoSec to adopt the broader role for A&E as envisaged in the Strategy.

**H. Consistent A&E for EcoSec:** The evaluation found that the adoption and use of A&E by EcoSec was too reliant on the individual preferences of the EcoSec coordinators. This meant that the A&E function and activities were not yet fulfilling their potential role for EcoSec in all relevant delegations, compounded by the lack of consistent institutional investment. Before a move to a transversal approach, this evaluation believes more needs to be done by EcoSec management to support and include A&E comprehensively across all of its operations and timely through its annual planning process.

**Recommendation H:** It is suggested that EcoSec HQ management should develop a series of actions to support EcoSec coordinators (and deputies) in the inclusion of A&E roles, adoption and use of A&E across all (relevant) operations.

# Acronyms and abbreviations

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|                 |  |
|-----------------|--|
| <b>A&amp;E</b>  | Analysis & Evidence                                    |
| <b>AAP</b>      | Accountability to affected populations                 |
| <b>DAC</b>      | Development Assistance Committee (of OECD)             |
| <b>EcoSec</b>   | Economic Security                                      |
| <b>GIS</b>      | Geographical Information Systems                       |
| <b>HQ</b>       | Headquarters   |
| <b>ICRC</b>     | International Committee of the Red Cross               |
| <b>IOM</b>      | International Organization for Migration               |
| <b>KII</b>      | Key Informant Interviews                               |
| <b>LEAP</b>     | Learning, Evaluation, Accountability and Planning      |
| <b>MEAL</b>     | Monitoring, Evaluation, Accountability and Learning    |
| <b>OBA</b>      | Outcome-Based Approach                                 |
| <b>OECD</b>     | Organisation for Economic Co-operation and Development |
| <b>P&amp;ES</b> | Protection & Essential Services                        |
| <b>PDM</b>      | Post distribution monitoring                           |
| <b>PfR</b>      | Planning for Results                                   |
| <b>QA</b>       | Quality Assurance                                      |
| <b>RRN</b>      | Regional Resource Network                              |
| <b>ToR</b>      | Terms of Reference                                     |
| <b>TPM</b>      | Third Party Monitoring                                 |
| <b>UNHCR</b>    | United Nations High Commission for Refugees            |
| <b>WVI</b>      | World Vision International                             |

# 1. Introduction

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This document is the evaluation report for the evaluation of the Economic Security (EcoSec) Analysis & Evidence (A&E) Strategy 2019–2022 ("the Strategy") for the International Committee of the Red Cross (ICRC). The evaluation was carried out from August 2022 to January 2023 by Owl RE, research and evaluation consultancy. The team was comprised of team leader, Dr Glenn O'Neil and three evaluation consultants, Lois Austin, Patricia Goldschmid and Obando Ekesa.



## 2. Purpose, objectives, and scope of evaluation

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### 2.1. Objective

The objective of the evaluation was to assess the stated mission and aims of the Strategy and the mechanisms developed to implement it, to identify what has or has not been achieved, understanding the challenges, or enabling factors and making tailored recommendations. It aimed to help inform the preparation of a future Transversal A&E Strategy and shape the new A&E transversal unit.

The evaluation contributed to accountability and learning as follows:

- **Accountability:** the evaluation assessed and reported on the quality and results of the Strategy and its associated activities, strategic orientations, action plan and implementation structure. It is planned that a response to the evaluation recommendations will be prepared by the A&E team and the actions taken in response will be tracked over time.
- **Learning:** the evaluation assessed the quality of the Strategy given the context in which it was developed, determined the reasons why changes have or have not occurred. It provided evidenced-based findings to assist in decision-making around the formulation of the future Transversal A&E Strategy.



## 2.2. Evaluation purpose

The purpose of the evaluation was to provide a clear and objective analysis of the relevance of the Strategy, the effectiveness of its implementation, the efficiency of the delivery, the sustainability of its benefits and the extent to which the Strategy was compatible with other related strategies and frameworks (coherence). The evaluation provides conclusions and recommendations based on the findings. Main users of the results of the evaluation will be the Transversal A&E Function and Protection & Essential Services (P&ES). It will also provide findings of interest to the EcoSec unit for adapting and improving its A&E services.

## 2.3. Evaluation questions, criteria and scope

The evaluation questions were delineated into sub-questions and matched to indicators, sources and tools as found in the evaluation matrix (annex 3):

1. Was the Strategy relevant and what are the key factors that will ensure its continued relevance or might undermine future relevance?
2. What were the results of the Strategy?
3. What factors have affected implementation and results of the Strategy?

The evaluation was guided by the following criteria based on the Organisation for Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) evaluation criteria<sup>1</sup>:

- **Relevance:** The extent to which the Strategy responded, or is expected to respond, to stakeholder's needs, policies, and priorities
- **Effectiveness:** The extent to which the Strategy achieved, or is expected to achieve, its objectives and its results
- **Efficiency:** The extent to which the Strategy delivered, or is likely to deliver, results in an economic and timely way
- **Sustainability:** The extent to which the net benefits of the Strategy are likely to continue
- **Coherence:** The extent to which the Strategy is compatible in relation to other related strategies, plans or frameworks.

These criteria have been cross-referenced to the evaluation sub-questions as described in annex 4.

## 2.4. Scope of the evaluation

The evaluation primarily focused on addressing the quality of all elements of the Strategy (mission and corresponding operational context and background, A&E activities, strategic orientations and action plan and implementation structure) and its related implementation mechanisms, including guidance, tools, processes, and capacity strengthening initiatives. The evaluation covered the period of implementation of the Strategy from 2019–2022 (recognizing that the evaluation was conducted before the end of the Strategy period, i.e., December 2022).

<sup>1</sup> Organisation for Economic Co-operation and Development—Development Assistance Committee; 'DAC Criteria for Evaluating Development Assistance': <http://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>



### 3. About the A&E Strategy

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In 2018, the A&E team was created as part of the EcoSec unit at the ICRC headquarters (HQ). That same year, the A&E team created the Strategy for the period 2019–2022 in collaboration with team members and in consultation with a range of internal and external stakeholders.

The Strategy was implemented during a period that was marked by the fall-out from the COVID-19 pandemic and the increasing awareness of the impact of climate change. ICRC resources were mainly committed to Afghanistan, Iraq, Nigeria, Somalia, the Syrian Arab Republic and Yemen, together with a renewed focus on Ukraine with the outbreak of hostilities in early 2022. As of July 2022, a new directorate with six new directors was appointed and a new organizational structure introduced. The A&E team moved from being within the EcoSec unit to being integrated as the A&E unit within the newly created P&ES. The demand for analysis and evidence by ICRC field operations only continued to increase over the period of Strategy implementation.<sup>2</sup>

The Strategy's mission was to provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector. More specifically, the Strategy set out four main focuses:

- Identifying who is most vulnerable and exposing the underlying causes of their vulnerability
- Determining the most appropriate type and scale of intervention
- Making the results of economic security and vulnerability analysis readily available to all those in a position to apply or use them
- Developing partnerships and training ICRC staff and local partners to collect, analyze and communicate economic-security information.



<sup>2</sup> ICRC (2022), ICRC Annual Report 2021; ICRC (2021), Operations-wide Analysis & Evidence—A proposed model for delegations (internal document).



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The Strategy offered eight different types of activities in an “A&E menu” together with corresponding strategic orientations and corresponding action plan and a proposed implementation structure:

- **A&E activities (labelled “services” in the Strategy):** needs assessments; situation monitoring and early warning; monitoring and evaluation; thematic analyses; data collection; data and beneficiary management; data visualization, reporting and information management; spatial analysis and remote sensing.
- **Strategic orientations and action plan:** simplification and harmonization of tools and activities; capacity strengthening and staffing; targeting; evidence-based programmes; agility and innovation; data sharing, information management, communication, and branding; partnerships and internal collaboration.
- **An implementation structure:** proposed human resources set-up for the Strategy 2019–2022.

The Strategy guided the creation of an A&E structure and staffing roles within the ICRC, comprised of central support (from HQ and the Belgrade Shared Services Centre), A&E regional specialists and A&E field staff within delegations, a mixture of resident and mobile staff. There are currently over 60 staff globally in an A&E role.

In 2021, the A&E team received a mandate to expand the A&E from EcoSec to serve all activities of the department of P&ES. A scoping and planning phase was carried out in 2022 by the A&E team with a resulting Transversal A&E Strategy, 2023–2027 available in draft form for consultation in late 2022.

## 4. Evaluation approach, methodology and ethical considerations

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**Methodological approach:** A mixed-methods approach was used for the evaluation of the A&E strategy to ensure that a full range of data and information was collected to respond to the evaluation questions. This approach combined qualitative and quantitative methods and analysis to respond to the evaluation questions. The Owl RE team worked in a participatory manner and involved the A&E team in each step of the evaluation process, where feasible. The evaluation was conducted remotely. A quality assurance (QA) role was included within the team to complement the role of ICRC's own QA process.

**Sampling strategy:** The sampling for all data collection was non-random purposeful sampling. The sampling aimed to include representatives of all of the target groups being addressed.

### 4.1. Data collection and analysis methods

- **Document review:** A review was carried out of all relevant documentation including the A&E publications, tools, guidelines, reports and other resources, global, regional, and delegation-level strategies, frameworks, action plans and reports. Documentation and interview notes/recordings were reviewed from two previous research consultancies (change management and transversal A&E). The list of key documents reviewed is found at annex 7.
- **Online survey:** An online survey (in English, French and Spanish) was carried out of all EcoSec (some 600 staff) with 208 responses received<sup>3</sup>, a 35% response rate, much higher than the anticipated response rate of 20% (a target set based on previous surveys with EcoSec staff). The survey questions are found at annex 6.
- **Key informant interviews (KII):** Interviews were conducted with 36 ICRC staff, comprising 20 field and 16 HQ staff. This included 11 A&E staff, 17 EcoSec staff, six delegation management<sup>4</sup> and two other HQ units/roles. The interview guides are found at annex 6. The list of persons interviewed is found at annex 8.
- **Comparative benchmarking of strategies:** A benchmarking study was made of A&E (or similar) strategies from other comparable organisations. This study of strategies complemented the existing study done by the Accountability to Affected Populations (AAP) unit in 2021.<sup>5</sup> The strategies included were from CARE International, International Organization for Migration (IOM), United Nations High Commissioner for Refugees (UNHCR) and World Vision International. A summary of the comparative study is found at annex 2.

<sup>3</sup> 153 responses in English, 49 in French and 6 in Spanish.

<sup>4</sup> Delegation management was considered by this evaluation to be: Heads and deputy heads of delegations; heads of sub-delegations; heads of regional affairs.

<sup>5</sup> The Operations partnership (2021), *Review of humanitarian MEAL practices—Sector benchmarking* (internal document).



- **Self-assessment of A&E Strategy action plans:** A self-assessment of the progress towards achieving the points set out in the Strategy action plans was completed by the A&E team. The assessment table is found at annex 1.

**Data compilation and analysis:** For the qualitative data analysis, the Owl RE team cleaned, organised, categorised and coded the interview data and open question responses of the survey. The quantitative data from the survey was compiled and analysed using descriptive statistics. The data and information collected was triangulated to form the basis of the findings found in this report.

**Deviations from the Terms of Reference (ToR):** The only deviation from the ToR (annex 9) for this evaluation was the timing foreseen; the ToR anticipated that the evaluation would start in August 2022 and finish in December 2022; the evaluation started in late August 2022 (inception phase) and finished in January 2023 (a detailed timeline is found at annex 10).

## 4.2. Risks and mitigation measures

In the inception phase of the evaluation, four risks and accompanied mitigation measures were identified for the evaluation. These are reproduced below with the accompanying additional measures taken.

**Table 1. Identified risks and mitigation measures**

| Risks identified in the inception phase   | Mitigation measures   |
|---|---|
| The short time frame of the evaluation combined with the timing (annual planning period) may result in some KIIs not being available for interviews as required.                              | The Owl RE team worked closely with the A&E team to identify KIIs for the evaluation. The key groups were covered although delegation management interviewed (six persons) was limited, and despite efforts of the A&E team, addition delegation management could not be interviewed.   |
| Remote data collection and the lack of in-person interaction with KIIs may compromise the quality of data in terms of understanding some of the nuances of each context.                      | The Owl RE team interviewed ICRC staff covering over 20 contexts of all geographic regions providing a comprehensive review of the different operational contexts for A&E.  |
| In the analysis of data and information collected, there is the possibility that range of sources is not sufficiently diverse to provide a complete picture of the Strategy's implementation. | A range of data and information was collected from multiple sources. However, two planned data collection methods could not be carried out:<br>a. the analysis of Planning for Results (PfR) EcoSec chapters. This was not possible due to the data regulations of ICRC to share these internal documents externally. This was replaced by summary PfR data prepared by the A&E team.<br>b. a survey with delegation management. It was assessed by the evaluation unit and A&E team that it was not feasible to carry out this survey for the evaluation. Six delegation management were interviewed. However, this groups' feedback for the evaluation remains limited. |
| The continued approach to remote working stemming from the COVID-19 pandemic may prevent in-person meetings depending on the timeframe.   | No in-person interviews were foreseen and therefore not carried out. An in-person meeting in Geneva was held for the validation of the evaluation findings.   |

### 4.3. Ethical considerations and safeguarding

The evaluation was conducted in accordance with international best practices and standards in evaluation, with the evaluators respecting the key principles of evaluation, including:

- Clarity
- Integrity
- Independence
- Honesty
- Transparency
- Accountability
- Accuracy
- Non-discrimination<sup>6</sup> and impartiality<sup>7</sup>
- Do no harm
- Respect for the dignity of affected persons
- Confidentiality
- Protection of the data collected respecting ICRC's Rules on Personal Data Protection and the ICRC Handbook on Data Protection.

Staff participating in KIs were assured anonymity and confidentiality of their responses at the beginning of the interviews and were given the opportunity to give their informed consent by providing space for questions and answers prior to the interviews. Staff responding to the online survey were assured that their responses would be treated confidentially and anonymously.

The evaluators maintained professional integrity by ensuring that information, knowledge, and data gathered during and for the evaluation process was used solely for the evaluation process and purpose. No conflicts of interests were identified between the evaluators and the area of focus of the evaluation. The evaluation team were able to work independently and free from undue influence to produce their findings and evaluative judgements.

The evaluation team complied with the United Nations Evaluation Group's [2020 Ethical Guidelines for Evaluations](#) and 2014 [Guidelines on Integrating Human Rights and Gender Equality in Evaluations](#) and adhered to AAP commitments and humanitarian principles. The evaluation team adhered to the [ICRC Code of Conduct](#) and relevant policies on ethics and safeguarding.

The Owl RE team understood that the evaluation methodology did not require any approval and/or review by an ethics review board as there were no vulnerable populations being canvassed by the evaluation.

<sup>6</sup> For example, on the basis of sex, disability, race, religion or belief, political opinion, sexual orientation, national origin, age, class, language, or any other characteristic

<sup>7</sup> Based on the needs of the persons deprived of liberty and not on any other grounds.

