

# Study on the effectiveness of humanitarian partners and funding relations of the Netherlands

Case study report – Yemen

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Disclaimer: the opinions expressed in this report are those of the evaluation team, and do not necessarily reflect those of IOB.

Responsibility for the opinions expressed in this report rests solely with the authors.

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# 1 Introduction

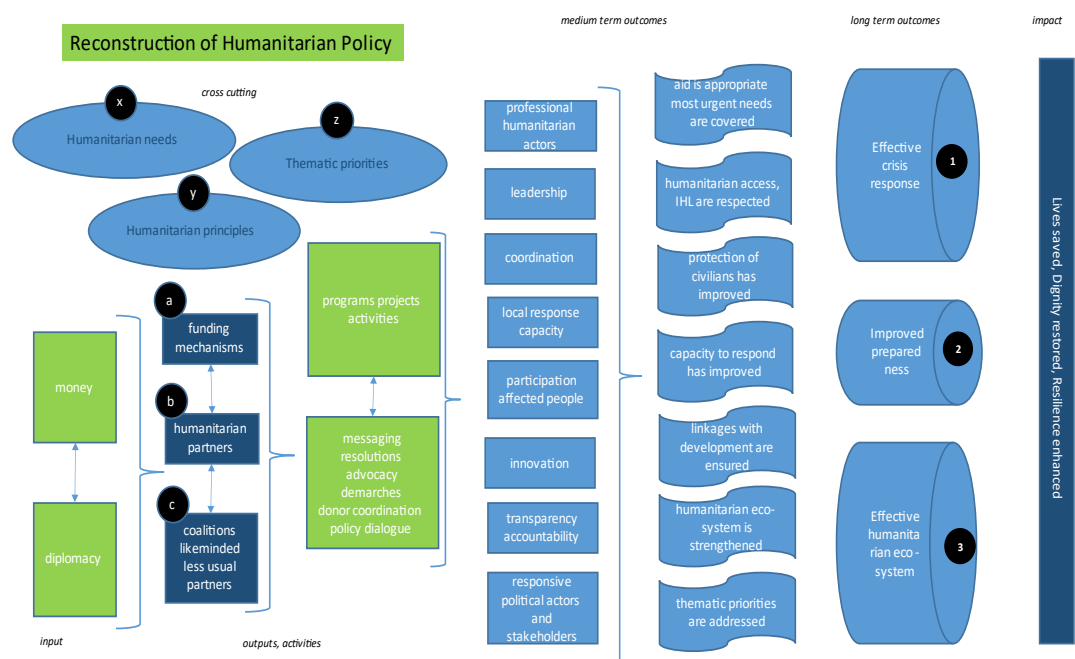
## 1.1 Background to the study

“The humanitarian objectives of the Netherlands are defined by the wish to save lives, restore dignity and enhance the resilience of people affected by humanitarian disasters and crises”.<sup>1</sup> To meet such objectives the Dutch government has provided financial support to a number of selected humanitarian partners and funding mechanisms, providing non-earmarked, semi-earmarked, and earmarked funding with a global coverage. This is intended “to support an effective crises response, to improve preparedness, and to build an effective humanitarian eco-system”.<sup>2</sup> Such funding is supplemented by diplomatic and advocacy activities.

So as to evaluate the effectiveness of such activities, the Policy and Operations Evaluation Department of the Dutch Ministry of Foreign Affairs (IOB) commissioned a number of evaluations and reviews, including this Yemen case study: one of three case study countries, the other two being Syria and South Sudan. Consolidation of all these activities will be undertaken by IOB themselves.

Figure 1 below reflects the Dutch humanitarian policy between 2015-2020, indicating inputs, outputs, activities, cross-cutting principles, medium-term and long-term expected outcomes, as well as intended impact. It also illustrates the three fundamental pathways adopted to reach the above-mentioned objectives: a) funding mechanisms, b) humanitarian partners, and c) humanitarian diplomacy. These are the key focal areas of the study. Each pathway is further elaborated in detail (see Annex 1) where the assumptions underpinning the expected outcomes are indicated.

Figure 1. Dutch Humanitarian Policy 2015-2020



<sup>1</sup> Terms of reference, Annex 1 Reconstruction of Humanitarian Policy.

<sup>2</sup> Terms of reference, page 1.

For pathways a and b, the Dutch government department for Stabilisation and Humanitarian Aid (DSH) “allocates around 40-55% of the humanitarian budget as predictable, flexible, and unearmarked core funding to a limited number of “experienced humanitarian partners”, with whom there is a long-term relationship”.<sup>3</sup> Partners include UN organisations such as the World Food Programme (WFP), United Nations’ Children’s Fund (UNICEF), UN organisation for the Co-ordination of Humanitarian Affairs (OCHA) and the UN High Commission for Refugees (UNHCR), plus Red Cross partners: the International Committee of the Red Cross (ICRC), International Federation of Red Cross and Red Crescent Societies (IFRC), The Netherlands Red Cross (NLRC), as well as the Dutch Relief Alliance (DRA). These organisations are trusted to spend such funding where it is needed most, whilst considering the Dutch government’s humanitarian objectives and priorities.

Unearmarked funding through DSH annual contributions to the “experienced humanitarian actors” for the period 2015-2020 are as follows:

Table 1. Annual €M allocation to experienced humanitarian partners by year

Year	WFP <sup>4</sup>	UNICEF <sup>5</sup>	OCHA	UNHCR	ICRC <sup>6</sup>	IFRC	NLRC	DRA
2015	36.0	15.0	5.0	33.0	40.0	0	15.0	-
2016	36.0	19.0	5.0	42.0	40.0	0	16.5	-
2017	49.0	17.0	7.0	46.0	40.0	0	17.4	60.0
2018	36.0	17.0	5.0	33.0	40.0	0	17.2	60.0
2019	36.0	10.2	7.0	33.0	40.0	0.2	16.2	70.0
2020	36.0	10.2	7.0	33.0	45.0	0.9	24.9	70.0

Additionally, “softly (semi) earmarked funding is made available for ongoing chronic crises, in response to new developments, and acute crises during the year. On average 30-40% of the overall budget is allocated to partners for humanitarian assistance in specific crises”.<sup>7</sup> For such specific crises DSH selects the most appropriate partner or funding mechanism that the partner manages, for example the UN Country Based Pool Fund (CBPF) or the DRA, setting aside approximately €15 million at the start of each year.<sup>8</sup> DSH also contributes a significant sum annually to the UN Central Emergency Response Fund (CERF) fund often being the second highest donor each year. The balance of DSH’s humanitarian budget has consisted of direct earmarked contributions to experienced partners in specific countries. This method of funding has not been utilised in Yemen since 2017.

Annual allocations from 2015-2020 to the UN CERF fund, as well as CBPF and direct funding contributions to Yemen were as follows:

<sup>3</sup> IOB report: “Dutch decision-making on humanitarian assistance: Strengths and Weaknesses. September 2021

<sup>4</sup> WFP was supported with €108M for 2019 through 2021.

<sup>5</sup> UNICEF has received €51M for the period 2109-2023

<sup>6</sup> The ICRC has been provided €120M to cover three years from 2019 onwards. This was supplemented with a €5M COVID top up in September 2020

<sup>7</sup> IOB report: “Dutch decision-making on humanitarian assistance: Strengths and Weaknesses. September 2021.

<sup>8</sup> Ibid.

Table 2. Annual CERF, CBPF and Direct allocations to Yemen

Year	Netherlands annual contribution to the CERF <sup>9</sup> \$M	CERF allocation to Yemen \$M	DSH allocation to Yemen Humanitarian Fund (YHF) CBPF \$M	DSH direct allocation to Yemen
2015	59.2	44.2	13.5	-
2016	60.5	15.0	11.3	4.0
2017	71.3	25.6	8.2	6.0
2018	67.9	49.9	19.0	-
2019	71.3	31.7	12.9	-
2020	98.0	65.0	15.3	-

The CERF and pool funding is allocated in-country by OCHA to a range of UN agencies, plus INGOs and NGOs.

DSH aims to promote crosscutting thematic priorities such as localisation, innovation, and the triple nexus, as well as other specific focal areas. Currently there are eighteen thematic priorities, and the ongoing assumption is that the above-mentioned core funding, together with flexible support to ongoing and new crises, will enable the Netherlands to gain influence and promote the adoption and inclusion of such thematic priorities within humanitarian sectoral responses. These assumptions were reviewed within the scope of this study: please refer to the relevant findings sections below.

## 1.2 Scope, approach and data collection methodologies

This Yemen case study covers the period 2015 to 2020, albeit conversations did naturally focus on recent years and the current ongoing operational context. Yemen was selected as a case study country due to the complexity of the ongoing humanitarian context, the presence in-country of “experienced partners”, and the level of support provided to the CERF and CBPF.

The main objectives of the case study, as stated in the Terms of Reference (ToR), are to:

1. Shed light on the effectiveness of Dutch supported partners in the delivery of humanitarian aid.
2. Provide insights into the conditions and circumstances under which the Netherlands as a donor enhances or hampers the effectiveness of these partners in the delivery of humanitarian aid. This includes an evaluation of the effectiveness of a number of funding mechanisms used by the Netherlands: core funding, pooled funds, country earmarking, and Dutch Relief Alliance.<sup>10</sup>

The case study has examined how different funding mechanisms and humanitarian partners have delivered results on three policy objectives of Dutch humanitarian assistance since 2015:

<sup>9</sup> Taken from individual CERF annual reports 2015 – 2020.

<sup>10</sup> Terms of reference page 1.

1. The ambition to deliver timely, needs-based, effective, principled and high-quality humanitarian assistance;
2. The ambition to be coherent with broader development approaches and crisis responses; and
3. The ambitions to innovate and localise.<sup>11</sup>

The study has also looked at the strengths and weaknesses of DSH's humanitarian partners, briefly reviewing partners' operational and programmatic performance, as well as the timeliness and functionality of the mechanisms supported.

Beyond this, the country case study has also reviewed the relationship between the Dutch government and its selected partners, whether this relationship has influenced the effectiveness of partner aid delivery, and the extent to which such relations have led to the adoption of the Dutch government's thematic priorities. Furthermore, diplomatic and advocacy initiatives - either individually or alongside other donors - have been assessed. Once more, the assumptions underlying the diplomatic humanitarian pathways have also been reviewed.

The overall approach of this study was consultative, through a mixture of methodologies, as follows:

Key informant interviews (KIIs) with:

- Recipients of non-earmarked funding (six: UNCHR, UNICEF, WFP, OCHA, ICRC, IFRC)
- Recipients of CERF funding and direct funding (three: UNCHR, UNICEF, WFP)
- Fund manager and recipient partners of YHRF (five international and two local)
- Recipients of DRA funding - consortium members (five)
- Recipients of DRA funding - consortium member local partner (one)
- Dutch Embassy staff – Amman (one)
- Other donors and embassies (two: Swedish, DG ECHO<sup>12</sup>)
- Other relevant actors (ACAPS)<sup>13</sup>

The above list includes the recipients of each type of funding mechanism as well as their implementing partners. Interviews were agreed to be anonymous and confidential, and as such at times the names of some partners have been withheld within this report.

A number of interview guides were elaborated and utilised as relevant based on meeting the research questions, sub questions, and judgement criteria indicated in the research matrix elaborated in the inception report. The above list of country-based interviewees was split between the Team Leader and the two Yemeni local consultants as appropriate, with the local consultants interviewing the CBPF and DRA recipients and their local partners while the Team Leader interviewed the "experienced partners".

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<sup>11</sup> Terms of reference, page 2

<sup>12</sup> Directorate-General for European Civil Protection and Humanitarian Aid Operations

<sup>13</sup> <https://www.acaps.org/country/france>

Field Trips:

A field trip to Jordan was undertaken by the Team Leader and a representative of the IOB department to undertake in-person interviews with embassies, UN agencies and other donors.

Observation/Site visits:

One of the local consultants undertook a two-day trip to Aden and the surrounding areas to talk to WFP, YHF and DRA partners, as well as beneficiaries.

Focus group discussions:

At a beneficiary level, five focus group discussions were held with 51 beneficiaries. A multi sectoral interview guide for such meetings had been elaborated in preparation.

Desk Research:

An analysis of partner project documents has provided some guidance as to how well partner interventions have met their objectives. A bibliography of documents can be seen in Annex 4.

Data Analysis:

The information gathered using the methodologies indicated above was entered into an analysis matrix whereby all the feedback to each evaluation question and sub question was gathered onto one excel spreadsheet therefore enabling the consolidation of information and feedback in one location generating the initial findings and conclusions. This greatly facilitated the formulation of the debrief workshop presentations and therefore eventually this case study report.

Debrief workshops:

Prior to writing up country case study reports, a debrief workshop has been conducted remotely so as to test initial findings and conclusions from the data gathered to date, to identify any gaps in the data gathered, and to answer any initial questions that arose. Attendees were predominantly from the MFA in The Hague and Dutch embassies and missions.

Partner survey:

A partner survey has been undertaken, however as the results cannot be sorted on a country basis this information will be utilised for the synthesis report.

The study has been both summative in that it has reviewed how effectively funding to date has been utilised, and formative, in that it will look forward identifying any possible improvements and changes to ongoing practices.

Intended users of the report include:

- MFA staff in The Hague (IOB office, DSH and other relevant technical departments).
- Embassy staff in Amman responsible for programme monitoring and donor relations
- Embassy staff elsewhere, globally
- DRA partners, both in-country and at their global and regional headquarters
- Other donors and interested stakeholders (UN partners and the Red Cross Movement recipients).

## 1.3 Research questions

As per the ToR the research questions were as follows:<sup>14</sup>

### **RQ 1 How effective are Dutch-funded actors in the humanitarian system (UN Agencies, Red Cross family and NGOs) in achieving Dutch humanitarian goals?**

- 1.1 What are relative strengths and weaknesses of various funded humanitarian actors, how can these be explained, and in what way have these delivered added value in the delivery of humanitarian assistance?
- 1.2 Have Dutch-funded actors in the humanitarian system delivered timely, needs-based and principled humanitarian action? What have been factors of success, or failure?
- 1.3 What has been the contribution of Dutch-funded actors to the objective of innovation, localisation and the coordination with broader development goals? What best practices are identifiable and what has been the added value for the realisation of humanitarian goals?

### **RQ 2 What kind of funding relation does the MFA have with its various partners, and how does this relation enable or hamper their effectiveness in the delivery of humanitarian aid?**

- 2.1 [How are funding decisions made within the MFA?]
- 2.2 What different types of relations between MFA and recipient organisations emerge from these funding decisions, and how do these relations enable or hamper the effectiveness of humanitarian assistance?
- 2.3 In what way have the priority themes innovation and localisation been promoted within these relations?
- 2.4 How have policy changes in response to the IOB Policy Review of 2015 been implemented, and to what extent have these changes contributed to achieving Dutch humanitarian goals?

Note: Research question 2.1 will not to be addressed by this effectiveness study. This question has been taken up separately by IOB itself. Please note also that question 2.4 was also reduced by IOB in as much as only the level of ongoing monitoring of Dutch government activities, together with the effect of diplomatic activities has been reviewed.

## 1.4 Limitations

The short time period in which to assess organisational functionality was the main limitation to the case study. Normally an evaluation of one of the UN partner's effectiveness in-country would take a period of months utilising a large team of evaluators. In this study perhaps only one interview per organisation has been undertaken, normally of one hour in length. This has been supplemented at times by field visits and secondary research so that a reasonable impression of each funding recipient's effectiveness has been possible, together with an overview of how they have contributed

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<sup>14</sup> ToR page 3.



towards meeting the objectives of the Dutch Governments humanitarian policy objectives.

Similarly, this has not been a standard evaluation in that a donor has funded a specific project in one geographical location. The non-earmarked core funding is given at headquarters (HQ) level and as such it cannot be associated with any particular project, moreover the reality is that the Dutch government funding has its “fingers in many pies”. This, however, does not make the funding provided easy to evaluate as recipient organisations struggle to identify programmes they feel the Dutch Government have funded and as a consequence what they feel they should be presenting to the study team. This has led to delays in terms of how quickly some organisations have responded to the study’s initial enquiries.

Access to the field due to security restrictions and the need for travel approvals from SCMCHA<sup>15</sup> have restricted field visits. In the north of the country, women have to be accompanied by a male relative.<sup>16</sup> As such only field visits in the south were planned and undertaken. Recent kidnappings also restricted the areas that could be visited. In the north, to mitigate this limitation, remote telephone interviews were undertaken.

The breadth of questions the evaluation team has been looking into has been extensive. This has meant that not every topic has been raised with every interviewee. As such, although a clear attempt has been made to answer all of the questions set, some answers will be deeper and more evidence-based than others.

Finally, the early years of the study scope period have been difficult to discuss/assess due to staff having moved on and the natural focus of discussions on recent or ongoing contextual circumstances.

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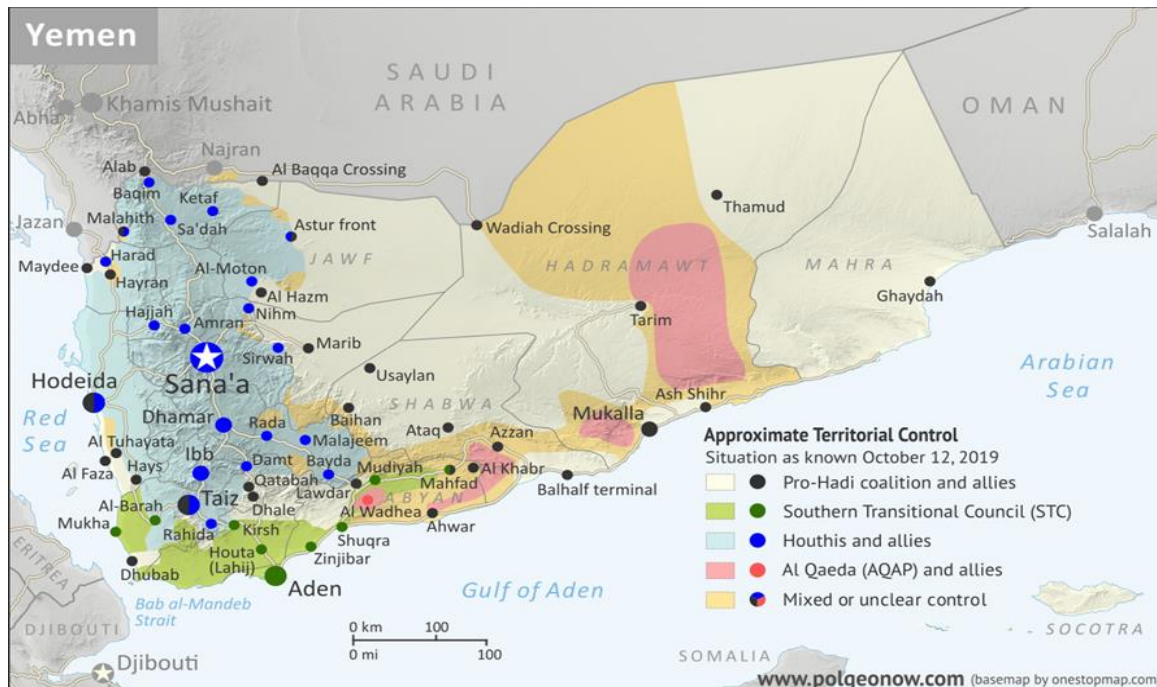
<sup>15</sup> The Supreme Council for the Management and Coordination of Humanitarian Affairs.

<sup>16</sup> The Mahram protocol issued by SCMCHA.

## 2 The Yemen country context

### 2.1 Operating context

Figure 2. Yemen Conflict Map October 2019

Source: [www.polgeonow.com](http://www.polgeonow.com)

Yemen is in the southwest of the Asia continent bordered to the north by the Kingdom of Saudi Arabia and Oman from the east. Although Yemen has a lot of natural riches, it is considered one of the poorest countries worldwide due to the ongoing conflict.

Yemen has seen more than its share of civil wars throughout its history, including a post re-unification conflict in 1994. Stability was lost in 2004 when war broke out between Shia Houthis in Northern Yemen and their former ally, the then incumbent President Saleh. This continued intermittently for years until 2010. In 2011, Yemeni people went out to the streets against the governed regime led by former president Ali Abdullah Saleh in the so-called “Arab Spring Revolution”, which ended by removing the presidency from Saleh to his deputy Abdrabbuh Mansour Hadi. In 2012, elections were held to legitimise the Hadi presidency.

These events were followed by a National Dialogue Conference that lasted for approximately two years and aimed to produce a new constitution agreed upon by all political parties in Yemen. However, attempts at a political transition failed and in September 2014 the Houthis took control of Sana’a and the Red Sea Port of Hodeida. President Hadi relocated himself to Aden. The Houthis marched towards Aden, however, this was interrupted by the Hadi requested intervention of Saudi Arabia in March 2015, who launched air strikes on Houthi positions. The Saudis, supported by the United States of America, did not wish to see an Iranian supported Shia state on its Southern border.