## 5. Findings

### 5.1. Relevance

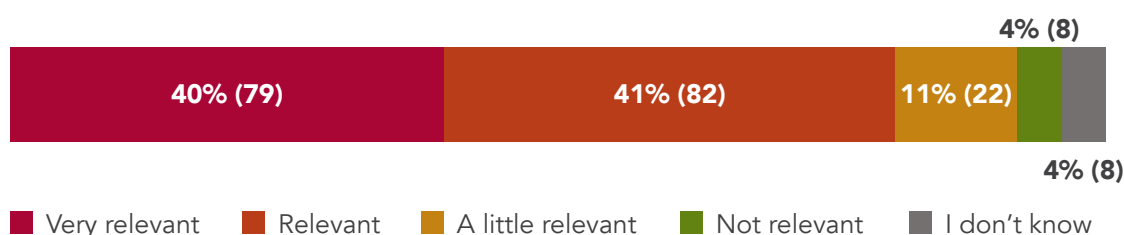
**Was the Strategy relevant and what are the key factors that will ensure its continued relevance or might undermine future relevance?**

The Strategy was relevant, ambitious and visionary. It has complemented EcoSec approaches and ICRC Institutional strategies at different levels and provided a strong foundation for moving towards evidence-based programming. The relevance of the Strategy at the delegation-level was tempered by different factors including available A&E staff, the focus of EcoSec activities, complementarity (or not) with other similar tasks, and its visibility, use and support/interest from delegations. There was a concern that moving towards a Transversal A&E could slow down A&E implementation within EcoSec.

#### *Relevance and achievability of the Strategy*

The majority of staff interviewed were positive that the Strategy was relevant, and this was supported in the survey in which 81% of respondents felt that the Strategy was either relevant or very relevant (see figure 1 below). However, despite its relevance, what was questioned was the feasibility of practically implementing the Strategy, particularly given its ambitious nature and the inconsistent investment in human resource at delegation level to ensure its implementation. As discussed in the Results section, the Strategy was ultimately successful in implementing its activities and securing the necessary human resources at the field level, with over 60 A&E posts currently existing although it did not reflect a uniform investment across all delegations with EcoSec activities.

**Figure 1: Relevance of A&E to EcoSec activities of delegations (source: survey of EcoSec staff)**



#### *Clarity of the Strategy*

The structure of the Strategy with the inclusion of an action plan for each of the Strategy's strategic orientations was seen as a useful way to understand expected deliverables and has facilitated clarity of the objectives and outputs for EcoSec and A&E staff. The A&E team produced an annual implementation plan accompanied by regional implementation plans and delegation level plans (for some delegations with A&E staff) since the Strategy's introduction in 2019. The monitoring of the Strategy's implementation was carried out informally, rather than a documented monitoring of the progress on implementing the action plans.

Despite its clear structure, the length and ambitious nature of the Strategy were also considered to be a barrier to its implementation. This was combined with a reported lack

of adoption by some delegations, despite the relevance of the tools designed by the A&E team to support more robust A&E approaches. Interviews with EcoSec staff indicated that the A&E tools and support were more well-known than the Strategy document itself, which was to be expected, given they were the most visible outputs of the Strategy, along with the new A&E staff employed, as described below. Where A&E staff were present or A&E regional specialists have made visits to delegations this have been helpful in disseminating the Strategy and explain the A&E role and activities to the delegations' EcoSec teams.

### ***Relevance of the Strategy to institutional needs and priorities***

The A&E Strategy made clear linkages with a number of existing organisational strategies including the ICRC Institutional Strategy 2019–2024 which makes reference to strengthening the collection and use of evidence, data and research; refining analysis of factors contributing to vulnerability and needs; evaluating the outcomes of activities; and establishing mechanisms to disaggregate data. Links with other institutional level strategies such as the Second Information Environment Strategy 2018–2021 and the Digitalization of Operations Strategy 2017–2021 are also set out. The Strategy supported P&ES in moving towards a more evidence-based response and was in line with the outcome-based approach (OBA) adopted by the ICRC.

In order to ensure alignment with Regional Strategic Frameworks in some regions the A&E team supported regional teams (Africa for example) in developing a roadmap of outcomes and indicators to ensure alignment with the overarching Institutional Strategy and this was considered as useful.

As mentioned above, there was an issue of visibility of the A&E Strategy within delegations. A reason for this cited was the overwhelming number of strategies and directions coming from HQ which delegations are required to take account of. While this does not diminish the relevance of the Strategy itself, it creates a challenge in terms of its implementation.



### ***Coherence of the Strategy with other tasks***

At the field level, there was some confusion as to the coherence of A&E work with other tasks such as AAP, market system analyses (of Cash and Market specialists), data management, information management, protection data analysis, digital mainstreaming, Geographic Information System (GIS) services and evaluation functions, amongst others. A number of EcoSec staff stated that they had difficulties in explaining these differences to delegation colleagues. Some EcoSec staff highlighted the usefulness of having the Strategy in order to highlight to management the need to be more reflective when analysing data and designing interventions. Where delegations have been able to make use of the harmonised A&E data collection approaches and tools, such as the standardised forms, EcoSec staff reported that this has facilitated improved analysis and a clearer understanding of A&E's role.

### ***Ongoing relevance of the Strategy***

Having been written in 2018, the Strategy was perceived by the majority of staff interviewed to be visionary in nature. A number of interviewees emphasised that it remains relevant to date, particularly given the progress that can be seen in terms of strengthening approaches to A&E primarily in those countries which have dedicated A&E functions and/or have received significant levels of support. However, they indicated that there remains a need to intensify support in other delegations, reflecting the inconsistent implementation of the Strategy and A&E in general as discussed below.

The relevance of the Strategy was reinforced by the ability of the A&E team to adapt their priorities to the changing contexts, for example to provide support quickly to Ukraine in 2022 and produce an analytical product focused on the COVID-19 pandemic, that reportedly received attention at the highest level (i.e., Presidency) of the ICRC. Moving towards a Transversal A&E Strategy, there was concern from EcoSec staff that the efforts to continue to integrate consistently A&E within EcoSec could slow down, as discussed below in section 5.4.

## **5.2. Results**

### **What were the results of the Strategy?**

The mission and focus areas of the Strategy were primarily seen as having been achieved. The main achievement of the Strategy was introducing A&E more systematically and in a harmonised manner within EcoSec, supported by dedicated staff and teams. This accelerated the move towards strengthening evidence-based programming within the ICRC. Areas of less achievement were concerning ICRC as an analytical partner and the inconsistency of A&E implementation across ICRC delegations. The perceived level of achievement also varied based on the role of the staff. The PDM tool and the EcoSec Cookbook were the most used tools by delegations; 95% of all EcoSec Planning for Results indicators were now Cookbook indicators. The Strategy was implemented efficiently and it is anticipated that the resulting A&E activities will continue.

### ***Achievements of the Strategy***

The majority of staff interviewed or surveyed agreed that the Strategy had achieved its mission (see section 3 for the mission text). Of the survey respondents, 66% thought that the Strategy had achieved its mission "Completely" or "A lot", whereas 30% responded "A little" or "Not at all" as seen in figure 2.



**Figure 2: Achievement of A&E mission (source: survey of EcoSec staff)**



Staff saw the main achievement of the Strategy as introducing A&E more systematically and in a harmonised way within EcoSec, supported by dedicated staff and a regional and HQ support team. This accelerated the move towards strengthened evidence-based programming within EcoSec, as highlighted in the following quotes from survey respondents:

*"The A&E has changed the culture and the approach of EcoSec to evidence-based programming...Guidelines, methodologies and advisory role of the A&E have strongly influenced the quality of programmes and contributed to the efficiency and effectiveness of EcoSec work."*

*"The greatest benefits of the A&E approach are enormous. The use of tools to guide in programming have significantly reshaped the approach to EcoSec implementation."*

*"L'harmonisation des outils de collecte et d'analyse des données."*  
(Translation: "The Harmonisation of data collection and analysis tools.")

Based on the feedback from interviews and the survey, those staff that were less sure about the Strategy's achievements were referring mainly to two distinct aspects. Firstly, the statement within the Strategy mission to be a partner of choice for analytical services in the humanitarian sector was seen by many as challenging and not yet achieved. Staff commented that ICRC faced challenges in sharing data and analysis internally between departments/metiers, let alone externally. Field staff were most likely not aware of the A&E team's efforts already to share best practices and methods, for example through public events, such as the A&E Week, which was attended by more than 2,000 people in 2021.<sup>8</sup>

Secondly, staff commented that the Strategy was not yet implemented consistently across ICRC delegations with an EcoSec presence. The use of A&E by a delegation largely depended upon the interest of the EcoSec coordinator and team, support of delegation management and presence/support of a regional A&E adviser, according to staff.

The estimated level of achievement of the Strategy also varied depending upon the role the staff held within the ICRC. A&E staff were very positive about the achievements seen; EcoSec staff were also positive, but some had reservations as described above. The EcoSec coordinator and their deputies provided examples of where they saw the achievements of the Strategy as described above, but also saw some limitations, mainly related to the lack of consistent implementation of A&E across all delegations (due to financial constraints and visibility) and the focus of A&E staff to date mainly on monitoring. The limited number of delegation management interviewed (6 persons) had a more mitigated estimation of the achievement of the Strategy; they all supported the move to evidence-based programming and saw A&E as important in this regard, but they had limited visibility of A&E and/or examples of A&E informing major programming decisions.

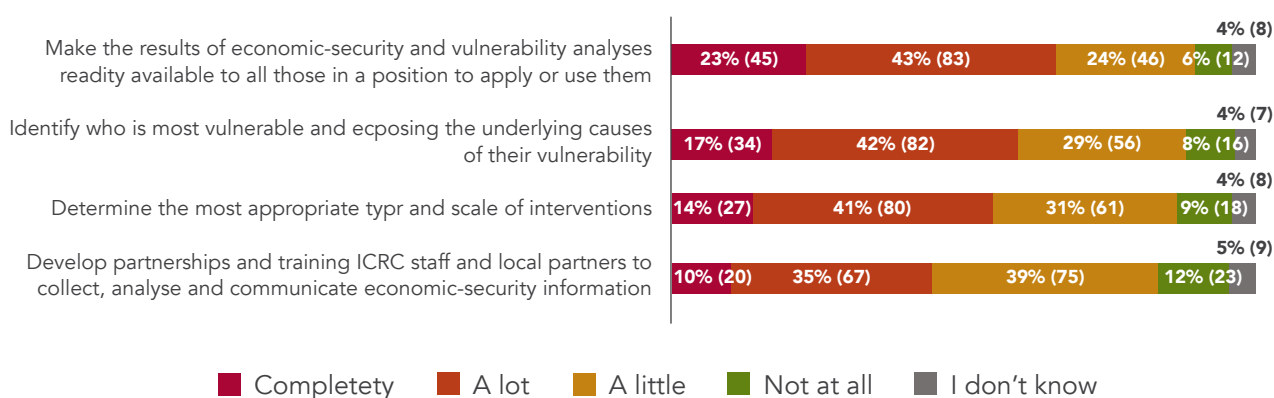
<sup>8</sup> <https://www.icrc.org/en/event/analysis-data-then-what>

### Intended and unintended results of the Strategy

Four focuses were set out in the Strategy as seen in figure 3. The split of ratings was similar to those seen in figure 2 with some two-thirds of survey respondents agreeing that these focus areas were supporting “Completely” or “A lot” EcoSec activities in their delegations while some one-third responding “A little” or “Not at all”. These latter responses increased to 51% concerning the focus on partnership, which reflects the similar finding above concerning the challenges of partnering and sharing.

The greatest results of the four focuses of the Strategy was seen in making the results of EcoSec analyses available for use (66% “Completely” and “A lot”) followed by identifying the most vulnerable and the underlying causes (59% “Completely” and “A lot”) as seen in figure 3.

**Figure 3: Results of four focuses of A&E strategy (source: survey of EcoSec staff)**



These top two focuses were reflected in the examples provided in the interviews and surveys from A&E and EcoSec staff, including:

- A&E conducting a post-harvest assessment that found that ICRC’s agriculture programme was underperforming and consequently triggered an adjustment of the programme;
- A&E analysis was crucial in moving from an expensive and poorly targeted relief operation to a targeted livelihood approach;
- The collection and compilation of data into dashboards by A&E informed risk analyses for future crises such as droughts;
- PDM that verified a range of elements and was crucial to inform the next phase of a multi-million dollar response.

The 2022 ICRC research and publication “Analysis and Evidence in Action” provides further examples as to how A&E is used to improve programming and longer-term strategy and contribute to learning.<sup>9</sup> Determining the most appropriate type and focus of an EcoSec intervention, the second-last rated focus as seen in figure 3, was an area where A&E had yet to make a significant impact for most delegations. Examples were provided where A&E was crucial in informing interventions, such as A&E’s analyses were reported as being key in informing the current design of both the cash and in-kind EcoSec responses in Ukraine. However, this was also an area of concern for the A&E staff; that their work was not being used sufficiently to inform current and future programming consistently and in a significant way. Aside from describing how A&E should feed into institutional reporting mechanisms,

<sup>9</sup> See ICRC (2022), Analysis and Evidence in Action.

the Strategy does not fully explain how A&E should be integrated with decision-making, as also seen for the strategies of comparable organisations (see annex 2) (this aspect has been emphasised in the new Transversal A&E Strategy). The role of A&E in decision-making was illustrated by this quote from a EcoSec staff surveyed:

*"As a former M&E in an international non-governmental organisation, it [A&E] has always been instrumental in how I approach planning, programming and lessons learnt. However, I believe ICRC is still a bit weak in this field, especially on translating M&E into a real decision-making tool, rather than a reporting obligation."*

The EcoSec coordinators and deputies were positive in the introduction of A&E leading to more standardised tools and indicators that supported better analysis and decision making. A concern of the coordinators and deputies was the lack of visibility for A&E and its inconsistent application, as these two coordinators/deputies highlighted:

*"As Coordinator, the A&E team filled a gap that was necessary to fill. Having said this, it is necessary that this is happening in the entire Institution and that this is happening at Department level. The greatest benefit is to have team that can integrate the basic of A&E and that can understand the relevance and importance of monitoring. Analysis are sometimes basic, but there are signs that people are developing."*

*"A&E is not really widely communicated. Still redliners are not really understanding it. Also, delegation directions depends a lot on interest of EcoSec Coordinator, so changing Coordinators some time brings different directions. We need more clear instructions to which direction the institution would like to move forward with the A&E, and in a way to impose it to all delegations, not only sporadically."*

The majority of examples cited by EcoSec and A&E staff were focused on PDM and consequent adjustments to existing interventions, as also reflected in the A&E tools used, as discussed below.

An unintended result identified was that the development and roll-out of the Strategy increased interest in evidence-based programming within EcoSec and other ICRC departments/metiers, according to staff interviewed. The success of the A&E strategy's implementation also provided impetus for the A&E team to secure support to move towards a transversal model, as discussed further below.