Since then, what has been described as the world's worst humanitarian crisis has unfolded, causing millions of people to be displaced and suffer shortages in basic food, health and shelter needs.<sup>17</sup> In March 2015 Islamic State claimed its first major attacks in Yemen. Al Qaeda (AQAP) is also present in the southeastern part of the country.<sup>18</sup>

Figure 2 above illustrates the complexity of the conflict as at October 2019. The Stockholm agreement of December 2018 made little impact, and in 2019 the South Yemen government was not only fighting against the Houthi North, but also a United Arab Emirates (UAE) backed Southern Transitional Council (STC). Since then, however, public opinion globally, and American support for the Saudi-led coalition specifically, has decreased, putting pressure on seeking a peaceful political resolution. A coalition was formed between the Saudis and UAE. Since February 2021, the Houthis are pursuing a continued military attack on Marib in an attempt to control the oilfield there. The Saudis continue to make airstrikes on Houthi positions,<sup>19</sup> including against their Marib offensive.<sup>20</sup>

## 2.2 Humanitarian situation

The overall humanitarian response is led by the UN country team, who produce a Humanitarian Response Plan (HRP) based on their Humanitarian Needs Overview (HNO). The most important element is the Integrated Food Security Phase Classification (IPC)<sup>21</sup> process organised by the Food and Agriculture Office of the United Nations (FAO) and WFP, who send out trained enumerators throughout the country to each governorate, access permitting. Promoted predominantly as a food security crisis, \$1 billion of the \$2.23 billion requested in the 2020 HRP extension is for 20 million food-insecure people.<sup>22</sup> Clearly WFP has a significant role in the response. Other key HRP sectors are Protection, WASH, Health, Nutrition, and Shelter. OCHA co-ordinates the clusters.

The 2021 HRP appeals for USD 3.85 billion, which targets 16 million people out of 20.7 million people in need. The UN have estimated that 24.3 million people in 2021 were “at risk” of hunger and disease, of whom roughly 14.4 million were in acute need of assistance.<sup>23</sup> Furthermore, people also suffer from poor service provision in education, health, sanitation and water supply. It is estimated that 20.5 million Yemenis are without safe water and sanitation.<sup>24</sup> The crisis has caused the internal displacement of approximately four million people, 73% of them being women and children.<sup>25</sup> The 2021 HRP estimated that 80% of the Yemeni population were in some form of humanitarian support or protection, and that “25% of the population, including 2.1 million children and 1.2 million pregnant or lactating women, suffer from either moderate or severe malnutrition”.<sup>26</sup>

<sup>17</sup> <https://arabcenterdc.org/resource/a-timeline-of-the-yemen-crisis-from-the-1990s-to-the-present/>

<sup>18</sup> IBID

<sup>19</sup> <https://maps.southfront.org/military-situation-in-yemen-on-january-1-2022-map-update/>

<sup>20</sup> <https://www.france24.com/en/middle-east/20211016-saudi-led-coalition-intensify-air-strikes-against-yemen-houthi-rebels>

<sup>21</sup> Integrated Food Security Phase Classification

<sup>22</sup> OCHA HRP Extension June-December 2020

<sup>23</sup> <https://www.worldbank.org/en/country/yemen/overview#1>. November 2021

<sup>24</sup> Ibid.

<sup>25</sup> <https://www.unfpa.org/yemen>

<sup>26</sup> UN HRP 2021

Moreover, the crisis has caused a catastrophic economic deterioration that has increased poverty levels. The inflation rate in Yemen continues to increase due to the depreciation of the Yemeni Ryal. Completely reliant on imports, exchange rate fluctuations have an impact across all household items. The country is also affected by locust infestations and flooding, which exacerbates levels of malaria, dengue fever, cholera, and diphtheria outbreaks. 2017 saw a cholera outbreak and a potential famine. The IPC of March-July that year stated 17 million people, being 60% of the Yemen population, were food-insecure, of which 6.8 million were in IPC Phase 4 (i.e. emergency phase).<sup>27</sup> From 2019 onwards the COVID-19 pandemic has also been affecting the country.

The context remains fluid, and front lines and control over a certain location can change on a daily basis, inevitably making the delivery of humanitarian aid very difficult. Access and insecurity are a daily challenge. The country is divided along the conflict's front lines into a de facto North and South Yemen. There have been reports that aid has been diverted,<sup>28</sup> and delays are commonly reported in terms of getting aid agencies interventions and beneficiary lists approved. Recently-imposed Mahram regulations that state women cannot travel without a close male relative have made it difficult for female NGO staff to access beneficiaries. Movement in the South is somewhat easier, albeit not without its difficulties.

## 2.3 DSH funded activities

DSH's experienced humanitarian partners - OCHA, WFP, UNICEF, and UNHCR - together with both the International Committee (ICRC) and the International Federation (IFRC) of the Red Cross Movement<sup>29</sup> are operational within this context. Each organisation will have benefited from core unearmarked funding at The Hague level.

CERF funding by year to each of the experienced humanitarian partners is as follows:

Table 3 CERF funding to experienced humanitarian partners by year - Yemen

Year	CERF allocation to Yemen \$M	CERF Yemen Allocation to WFP \$M <sup>30</sup>	CERF Yemen Allocation to UNICEF \$M	CERF Yemen Allocation to UNHCR \$M
2015	44.2	9.4	11.9	6.4
2016	15.0	1.4	5.7	2.9
2017	25.6	15.8	6.0	-
2018	49.9	25.5	9.2	6.0
2019	31.7	31.7	-	-
2020	65.0	30.0	16.0	-

<sup>27</sup> <https://www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1026467/?iso3=YEM>

<sup>28</sup> <https://www.reuters.com/article/us-yemen-security-aid-idUSKBN2001JT>

<sup>29</sup> Working alongside the Yemen Red Cross

<sup>30</sup> <https://cerf.un.org/what-we-do/allocation-by-country>

WFP has been by far the largest recipient of CERF funding in Yemen, understandable considering the food insecurity situation ongoing there. UNICEF has also been generally well funded.

In terms of contributions to the Yemen humanitarian Fund, since 2015 DSH has always been one of the top five donors, providing \$80 million over the time period, averaging a consistent \$13 million per annum.

Table 4. DSH contributions to the Yemen CBPF by year<sup>31</sup>

Year	DSH allocation to Yemen CBPF \$M	Total contributions received	DSH %
2015	13.5	56.7	24%
2016	11.3	107.2	11%
2017	8.2	175.6	5%
2018	19.0	208.7	9%
2019	12.9	168.6	8%
2020	15.3	97.9	16%

DRA has funded the Yemen Joint Response during the period in 2018-2021, delivering a multi-sector response, with 5 partners implementing activities in 6 different sectors in 5 governorates. The agencies involved were CARE (lead), Save the Children (SAVE), Stichting Vluchteling/IRC, OXFAM Novib, CORDAID, and ZOA, for a total value of €10,983,364. This has been implemented alongside local partners: Solidarity Association for Development / Attadhamon Foundation for Development, Al-Nibras Foundation, Coalition of Humanitarian Relief (CHR), and the Yamaan Foundation.<sup>32</sup>

In terms of direct DSH funding to agencies in Yemen, in 2016 WFP was given €3 million for Emergency Food and Unicef was given €1 million, in 2017 WFP was given €5 million, and ICRC €1 million.

<sup>31</sup> Taken from each annual CBPF report 2015-2020 by individual country.

<sup>32</sup> DRA Impact Report 2020

## 3 Overview of the effectiveness of support to humanitarian partners (RQ1)

### 3.1 Strengths, weaknesses and challenges of funded humanitarian actors

#### 3.1.1 Strengths

Each of the “experienced partners” receiving non-earmarked funding, bring their own traditional mandated sectoral expertise to Yemen: OCHA manage co-ordination, the cluster system, the CERF and the CBPF, UNICEF work alongside the national health services providing vaccinations and nutrition programming (SAM),<sup>33</sup> while also providing WASH, protection, and education support.<sup>34</sup> WFP provide general food assistance, and cover the Moderate Acute Malnutrition (MAM) caseload,<sup>35</sup> while implementing livelihood and school feeding programmes,<sup>36</sup> and UNHCR are providing protection, shelter and non-food items<sup>37</sup> and covering refugee matters.<sup>38</sup> The UN agencies, as by design, complement each other to cover a broad spectrum of activities, co-ordinated within the cluster system which each of them lead according to their specialty. ICRC are working in the conflict areas, prisons, and together with the IFRC are supporting the Yemen Red Cross (YRC) in terms of capacity building, particularly related to disaster response. Each funding recipient is an important actor within the South Sudan humanitarian context.

Specific programmatic strengths or added values, as identified by the evaluation team, are, for example, the monitoring reports produced by OCHA within the Yemen Humanitarian Fund.<sup>39</sup> These monitoring reports result from numerous field trips, not easy to undertake in Yemen, providing sectoral recommendations that would benefit the extended humanitarian community. The fund has also managed to reach its target of dispersing 25% of its funding to local partners.<sup>40</sup>

WFP and FAO have contributed a great deal to the IPC process, which is the basis for most of the HRP and governorate-based targeting. The extent of WFP food security support is also impressive, reaching approximately 15 million beneficiaries in 2020.<sup>41</sup> ICRC and the YRC, who function on both sides of the conflict, have access to areas that other UN agencies and INGOs do not have.

YHF recipients also have their own sectoral expertise. For example, the National Foundation for Development and Humanitarian Response (NDFHR) specialises in WASH; Action Against Hunger (ACF) in Health; the Norwegian Refugee Council in Camp management; and the Yemen General Union of Sociologists, Social Workers, and Psychologists (YGUSSWP) in psychosocial support.

<sup>33</sup> Treatment of the severely acute malnourished caseload.

<sup>34</sup> <https://www.unicef.org/emergencies/yemen-crisis#what-unicef-is-doing>

<sup>35</sup> Moderately acutely malnourished

<sup>36</sup> WFP Yemen External Situation Report Jan 2022.pdf

<sup>37</sup> <https://www.unhcr.org/uk/yemen-emergency.html>

<sup>38</sup> Mostly related to through traffic of migrant workers from the Horn of Africa to Saudi Arabia.

<sup>39</sup> For example the OCHA YHF Monitoring Report 2021

<sup>40</sup> OCHA quoted that 26% of its CBPF in 2021 went to local partners.

<sup>41</sup> WFP Yemen Annual Country Report 2020.