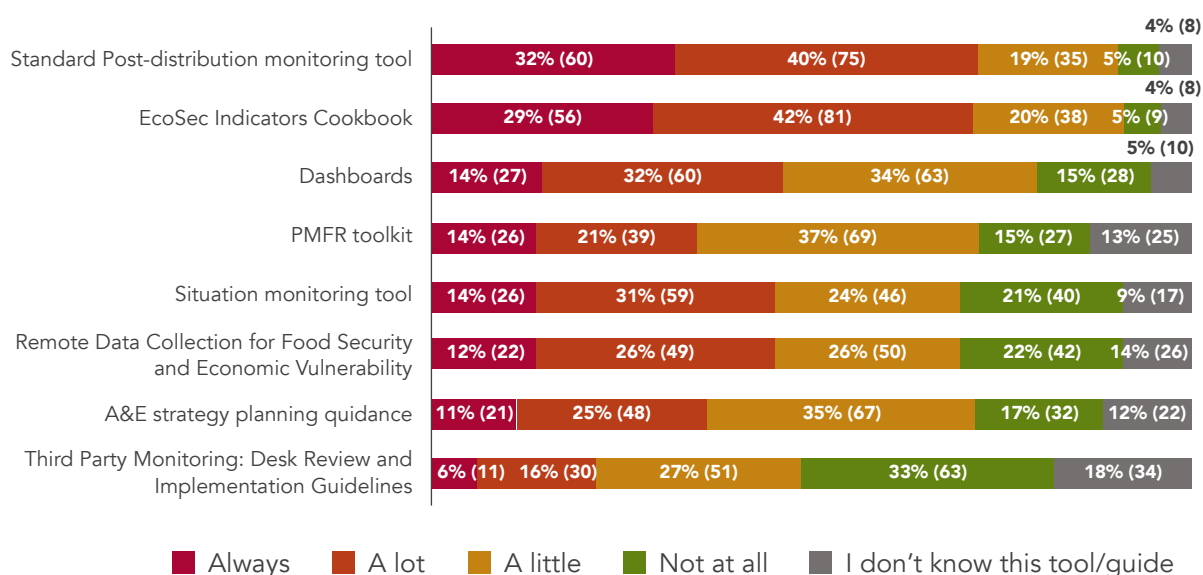
### **Use of A&E outputs at the delegation level**

The main A&E outputs (tools and guidelines) produced as part of the Strategy's implementation and available in the A&E Toolkit have shown different levels of usage by delegations. Two tools—the PDM tool and the EcoSec Cookbook—were reported as having high levels of usage by delegations in both the survey (figure 4) and interviews.

The lower rated tools and guidelines in terms of usage, such as the Third Party Monitoring (TPM) guidelines and A&E Strategy planning guidance reflect their limited relevance for many delegations. For example, the TPM guidelines would only be relevant for a small number of delegations that are currently carrying out or considering TPM (estimated at no more than five delegations currently).



**Figure 4: Use of A&E tools and guidelines (source: survey of EcoSec staff)**



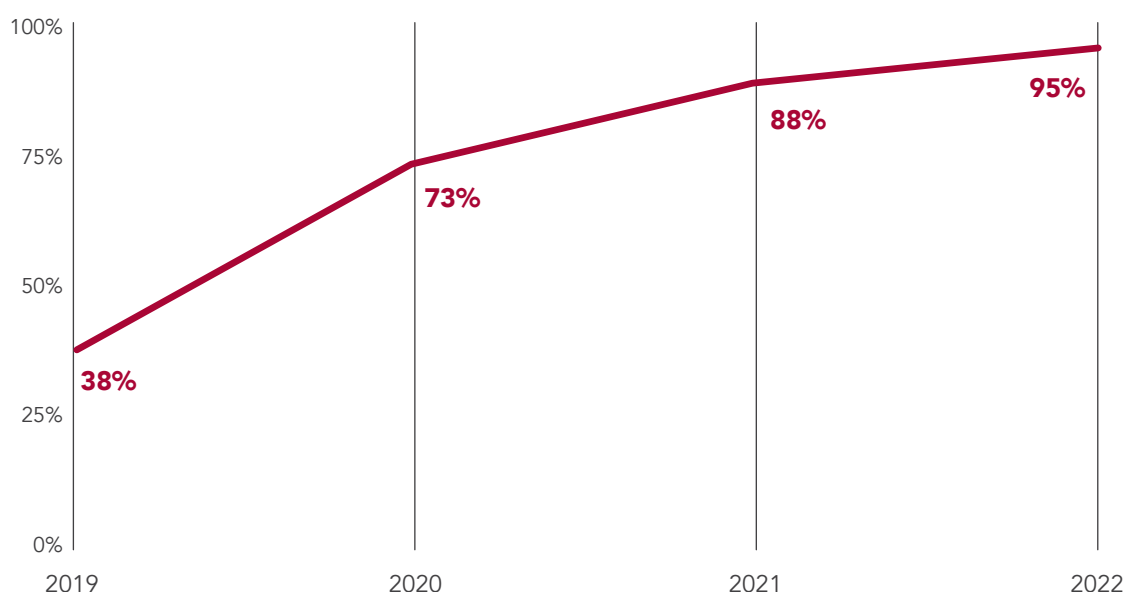
The association between PDM and A&E was strong; based on feedback from staff, this is one of the main tasks for A&E staff in delegations. This was seen by staff as both positive and negative. On one hand, PDM provided a systematic and useful analysis to adjust and inform EcoSec programming. On the other hand, it meant that A&E was mainly seen as a monitoring function (PDM and other monitoring activities) and less a fully rounded A&E role as foreseen in the Strategy. The A&E team had developed a self-assessment tool to assess the A&E capacity of the delegations that could support a fully rounded A&E role.<sup>10</sup> According to some staff this also lessened the role of EcoSec staff in monitoring as this survey respondent, an EcoSec coordinator, commented:

*"Cette position [A&E] décharge les collègues EcoSec de la partie A&E dans leur cycle de projet. Par contre ils s'en éloignent trop."*  
 (Translation: "This position [A&E] relieves the EcoSec colleagues of the A&E part of their project cycle. On the other hand, they are too far away from it.")

The EcoSec Indicators Cookbook was seen as very beneficial for EcoSec, particularly accelerating a move towards greater harmonisation for EcoSec indicators, consequent monitoring and programming in general. Greater harmonisation was seen as useful by EcoSec staff as it allowed comparability and facilitated the compilation and analysis of data and consequent reporting of results. This success can be seen in the adoption of the proposed Cookbook indicators within the EcoSec PfR across all delegations. Figure 5 shows that the use of the Cookbook indicators in EcoSec PfR has increased incrementally from 38% in 2019 to 95% in 2022.

10 Economic Security Analysis & Evidence Capacity - Delegation Self-Assessment.

**Figure 5: Usage of Cookbook indicators within EcoSec PfR (global) (source: A&E team analysis)**



### ***Efficiency of achieving the results of the Strategy***

The A&E team have implemented the Strategy efficiently, based on the feedback from interviews, the survey and project monitoring. As stated above, the Strategy was ambitious, setting out seven action plans containing 51 tasks. Based on a self-assessment by the A&E team of the progress towards achieving these tasks, 96% (49 of 51) have been completed to date (December 2022) and 4% (2 of 51) are currently underway (see annex 1 for further details). Although this evaluation could not verify that each of the 51 tasks were completed or underway, this level of implementation was confirmed by the feedback from interviews and the survey.

As of late 2022, there was some 60 staff in A&E field positions. According to staff, this relied on delegations being convinced of the value of creating an A&E staff position(s) with the support of the A&E regional specialists and HQ team rather than any institutional commitment to investing in A&E. Without this network of A&E staff, together with A&E regional specialists, it would have been challenging to implement the Strategy. At the same time, delegations without dedicated A&E staff did progress in implementing the Strategy too; when comparing survey results from delegations with and without A&E, the average high usage level of tools/guidelines (figure 4) was 38% ("Always" or "A lot") for those with A&E staff and 30% for those without. This illustrates that delegations without dedicated A&E staff were still making considerable efforts to implement the Strategy.

### ***Sustainability of the Strategy's results***

The Strategy was designed to consolidate and launch a new area of work within EcoSec; given its successful implementation, it is anticipated that the resulting A&E activities will continue. The Strategy and its implementation contained certain aspects encouraged the sustainability of its results, according to staff interviewed and surveyed, including:

- The use of the Cookbook indicators within the EcoSec PfR, at 95% in 2022 (figure 5) indicates that these are now well integrated within EcoSec planning and programming;
- The A&E tools and guidelines are easily accessible online for use through the toolkit and available in several languages, which will encourage their use by EcoSec and other departments/metiers;

- The network of A&E staff of some 60 will continue to support the implementation of the Strategy's focuses (admittedly A&E staff numbers could fluctuate dependent upon the level of EcoSec activities globally and the move towards Transversal A&E).

It was also considered that the ICRC institutional priorities as described in the Relevance section will likely continue to support evidence-based programming of which A&E is a key element.

Despite the very good prospects estimated for A&E's sustainability, staff highlighted a number of factors that will influence its sustainability, including: delegation management, EcoSec coordinators and programme teams using the A&E work for decision-making; A&E staff moving beyond a monitoring role and into a more rounded A&E role; A&E training being available for EcoSec staff (non-A&E) to secure their support; and consistency in EcoSec's use of A&E across delegations.

### 5.3. Factors

#### What factors have affected implementation and results of the Strategy?

The significant growth in A&E staff supported the implementation of the Strategy but was hindered by the inconsistency of their deployment across all regions and contexts. The A&E leadership and regional specialist, the tools and guidance were all seen as enabling factors for the Strategy. Also were the commitments of the ICRC to evidence-based programming and transversality, even if ICRC departments/metiers remained siloed in many respects. Delegation management and EcoSec coordinators were important in their support for the Strategy although it was not visible for them all. This was a hindering factor together with their use of the A&E work and an underdeveloped institutional A&E culture.

Factors were identified that enabled and hindered the implementation and results of the Strategy. For most factors, they could both enable and hinder the Strategy, as described in this section.

**Financial and human resources:** An enabling factor was the human resources secured for A&E and the consequent significant growth in A&E staff of some 60 by late 2022. Nevertheless, staff dedicated at a field level varied influencing the consistency of A&E across regions and contexts as described above. The availability of financial resources was mentioned by staff as more challenging for the implementation, particularly in some regions and contexts when resources shifted according to operational priorities. There was no identified investment plan or strategy to accompany the Strategy's implementation.

**Institutional priorities:** The priorities given to evidence-based programming by the ICRC and its commitment to transversality were seen as enabling factors (even if not always supported by the necessary investment at the field level). These developments were very much supported by ICRC's donors according to ICRC staff. However, staff commented that the ICRC remains siloed in many respects, such as across P&ES departments/metiers, potentially hindering the A&E transversality approach.

**Skill set and competencies:** The incremental growth in A&E staff meant that there was support for the implementation of the Strategy's focuses, however this varied largely according to the delegations with some having several A&E staff and others none. Staff training was an important factor mentioned as essential for the successful implementation of the Strategy, for both A&E staff and other EcoSec staff. According to staff, potential barriers that hindered

successful training was the virtual nature of most trainings and potential language barriers. Self-assessment of skills, not only specific to EcoSec and A&E, were noted as essential to successful training as mentioned by this staff member: *"We need to establish staff self-assessment skills system to see where we have skill gaps still."* A hindering factor related to skill-set and competencies was the perception that A&E field staff were mainly focusing on monitoring as described above.

Although the moving of mobile EcoSec and A&E staff every one to two years could negatively influence continuity (as alternatively residential staff remaining could encourage its continuity), moving between delegations was also seen as positive in that the staff could transfer best practices between delegations and contribute to increasing awareness and adoption of A&E. An example was provided of an EcoSec coordinator, who had previously worked with A&E, arriving in a new delegation without A&E and prompting its introduction. Although the issue of moving of mobile staff and loss of continuity is not limited to EcoSec and A&E staff, it was more pronounced given A&E involved the introduction of a new role, strategy and consequent activities.

**A&E leadership and regional specialists:** An enabling factor highlighted was the A&E leadership who provided a clear vision, strategic orientation and practical support for the Strategy's implementation. The A&E regional specialists were also key for the Strategy's implementation, in terms of supporting the A&E field staff and working with the delegations to adopt and integrate A&E.

**Delegation and EcoSec management:** An enabling role was the support of delegation and EcoSec management (i.e., coordinator and deputies) for the Strategy and the move towards evidence-based programming. A supportive management was seen as key as this A&E staff commented:

*"If management is not on board then the metier can push and pull but there will be no progress without management approval. And if it's not understood well then you have to invest so much to make the decision-makers understand."*

Conversely, a hindering factor could be the lack of support from delegation management and EcoSec coordinators/deputies for the A&E Strategy and function, as indicated by this EcoSec staff: *"The biggest challenge is the buy in from the different people such as coordinator or management of delegation who are not part of the A&E team and might not be aligned with those priorities."*

**Guidance and tools:** An enabling factor was that the Strategy was well-structured and its implementation through action plans clear, as this EcoSec staff commented:

*"Each person implicated can understand very easily their role and there is no need for additional meetings. For example, evidence-based decision making, the approach is already clearly defined."*

The adoption of common tools, such as the PDM tool and the Indicators Cookbook were seen as encouraging harmonization, in addition to support for tools such as Device Magic and Red Rose.

**Visibility and use of A&E awork:** As mentioned above, the visibility of A&E work, was a hindering factor. EcoSec staff were largely aware of A&E activities, tools and the function but felt that it was not known enough by delegation management whose support was needed for securing budgets and A&E positions. A&E staff thought that their analyses were not being used consistently to inform current and future programming. Further, they thought there was no accountability for not using the analyses. EcoSec coordinators/deputies provided examples of using A&E work, although not all thought it was yet sufficiently developed to inform programme adjustments and new initiatives, as reflected in figure 3 above.

**A&E culture<sup>11</sup>:** A hindering factor raised by staff was that ICRC had a relatively undeveloped A&E culture that meant that A&E did not always receive the support required within the ICRC. This was particularly noted by the A&E or EcoSec staff who had worked in other organisations and were surprised to see the undeveloped nature of A&E within the ICRC and it being limited to only EcoSec. The benchmarking study found that other similar organisations applied A&E (or similar) strategies across all programming (see annex 2). Some staff interviewed also saw the need for a Transversal A&E across all field programming and activities, including cooperation and prevention. This lack of A&E culture was seen as improving although there remained scepticism within ICRC, for example, a minority of EcoSec staff interviewed or surveyed believed A&E is an activity that should be carried out by EcoSec staff and not A&E specialists.

## 5.4. Transversal A&E

**What elements of the Strategy will remain relevant in the face of institutional developments, such as the Transversal A&E scoping phase?**

The Strategy was seen as remaining relevant in the face of institutional developments. Staff were positive that all the key elements of the Strategy will remain in place. EcoSec staff emphasised the need to focus on the use of A&E work in moving to the next phase of the Strategy. The experience of implementing the Strategy provided insights for the transition towards the Transversal A&E, including; developing complementarities between similar departments/metiers, putting in place a transversal structure, incentivizing use of A&E work, introducing an incremental roll-out, supporting champions, securing resources and focusing on achievable A&E results for all P&ES departments/metiers.

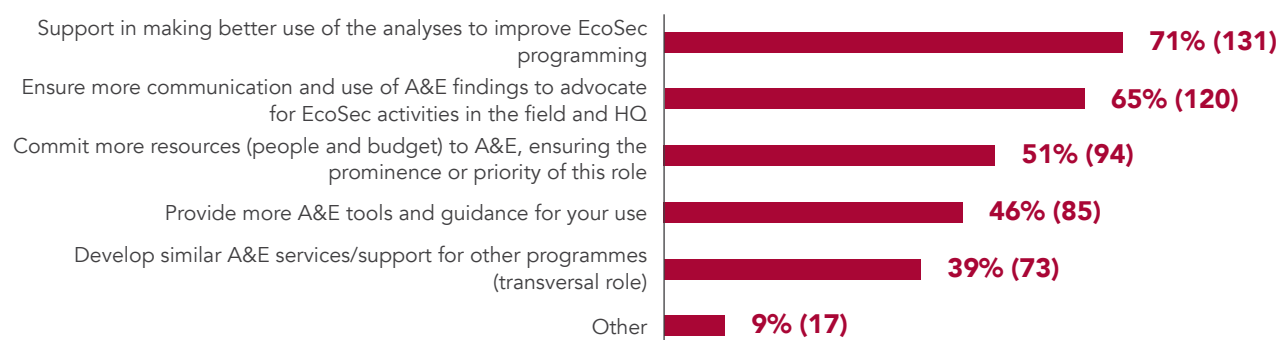
The Strategy was seen as remaining relevant in the face of institutional developments; all signs indicate that the ICRC will continue to reinforce its support for evidence-based programming according to staff and as described above.