Likewise, DRA members bring both national and global experience with them. For example, OXFAM focus on WASH and food security and livelihoods in Yemen, particularly the rehabilitation of the infrastructures utilising Cash for Work (CFW) interventions. Care focuses on CFW and are the leader of the livelihood clusters in several areas. SAVE have multi sectoral expertise including Livelihood and WASH, and Cordaid focus on supporting health facilities and providing psychological support. Local partner added value within the DRA consortium is that they have access to hard-to-reach areas, stronger coordination with local authorities and a better understanding of community needs and their culture. The YHF and the DRA consortium members have a similar approach in that they tend to implement integrated activities or at least coordinate with other actors in same areas. This is one of the YHF objectives.

DRA partners themselves believe their strengths lie in the fact that they focus on a limited number of sector and areas where they have the most expertise, they tend to use development-based approaches to deliver emergency programmes to ensure sustainability, that they have utilised innovative ways of sharing learnings, for example, peer-to-peer evaluations,<sup>42</sup> and they have maintained strong connections with authorities and local communities.

In terms of the functionality of the pool funds, YHF budget compliance is reported by recipients as a challenge stating it lacks flexibility, requiring high levels of budget detail, while other donors are more flexible. DRA funding is said by its members to be more adaptable with a quick approval process, and - albeit initially directed at emergency activities - incorporating more resilience-building interventions aimed at more sustainable outcomes now. Having consistent DRA funding for the last five years has created stability and a continuity of programmes that enables staff capacity building and facilitates work with the local authorities.

Overall, a broad range of sectoral activities have been implemented by the targeted partners and Dutch government funding has contributed to this.

### 3.1.2 Weaknesses and Challenges

The operational context is difficult and not without challenges that can have a detrimental effect on the effectiveness and timeliness of programme interventions. Obviously, the ongoing conflict is an issue, meaning access to some areas is difficult in terms of security, especially in the South where there are more warring factions involved and the landscape is more fragmented. However, access is more than just a security issue. The need to acquire governmental travel permissions for site visits and assessments, especially in the North through SCMCHA, is a hindrance, as such approvals can take a long time to be given - if given at all. Within this there is a further hurdle, in that female agency staff members are now required to follow the “Mahram” protocol which means that they should have a male relative travelling with them. This reduces their access to beneficiaries, especially in an environment where access to female beneficiaries can be difficult with such additional constraints.

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<sup>42</sup> I.e. they chose a theme like accountability or effectiveness and then conduct joint field visits to projects activities and produce a report highlighting strengths, weaknesses and recommendations.

Similarly, approvals are required from governmental authorities for programmes to start. This can take between 3-6 months to materialise, again predominantly in the North with SCMCHA, meaning that funding for a one-year intervention may have to be spent in 6-9 months once approval has been received.<sup>43</sup> As confirmed by the international DRA members, this tends to affect INGOs more than NNGOs, who have better local contacts. The UN agencies can avoid this issue if they have prearranged agreements with the relevant ministries. To mitigate this problem DRA in 2022 has started issuing two-year contracts.

Funding partners have reported attempts from the government to influence or interfere in compiling beneficiary lists and the choice of programme implementation sites. All this has to be negotiated by the agencies before implementation can begin, which again takes time as the lists put forward by local authorities have to be monitored and changed, as do the project locations.

SCMCHA also has a tendency to issue daily directives - such as the Mahram requirement - which agencies have to follow. This can also create programmatic delays, as does the non-approval of international visa applications. The tough work environment, and lack of accompanied posting status, means that most staff only stay for a short period of time, with each new incumbent having to gain the trust of the local authorities once more.

NNGOs report that they still face difficulties attracting funding, with donors and UN partners preferring to support the UN agencies and INGOs who they trust to manage and monitor local partners, not wishing, or perhaps not having the capacity, to do this themselves. Local partners also have capacity issues, as well as trouble retaining staff who are recruited by the INGOs and the UN.

One further difficulty for all donors and funding agencies is access to on-site monitoring, which is often not possible. Third party monitors (TPM) provide some support but are not an ideal alternative as programme managers would prefer to witness progress with their own eyes, and TPMs might also perhaps be too close to the communities they are meant to be monitoring.

## 3.2 Timeliness and effectiveness of partner interventions

### 3.2.1 Timeliness

The slow approval of DRA and CBPF partner activities mentioned above obviously has an impact on the timeliness of interventions. It also increases the risk of the community-level situation having changed from the time the proposal is written to when implementation can start. Having to wait 3-6 months before implementation is far from ideal. The need for flexible funding based on beneficiary feedback is therefore paramount. In this respect DRA members have stated that the DRA funding mechanism works well, and that funds are easily adaptable and released on a timely basis.

Similarly, the non-earmarked core funding is said to be quickly available on an individual agency basis, released through their own in-house mechanism as required, for example,

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<sup>43</sup> As mentioned by an Oxfam DRA local partner.



by WFP to fill pipeline gaps. CERF funding is also said to be released relatively quickly, although the pool funding takes more time. As per Table 3 above, CERF funding has supported WFP, UNICEF and UNHCR almost annually during the evaluation period, with WFP being the most significant recipient. The IFRC DREF system, which Dutch funding supports, is known to release funds within 48/72 hours of request.

The assessment process in Yemen is a concern both on a national and localised scale. Nationally, the IPC process has historically been one of the main pillars of the annual HRP process. Although its access to governorates has increased over recent years<sup>44</sup> the information gathered is never 100% complete. Similarly UNICEF SMART reports have also only been undertaken sporadically, and UNICEF have concerns over possible shortfalls in their data from remote rural areas.

At a local level, DRA local partners have stated that they lack assessment capacity and there is no uniformity from one agency to another. Integrate into this the tendency for local authorities to try to interfere in beneficiary lists and site selection renders the situation both complex and unpredictable. In this respect humanitarian principles are under threat. One positive factor, however, is that local organisations are reported to have better localised access and community engagement.

### 3.2.2 Effectiveness

In terms of the programmatic effectiveness, there has not been sufficient time for the review team to fully evaluate each experienced partner, CERF, CBPF and DRA recipients' interventions. However, based on partner feedback, site observations, and interviews with partners and beneficiaries, it would appear that there has been and continues to be a lot of effective programming ongoing, providing support across a broad spectrum of sectors and activities.

In terms of meeting the Dutch government objectives of saving lives, restoring dignity and enhancing resilience, it could be said there has been partial effectiveness. Clearly lives are being saved: WFP themselves have assisted 13 million beneficiaries with lifesaving food support in 2021 - the same level as in 2020 - and both WFP and UNICEF have implemented MAM/SAM interventions respectively, saving the lives of acutely malnourished children.

DRA partners have mentioned a need to move more towards resilience-based sustainable interventions, as have some of the UN partners, especially in areas where there is no ongoing conflict. This has been mirrored in feedback from beneficiaries, who do not wish to be aid-dependent, but want to be self-sustainable. This already happens to some extent, for example, the UNICEF and ACF interventions at health centres where national services are reinforced and healthcare staff are trained, and the Live Makers Meeting Place Organisation (LMMPO) train local committees to manage WASH installations.

Similarly SAVE has utilised a conditional cash transfer approach to pave the road to the market in Saada, enabling communities to access the market to sell their own products and thereby contributing to reviving the economy. By moving from unconditional cash to conditional cash transfer, SAVE believe they will help build certain skills for beneficiaries

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<sup>44</sup> IPC classification reports 2013 onwards.

that can be used after the project is completed, help to create community assets, and increase community participation, therefore helping beneficiaries to feel more independent and self-reliant.

Especially in Northern Yemen, restoring dignity - particularly of women and children - remains a concern due to the difficulties surrounding protection programming. The fact that the SCMCHA authority will not approve any interventions that include gender-specific protection or activities addressing sexual and gender-based violence means that those interventions are not implemented at the scale required, having to be hidden somewhat in other activities. The Mahram protocol also restricts female staff access to the field to undertake such activities. On a positive note, the increased participation in CFW and livelihood and resilience-building programming is good for beneficiary confidence with self-reliance being more dignified than having to live on handouts. The establishment of community committees to manage WASH interventions will have a similar effect.

### 3.3 Innovation, localisation, nexus and co-ordination within interventions

#### 3.3.1 Localisation

The Dutch government are currently promoting 18 thematic humanitarian priorities, three of which have been prioritised within this case study review. The thematic priority most prominent in the discussions was that of the Grand Bargain pledge of localisation, which is also very much a priority for UN organisations, the Red Cross Movement and the DRA consortium participants.

Within this latter group, the number of local partners involved in the consortium in Yemen has grown from one in 2019 to 10 as of 2022. Furthermore, DRA informs that 39 NNGOs were enrolled in their humanitarian leadership academy capacity building training course over the last two years, six of which are consortium members. However, during interviews, DRA and YHF funding recipients have said there is space for improvement in terms of treating local partners as equals, moving towards partnerships and not sub-agreements. International partners appreciate the fact that NNGOs have a greater understanding of the local context, better relations with local authorities and the communities themselves, and therefore better access. There is a specific illustration of how well Cordaid have worked with their implementing partner, Yamman, that is a good example for others to follow. In this instance Cordaid give 90% of the funding to its partner, providing thereafter necessary technical support.

Similarly the YHF contribution has grown in recent years to reach the target of 25% of funding to local partners, which was set globally. Still, however, international organisations receive much more, and local organisations are perceived as high risk and thus have a lower funding ceiling. The notion that NNGOs are cheaper than INGOs was also questioned by the YHF, stating that economies of scale can often outweigh cost savings gained elsewhere.

UNICEF and ACF (YHF recipient) are implementing activities that should have a long-term impact as they rehabilitate and build the capacity of staff at national health service facilities. Plus, the capacity building of the Yemen Red Cross by the IFRC/ICRC is a good example of institutional capacity building that will have a durable localised impact. The national society will continue to operate in Yemen responding to localised disasters, tracing family members, and working in conflict zones.

### 3.3.2 Innovation

Innovation perhaps has been the least effective element of the DRA joint response in Yemen to date as a result of the low budget allocation: \$50,000 up until 2022. INGOs generally do not feel motivated to apply for such small funds as they are preoccupied with other large-scale interventions, and because it is unclear, if successful, how such an innovative project would be expanded. Furthermore, innovation can be perceived as risky, with no guaranteed output: an experiment that could fail and cause harm to people who are in urgent need for help. As one partner said: *“As we are in an emergency, there is no space for innovation.”* Increasing the budget allocation to \$1,000,000 in 2022 may go some way to increasing DRA partner interest and involvement. To date the small amounts involved encouraged the thinking that local partners were in a better position to utilise such funding.

The number of DRA innovative projects implemented in Yemen to date has been small. In 2019 16 DRA partners applied for innovation funding and three projects were supported. Only one of these was effectively implemented.<sup>45</sup> In 2020 only one project was supported, but the project suffered logistical issues and was never implemented.

Within the Yemen context, and perhaps as a standard practice globally, the move from unconditional cash to conditional cash has enabled recipients to gain skills and build community assets, generating an increased layer of participation and ownership of the assets constructed. In turn such assets, such as market linkage roads, will provide economic benefits to the communities as well. The distribution of food vouchers will also help support local markets (SAVE). Similarly, community committees to manage WASH infrastructure in Hajjah have been established (LMPPPO). There have been no reported examples of innovation from the experienced partners.

### 3.3.3 Nexus

According to a number of partners interviewed, the humanitarian intervention in Yemen is at a pivotal moment. As much as emergency response activities are still required, there is a stronger need to initiate resilience building and livelihood interventions so that beneficiaries, as they are requesting, have a source of income beyond that provided by the humanitarian agencies. As one FGD beneficiary mentioned: *“The amount received is spent on buying food, paying debts, and health care and medicines. However, the received amount is insufficient, as it is the only income source we have.”*<sup>46</sup>

<sup>45</sup> AFAQ implemented a small family focused livelihoods project in Aden.

<sup>46</sup> FGD Participants in Lahj, Toban District - IDP Camp

Resilience building and capacity building activities are included in partner programming, for example the UNICEF and SAVE activities mentioned above. This is happening irrespective of funding channel, but there are seemingly no or limited links between humanitarian and developmental actors.

The Yemeni population does not want to become dependent on humanitarian aid. Again, as another beneficiary mentioned: *“We need more interventions that help us to find other income services. We tried to work outside the camp, yet sometimes we were arrested as we work.”*

What role the Dutch government has played in pursuing this thematic objective is not clear, albeit the regional humanitarian officer is a board member on the YHF that promotes resilience building activities.

### 3.4 Assessment of underlying pathway assumptions

Annex 1 contains the three humanitarian pathways elaborated by the Dutch government to illustrate the medium and long-term outcomes expected as a result of the financial and diplomatic inputs provided, and as consolidated in the humanitarian policy diagram shown in Figure 1 above.

Within these three pathways there are numerous assumptions whose validity each case study has attempted to review. As there are so many of them, they have been prioritised in that the assumptions highlighted in blue within each pathway and repeated here have been selected for comment. Those most relevant for EQ1 have been reviewed here, while the remaining - more relevant to EQ2 - ones are reviewed at the end of the next section.

The following key assumptions, mostly taken from the humanitarian pathway, have been assessed on the basis of findings from the Yemen context as indicated above. Some have been grouped together as appropriate, and a judgement as to the validity of the assumption indicated:

Assumption	Comment	Validity
<i>Humanitarian partners have added value on the basis of specific knowledge and expertise, deliver relevant assistance, and act with integrity, working according to humanitarian principles.</i>	The core funded “experienced partners”, together with the DRA and CBPF recipients, bring a wealth of experience across a broad spectrum of sectoral expertise, each with their own added value. This also applies at NNGO level, where such organisations provide cultural knowledge, increased acceptance and improved access. As assessments are generally well undertaken, the support provided will be relevant to beneficiary needs, albeit gaps in coverage and funding shortfalls will mean that not every beneficiary’s needs will be fully met. All humanitarian partners work according to humanitarian principles. SAVE, for example, reported they have worked with all their local partners to commit everyone to implement their projects according to accepted humanitarian standards and a code of conduct. All partners have also signed up to the Red Cross code of conduct and Sphere Standards.	<b>Agreed</b>
<i>UN, Red Cross and NGOs are able to make an independent and impartial assessment of humanitarian needs. Partners address most urgent needs.</i>	A lot of effort is made by partners in terms of undertaking both national and local assessments. WFP and FAO run the annual IPC process that drives the HRP. Each INGO and NNGO does its own assessment, coordinating with the relevant clusters, local authorities and local communities. That said, there are concerns that the IPC process, although improved, does not provide a full picture, and that some local organisations lack the capacity to undertake full assessments, and there is a need for standardisation and improvement as the quality of each assessment is reliant on the partner’s capacity and the procedures they have in place. Furthermore, within the Yemen context, local authorities can try to bias assessments, trying to influence the beneficiary lists and locations to be supported. There are also access problems with respect to the most remote rural regions. Overall however, partners address the most urgent needs, with a strong focus on food security: what is lacking is support for the medium/longer term needs that are not being addressed just now.	<b>Partially Agreed</b>
<i>If local organisations are in the driving seat this will lead to better needs assessments and lower cost of aid delivery.</i>	As mentioned above, some NNGOs lack capacity, protocols and experience in terms of undertaking assessments. However, they are better at dealing with local authorities and have a better understanding and stronger relations with the beneficiary communities. Overall, however, international organisations have stronger capacities in terms of finances, assessments tools and reporting. As for lower cost, local partners are reported as having lower operational costs, particularly in terms of salaries, but, as mentioned above, they lack the capacity and experience to work at scale.	<b>Invalid</b>

Assumption	Comment	Validity
<i>NGOs bring added value to innovation / Partners innovate and address thematic priorities / Innovation will increase effectiveness and efficiency of aid.</i>	Within the Yemen context, the study has discovered little in terms of innovation from any of the funded partners. Local DRA consortium members feedback refers to innovation as a risk in an emergency environment, when lifesaving is a priority, and the smaller organisations may be reluctant to take a chance with the small-scale funding that they have. The assumption needs to be reworded so to clarify if it is referring to INGOs or NNGOs.	<b>Invalid</b>
<i>Partners enhance local response capacity.</i>	The study has witnessed two levels of improving local capacity: firstly building the capacity of local organisations by international organisations, and secondly the capacity building of individuals within local communities through CFW schemes. Only the former is likely to enhance local response capacity. DRA partners, for example, have helped to enhance capacities of its local partners through different ways including mentoring, coaching and sharing tools, procedures and systems. This is also happening under the UN, Red Cross, and CBPF programmes, specifically with respect to those organisations working alongside national level service providers.	<b>Agreed</b>
<i>NGOs have large implementing capacities and can often work in places where the UN has no access.</i>	There are clearly some areas within Yemen where the Red Cross and local NGOs have better access than the UN and INGOs. However, INGOs tend to have a larger implementation capacity than NNGOs. Few local NGOs, however, are reported to have a large implementation capacity. Again, there is a need for the assumption to clarify whether they are referring to INGOs or NNGOs.	<b>Partially Agreed</b>
<i>DRA will improve the effectiveness of aid and prevent fragmentation.</i>	The DRA consortium has enabled INGOs and NNGOs to coordinate, cooperate, integrate and learn from each other. In doing so this will have improved the quality of the support provided to Yemen beneficiaries. Utilising CARE as a conduit for the funding has generated a less fragmented approach for the Dutch government than having to go through each INGO directly.	<b>Agreed</b>

Assumption	Comment	Validity
<i>Large scale crises ask for deployment of big multi-lateral agencies.</i>	The economies of scale and experience of the large UN agencies means they are invariable required to support large scale crises, especially in a complex conflict scenario with multiple actors and stakeholders.	<b>Agreed</b>
<i>UN led co-ordination prevents gaps and overlaps and determines which actor is best suited to deliver aid on the basis of quality, capacity, presence, access and speed / Partners support UN leadership and actively contribute to humanitarian co-ordination.</i>	<p>There is a need for a central co-ordinating body and OCHA is well experienced in delivering this role. OCHA also leads the process in terms of who should be the recipients of the CERF and YHF. Such decisions are taken in co-ordination with cluster leads who provide analysis of the gaps they have identified by location, for example lists of health centres to be supported. The UN, and also the relevant recipients, then coordinate with the local authorities.</p> <p>In terms of selecting the best actor to provide the support, this is generally based on who has the best capacity in a specific geographical area. The concern is that meeting the 25% YHF target of NNGO funding introduces a criterion not based on capacity, that may lead to a less than optimal decision.</p>	<b>Agreed</b>
<i>Aid delivery based on humanitarian principles is the best way to guarantee appropriate needs based effective aid.</i>	The neutrality and impartiality of aid is the only way to earn the respect on both sides of any conflict. Similarly, having a humanitarian code of conduct has helped funding recipients work with the local authorities, i.e. by stating there are rules that have to be followed. Such humanitarian principles support the acceptance of the humanitarian actors and therefore improve access, whereby actual needs can be ascertained. In the Yemen context, it would appear that the NNGOs, the Yemen Red Cross and the ICRC have better access than other partners.	<b>Agreed</b>
<i>Partners ensure linkages with development.</i>	Although, as mentioned above, there are some resilience building activities integrated into funding recipients' programmatic activities, there is no clear link between the humanitarian partners and the development agencies.	<b>Not Agreed</b>

## 4 Relationships with partners (RQ2)

### 4.1 Types of relations funding mechanisms generate

According to the Yemen partners, the non-earmarked core funding provides flexible support for sudden onset disasters and gap filling for ongoing interventions, and can be quickly accessed improving the timeliness of a response. As such, it is very much appreciated by the recipient agencies, especially as such funds can be recycled should an alternative donor be identified at a later date. This was quoted by OCHA as “good humanitarian donorship principles”.<sup>47</sup> CERF Funding, which predominantly goes to the UN experienced partners, was also said to be useful in terms of programmatic gap filling.

That said, there was no clear indication of a close relationship between the “experienced partners” in the field and the Dutch government. Although they have good relations with the regional humanitarian adviser based in Yemen, this contact is irregular and the advisor has only once been able to travel to the country due to COVID and security concerns.

YHF recipients also do not have close relations with the Dutch government, even though the regional advisor sits on the YHF board. Partners have also stated the fund to be less flexible than other funding channels.

The Red Cross movement links themselves directly to their respective HQs in Geneva and the Netherlands Red Cross, and also have little contact with the Dutch government. Nonetheless, they reported to the evaluation team that they made good use of DREF funds in recent years, for example to improve the infrastructure of the YRCS. The IFRC was also very appreciative of the manner in which the Dutch government provides its support: not asking for publicity, nor earmarking the funds.

As in other case study countries, there is a clearer link between the DRA members and the Dutch government as a funding relationship. Communication it seems is mainly through CARE, the DRA in-country lead agency, and DRA HQ in The Hague. There would appear to be little communication between the DRA members themselves and the Dutch government, although the members have reported that the flexibility of the funding has created a strong level of trust within the consortium, and measures to increase contract lengths<sup>48</sup> will further facilitate the effective usage of the funding provided.