Concerning the foreseen move to the Transversal A&E, staff were positive that all the key elements of the Strategy, such as staffing, budget, tools and guidance, will remain in place. However, a concern of EcoSec was that the move to the Transversal A&E will slow down the consistent integration of A&E within EcoSec across all delegations as described above. As stated in the Results section above, the ongoing relevance of the Strategy will depend upon a number of factors, notably the better use by delegation management and EcoSec coordinators of the A&E work for decision making.

When asked what to focus on for the next phase of the A&E Strategy (combining EcoSec and Transversal), the top two priorities selected by surveyed EcoSec staff both focused on the use of the A&E work: 71% for *“Support in making better use of the analyses to improve EcoSec programming”* and 65% for *“Ensure more communication and use of A&E findings to advocate for EcoSec activities in the field and HQ”* (see figure 6).

<sup>11</sup> A&E culture for this evaluation is defined as beliefs, values, mind-sets, and consequent practices that support and encourage the use of A&E within the organisation.

**Figure 6: Priorities for A&E transversal strategy (source: survey of EcoSec staff)**



### ***Transiting towards the Transversal A&E strategy***

The experience of implementing the Strategy provided insights that staff interviewed suggested were useful for the transition towards Transversal A&E:

- **Similar functions:** For staff, there was considerable overlap and potential synergy between all the ICRC functions working in the field of data, analysis and assessment, including AAP, market system analyses, data management, protection data analysis, information management, digital mainstreaming, GIS services and evaluation functions, amongst others. There was general consensus that further work was needed to ensure more complementarity and less overlap between these functions.
- **Structure:** Related to the above, there has already been a move within delegations to ensure that these similar functions work together. In a number of delegations, including Colombia, Yemen and the Central African Republic, these similar functions have been placed directly under the Head of Programmes (equivalent to the previous Deputy Head of Delegation role) and are encouraged to work closely together. Yemen has already created a transversal A&E team working across P&ES departments/metiers incorporating AAP.
- **Use of A&E work:** An issue raised by staff was the lack of accountability, mechanisms and incentives for delegation management, EcoSec coordinators and staff to use A&E work to inform EcoSec programming. Staff suggested that this needs to be given a greater priority in the implementation of the Transversal A&E.
- **Roll-out:** Staff suggested the gradual incremental roll-out of Transversal A&E thorough pilots but based on a shared roadmap to have A&E consistently present across ICRC delegations.
- **Champions:** Greater efforts were needed to support the delegation management who would be key to the success of the Transversal A&E, notably the Heads of Programmes. This role is highlighted as it was anticipated that the Transversal A&E role would report to the Head of Programmes in most delegations.
- **Resources:** Concerns were raised by staff as to how it would be possible to implement Transversal A&E with the same resources as for EcoSec A&E. Staff suggested that resources should be adjusted accordingly. This has already started in some delegations, for example, the Regional Resources Network (RRN) in Amman will appoint a staff for A&E EcoSec and a second staff for Transversal A&E.
- **Tools, guidance and indicators:** Staff highlighted the potential challenges to implement A&E transversality across P&ES given that the departments/metiers often operate distinctly ("siloes"). They suggested learning from the experience of implementing the Strategy and focus on some achievable results, such as extending the EcoSec Cookbook to all P&ES departments/metiers.

## 6. Conclusions and Recommendations

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This evaluation found that the Strategy was ambitious and ultimately proved to be a fundamental step and solid basis for launching A&E within EcoSec globally. Key to its success was securing a core HQ and regional team, dedicated field A&E staff and the development of practical tools and guidance that were widely used. The success of the Strategy was a key contribution to the A&E team being able to propose a broader transversal role for A&E within P&ES. Ultimately, all field programming and activities could benefit from transversal A&E.

The Strategy was hampered in its implementation by factors that were largely outside of its control. Firstly, there was an absence of systematic institutional investment in A&E, which has led to inconsistent resourcing across contexts. Delegations seem to have budgeted for A&E according to the interest of the EcoSec coordinators rather than as part of a structured institutional push. Given this situation, the A&E team have done well in securing the A&E resource to date. Secondly, the development of the A&E function has not yet been accompanied by an institutional transformation of cultural change to foster evidence-based decision making and adapt processes and incentives to enable A&E (and other evidence-based processes) to influence ICRC strategies and interventions.

As the A&E moves to a transversal role, there is still an impression that there is still work to be done to consolidate A&E for EcoSec; this evaluation believes a focus is still needed on completing implementation of A&E within EcoSec across delegations. A&E does not yet have the position and role it should have for EcoSec in all delegations. Further, where it is present, there is a perception that A&E focuses too much on the monitoring aspects that does not reflect the full scope of A&E as laid out in the Strategy.

The following conclusions and recommendations are both focused on A&E within EcoSec and the Transversal A&E.

**Conclusions and recommendations for Transversal A&E:** The new Transversal A&E Strategy is already quite advanced in its development, with a final draft in circulation in December 2022. Therefore, these recommendations focus on key points that this evaluation believes need to be emphasised in the new Transversal A&E Strategy, either in the document itself, its implementation or support needed.

**A. Institutional Investment for Transversal A&E:** The experience of the implementation of the A&E Strategy illustrates that its implementation was hampered by the lack of a structured and systematic investment in the A&E role at the delegation level. For the Transversal A&E Strategy, the lack of an institutional investment plan is risk that will hamper its implementation; a key learning from this evaluation that should be taken into account.

**Recommendation A:** It is suggested that P&ES management should develop an institutional investment plan to accompany the Transversal A&E Strategy, setting out where resources will be dedicated to A&E at the field, regional and HQ levels, ideally with a projected timing.



**B. Cultural change to foster evidence-based decision making:** Within the ICRC, there has been an incremental shift to foster evidence-based decision making given the various policies and initiatives in place, including A&E. However, this evaluation saw that a threat to the implementation of A&E and other evidence-based processes is the lack of a supportive institutional culture for conducting and enabling associated activities. This is further compounded by the absence of incentives on the consistent use of evidence for decision making. Furthermore, as the A&E strategy and its deliverables was mostly provided within EcoSec, better communication of findings and uses of evidence generated through A&E activities needs to be shared and utilised for operational planning where available.

**Recommendation B:** ICRC management at the Directorate level responsible for overseeing evidence-based processes should place a higher priority on fostering a more supportive institutional culture for A&E and similar activities. A series of measures should be developed to create incentives to encourage the use of evidence for decision making such as including this within delegation management and coordination job descriptions and performance frameworks. This should integrate a discussion with OBA initiative. A culture of reflection and learning on a programmatic level can be fostered, which the evidence can provide for.

**C. Champions for the Transversal A&E:** The draft Transversal A&E Strategy refers to the buy-in and sponsorship needed for Transversal A&E, supported by a communication and change management plan. What this evaluation believes is also needed is a more targeted approach to nurture and support the staff within delegations that will be key to the successful implementation of the Transversal A&E; this includes the Heads of Programmes (equivalent to Deputy Heads of Delegations) who will likely manage the transversal A&E positions in the delegations and the P&ES delegation-level coordinators (i.e. health coordinator, protection coordinator, WATHAB coordinator, etc.), whose cooperation and buy-in will be important for the successful implementation.

**Recommendation C:** It is suggested that the A&E team develop a set of complementary actions in the delivery phase to nurture and support Heads of Programmes and P&ES coordinators, such as targeted briefings; identification of locations and programmes for which A&E will be piloted; timetable the specific actions/focus areas for A&E support; and define when and how A&E support will be provided by regional A&E specialists.

**D: Prioritising actions of Transversal A&E:** Within the draft Transversal A&E Strategy, there are over 50 actions within the action plans. The experience of implementing the Strategy showed that certain actions were key to encouraging the uptake of A&E amongst EcoSec, for example the production of guidance and tools, such as the indicators Cookbook and the PDM tool. This evaluation would encourage that certain actions be prioritised, particularly with the view to roll-out actions that can provide rapid support to delegations and gain their confidence.

**Recommendation D:** It is suggested that the A&E team prioritise the actions of the Transversal A&E Strategy, setting this out in a timetable, and giving priority to those actions that will provide practical support and guidance to delegations, such as tools and guidelines (i.e. indicators cookbook for P&ES).

**E. Similar functions within delegations:** Within delegations there was a concern that the planned A&E transversal roles will face challenges in complementarity with other similar roles as described in the evaluation findings. The draft Transversal A&E Strategy does mention it



will be guided by a detailed collaboration framework that defines synergies and boundaries between the different roles of A&E and AAP. However, this evaluation believes this could be complemented by a “bottom-up” approach to understand how these similar functions are already working together at the field level.

**Recommendation E:** ICRC management at the Directorate level responsible for overseeing evidence-based processes should bring together the relevant units/services, such as A&E, evaluation and AAP to consider further how they will work together at the field level, using the existing examples, such as Yemen, for good practice examples for the Transversal A&E roll-out.

**F. Measurable strategy:** A limitation identified of the implementation of the A&E Strategy was that it was not accompanied by a formal measurement plan that tracked its associated activity rollout. Although annual implementation plans were produced, they did not track the progress towards achieving the actions of the action plans. The draft Transversal A&E Strategy also sets out priorities with actions that would lend itself to a simple measurement plan.

**Recommendation F:** It is suggested that the A&E unit adopt two simple measurement actions to accompany the Transversal A&E Strategy:

- a. Create a tool to measure progress annually to achieving the actions of the action plans. The tool used for this evaluation to measure actions could serve as a template (see annex 1)
- b. Create a measurement table to accompany the four strategic priorities and action points.

## Conclusions and recommendations for A&E within EcoSec:

**G. A&E EcoSec role in delegations:** Based on the feedback received by this evaluation, the role of A&E staff within EcoSec is currently mainly centred on monitoring, particularly PDM. The vision and focuses of the Strategy was far wider than monitoring and efforts may be needed to ensure that A&E staff within EcoSec are fulfilling this broader role, but also that coordinators are fully aware of the scope of delivery and enable more robust A&E deliverables.

**Recommendation G:** It is suggested that on the basis of the results of the existing self-assessment tool, the A&E unit identify actions to encourage A&E staff within EcoSec to adopt the broader role for A&E as envisaged in the Strategy.

**H. Consistent A&E for EcoSec:** The evaluation found that the adoption and use of A&E by EcoSec was too reliant on the individual preferences of the EcoSec coordinators. This meant that the A&E function and activities was not yet fulfilling their potential role for EcoSec in all relevant delegations, compounded by the lack of consistent institutional investment. Before a move to a transversal approach, this evaluation believes more needs to be done by EcoSec management to support and include A&E comprehensively across all of its operations and timely through its annual planning process.

**Recommendation H:** It is suggested that EcoSec HQ management should develop a series of actions to support EcoSec coordinators (and deputies) in the inclusion of A&E roles, adoption and use of A&E across all (relevant) operations.

# Annex 1

## Self-assessment A&E strategy action plans

The following self-assessment of the progress towards achieving the A&E Strategy action plans was completed by the A&E team based on a template provided by the Owl RE team.

| #  | Action plan / points  | Status   | Comment  |
|--|---|--|--|
| <b>A. STRATEGIC ORIENTATIONS AND ACTION PLAN</b> |   |  |  |
| 1  | 1. Review and group tools for both data collection and data management by thematic area and data type, identify common bottlenecks and define standards for collecting and managing data.         | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Created tools for assessments, monitoring etc. as required by activities and identified methodologies to guide their usage. Data management and activity management document were also developed guiding teams to provide more effective A&E activities and strengthening the use of evidence. |
| 2  | 2. Create common identifiers and data labels to streamline data flow, in line with institutional standards.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Question bank captures the need for common identifiers, which may relate to other institutional standards especially in terms of cross cutting/thematic data (SV, AAP etc.)  |
| 3  | 3. Define a system for storing data and transferring them between the field and headquarters, in line with the ICRC's data-protection policies.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | As far as possible in terms of data collection activities, information collection, storage and sharing practices are aligned with ICRCs data protection policies. (Device Magic and Red Rose on premise)   |
| 4  | 4. Create standard syntaxes for data analysis, in collaboration with other operational units.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Common identifiers, standard forms, question bank, etc. Primarily for EcoSec but also have multi-disciplinary components in it, as questions were developed with depts like SV, AAP, etc. tools such as BNVA.  |
| 5  | 5. Develop online tools that display analyses that can be read by users at all levels   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Have created global tools that continue to be used by users at all levels. Including Global Situation Monitoring Dashboards. PDM Dashboards etc. Share analysis through quarterly emails.  |
| <b>B. CAPACITY STRENGTHENING AND STAFFING</b>    |   |  |  |
| 6  | 1. Define technical competencies for A&E positions, in coordination with DTD and DMM.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| 7  | 2. Create separate career path for analysts, in alignment with other analytical positions within the organization, and in collaboration with the Human Resources directorate and talent managers. | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |

| #                   | Action plan / points  | Status   | Comment   |
|---------------------|---|--|---|
| 8                   | 3. Liaise with delegations to introduce A&E-delegate positions at country level.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | These positions were introduced as country level and continue in this way. Discussions with delegations are central to the support provided by A&E.   |
| 9                   | 4. Demonstrate added value of A&E staff in regions and delegations.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |   |
| 10                  | 5. Develop context-specific regional training in pertinent areas for technical staff, in cooperation with the Learning and Development division.    | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Provide A&E Regional Workshops as well as participate   |
| 11                  | 6. Consolidate A&E pool capacities by organizing workshops and retreats (possibly together with partners).  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | EcoSec A&E Training Course has been developed and rolled out, together with regional workshops on A&E and Regionals support delegations with further tailored trainings.  |
| 12                  | 7. Liaise with delegations and talent managers to identify the right people, within and outside the ICRC, to fill critical positions                | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Continue to work with delegations and talent management. In 2022, A&E undertook to drive a recruitment campaign, identifying the right profiles from within and external to the ICRC.   |
| <b>C. TARGETING</b> |   |  |   |
| 13                  | 1. Increase assessment capacities and specialization at delegation level.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | <p>Created a Targeting Guidelines Document to be utilised at delegation level. There has also been a focus to support on trainings for targeting practice by Regional A&amp;E Advisors to both A&amp;E and generalist EcoSec staff.</p> <p>Support on assessment tool development and analysis has also been key.</p> |
| 14                  | 2. Create guidelines for the Basic Needs and Vulnerability Assessment, the Emergency Needs Assessment, and the Economic Security Market Assessment. | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | All Guidelines created.   |
| 15                  | 3. Create targeting guidelines in line with international standards.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Guideline created.  |
| 16                  | 4. Define criteria for targeting vulnerability, at global, regional and context levels, in collaboration with other units.                          | <input type="checkbox"/> Completed<br><input checked="" type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Continue to support in delegations where this support is needed and contextually driven. Where global support is needed, it is created in collaboration with programme leads. Its underway as this is an ongoing process.   |
| 17                  | 5. Create guidelines for ensuring accountability to people affected, with a view, in particular, to engaging communities more closely.              | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | AAP considerations is captured across A&E Assessment, monitoring and data collection guidance (including remote)  |