One point that came out of the OCHA Interview was the importance of timing of the YHF contributions. It arrived in the last quarter previously, and of course the pool fund managers would prefer for it to arrive at the start of the year.

Similar feedback as in other case study countries has been received regarding ICRC formal reporting, i.e. that it is quite minimalist, although they are happy to talk in detail informally in person. In this respect, more frequent visits from the regional humanitarian officer would facilitate information sharing. Like the IFRC, the ICRC were very appreciative of the trustful manner in which Dutch government funding was provided.

<sup>47</sup> <https://www.ghdinitiative.org/ghd/gns/principles-good-practice-of-ghd/principles-good-practice-ghd.html>

<sup>48</sup> Contracts will be increased to two years in 2022 to offset the approval delays.



Overall, the Dutch government has a good reputation within the Yemen humanitarian community, with a number of recipients appreciating the manner in which the funding is provided. Now that COVID restrictions are less stringent and travel within the region can resume, more face-to-face encounters between the regional humanitarian officer and the funding recipients should be possible.

## 4.2 Promotion of thematic priorities

Although relations between the experienced partners and the Dutch government are good, the lack of close working local relations mentioned above makes it difficult to push for the inclusion of priority thematic cross-cutting issues into programmatic interventions. Promotion of priorities may be happening at a HQ level between The Hague and the various HQs as core funding is dispersed,<sup>49</sup> but it was not evident in the discussions between the evaluation team members and the funding recipients. Still, some influence may have been possible within the YHF as a result of having the regional humanitarian officer on the board with work plan objectives that include the promotion of selected themes.

Local DRA partner feedback has indicated that the NNGOs have benefited from working with their international partners in terms of adopting the international humanitarian principals that guide them. Nonetheless, the themes being promoted by the Dutch government are already standard practice amongst the international agencies and UN organisations, except perhaps for the relatively new themes such as the prevention of sexual exploitation and abuse (PSEA) which is in the process of being rolled out. Although a sense of ownership of such themes is evident, this is not said to be as a result of Dutch encouragement.

With respect to the PSEA thematic priority, this issue is considered sensitive within the Yemen governments, especially in the North. Here, this and similar gender sensitive protection themes are impossible to include in programme proposal offered for approval, and as such do not receive the attention they need. This situation is exacerbated by the “Mahram” protocol that makes female staff’s access to the field more difficult.

## 4.3 Monitoring and diplomatic activities

This evaluation question has been much reduced by IOB since the ToR was issued, and is now only addressing a) the capacity for and the extent of monitoring ongoing, and if this has improved since 2015, and b) what diplomatic or advocacy initiatives have the Dutch government undertaken and with what outcome?

With respect to the former, there has not been a significant increase in recent years of embassy-led monitoring at a field level due to the COVID, visa and security access restrictions that the regional humanitarian officer has faced. It would be beneficial should the regional officer manage to spend more time in Yemen, however, it is clear that non-earmarked and pool-based funding does not lend itself easily to programme-based monitoring as it is never clear which projects have been directly supported.

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<sup>49</sup> The review did not have discussions with partners at this level.

In terms of diplomatic initiatives, the Dutch government have been involved in the “Benchmark” process, an intervention by a number of agencies and donors at the Senior Officials Meeting (SOM) in November 2020 to try to improve how the SCMCHA authority manages humanitarian aid in Yemen. This outlined seven areas which parties to the conflict must respect in Yemen to enable humanitarian access and allow principled delivery of assistance.<sup>50</sup>

They are also reported to be regularly present at the pledging conferences. Interaction between donors is ongoing which could lead to joint diplomatic or advocacy initiatives in the future. One recent such occurrence was the Dutch government’s involvement with the UN with respect to trying to prevent the stricken SAFER oil tanker from having a damaging environmental impact.<sup>51</sup>

## 4.4 Assessment of underlying pathway assumptions

The following key assumptions, mostly taken from the diplomatic<sup>52</sup> and funding pathways have been assessed on the basis of findings from the Yemen context as indicated above, plus feedback from humanitarian actors. Some have been grouped together as appropriate.

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<sup>50</sup> For example, these priorities included the cancellation of a 2% levy on humanitarian aid, the acceptance of biometrics for the registration of beneficiaries, and the timely approval of agreements and sub-agreements with humanitarian actors to deliver supplies and services.

<sup>51</sup> <https://news.un.org/en/story/2022/04/1115932>

<sup>52</sup> Assumptions referring to The Hague level capacity and activities have been excluded as these have not been reviewed in this case study.

Assumption	Comment	Validity
<i>Providing non-earmarked, predictable funding to a core number of professional organisations enhances specialisation and necessary scale</i>	Both WFP and UNICEF have reported that the predictable non-earmarked funding has enabled them to fill gaps in programmes that have faced funding shortfalls, enabling specialisation to occur. This could equally be said about support provided to the other experienced partners. The amounts concerned however are not so significant so as to be able to ensure necessary scale: if anything humanitarian actors in Yemen are facing shortfalls in funding that are leaving gaps in their responses and some beneficiary needs unmet.	<b>Partially Agreed</b>
<i>Predictable unearmarked funding leads to efficient effective and timely delivery of aid</i>	DRA partners have stated their appreciation regarding the predictability and the regularity of their funding mechanism. This they believe has contributed to the effectiveness of their programming. Similarly, the UN agencies have stated that they appreciate the consistency of the core funding in that they been able to utilise the non-earmarked funding to kick start their operations whilst other funding arrived. The flexibility of the core funding also reportedly allows such agencies to fill gaps where there are funding shortfalls. Both of these positives will go some way to ensuring the timeliness of aid. However, overall, it is not the timing of the funding that dictates the timeliness of the interventions, and in this Yemen scenario, even if the funding is available, not having government approval for activities to start can lead to delays.	<b>Partially Agreed</b>
<i>Partners improve their capacity to respond (especially) if and when receiving unearmarked predictable funding.</i>	As mentioned above, the flexibility of the funding enables recipient agencies to fill gaps. This is not restricted to supplies, and can also be utilised for staffing or whatever other capacity constraint that organisation may be facing. The further assumption is of course that the recipient agencies will use any funds wisely and economically.	<b>Agreed</b>
<i>Through dialogue with partners donor co-ordination and monitoring, NL is able to assess the effectiveness of UN, Red Cross and NGOs</i>	Dialogue with and monitoring of partner activities should provide sufficient information so as to enable the Dutch government to assess the effectiveness of their recipient partners reasonably well, if only to a certain extent. To establish the true effectiveness of a particular agency in any country a full-scale multi sectoral evaluation would need to take place. Thankfully the agencies themselves tend to organise these, for example WFP CSPE evaluations. What is needed therefore is to be on sufficiently good terms with the agencies to receive copies of such reports. Were the regional humanitarian advisor able to spend more time in-country, dialogue levels would increase as would a greater awareness of partner interventions.	<b>Partially Agreed</b>

<p><i>Accessible knowledge and capacity at DSH and embassies to assess whether UN, RC NGOs do indeed have the expertise, professionalism and capacity to take decisions according to needs, principles, and thematic priorities / Adequate knowledge of IHL and humanitarian principles at an embassy level</i></p>	<p>Such assumptions are reasonable and one would further assume these to be verified during any recruitment interview process. However, what is missing from the assumption is the necessity for such individuals to be able to access field level interventions on a regular basis. This is applicable not only to regional staff, but also to DSH staff from The Hague. With respect to the experience and expertise and capacity of the regional humanitarian staff member, this would appear to be good and more than enough to fulfil the role.</p>	<p><b>Partially Agreed</b></p>
<p><i>The NLS has enough flexibility to adjust to changing contexts and is able to keep an updated and solid information position</i></p>	<p>With respect to DRA funding there is clear feedback that the funding is flexible enough to adapt to the changing context. The same has been said to apply to the non-earmarked and pooled funding, though it has been reported by YHF recipients that changing programme activities can be quite laborious. In-country recipients will surely be aware of ongoing contextual changes. This would be more difficult for the remote embassy staff in Amman. Also, without in-country presence, the Dutch government will be missing out on the informal discussions on topics that may not make it into official reports.</p>	<p><b>Partially Agreed</b></p>
<p><i>The NLS has insight into power relations and direct or indirect access to power holders and stakeholders</i></p>	<p>Through the regional humanitarian advisor's contacts with partners and the Ambassador's presence at the SOMs, the Dutch government will have direct or indirect access through the UN Humanitarian Co-ordinator to those in positions of power, albeit remotely. The regional humanitarian adviser was reported as being very active and knowledgeable about events in Yemen by the other key stakeholders.</p>	<p><b>Agreed</b></p>
<p><i>Multi annual funding gives the NLS a good reputation and influence. /The NLS has influence because of its good reputation as a large predictable and trustworthy humanitarian donor. /Being a large and flexible donor gives NLS leverage</i></p>	<p>The Dutch government has a good reputation based on the flexibility and diversity of its funding irrespective if it is multi annual or not, which is a benefit to the recipient organisations. What is not evident is what leverage or influence the Dutch government is achieving. In terms of the thematic priorities, at a field level, organisations are reporting that they follow such policies irrespective of whether or not the Dutch government is pushing for them. Perhaps this happens to a certain extent at a HQ level.</p>	<p><b>Partially Agreed</b></p>

<p><i>NLs is able to influence partners towards desired outcomes. / Humanitarian actors and partners can be influenced to act in line with donor policies.</i></p>	<p>As above, there is little evidence of Dutch government influence on policy adoption except perhaps for the influence of international DRA partners over their local counterparts.</p>	<p><b>Invalid</b></p>
<p><i>Strong political engagement is indispensable to the success of humanitarian aid. This asks for continuous interaction between diplomacy and the political arena</i></p>	<p>Within the Yemen context it is evident that the UN and donors are working together to try to influence how both governments are supporting and facilitating humanitarian aid. An example of this was the “Benchmarks” list agreed with SCMCHA. It is unclear how successful this has been though, and the delivery of humanitarian aid in Yemen is still problematic and complex.</p>	<p><b>Agreed</b></p>
<p><i>Working with professional humanitarian partners will help to improve humanitarian access</i></p>	<p>There is a clear need to work with partners who have experience in implementing large-scale operations. Invariably these are UN agencies or INGOs. However, these organisations have their constraints in the Yemen context, and as such it is also important to work with local partners, who may be perhaps less experienced, or “professional” in terms of their policies and procedures, but can provide access and knowledge that the international partners may not have.</p>	<p><b>Agreed</b></p>
<p><i>The NL has a credible claim and is a credible partner in a particular context</i></p>	<p>The fact that the Dutch government has been given a seat at the SOM is a clear indication that it is considered a credible partner within the Yemen context. We assume this is based on their consistently high levels of funding and good reputation.</p>	<p><b>Agreed</b></p>

## 5 Conclusions and recommendations

### 5.1 Conclusions

The following conclusions are drawn from the findings indicated above as per the research questions set out in section 1.3

**RQ 1 *How effective are Dutch-funded actors in the humanitarian system (UN agencies, Red Cross family and NGOs) in achieving Dutch humanitarian goals?***

Dutch government funding mechanisms in Yemen support a broad spectrum of key UN, Red Cross, INGO, and NNGO organisations who are providing a variety of integrated complementary programmes that meet existing beneficiary needs and contribute towards the Dutch government objectives of saving lives, restoring dignity and enhancing resilience. This is evident in the lifesaving activities of WFP and its food security partners, as well as UNICEF and other supported actors engaged in the health sector. ICRC and UNHCR are key actors in the protection sector. DRA and local partners are providing their own sectoral expertise as well. Furthermore, resilience building and capacity strengthening activities have been incorporated into programmatic interventions that will support communities after the programmes have ended.