| #                                   | Action plan / points   | Status   | Comment  |
|-------------------------------------|--|--|--|
| 18                                  | 6. Work with other units to identify multi-sectoral vulnerabilities and profile the population affected.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Multidisciplinary needs assessment etc.  |
| 19                                  | 7. Liaise with delegations to pilot new targeting methods  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| <b>D. EVIDENCE-BASED PROGRAMMES</b> |  |  |  |
| 20                                  | 1. Produce/update toolkits and define minimum standards for assessments and analyses.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Created and continue to update.  |
| 21                                  | 2. Adapt/create "question banks" for both traditional and mobile data collection.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| 22                                  | 3. Link data collection to data management and data visualization automatically.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Refer to support from the BSSC team and Regionals                                  |
| 23                                  | 4. Create a user-friendly data visualization library, adapted to various programmes and populations.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Global Dashboards, Templates etc.  |
| 24                                  | 5. Create templates, online and offline, for automatic reporting.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| 25                                  | 6. Train delegation staff in reading and interpreting data.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Continuous support by regionals and BSSC team. A&E Workshops and Training Courses. |
| 26                                  | 7. Create new measurement standards, as part of the Programme Management Reference Framework.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Refer to PMfR and Indicators Cookbook.   |
| <b>E. AGILITY AND INNOVATION</b>    |  |  |  |
| 27                                  | 1. Participate in the international dialogue on data innovation through conferences and bilateral discussions with companies, organizations, innovation labs and universities. | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | A&E Week,  |

| #  | Action plan / points  | Status   | Comment   |
|--|---|--|---|
| 28   | 2. Sponsor the designing of new applications and software—for data collection (e.g., remote data collection), beneficiary data management and distribution management—and introduce them in the field       | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Device Magic, Red Rose, Tableau etc. to support data collection, beneficiary data management etc.   |
| 29   | 3. Create a preferential entry point for EcoSec field staff with the ICRC's Innovation unit and DigitOP team.   | <input type="checkbox"/> Completed<br><input checked="" type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Seeking opportunities for field solutions through Innovations   |
| 30   | 4. Together with other analytical units in the ICRC, organize "data-week" workshops and hackathons for internal and external analysts, innovators and scientists.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | A&E Week 2021   |
| 31   | 5. Invest in sharing resources, internally and externally, to promote innovative thinking.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | A&E Week 2021   |
| 32   | 6. Invest in new solutions as they become available.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Continuously reflect and test solutions with delegations (data collection through crowd sourcing, SQL Spreads and tableau licencing for delegation teams) |
| 33   | 7. Seek funding for innovative initiatives.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Funding sources from Innovations departments, Innovation Norway for ReMAP etc.  |
| <b>F. DATA SHARING, INFORMATION MANAGEMENT, COMMUNICATION AND BRANDING</b> |   |  |   |
| 34   | 1. In line with the Operational Data Value Chain project, create an online platform combining external and internal data, to enable informed decision-making and advocacy with partners/authorities/donors. | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | ICRC Situation Monitoring Platform  |
| 35   | 2. Create an information management and communication plan for EcoSec, together with a set of promotional products.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | A&E Planning Toolkit, Question Bank, Various A&E publications and guidance etc.   |
| 36   | 3. Collect all data, analyses and reports and make them available to the entire organization, in order to establish best practices.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |   |
| 37   | 4. Step up internal information sharing and communication, through online communities, newsletters and internal ICRC events.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | ICRC A&E Communities Page, creation of A&E Events, participation in ICRC workshops, steering committees etc.  |

| #                                | Action plan / points   | Status   | Comment   |
|----------------------------------|--|--|---|
| 38                               | 5. Step up external information sharing and communication, through social media and blogs and by writing guest articles. | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Where allowed to share communication or by contributing to the information pieces of the communications dept. through our analysis and the interpretation thereof. Sharing of publicly available ICRC resources and events on social media (LinkedIn, Twitter etc.) |
| 39                               | 6. Draft data-sharing agreements with partner organizations  | <input type="checkbox"/> Completed<br><input checked="" type="checkbox"/> Underway<br><input type="checkbox"/> Not started | EcoSec A&E and EcoSec contribute to institutional Partner Agreements. A&E supports ongoing bilateral delegation level agreements where needed.  |
| <b>G. PARTNERSHIPS</b>           |  |  |   |
| 40                               | 1. Produce a desk review and mapping of local and international organizations.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Secondary data exercise—informed CEVI<br><br>Do this at delegation level as well  |
| 41                               | 2. Proactively engage in the international dialogue, by taking part in conferences and workshops                         | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | HNPW, ALNAP etc. and other forums.<br><br>Active participant to the inter-agency working group on early warning, Movement Cash Working group etc.   |
| 42                               | 3. and through bilateral meetings with actual and potential partners.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Ongoing bi-lateral discussions  |
| 43                               | 4. Seek collaborators for joint studies and publications.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | ReMAP, Joint needs assessment in emergencies etc. IFRC and partner national societies   |
| 44                               | 5. Invite outsiders to attend ICRC training sessions and workshops.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | A&E Week, ICRC collaborations with movement partners.   |
| 45                               | 6. Draft a memorandum of understanding for joint work with other organizations.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | e.g. Is of work with NorCross and IFRC on ReMAP   |
| 46                               | 7. Promote secondary-data collection within the organization   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | One example can be through the CEVI   |
| <b>H. INTERNAL COLLABORATION</b> |  |  |   |
| 47                               | 1. Participate in the internal dialogue on collaboration between units.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Ongoing discussions   |

| #  | Action plan / points   | Status   | Comment  |
|----|--|--|--|
| 48 | 2. Define the common software, tools and skill sets needed.  | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| 49 | 3. Produce impact assessments of joint work.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| 50 | 4. Contribute to creating ICRC-wide common identifiers and to the compilation of a common gazetteer.   | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started |  |
| 51 | 5. Provide light GIS support to delegations and liaise with GIS focal points to manage mapping support | <input checked="" type="checkbox"/> Completed<br><input type="checkbox"/> Underway<br><input type="checkbox"/> Not started | Liaising with GIS focal points is an ongoing process in delegations, regional levels and HQ. |

## Annex 2

# Comparative benchmarking of strategies

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### 1. Introduction and methodology

In November 2021 the ICRC's AAP team undertook a benchmarking study to understand the current approaches and practices within the humanitarian system related to monitoring, evaluation, accountability and learning (MEAL).<sup>12</sup> The study looked at seven peer organisations<sup>13</sup> with the aim of enabling the ICRC to compare its current approach against peer organisations.

As part of the 2022 evaluation of the ICRC's A&E strategy, a light-touch benchmarking study was undertaken of the A&E (or similar) strategies of comparable organisations. This study complemented the existing study of approaches and practices undertaken 2021 but instead focused on MEAL strategies (as opposed to approaches and practices). The strategies identified for this 2022 evaluation were from CARE, IOM, UNHCR and World Vision International (WVI).<sup>14</sup>

This benchmarking study was designed to contribute to the response to Evaluation Question 1. The following selection criteria were used for comparable organisations:

- Organisations active in humanitarian response
- Organisations operating at a global level
- Organisations operational in situations of conflict and violence
- Organisations with considerable operational presence (economic security/food security and livelihoods operations but also health and protection).

The websites of a number of organisations were browsed in order to undertake a desk review and analysis of relevant comparable strategies considering:

- Scope of strategy
- Data focus
- Assessment focus
- Analysis focus
- Response options focus
- Monitoring focus

<sup>12</sup> The Operations partnership (2021), *Review of humanitarian MEAL practices—Sector benchmarking*.

<sup>13</sup> Save the Children, Oxfam, UNHCR, IFRC, MSF, NRC and WFP

<sup>14</sup> UNHCR data strategy (<https://www.unhcr.org/5dc2e4734.pdf>), UNCHR evaluation strategy (<https://www.unhcr.org/5a93c8637.pdf>), IOM Monitoring and Evaluation Strategy (<https://publications.iom.int/books/oig-monitoring-and-evaluation-strategy-2021-2023>), World Vision's Learning through Evaluation with Accountability & Planning ([https://www.wvi.org/sites/default/files/LEAP\\_2nd\\_Edition\\_0.pdf](https://www.wvi.org/sites/default/files/LEAP_2nd_Edition_0.pdf)), CARE International MEAL approach [http://careglobalmel.careinternationalwikis.org/\\_media/2019\\_july8\\_mel\\_approach\\_principles\\_and\\_standards.pdf](http://careglobalmel.careinternationalwikis.org/_media/2019_july8_mel_approach_principles_and_standards.pdf).



- Learning focus
- Evaluation focus
- Reporting focus
- Services offered in above focuses (centrally or decentralised)
- Set-up / structure (if specified)
- Resources available (if specified)

## 2. Results of the benchmarking

### Strategy comparability

The strategies of all organisations reviewed, including the ICRC's A&E strategy, have been developed in a consultative manner, as far as can be determined, with the aim of focusing on practical strategic outputs.

### Scope of strategy

The ICRC's current A&E strategy focuses on one area of the organisation's programming i.e. EcoSec. The strategies of the other organisations reviewed are focused upon the entirety of programming and not dedicated to one service.

The A&E strategy provides an action plan for each of its strategic orientations while the strategies of other organisations are less clear about individual actions that will be undertaken in order to ensure strategy implementation. With the exception of WVI's Learning, Evaluation, Accountability and Planning (LEAP) approach document, the strategies reviewed tend to be externally focused, setting out intended approaches, whereas the ICRC's A&E strategy is relevant for internal and external audiences alike.

Unlike the A&E strategy and the strategies of other organisations, UNHCR has developed a dedicated Evaluation Strategy on the basis that evaluation is distinct from other oversight functions (such as audit and inspection) and that evaluations are not purely compliance-driven but are also focused on accountability and learning.

All the strategies reviewed aim to ensure a global consistency of approach to MEAL.

### Data focus

The different strategies assessed each have a different data focus. CARE International and WVI emphasise the importance of gathering impact data and have created specific indicators to support this. UNHCR's Data Transformation Strategy is broader, setting out core principles in relation to data collection and management and highlighting that the focus is on the humanitarian situation; people affected; and operational information on the delivery of protection and assistance. The A&E strategy is also relatively broad in terms of specifying the data focus, beyond the fact that the focus is on EcoSec.

### Assessment focus

The A&E Strategy provides an overview of the EcoSec approach to needs assessments and the tools available to conduct assessments, highlighting the link with baseline establishment and the definition of monitoring frameworks.

With the exception of WVI's LEAP framework, which is similar to the A&E Strategy in that it is based around the programme/project cycle, the other strategies assessed make little or no mention of approaches to needs assessments.

### **Analysis focus**

Unlike the other strategies assessed, a central thrust of the A&E Strategy is analysis in terms of methodological advice and technical review. Again, the exception is WVI's LEAP framework which highlights the need to go beyond needs analysis to deeper political and social analysis. Tips for analysis are provided in the framework and the need for good analysis as opposed to the collection of large amounts of data is emphasised.

### **Response options focus**

None of the strategies assessed, including the A&E strategy include specific narrative on the design or response options aspects of MEAL beyond stating that MEAL systems should be clearly linked with decision-making (CARE International).

### **Monitoring focus**

The A&E Strategy provides clear insights into the ICRC's overall approach to monitoring, highlighting the different systems and approaches in place. Other organisational strategies considered in this review provide different levels of detail with regard to monitoring approaches, with CARE International and WVI adopting a more thorough overview of approaches to monitoring and UNHCR and IOM setting out more briefly the importance of monitoring without specifying in a comprehensive manner what approaches are to be adopted.

### **Learning focus**

As with the A&E Strategy, all other organisational MEAL strategies have a clear emphasis on organisational learning. CARE International and WVI extend this to promoting the importance of designing MEAL systems and practices which are conducive to learning from the project level upwards.

### **Evaluation focus**

The A&E Strategy states that the A&E team will take the lead in defining standard methodologies and terms of reference for evaluating EcoSec programmes and operations in order to measure impact. UNHCR outlines a similar approach in its Evaluation Strategy which provides detail on the four different types of centralised evaluation that the organisation undertakes (longitudinal; institutional; strategic; and rapid) as well as who will undertake evaluations. With the exception of UNHCR's Data Transformation Strategy, all the other strategies assessed include an evaluation focus, emphasising the need for evidence-based learning.

### **Reporting focus**

The A&E Strategy differs from the other organisational strategies assessed in that it provides clarity on how A&E will feed into institutional reporting mechanisms. The other strategies make minimal reference to reporting approaches although WVI's LEAP framework indicates that there are separate guidelines on this topic.

### **Set-up / structure (if specified)**

The findings of the 2021 AAP review confirmed that there is no other organisation with a truly comparable structure to the A&E structure like the ICRC, and this has been confirmed in this complementary study. IOM has a central evaluation office which provides technical assistance for evaluations, but it is less clear how other aspects of MEAL are supported. UNHCR has two levels of evaluation—decentralised (managed outside the central Evaluation Service) and

centralised (managed by the Evaluation Service). UNHCR has aimed to expand its evaluation coverage by increasing the number of decentralised evaluations which are commissioned and managed by county operations, Bureaus and Divisions and conducted by external consultants. Decentralised evaluations receive technical advice and quality assurance from the Evaluation Service. UNHCR's Evaluation Office is independent of management functions and reports directly to the High Commissioner. WVI has a LEAP team which offers global support.

**Resources available (if specified)**

Other organisational strategies do not clearly define the financial and human resources available for MEAL activities. However, IOM has set up a number of evaluator trainings to ensure quality assurance and has a roster of 82 internal evaluators. A global M&E community of practice has also been established for IOM staff and Regional M&E Officers in eight of the nine Regional Offices which have gone on to develop regional M&E networks.

## Annex 3

### Evaluation matrix

| Sub-questions  | Indicators  | Source of data   | Data collection tools             |
|--|---|--|-----------------------------------|
| <b>1. Was the Strategy relevant and what are the key factors that will ensure its continued relevance or might undermine future relevance?</b>   |   |  |                                   |
| 1.1. Was the Strategy consistent, coherent, and complementary in relation to other related strategies, plans or frameworks in the institution at global, regional or delegation level? | Extent of strategy being consistent, coherent, and complementary in relation to:<br>– strategies, plans, frameworks <sup>15</sup><br>– global, regional, delegation levels              | Relevant strategies, plans, frameworks<br>ICRC staff; A&E, delegation management (DM), other units | Document review<br>KII            |
| 1.2. Was the Strategy specific and provided stakeholders clarity on its mission and deliverables?  | Perceptions of stakeholders (A&E, EcoSec staff and delegation management) on the clarity on the mission and deliverables of the A&E strategy  | ICRC staff: A&E, EcoSec, DM  | Document review<br>KII<br>Surveys |
| 1.3. Was the Strategy measurable and did it set clear expectations?  | Level of measurability of strategy, such as existence of baselines, indicators and other measurable aspects.<br><br>Extent to which expectations are set and clear in the A&E strategy. | ICRC staff: A&E staff  | Document review<br>KII            |
| 1.4. Was the Strategy achievable by the team and stakeholders?   | Extent to which strategy was perceived as being achievable by the A&E team and stakeholders (EcoSec staff and delegation management)  | ICRC staff: A&E, EcoSec, DM  | Document review<br>KII<br>Surveys |
| 1.5. Was the Strategy relevant to institutional needs and priorities?  | Level of relevance of A&E strategy with the institutional needs and priorities as set out in:<br>– strategies, plans, frameworks  | Relevant strategies, plans, frameworks<br>ICRC staff: A&E, EcoSec, DM, other units                 | Document review<br>KII<br>Surveys |
| 1.6. Has the Strategy remained relevant over the evaluation period?  | Extent to which the A&E strategy has remained relevant from January 2019 to August 2022   | A&E strategy implementation plans<br>ICRC staff: A&E, EcoSec, DM, other units                      | Document review<br>KII<br>Surveys |

<sup>15</sup> Including: ICRC Institutional Strategy 2019–2022; Second Information Environment Strategy 2018–2023; Digitalization of Operations Strategy 2017–2021; AAP Framework.

| Sub-questions  | Indicators   | Source of data   | Data collection tools   |
|--|--|--|---|
| 1.7. What elements of the Strategy will remain relevant in the face of institutional developments, such as the Transversal A&E scoping phase?                | Identification of elements of the A&E strategy that will remain relevant given institutional developments including:<br>– Transversal A&E scoping phase<br>– Other developments to be identified | A&E strategy implementation plans; toolkit<br>ICRC staff: A&E, EcoSec, DM, other units | Document review<br>KII<br>Surveys                                 |
| <b>2. What were the results of the Strategy?</b>   |  |  |   |
| 2.1. To what extent was the Strategy effective and have its aims and outputs been achieved?  | Extent to which strategy has been achieved as seen in its aims (Mission and Focuses) and outputs (Action plans)  | 2018 & 2022 PFR (4 countries)<br>ICRC staff: A&E, EcoSec, DM                           | Self-assessment of A&E strategy<br>PFR analysis<br>KIIs<br>Survey |
| 2.2. What were the intended and unintended results of the implementation of the Strategy?  | Identification of: 1) intended results and 2) unintended results of the strategy implementation  | 2018 & 2022 PFR (4 countries)<br>ICRC staff: A&E, EcoSec, DM                           | PFR analysis<br>KIIs<br>Survey                                    |
| 2.3. How have outputs (e.g., guidelines, tools etc.) of the Strategy been used at delegation, regional and global level?                                     | Level of use of the A&E strategy's outputs (i.e. A&E Toolkit) at the levels:<br>– global, regional, delegation   | A&E toolkit<br>ICRC staff: A&E, EcoSec, DM   | Document review<br>KII<br>Surveys                                 |
| 2.4. How efficient were the A&E team and stakeholders in achieving the results of the Strategy? (e.g., allocation of resources, cost-efficiency, timeliness) | Level of efficiency of the A&E team and stakeholders (EcoSec staff and delegation management) in achieving results concerning:<br>– allocation of resources<br>– cost efficiency<br>– timeliness | A&E budget and planning documentation<br>ICRC staff: A&E, EcoSec, DM                   | Document review<br>KIIs   |
| 2.5. To what extent is it likely that the results of the Strategy will continue after implementation of the Strategy?  | Identification of elements and instances that illustrate that results of the A&E strategy will continue following August 2022  | 2018 & 2022 PFR (4 countries)<br>ICRC staff: A&E, EcoSec, DM, other units              | PFR analysis<br>Document review<br>KII<br>Surveys                 |

| Sub-questions   | Indicators   | Source of data  | Data collection tools             |
|---|--|---|-----------------------------------|
| <b>3. What factors have affected implementation and results of the Strategy?</b>  |  |   |                                   |
| 3.1. Was the organisational capacity, including financial and human resources, organisational structure, appropriate skill sets and competencies, leadership, guidance and standards, infrastructure etc. sufficiently available to implement the Strategy? | Extent to which organisational capacity was sufficient to implement the A&E strategy, including: <ul style="list-style-type: none"> <li>– financial and human resources</li> <li>– organisational</li> <li>– structure</li> <li>– skill set and competencies</li> <li>– leadership</li> <li>– guidance and standards</li> <li>– infrastructure</li> <li>– other factors</li> </ul> | A&E budget and planning documentation<br>ICRC staff: A&E, EcoSec, DM  | Document review<br>KII<br>Surveys |
| 3.2. How was Strategy implementation affected by organisational motivation factors, including organisational culture, organisational history, buy-in and political will?  | Extent to which A&E strategy implementation was affected by: <ul style="list-style-type: none"> <li>– organisational culture</li> <li>– organisational history</li> <li>– buy-in</li> <li>– political will</li> <li>– other factors</li> </ul>   | A&E budget and planning documentation<br>ICRC staff: A&E, EcoSec, DM, other units                           | Document review<br>KII<br>Surveys |
| 3.3. How did the enabling environment, including funding levels, operational context etc. affect Strategy implementation?   | Extent to which enabling environment affected A&E strategy implementation including: <ul style="list-style-type: none"> <li>– funding levels</li> <li>– operational contexts</li> <li>– other factors</li> </ul>   | Relevant ICRC documentation on funding, contexts and operations<br>ICRC staff: A&E, EcoSec, DM, other units | Document review<br>KII<br>Surveys |

## Annex 4

### Evaluation criteria

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The evaluation criteria was integrated into the data collection and analysis based on the evaluation matrix. The evaluation criteria were matched to the evaluation sub-questions to ensure that they are covered by the evaluation, as set out in the following table:

| Evaluation criteria   | Relevant evaluation sub-questions |
|---|-----------------------------------|
| Relevance: The extent to which the Strategy responded, or is expected to respond, to stakeholder's needs, policies and priorities | – 1.2, 1.3, 1.4, 1.5, 1.6, 1.7    |
| Effectiveness: The extent to which the Strategy achieved, or is expected to achieve, its objectives and its results               | – 2.1, 2.2, 2.3                   |
| Efficiency: The extent to which the Strategy delivered, or is likely to deliver, results in an economic and timely way            | – 2.4, 3.1, 3.2, 3.3              |
| Sustainability: The extent to which the net benefits of the Strategy are likely to continue                                       | – 2.5                             |
| Coherence: The extent to which the Strategy is compatible in relation to other related strategies, plans or frameworks            | – 1.1                             |



# Annex 5

## Evaluation brief

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### EVALUATION BRIEF

#### EcoSec Analysis & Evidence Strategy 2019–2022

##### About this Evaluation

The evaluation aims to assess the stated mission and aims of the [Analysis & Evidence Strategy 2019–2022](#) and the mechanisms developed to implement it, to identify what has or has not been achieved, understanding the challenges, or enabling factors and making tailored recommendations. It will be utilized to inform the preparation of a future Transversal A&E Strategy.

The evaluation will contribute to accountability and learning:

- **Accountability:** the evaluation will assess and report on the quality and results of the Strategy and its associated services, strategic orientations, action plan and implementation structure. A response to the evaluation recommendations will be prepared by the A&E team and the actions taken in response will be tracked over time.
- **Learning:** the evaluation will assess the quality of the Strategy given the context in which it was developed, determine the reasons why changes have or have not occurred, draw lessons, and derive good practices for learning. It will provide evidenced-based findings to assist in decision-making around the formulation of the future Transversal A&E Strategy.

##### Evaluation Objectives

The evaluation primarily focuses on addressing the quality of all elements of the Strategy (Mission and corresponding operational context and background, A&E services, strategic orientations and action plan and implementation structure) and its related implementation mechanisms, including guidance, tools, processes, and capacity strengthening initiatives. The evaluation will cover the period of implementation of the Strategy from 2019–2022 (recognizing that the evaluation will be conducted before the end of the Strategy period).

The strategy offers 8 different type of services in an “A&E menu”, 8 strategic orientations and corresponding action plan and a proposed implementation structure:

- **A&E services:** needs assessments; situation monitoring and early warning; monitoring and evaluation; thematic analyses: data collection; data and beneficiary management; data visualization, reporting and information management; spatial analysis and remote sensing.
- **Strategic orientations and action plan:** simplification and harmonization of tools and services; capacity strengthening and staffing; targeting; evidence-based programmes;

agility and innovation; data sharing, information management, communication, and branding; partnerships and internal collaboration.

- An implementation structure: proposed HR set-up for the A&E Strategy 2019–2022

## Timeline

| ● — — — — — ● — — — — — ● — — — — — ● — — — — — |   |  |  |  |
|---|---|--|--|--|
| Sept 2022                                       | End Sept/Oct 2022   | End Oct 2022   | End Nov 2022   |  |
| INCEPTION                                       | DATA COLLECTION   | PRELIMINARY FINDINGS   | FINALISATION   |  |
| Confirm:<br>Scope, Context and<br>Methodology   | Primary and secondary<br>information collection<br>and review | Provide preliminary<br>findings presentation<br>for discussion | Discussion and<br>finalization of Evaluation<br>Report |  |
| <i>Presentation to<br/>Advisory Group</i>       |   | <i>Presentation to<br/>Advisory Group</i>                      |  |  |

## Contact

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ICRC

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# Annex 6

## Data collection tools

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### Surveys:

#### Tool 1: Survey for EcoSec staff

*Dear EcoSec staff,*

*This survey is being carried out as a contribution of the evaluation of the Analysis and Evidence (A&E) Strategy 2019-2022 ([view the strategy here](#)). Therefore, we would appreciate your feedback on the Strategy and its implementation. All responses are confidential and anonymous. This survey will take some 10 minutes to complete.*

*A&E Strategy evaluation team*

1. In which region are you currently working:
  - The Americas
  - Africa
  - Asia and Pacific
  - Europe and Central Asia
  - Middle East
  - Cross-regional
  - Global/HQ
2. What is your current EcoSec role?
  - EcoSec Coordinator
  - EcoSec Delegate
  - EcoSec Field Officer
  - EcoSec Technical Advisor (e.g. livestock, agriculture, nutritionist etc.)
  - EcoSec Head/Deputy Head of Sector (HQ)
  - Other, please specify. \_\_\_\_\_
3. Do you currently have A&E staff in your delegation?
  - Yes
  - No
  - Don't know
4. The A&E Strategy and its implementation aimed to provide economic security and vulnerability analysis; how relevant has such a service been for the EcoSec activities in your delegation:
  - Not relevant

- A little relevant
- Relevant
- Very relevant
- Don't know

5. To what extent do you believe the A&E Strategy has achieved its mission to:

*"Provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector"*

- Not at all
- A little
- A lot
- Completely
- Don't know

6. To what extent do you believe the A&E Strategy and its implementation has supported the EcoSec activities in your delegation to:

*Identify who is most vulnerable and exposing the underlying causes of their vulnerability*

- Not at all
- A little
- A lot
- Completely
- Don't know

*Determine the most appropriate type and scale of interventions*

- Not at all
- A little
- A lot
- Completely
- Don't know

*Make the results of economic-security and vulnerability analyses readily available to all those in a position to apply or use them*

- Not at all
- A little
- A lot
- Completely
- Don't know

*Develop partnerships and training ICRC staff and local partners to collect, analyse and communicate economic-security information.*

- Not at all
- A little
- A lot
- Completely
- Don't know

7. To what extent have you used or benefited from the following A&E tools and guidelines:

*EcoSec Indicators Cookbook*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*PMFR toolkit*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Dashboards*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*A&E strategy planning guidance*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Standard Post-distribution monitoring tool*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Situation monitoring tool*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Remote Data Collection for Food Security and Economic Vulnerability*

- Not at all
- A little
- A lot

- Always
- Don't know this tool/guide

*Third Party Monitoring: Desk Review and Implementation Guidelines*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

8. Please describe the greatest benefit of the A&E strategy and its implementation for your own EcoSec work:
9. Thinking about the next A&E strategy (combining EcoSec and transversal) that will be developed in 2022, what would be the top three priorities for you? [select three only]
  - Develop the A&E services for other programmes (transversal role)
  - Commit more resources (people and budget) to A&E
  - Provide more analyses to inform your EcoSec programming
  - Provide more A&E tools and guidance for your use
  - Support in making better use of the analyses to improve EcoSec programming
  - Other, please specify: \_\_\_\_\_
10. Thank you for your feedback on the A&E Strategy; please provide any further suggestions or comments here:

## **Tool 2: Survey for Delegation Management (n.b. not used for the evaluation)**

*Dear colleagues,*

*This survey is being carried out as a contribution of the evaluation of the Analysis and Evidence (A&E) Strategy 2019–2022 ([view the strategy here](#)). Therefore, we would appreciate your feedback on the Strategy and its implementation. All responses are confidential and anonymous. This survey will take some 10 minutes to complete.*

*A&E Strategy evaluation team*

1. In which region are you currently working:
  - The Americas
  - Africa
  - Asia and Pacific
  - Europe and Central Asia
  - Middle East
  - Cross-regional
  - Global
2. What is your current role?
  - Head of Delegation
  - Deputy Head of Delegation

- Head of Programmes
  - Head of Operations
  - Head of Sub-Delegation
  - Other, please specify: \_\_\_\_\_
3. Do you currently have A&E staff supporting your EcoSec operations?
- Yes
  - No
  - Don't know
4. The A&E Strategy and its implementation aimed to provide economic security and vulnerability analysis; how relevant has such a service been for the EcoSec activities in your delegation (or sub-delegation):
- Not relevant
  - A little relevant
  - Relevant
  - Very relevant
  - Don't know
5. To what extent do you believe the A&E Strategy has achieved its mission to:
- "Provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector"*
- Not at all
  - A little
  - A lot
  - Completely
  - Don't know
6. To what extent do you believe the A&E Strategy and its implementation has supported the EcoSec activities in your delegation (or sub-delegation) to:
- Identify who is most vulnerable and exposing the underlying causes of their vulnerability*
- Not at all
  - A little
  - A lot
  - Completely
  - Don't know
- Determine the most appropriate type and scale of interventions*
- Not at all
  - A little
  - A lot
  - Completely
  - Don't know
- Make the results of economic-security and vulnerability analyses readily available to all those in a position to apply or use them*
- Not at all
  - A little



- A lot
- Completely
- Don't know

*Develop partnerships and training ICRC staff and local partners to collect, analyse and communicate economic-security information.*

- Not at all
- A little
- A lot
- Completely
- Don't know

7. To what extent have you used in your delegation (or sub-delegation) planning and analysis the following A&E tools and guidelines:

*EcoSec Indicators Cookbook*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*PMFR toolkit*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Dashboards*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Situation monitoring tool*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Post Distribution Monitoring reports*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

*Other Monitoring reports produced by EcoSec / A&E teams*

- Not at all
- A little
- A lot
- Always
- Don't know this tool/guide

8. Please describe the greatest benefit of the A&E strategy and its implementation for the EcoSec operations in your delegation (or sub-delegation):

9. Do you believe the following aspects were sufficient to support the implementation of the A&E Strategy

*The organisational structure put in place (regional and HQ A&E support)*

- Not at all
- A little
- A lot
- Completely
- Don't know

*The skill set and competencies of the A&E staff*

- Not at all
- A little
- A lot
- Completely
- Don't know

*The A&E leadership*

- Not at all
- A little
- A lot
- Completely
- Don't know

*The A&E guidance and standards*

- Not at all
- A little
- A lot
- Completely
- Don't know

*The A&E infrastructure*

- Not at all
- A little
- A lot
- Completely
- Don't know

10. Thinking about the next A&E strategy (combining EcoSec and transversal) that will be developed in 2022, what would be the top three priorities for you? [select three only]
  - Develop the A&E services for other programmes (transversal role)
  - Commit more resources (people and budget) to A&E
  - Provide more analyses to inform EcoSec programming
  - Provide more A&E tools and guidance for use for your EcoSec staff
  - Support in making better use of the analyses to improve EcoSec programming
  - Other, please specify: \_\_\_\_\_
11. Thank you for your feedback on the A&E Strategy; please provide any further suggestions or comments here:

### Tool 3: Interview guide—ICRC A&E staff

*For all interviews, ICRC staff will be advised that all responses are confidential and anonymous; they are also free not to answer any question asked.*

#### Relevance of the strategy

1. How clear is the A&E strategy to you in terms of the A&E mission<sup>16</sup> and deliverables<sup>17</sup>?
2. Is the Strategy relevant and aligned with institutional needs and priorities, for example in the context(s) you are currently working/supporting?
3. What are the key factors that will ensure the future relevance of the Strategy, particularly in light of the move to Transversal A&E?
4. How measurable was the Strategy and to what extent did it set out clear expectations?
5. Is the Strategy still relevant for the context(s) you are currently working/supporting? What aspects are particularly relevant—and not relevant?
6. Are there any factors which are likely to undermine the future relevance of the strategy, particularly with regard to the move to a Transversal A&E service?
7. Are you aware of any strategies and approaches that other organisations have in place to strengthen quality evidence and analysis? Are there any aspects of these which are considered to be good/best practice?