What is not yet occurring in the Yemen context - which remains in an emergency mode - is the longer-term developmental support that should be linked to the humanitarian activities. Beneficiaries are asking for more livelihood and income-generating activities that will reduce their dependence on humanitarian aid, and only with this will the goal of restoring dignity be achieved. In addition, SCMCHA's reluctance to work on gender-related or cross-sectoral protection issues works against efforts to improve the situation of its own citizens who need such support to feel safe and secure and in control of their own lives in their own country.

The relative strengths and weaknesses of the various recipients and funding mechanisms, as well as their effectiveness with respect to priority themes, are presented in Annex 2, in as much as the study was able to assess them given the time restraints and limitations faced. Overall, it would appear that all partners endeavour to operate with strong humanitarian principles, although these are continually challenged, and utilise a needs-based approach, albeit there is a need for more standardisation and capacity building with respect to needs assessments. Also, there are gaps in terms of the encouraging innovation as well as a more developmental nexus approach.

There are a number of challenges inherent within the Yemen crisis that makes implementing humanitarian programmes, especially on a timely basis, difficult to do. Most of these, such as the timeliness of approvals and insecurity, are beyond the control of the agencies involved. Agencies involved need to remain flexible and adaptive to changes in context, regulations and beneficiary needs. In this respect the flexibility of the Dutch non-earmarked, CERF and DRA funding has been most valuable and appreciated.

The integration of the thematic priority of localisation within Yemen operations seems to progress well, as this a priority area of not only the Dutch government but also the UN, Red Cross movement and the INGO/NNGO communities. The YHF target of allocating 25% of its funding to local organisations has been met, and capacity building within the DRA consortium has received an accentuated focus. That said, partnerships between INGOs and NNGOs are rarely seen as a partnership between equals, and NNGOs face greater difficulty than INGOs in terms of acquiring funding and having the capacity to respond.

***RQ 2 What kind of funding relation does the MFA have with its various partners, and how does this relation enable or hamper their effectiveness in the delivery of humanitarian aid?***

All recipients of the various funding mechanisms supported by the Dutch government are very appreciative of the funding provided, believing that through its predictability, flexibility and its timeliness, it improves the effectiveness of their programming, but there is no evidence to show that the relationship between such partners and the Dutch representatives is particularly close.

Furthermore, relations with partners were clearly reported as good, and the Dutch government has a good reputation as a donor that follows good humanitarian donor practices. However, there does not seem to be any level of influence or leverage generated by such funding over partner programmatic interventions, as can be seen with respect to the Dutch thematic priorities, except perhaps within the DRA consortium where linkages are clearer, and perhaps the NNGOs find themselves influenced by their Dutch-funded international partners.

With respect to levels of programmatic monitoring in Yemen, there has been no indication that this has increased in recent years as COVID and the security situation have made travelling somewhat difficult. Without such a field presence it is hard to be fully aware and up-to-date with ongoing contextual changes and operational challenges.

The Dutch government is well respected as a key stakeholder within the Yemen crisis as a result of substantial funding contributions over a number of years, and as a result of its diplomatic efforts and its overall engagement with the ongoing crisis.

Finally, while many of the underlying pathway assumptions remain valid, a substantial number are only partially valid or not at all. The Dutch government seems to overestimate how much influence its funding has over the timing, scale and content of country-level interventions. There would appear also to be too much confidence placed in local organisations either to organise national level assessments or to ensure connections with development actors. It is also difficult to know whether or not some assumptions are referring to INGOs or NNGOs.

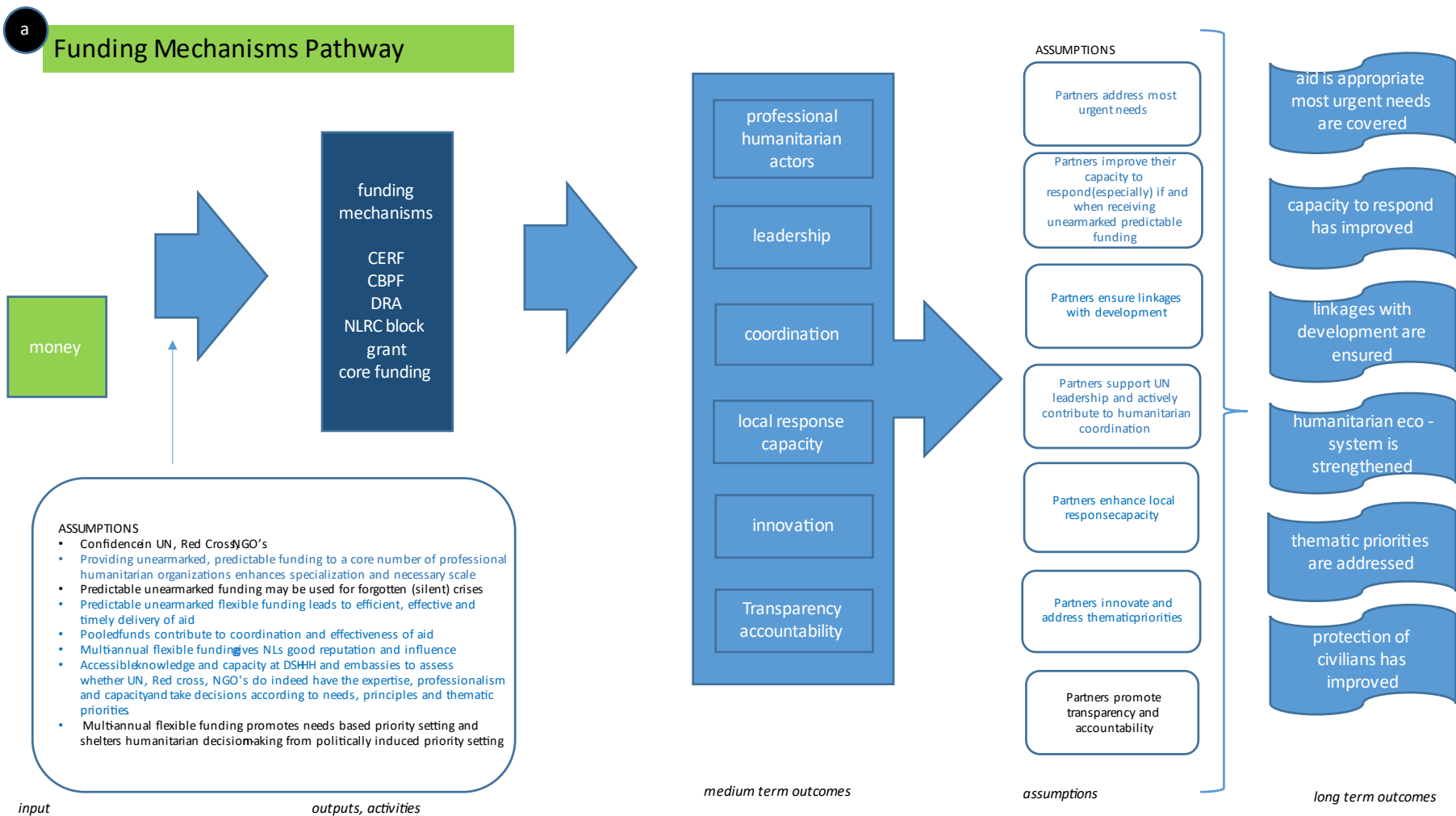
## 5.2 Recommendations

1. The Dutch government should continue to support the diverse range of HQ based funding mechanisms.
2. Increased presence in the field of the Amman-based Humanitarian Adviser would be beneficial in terms of improved relations with partners, an improved awareness of the operational context, and increased participation in informal discussions with partners to gather information not openly shared in reports.
3. There is a need for an advocacy initiative at senior levels of the UN on closing the gap between the humanitarian resilience building activities and the initiatives of the development actors, moving towards a more developmental phase in the Yemen response.
4. How to increase innovation efforts within the DRA consortium, as well as with other funding recipients, needs to be reviewed and elaborated. Furthermore, some clarity is required within the DRA consortium as to how innovation practices will be funded and, if successful, how they will be rolled out, especially in line with the substantially increased funding allocation in 2022.
5. Similarly, there is a need to standardise and improve DRA and YHF partner capacities to undertake localised field assessments.
6. DRA INGO consortium members should be encouraged to facilitate equal partnerships with their local counterparts as opposed to transactional sub-agreement arrangements. This could equally apply to UN agencies as well.
7. There is a need to review the underlying policy pathway assumptions, for example with respect to the level of influence Dutch funding generates and the capacity of NGOs. Similarly, there is a need to clarify as to whether or not assumptions are referring to INGOs or NNGOs.