#### Strategy results and factors affecting implementation

8. To what extent have the outputs of the Strategy (e.g. guidelines, tools etc.) been used in the context(s) you are currently working/supporting?<sup>18</sup> What have you found particularly useful—and not useful?
9. What are the key results of the implementation of the Strategy that you have seen in the context(s) you are currently working/supporting?

<sup>16</sup> The A&E mission is: To provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector.

<sup>17</sup> The four focuses of the Strategy are: a) identifying who is most vulnerable and exposing the underlying causes of their vulnerability; b) determining the most appropriate type and scale of intervention; c) making the results of economic-security and vulnerability analysis readily available to all those in a position to apply or use them; d) developing partnerships and training ICRC staff and local partners to collect, analyse and communicate economic-security information.

<sup>18</sup> Reference can be made to the eight service areas and the tools/guidelines produced.

10. How sustainable are the results achieved to date of the Strategy in the context(s) you are currently working/supporting?
11. To what extent has organisational capacity e.g.:
  - a. Financial and human resources
  - b. Organisational structure
  - c. Skillsets and competencies
  - d. Leadership
  - e. Guidance and standards
  - f. Infrastructure
 been sufficient to implement the Strategy?
12. To what extent have organisational factors such as organisational culture, history, buy-in, and politics has affected the implementation of the Strategy?
13. Are there any other factors which have influenced implementation of the Strategy, such as operational context?
14. Other comments and/or recommendations for the future Strategy?

#### **Tool 4: Interview guide—ICRC EcoSec staff**

##### **Relevance of the strategy**

15. How clear is the A&E strategy to you in terms of the A&E mission<sup>19</sup> and deliverables<sup>20</sup>?
16. Is the Strategy relevant and aligned with institutional needs and priorities, for example in the context(s) you are currently working/supporting?
17. What are the key factors that will ensure the future relevance of the Strategy, particularly in light of the move to Transversal A&E?
18. Is the Strategy still relevant for the context(s) you are currently working/supporting? What is particularly relevant—and not relevant?
19. Are there any factors which are likely to undermine the future relevance of the strategy, particularly with regard to the move to a Transversal A&E service?

##### **Strategy results and factors affecting implementation**

20. To what extent have the outputs of the Strategy (e.g. guidelines, tools etc.) been used in the context(s) you are currently working/supporting<sup>21</sup>? What have you found particularly useful—and not useful?
21. What are the key results of the implementation of the Strategy that you have seen in the context(s) you are currently working/supporting?

<sup>19</sup> The A&E mission is: *To provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector.*

<sup>20</sup> The four focuses of the Strategy are: a) identifying who is most vulnerable and exposing the underlying causes of their vulnerability; b) determining the most appropriate type and scale of intervention; c) making the results of economic-security and vulnerability analysis readily available to all those in a position to apply or use them; d) developing partnerships and training ICRC staff and local partners to collect, analyse and communicate economic-security information.

<sup>21</sup> Reference can be made to the eight service areas and the tools/guidelines produced.

22. How sustainable are the results achieved to date of the Strategy in the context(s) you are currently working/supporting?
  - a. To what extent has organisational capacity e.g.:
    - b. Financial and human resources
    - c. Organisational structure
    - d. Skillsets and competencies
    - e. Leadership
    - f. Guidance and standards
    - g. Infrastructure
 been sufficient to implement the Strategy?
23. To what extent have organisational factors such as organisational culture, history, buy-in, and politics has affected the implementation of the Strategy?
24. Are there any other factors which have influenced implementation of the Strategy, such as operational context?
25. Other comments and/or recommendations for the future Strategy?

## **Tool 5: Interview guide—ICRC Delegation Management**

### **Relevance of the strategy**

26. How aware were you that there was an A&E strategy? If you are, how clear is it to you— notably the mission<sup>22</sup> and deliverables<sup>23</sup>?
27. Is the Strategy relevant and aligned with institutional needs and priorities, for example in the context(s) you are currently working/supporting?
28. What are the key factors that will ensure the future relevance of the Strategy, particularly in light of the move to Transversal A&E?
29. Is the Strategy still relevant for the context(s) you are currently working/supporting? What is particularly relevant—and not relevant?
30. Are there any factors which are likely to undermine the future relevance of the strategy, particularly with regard to the move to a Transversal A&E service?

### **Strategy results and factors affecting implementation**

31. To what extent have the outputs of the Strategy (e.g. guidelines, tools etc.) supported the work in the context(s) you are currently working/supporting<sup>24</sup>? Can you indicate a guideline, tool or other aspect that has been particularly useful for your delegation(s)?

22 The A&E mission is: *To provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector.*

23 The four focuses of the Strategy are: a) identifying who is most vulnerable and exposing the underlying causes of their vulnerability; b) determining the most appropriate type and scale of intervention; c) making the results of economic-security and vulnerability analysis readily available to all those in a position to apply or use them; d) developing partnerships and training ICRC staff and local partners to collect, analyse and communicate economic-security information.

24 Reference can be made to the eight service areas and the tools/guidelines produced.

32. What are the key results of the implementation of the Strategy that you have seen in the context(s) you are currently working/supporting?
33. How sustainable are the results achieved to date of the Strategy in the context(s) you are currently working/supporting?
- a. To what extent has organisational capacity e.g.:
  - b. Financial and human resources
  - c. Organisational structure
  - d. Skillsets and competencies
  - e. Leadership
  - f. Guidance and standards
  - g. Infrastructure
- been sufficient to implement the Strategy?
34. To what extent have organisational factors such as organisational culture, history, buy-in, and politics has affected the implementation of the Strategy?
35. Are there any other factors which have influenced implementation of the Strategy, such as operational context?
36. Other comments and/or recommendations for the future Strategy?

# Annex 7

## List of documents reviewed

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- Analysis & Evidence Strategy 2019–2022
- Analysis and Evidence, Strategy 2023–2027, Protection and Essential Services (draft)
- Analysis and Evidence in Action report 2022
- Economic Security Indicators Cookbook
- Targeting, selection and prioritization methods for economic security programmes
- Strengthening Evidence-Based Decision-Making in Delegations: Analysis and Evidence
- Planning Guidance
- Remote Data Collection for Food Security and Economic Vulnerability: PART 1
- Remote Data Collection for Food Security and Economic Vulnerability: PART 2
- Implementation Guidelines
- Third Party Monitoring: Desk Review and Implementation Guidelines
- How To...Calculate Income and Expenditure
- Managing Evaluations in the Field—Step-by-Step planning Guidance (forthcoming)
- Multidisciplinary Assessments: Lessons Learned from the Near and Middle East Region
- A&E in brief
- A&E toolkit
- PMfR toolkit
- Transversal A&E toolkit
- A&E Job / Role Description templates
- 2020 A&E strategy implementation plan
- 2021 A&E strategy implementation plan
- 2022 A&E strategy implementation plan
- A&E examples (various reports, assessments, tools, strategies, etc.)
- The Operations partnership (2021), Review of humanitarian MEAL practices—Sector benchmarking



## Annex 8

### List of persons interviewed

| #  | Title  | Category        | Location                    |
|----|--|-----------------|-----------------------------|
| 1  | Head of EcoSec 2016–2021                             | EcoSec          | Geneva HQ                   |
| 2  | Head of EcoSec since 2021                            | EcoSec          | Geneva HQ                   |
| 3  | Deputy Head of EcoSec 2018–2022                      | EcoSec          | Geneva HQ                   |
| 4  | A&E Lead   | A&E             | Geneva HQ                   |
| 5  | A&E Reg. Specialist (NAME-Eurasia)                   | A&E             | NAME RRN                    |
| 6  | A&E Reg. Specialist (East Africa—Asia)               | A&E             | NAIROBI RRN                 |
| 7  | A&E Reg. Specialist (West Africa)                    | A&E             | DAKAR RRN                   |
| 8  | A&E Delegate   | A&E             | Niger delegation            |
| 9  | A&E Delegate   | A&E             | Yemen delegation            |
| 10 | A&E Specialist                                       | A&E             | Colombia                    |
| 11 | A&E Project Advisor                                  | A&E             | Geneva HQ                   |
| 12 | Head of Sector EcoSec (Africa)                       | EcoSec          | Geneva HQ                   |
| 13 | Head of Sector EcoSec (NAME—Americas)                | EcoSec          | Geneva HQ                   |
| 14 | Head of Sector EcoSec (Asia—Eurasia)                 | EcoSec          | Geneva HQ                   |
| 15 | EcoSec Coordinator                                   | EcoSec          | Nigeria delegation          |
| 16 | EcoSec Coordinator                                   | EcoSec          | Ukraine delegation          |
| 17 | Rapid Deployment Advisor EcoSec                      | EcoSec          | Geneva HQ                   |
| 18 | Head of Regional Affairs (NAME) 2020–2022            | Delegation Mgt. | Amman regional delegation   |
| 19 | Head of Regional Affairs (E.Africa)                  | Delegation Mgt. | Nairobi regional delegation |
| 20 | Head of Regional Affairs (NAME)                      | Delegation Mgt. | Amman regional delegation   |
| 21 | EcoSec Data & Analytics Lead                         | A&E             | BSSC                        |
| 22 | EcoSec Data Reporting Lead                           | EcoSec          | Geneva HQ                   |
| 23 | Deputy Head of Delegation                            | Delegation Mgt. | Yemen delegation            |
| 24 | Deputy Head of Delegation                            | Delegation Mgt. | Colombia delegation         |
| 25 | Head of AAP Unit                                     | Other           | Geneva HQ                   |
| 26 | Deputy Director of Protection and Essential services | Other           | Geneva HQ                   |

|    |                                   |                 |  |
|----|-----------------------------------|-----------------|--|
| 27 | EcoSec Coordinator                | EcoSec          | Israel and the Occupied Territories delegation |
| 28 | EcoSec Coordinator                | EcoSec          | Somalia delegation                             |
| 29 | A&E Specialist                    | A&E             | Iraq delegation                                |
| 30 | A&E Specialist                    | A&E             | Libya and DRC delegations                      |
| 31 | EcoSec Livestock Reg. Advisor     | EcoSec          | Dakar RRN                                      |
| 32 | Regional EcoSec Trainer           | EcoSec          | Nairobi regional delegation                    |
| 33 | Regional Cash & Market Specialist | EcoSec          | Amman regional delegation                      |
| 34 | Cash and markets specialist       | EcoSec          | Geneva HQ                                      |
| 35 | Deputy Head of Delegation         | Delegation mgt. | Central African Republic delegation            |
| 36 | EcoSec Coordinator                | EcoSec          | Yemen delegation                               |

# Annex 9

## Terms of Reference

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### EVALUATION

#### EcoSec Analysis & Evidence Strategy 2019–2022

#### Terms of Reference

June 2022

#### Background

These Terms of Reference (ToR)<sup>25</sup>, developed in line with ICRC's ToR checklist<sup>26</sup> requirements are for the evaluation of the **Analysis & Evidence Strategy 2019–2022** (from now on referred to as "the Strategy") of the Economic Security (EcoSec) unit of the International Committee of the Red Cross (ICRC). The Strategy was developed by the Analysis & Evidence (A&E) Lead, in collaboration with team members and in consultation with a range of internal and external stakeholders and approved by the Head of the EcoSec unit in 2018. The Strategy was developed following the set-up of the Analysis & Evidence (A&E) team in that same year. The team was created as a result of the increasing interest of the organisation—and the EcoSec unit in particular—to design and build its programmes based on the best available evidence. More details on the context of the Strategy can be found in the Strategy document.

The mission of the A&E team's work has been to provide economic security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector. This is defined in the Strategy which outlines the guiding principle to deliver such a mission. The Strategy focuses on 8 strategic orientations and 8 main types of services offered by the team. Since the kick-off of the Strategy, each of these areas has benefitted from specific investment. A continuously evolving set of processes and products have been made available for staff in the field.

Since its creation in 2018, the A&E team grew exponentially. In 2022 the A&E team consists of staff spread across HQ, regional hubs and delegations. There are currently more than 60 staff as part of the A&E network. The A&E team is linked by a functional management structure which provides oversight, technical advice, training and coaching to ensure quality and effectiveness of A&E support to EcoSec programmes. HQ defines guidelines and outlines the key global priorities for the team together with regional specialists. Regional specialists, on top of their institutional contribution, provide support to the delegations in their regions and oversee the work of A&E focal points in the field. In delegations, the A&E focal point is the direct contact point (together with the EcoSec Coordinator) on A&E activities. A&E focal points are expected to be the first level support within the delegation in the areas of assessments, M&E, data collection, information management, analysis and reporting.

<sup>25</sup> This ToR will be updated before the consultancy with latest contextual information, list of documents and people to be interviewed in line with the Transversal Analysis & Evidence scoping phase

<sup>26</sup> Internal ICRC document

In ICRC, an Outcome Based Approach (OBA) initiative is ongoing, of which one of the components is promoting a more intentional and systematic outcome-based learning and evidence capacity beyond EcoSec for the whole ICRC Protection & Essential Services (P&ES) division. For 2022, the A&E team has received a mandate to explore, in close collaboration with the OBA initiative, options to expand its services beyond the EcoSec unit and serve as a Transversal A&E Function for the institution. The expected impact of such a function is strengthened programme quality, accountability, learning and multidisciplinary programming across the institution.

A scoping phase is ongoing from January—June 2022, which, if approved, will lead to the development of a Transversal A&E Strategy 2023-2027 in the second part of 2022.

The A&E team has requested an evaluation of the Strategy in the second half of 2022. The evaluation of the A&E Strategy 2019–2022 is triggered by various factors:

- An evaluation of the A&E Strategy 2019–2022 was already planned at the drafting stage. The Strategy document recommends a final evaluation of the strategy in order to document lessons learnt and incorporate them in the next strategy.
- **ICRC's evaluation framework** encourages the evaluation of strategies to create an objective evidence base to support important decisions, draw lessons for improvement and enhance organisational accountability (including transparency).
- With the development of a Transversal A&E Strategy for 2023–2027 in the second half of 2022, a timely evaluation of the A&E Strategy 2019–2022 ensures lessons learned and recommendations feed into the future Transversal A&E Strategy.

The purpose of this ToR is to provide key information to stakeholders about the proposed evaluation, to guide the selection of external evaluator(s) and to specify expectations that the evaluator(s) should fulfil.

The evaluation is scheduled to take place in the second half of 2022. It will be managed by the A&E team with oversight from the Evaluation Office and conducted by (an) external evaluator(s).

## Objective of the evaluation

The objective of the evaluation is to assess the stated mission and aims of the Strategy and the mechanisms developed to implement it, in order to identify what has or has not been achieved, understanding the challenges or enabling factors and making tailored recommendations. It will help inform the preparation of a future Transversal A&E Strategy.

The evaluation will contribute to accountability and learning:

- **Accountability:** the evaluation will assess and report on the quality and results of the Strategy and its associated services, strategic orientations, action plan and implementation structure. A response to the evaluation recommendations will be prepared by the A&E team and the actions taken in response will be tracked over time.
- **Learning:** the evaluation will assess the quality of the Strategy given the context in which it was developed, determine the reasons why changes have or have not occurred, draw lessons, and derive good practices for learning. It will provide evidenced-based findings to assist in decision-making around the formulation of the future Transversal A&E Strategy.