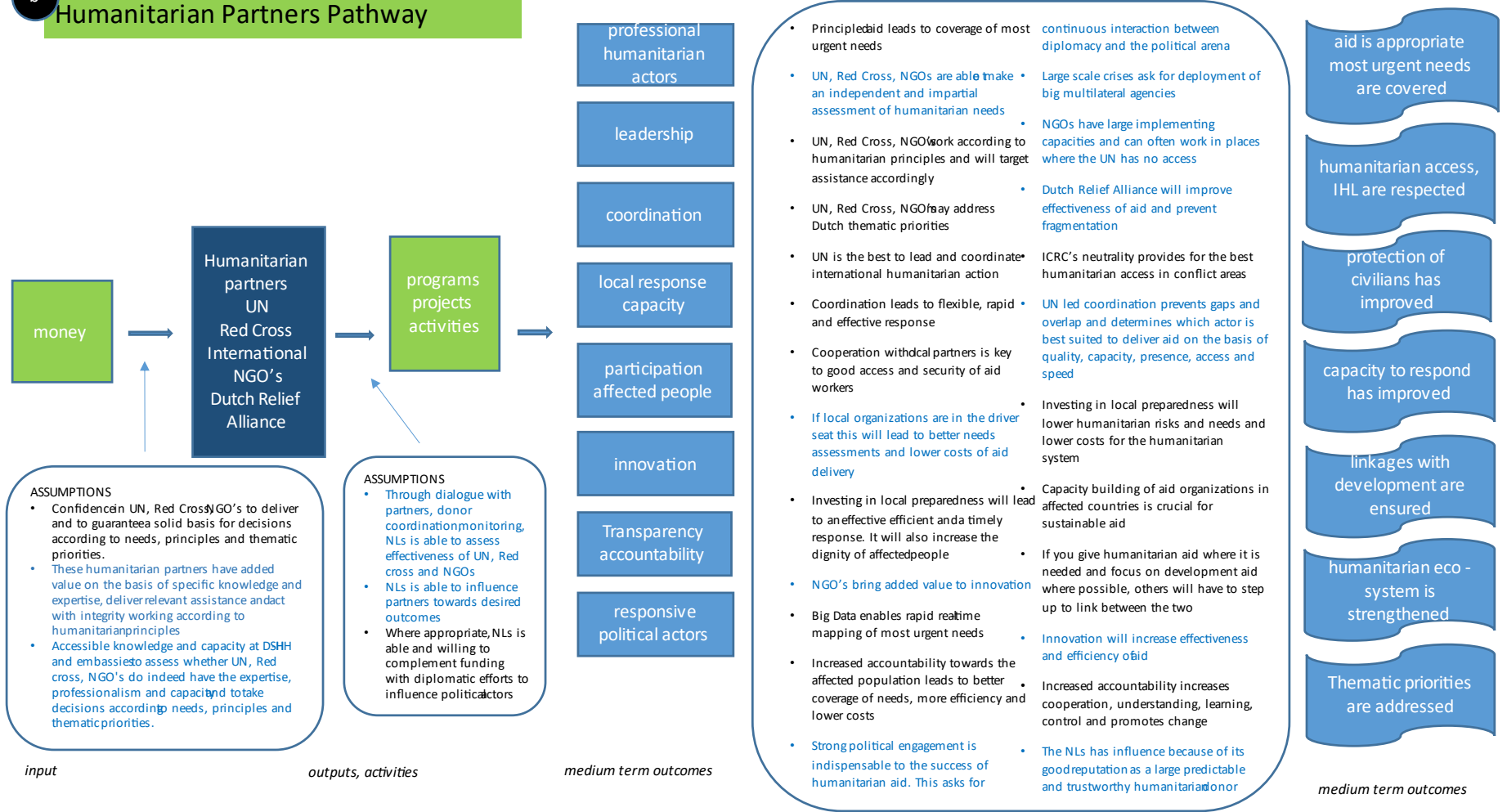


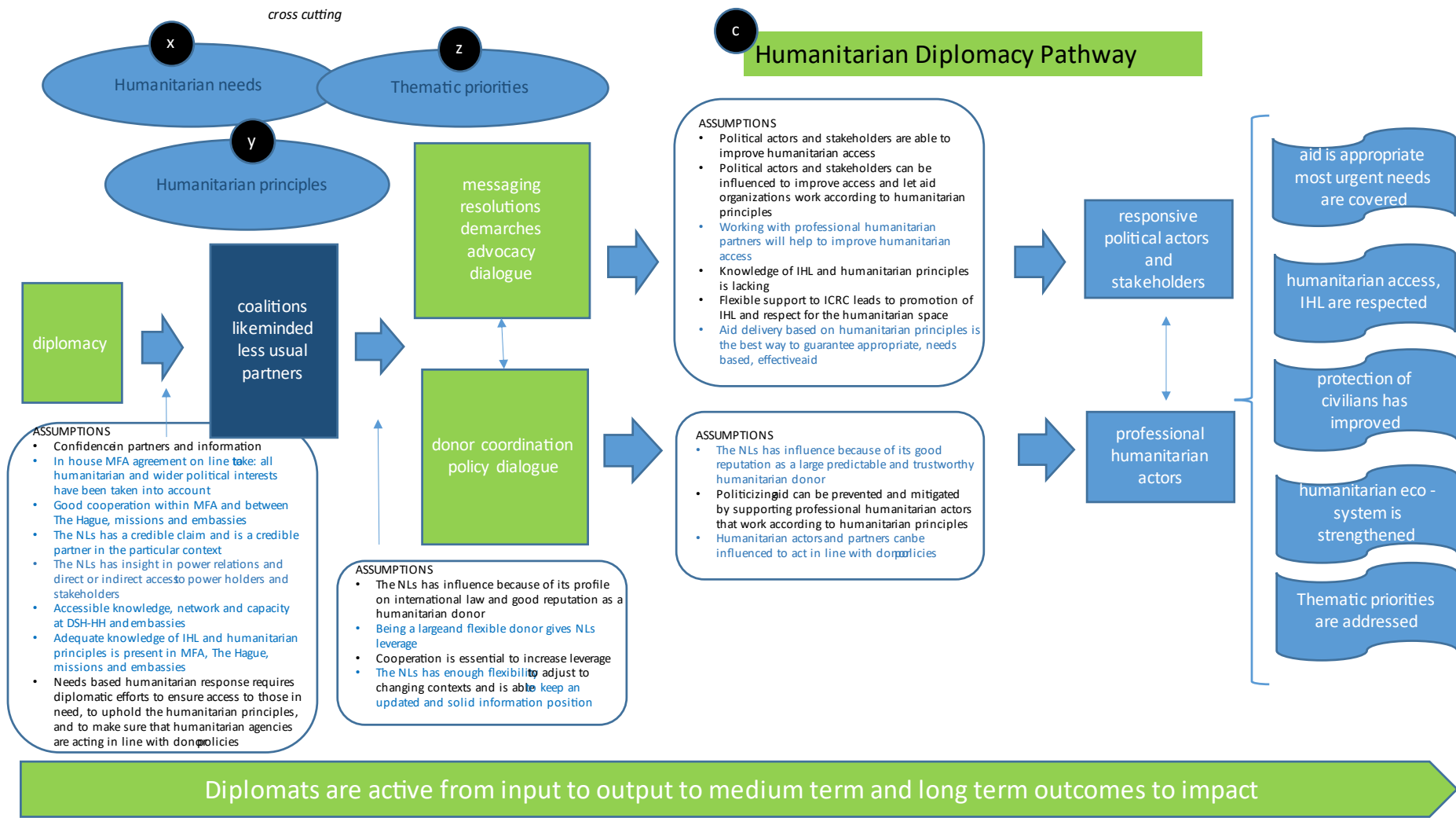
# Annexes

# Annex 1 Humanitarian Pathways



**b** Humanitarian Partners Pathway





## Annex 2 Strengths and Weaknesses

	Principled Approach	Timely intervention	Needs based	localisation	Innovation	Nexus	Main strengths	Main weaknesses	Main challenges
OCHA	++	++	++	++	0	-	Harmonisation of work with other partners Annual CBPF monitoring reports Manage co-ordination, the cluster system, and the CERF and Country Based Pooled Fund	Needs Assessments are not standardised across partners	Arrival of funding late in the Year (Oct / Nov).
WFP	++	++	++	0	0	-	Timely intervention within rapid response mechanism, response within 72 hours. Conduct monthly monitoring RAM (Research Assessment Monitoring). Food security programme coverage	0	Access to some areas
UNICEF	++	++	++	++	0	+	Timely intervention within rapid response mechanism, response within 72 hours. Multi sectoral approach	Implementing partner capacity (govt)	Rural targeting data.
ICRC	++	0	0	++	0	0	Acceptance by warring factions	0	Govt in North interference jeopardises humanitarian principles
CBPF	++	+	++	++		0	Detailed annual monitoring reports Increased percentage of funding for local organisation each year Allocations based on cluster lead identified needs.	Needs Assessments are not standardised across partners Slow approval and lack of flexibility affects timeliness	Timing of funding
CERF	++	++	++	0	0	0	Timely distribution of funding Gap filling potential	Only open for UN partners	0
Core/ non- earmarked	++	++	++	++	-	-	Flexible timely predictable funding	Not conducive to monitoring	Minimal partner reporting

DRA	++	++	++	++	-	+	<p>Focused on a limited number of sectors where they have the most expertise</p> <p>Capacity building of local partners - localisation</p> <p>Usage of development-based approaches to deliver emergency programs to ensure sustainability</p> <p>Comprehensive and innovative ways of sharing learnings</p> <p>Strong connections with authorities and local communities</p> <p>Flexibility of funding</p> <p>Peer to peer evaluations</p>	Local partner capacity	Consortium is not registered with local authorities
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**Key:**

The more triangulation, the darker shade of pink, i.e. 1 to 4 of the following sources

- Mentioned by stakeholders/key informants
- Found in secondary research
- Finding/observation on a field visit
- Finding one/more focus groups

**Rating per priority:**

- n/a no findings or not relevant
- 0 information insufficient to assess properly
- not OK,
- + OK – some activities/progress
- ++ on the right track
- +++ very good channel to fund for this priority

## Annex 3 Acronyms

CBPF	Country Based Pool Fund
CERF	Central Emergency Response Fund
CFW	Cash for Work
DG ECHO	Directorate-General for European Civil Protection and Humanitarian Aid Operations
DRA	Dutch Relief Alliance
DSH	The Department for Stabilisation and Humanitarian Aid
HNO	Humanitarian Needs Overview
HRP	Humanitarian Response Plan
ICRC	International Committee of the Red Cross
IFRC	International Federation of Red Cross and Red Crescent Societies
INGO	International Non-governmental organisation
IOB	Policy and Operations Evaluation Department of the Dutch ministry of Foreign Affairs
KII	Key informant interview
LMMPO	Live Makers Meeting Place Organisation
MAM	Moderate Acute Malnutrition
NNGO	National non-governmental organisation
NLRC	Netherlands Red Cross
OCHA	United Nations Office for the Co-ordination of Humanitarian Affairs
PSEA	Prevention of sexual exploitation and abuse
SAVE	Save the Children
SCMCHA	Supreme Council for the Management and Co-ordination of Humanitarian Affairs
SOM	Senior Officials Meeting
TL	Team Leader
UNICEF	United Nations Children's Fund
UNHCR	United Nations High Commission for Refugees
WASH	Water Sanitation and Hygiene
WFP	World Food Programme

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