## Scope of the evaluation

The evaluation will cover the *Analysis & Evidence Strategy 2019–2022*, which states as its mission: *To provide economic-security and vulnerability analysis that guides and influences ICRC programmes and policies, while establishing EcoSec and the ICRC as a technical and agile partner of choice for analytical services in the humanitarian sector.* More specifically, the aims of the Strategy are:

- Identifying who is most vulnerable and exposing the underlying causes of their vulnerability
- Determining the most appropriate type and scale of intervention
- Making the results of economic-security and vulnerability analysis readily available to all those in a position to apply or use them
- Developing partnerships and training ICRC staff and local partners to collect, analyze and communicate economic-security information.

The strategy offers 8 different type of services in an “A&E menu”, 8 strategic orientations and corresponding action plan and a proposed implementation structure:

- **A&E services:** needs assessments; situation monitoring and early warning; monitoring and evaluation; thematic analyses: data collection; data and beneficiary management; data visualization, reporting and information management; spatial analysis and remote sensing.
- **Strategic orientations and action plan:** simplification and harmonization of tools and services; capacity strengthening and staffing; targeting; evidence-based programmes; agility and innovation; data sharing, information management, communication and branding; partnerships and internal collaboration.
- **An implementation structure:** proposed HR set-up for the A&E Strategy 2019–2022

The evaluation primarily focuses on addressing the quality of all elements of the Strategy (Mission and corresponding operational context and background, A&E services, strategic orientations and action plan and implementation structure) and its related implementation mechanisms, including guidance, tools, processes and capacity strengthening initiatives. The evaluation will cover the period of implementation of the Strategy from 2019–2022 (recognizing that the evaluation will be conducted before the end of the Strategy period).

## Stakeholders and users of the evaluation

The Stakeholders of the evaluation are:

- **EcoSec clients:** Economic Security thematic files such as Nutrition, Microeconomic Initiatives, Resilience, Agriculture, Livestock, Cash and Voucher Assistance, Data Management and Institutional Reporting, Trainers.
- **Other units and divisions:** Protection Data Unit, Evaluation Office, the Centre for Operational Research and Experience (CORE), Outcome Base Approach (OBA), Planning, Monitoring & Evaluation (PME), Accountability to Affected People (AAP), Diversity & Inclusion, Data Management and Analytics, Digitalization of Operations (DigitOp), Digital Transformation of Data (DTD), Geo Data & Analytics, Archives & Information Management, Resource Mobilization, Information and Communication Technologies (ICT), Innovation Unit, WatHab, Weapon Contamination (WeC), Health, Detention, Protection of Civilian Population (PCP).
- **A&E team:** A&E team members at global, regional and delegation level.

- **Regions and field:** Regional Resource Networks (RRN's) and delegations.
- **External:** Partners (e.g., IFRC, NorCross, JDC, WFP) and service providers (e.g., Red Rose, Device Magic).

Main users of the results of the evaluation will be the Transversal A&E Function and Protection & Essential Services (P&ES). It will provide these users evidenced-based findings to assist in decision-making around the formulation of the future Transversal A&E Strategy.

## Evaluability assessment

Preliminary analysis carried out in line with **ICRC's evaluability checklist**<sup>27</sup> requirements confirm the feasibility of conducting an evaluation of the Strategy:

- **Institutional context:** The evaluation fits within **ICRC's evaluation framework**, which encourages the evaluation of strategies to create an objective evidence base to support important decisions, draw lessons for improvement and enhance organisational accountability (including transparency). The evaluation is supported by the Evaluation Office, and there is a clear need for the timing of the evaluation to feed into the Transversal A&E Strategy development phase. Stakeholders will be available for the evaluation, but it should be noted that data collection from stakeholders will mainly be envisioned online. Constraints are that because of limited resources available in the Evaluation Office the A&E team has been requested to act as managers of this evaluation, which will reduce the capacity of the A&E team for operational work.
- **Information availability:** A complete set of documentation is available on implementation mechanisms of the Strategy, such as guidance, tools, processes and capacity strengthening initiatives. This includes information for the desk review such as toolkits, mission and workshop reports, workplans etc (see Annex 1).
- **Theory of change and logframe:** One aspect that may affect evaluability and which will need to be assessed by the evaluation team as part of its inception work is that the Strategy does not include a formal theory of change or logical framework. Each strategic orientation however has listed outcomes (although baselines and targets are not identified). The evaluator(s) are therefore expected to conduct a systematic evaluation of the evaluation of the Strategy rather than a theory-based approach.

## Evaluation questions and criteria

The following three evaluation questions are developed and include sub-questions to be further detailed by the evaluation team when preparing the evaluation matrix during the inception phase.

**Question 1: Was the Strategy relevant and what are the key factors that will ensure its continued relevance or might undermine future relevance?**

The evaluation will assess the relevance of the Strategy considering international practice in the humanitarian sector, and benchmark with similar strategies by comparable organisations in the humanitarian sector. It will assess whether the Strategy was designed to attain results and support EcoSec's ambition to design and build its programmes based on the best available evidence. Potential sub-questions include:

- Was the Strategy consistent, coherent and complementary in relation to other related strategies, plans or frameworks in the institution at global, regional or delegation level?

- Was the Strategy specific and provided stakeholders clarity on its mission and deliverables?
- Was the Strategy measurable and did it set clear expectations?
- Was the Strategy achievable by the team and stakeholders?
- Was the Strategy relevant to institutional needs and priorities?
- Has the Strategy remained relevant over the evaluation period?
- What elements of the Strategy will remain relevant in face of institutional developments, such as the Transversal A&E scoping phase?

#### Question 2: What were the results of the Strategy?

The evaluation will assess the main areas in which results were achieved and for whom, as well as the main types of results produced and their sustainability (see Annex 1 for a list of documents for the desk review including outputs of the Strategy). The evaluation will generate an understanding of other factors that led to changes at delegation, regional and global levels to establish plausible associations between those and the Strategy. Potential sub-questions include:

- To what extent was the Strategy effective and have its aims and outputs been achieved?
- What were intended and unintended results of the implementation of the Strategy?
- How have outputs (e.g., guidelines, tools etc.) of the Strategy been used at delegation, regional and global level?
- How efficient were the A&E team and stakeholders in achieving the results of the Strategy? (e.g., allocation of resources, cost-efficiency, timeliness)
- To what extent is it likely that the results of the Strategy will continue after implementation of the Strategy?

#### Question 3: What factors have affected implementation and results of the Strategy?

The evaluation will look at explanatory factors that resulted from the way in which the Strategy was developed and articulated the way in which it was implemented and incentives, triggers or explanatory factors that caused the observed changes. Potential sub-questions include:

- Was the organisational capacity, including financial and human resources, organisational structure, appropriate skill sets and competencies, leadership, guidance and standards, infrastructure etc. sufficiently available to implement the Strategy?
- How was Strategy implementation affected by organisational motivation factors, including organisational culture, organisational history, buy-in and political will?
- How did the enabling environment, including funding levels, operational context etc. affect Strategy implementation?

The evaluation will be guided by the following criteria:

- **Relevance:** The extent to which the Strategy responded, or is expected to respond, to stakeholder's needs, policies and priorities
- **Effectiveness:** The extent to which the Strategy achieved, or is expected to achieve, its objectives and its results
- **Efficiency:** The extent to which the Strategy delivered, or is likely to deliver, results in an economic and timely way



- **Sustainability:** The extent to which the net benefits of the Strategy are likely to continue
- **Coherence:** The extent to which the Strategy is compatible in relation to other related strategies, plans or frameworks?

## Methodology of the evaluation

The evaluator(s) will be expected to take a sound methodological approach to ensure high quality, credibility and use of the evaluation. The evaluation methodology will systematically address the evaluation questions in a way that meets the dual purposes of accountability and learning.

The inception phase should include (online) technical briefings and exchange with key stakeholders to get preliminary information about the Strategy to be evaluated. The output of the inception phase will be an inception report, in line with [ICRC's inception report checklist](#) requirements, including:

- A detailed evaluation matrix
- A data collection methodology, including interviews and document reviews complemented by potential quantitative surveys
- Data collection tools
- List of interviewees
- A clear criterion for the selection of organisations to benchmark against and a list of organisations chosen from the humanitarian sector
- A workplan and timeline

During the data collection phase, the evaluator(s) are expected to collect data through a desk review, a purposive sample of (online) interviews with stakeholders at global, regional and delegation level (individual or group discussions) (see Annex 2), and quantitative surveys (e.g., survey monkey).

The methodology should allow for the sharing of regular updates in the course of the evaluation through draft reports, workshops and or/briefings for results to feed into the draft of the Transversal A&E Strategy.

The final report should be in line with [ICRC's evaluation report checklist<sup>28</sup>](#) requirements.

Evaluator(s) bidding are expected to identify the main risks in their proposed evaluation design and methodology and how they would manage these risks.

## Roles and responsibilities

The following roles and responsibilities for managing the evaluation process are identified:

- **Evaluator(s):** (an) external evaluator(s) will be hired, who were not involved in the design, implementation or monitoring of the Strategy, nor have any other conflicts of interests. The external evaluator(s) are responsible for carrying out the evaluation, including setting out the methodology and approach in the inception report, drafting data collection tools and implementing data collection, organising consultations with various evaluation stakeholders, delivering the inception, draft and final reports.

- **Evaluation Manager(s):** the evaluation will be managed by members of the global and regional A&E team who are responsible for drafting the terms of reference, selecting and contracting the evaluator(s); preparing and managing the budget; organising briefings for the evaluator(s); assisting in the preparation of the inception and data collection and meetings; conducting the first reviews of evaluation products; consolidating comments from stakeholders on the main evaluation outputs; disseminating outputs and results. The evaluation managers will be the interlocutor between the evaluator(s) and ICRC counterparts to ensure a smooth communication and implementation of the evaluation process. Filippo Minozzi, Analysis & Evidence lead based in HQ is the main contact person with the evaluator(s).
- **Evaluation Office:** responsible for providing oversight (technical advice, support and endorsement) for key stages such as the development of the terms of reference, inception and evaluation report, and recruitment of the evaluation team.
- **Dissemination Group:** Protection & Essential Services, which will be kept informed by the Evaluation Manager(s) about key steps and outcomes of the evaluation.

### Organisation of the evaluation

A high-level overview of key deliverables and tentative deadlines of the evaluation has been developed (see Figure 1). A more detailed timeline and workplan is expected to be developed by the evaluator(s).

The following deliverables are expected from the evaluator(s):

- Draft and final inception report
- 2 debriefing workshops
- Draft and final evaluation report
- Final evaluation report executive summary

The final evaluation report's executive summary (and/or the full report) will be published on the ICRC's website.

**Table 1. Preliminary timeline and key deliverables**

| Activities and deliverables                                    | Responsible                            | Working days | Dates        |
|--|--|--------------|--------------|
| <b>Preparation (by ICRC):</b>                                  |  |              |              |
| Terms of Reference developed and agreed with Evaluation Office | Evaluation Managers                    |              | 17 June      |
| Receipt of bids from evaluation firms                          | Evaluation Managers                    |              | 22 July      |
| Final selection evaluator(s)                                   | Evaluation Managers                    |              | 5 August     |
| <b>Inception:</b>  |  |              |              |
| Briefings with key stakeholders (and potential visit to HQ);   | Evaluation Managers and evaluator(s)   |              | 12 August    |
| Review of documents and data for desk review                   | Evaluation Managers and evaluator(s)   |              | 12 August    |
| Submit draft inception report                                  | Evaluator(s)                           |              | 31 August    |
| Feedback on draft inception report                             | Evaluation Managers, Evaluation Office |              | 09 September |

| Activities and deliverables  | Responsible                            | Working days | Dates        |
|--|--|--------------|--------------|
| Submit revised inception report  | Evaluator(s)                           |              | 23 September |
| Inception report   |  |              |              |
| <b>Data collection:</b>  |  |              |              |
| Desk review and primary data collection  | Evaluator(s)                           |              | 28 October   |
| Debriefing presentation / update (to feed into transversal A&E Strategy phase)   | Evaluation Managers and evaluator(s)   |              | 29 September |
| Debriefing presentation 2 / update (to feed into transversal A&E Strategy phase) | Evaluator(s)                           |              | 29 October   |
| <b>Reporting:</b>  |  |              |              |
| Submit draft evaluation report   |  |              | 11 November  |
| Feedback on draft evaluation report  | Evaluation Managers, Evaluation Office |              | 18 November  |
| Submit final draft evaluation report, executive summary                          | Evaluator(s)                           |              | 30 November  |
| <b>Presentation</b>  |  |              |              |
| Presentation to dissemination group  | Evaluation Managers                    |              | 15 December  |

### Profile of the evaluator(s)

Evaluator(s) will be selected according to [International Humanitarian Evaluation Profession Standards<sup>29</sup>](#). The evaluator(s) should have strong expertise in conducting global evaluations and the use of mixed methods in evaluation, and in-depth technical knowledge of humanitarian Information Management and Monitoring & Evaluation. The evaluator(s) have the following knowledge and expertise:

- Senior experience in global Strategy Evaluations
- In-depth knowledge of humanitarian Information Management, Monitoring & Evaluation (through studies, professional experience or consulting)
- In-depth knowledge of the humanitarian Information Management and Monitoring & Evaluation landscape, through either direct experience or an evaluation of a similar organisation
- Familiar with current practices and debates referring to humanitarian Information Management and Monitoring & Evaluation
- Sound knowledge of or experience in ICRC operations will be considered an advantage
- Good communications skills and experience of workshop facilitation
- Ability to write clear and useful reports
- Fluent in English, including team members fluent in French/Spanish
- Ability to manage the available time and resources and to work to tight deadlines
- Independence from the parties involved

## **Ethical matters**

The ownership of the draft and final documentation belongs to the ICRC exclusively. The document, or publication related to it, will not be shared with anybody except ICRC. ICRC is to be the main addressee of the evaluation and its results might impact on both operational and technical strategies. ICRC might share the results of the evaluation with donor(s) and relevant partners. All documentation shall remain the sole and exclusive property of the ICRC.

Evaluator(s) are required to adhere to international best practices and standards in evaluation. Specifically, evaluator(s) are required to abide by the Professional Standards for Protection Work; the ICRC's Code of Conduct; the ICRC's Code of Ethics for Procurement; and the ICRC Rules on Personal Data Protection.

## **Budget**

The total costs for this evaluation cannot exceed CHF 40,000.

## **Instructions for the submission of the proposal**

The proposal for this evaluation has to include, on top of the proposal itself, the CVs of the team members and the budget. It has to be submitted by email to [evaluation@icrc.org](mailto:evaluation@icrc.org) by July 22, 2022 at 23.59 CEST.

# Annex 10

## Evaluation timeline

The following table sets out the foreseen timeline for the evaluation; of note the evaluation was delayed in starting and data collection; it concluded in January 2023.

| Week                                | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | 11    | 12    | 13    | 14    |
|-------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
|                                     | 29/08 | 05/09 | 12/09 | 19/09 | 26/09 | 03/10 | 10/10 | 17/10 | 24/10 | 31/10 | 07/11 | 14/11 | 21/11 | 28/11 |
| <b>Inception phase</b>              |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Document review                     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Kick-off meeting                    |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Drafting IR                         |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| IR submission                       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| IR QA/validation                    |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| <b>Data collection phase</b>        |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Data collection                     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Presentation of initial findings    |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| <b>Analysis and Reporting phase</b> |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Analysis and report drafting        |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Draft report submitted              |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Report QA / validation#             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Final report submitted              |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Final presentation                  |       |       |       |       |       |       |       |       |       |       |       |       |       |       |

