Real-Time Response Review of Ukraine Humanitarian Appeal 2022 for Disasters Emergency Committee (DEC)

Hungary Country Report
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Acronyms

CHS    Core Humanitarian Standard  
CMC    Conflict Management Consulting  
CSO    Civic Society Organisations  
CVA    Cash and Voucher Assistance  
DEC    Disasters Emergency Committee  
EU     European Union  
FGD    Focus Group Discussion  
GDPR   General Data Protection Regulation  
IDP    Internally Displaced Person  
INGO   International Non-Governmental Organisations  
KID    Key Informant Discussions  
KII    Key Informant Interviews  
LGBTQ  Lesbian, Gay, Bisexual, Transgender and Queer  
M&E    Monitoring and Evaluation  
MEAL   Monitoring, Evaluation, Accountability and Learning  
MHPPS  Mental Health and Psychosocial Support  
MPC    Multi-Purpose Cash  
NFI    Non-Food Items  
PDM    Post Distribution Monitoring  
PSEA   Protection against Sexual Exploitation and Abuse  
PSHEA  Protection against Sexual Harassment, Exploitation and Abuse  
RTR    Real-Time Review  
TOR    Terms of Reference  
UNHCR  United Nations High Commissioner for Refugees  
UHA    Ukraine Humanitarian Appeal  
WASH   Water, Sanitation and Hygiene

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• The people of Ukraine for their resilience and courage in this crisis.
• The host communities in Hungary and neighbouring countries, and all who support people in need.
1. Executive Summary

Since 24 February 2022, the conflict in Ukraine has led to a major humanitarian crisis, with millions of people in need, including those who have fled across borders, those who are displaced inside the country and those unable or unwilling to leave conflict-affected areas. On 3 March 2022, DEC launched the Ukraine Humanitarian Appeal (UHA), which has raised £400 million to date, of which £215 million was allocated in Phase 1 and £86 million spent. 13 Member Charities responded as part of the DEC appeal, working with partners in Ukraine and four neighbouring countries: Poland, Romania, Moldova, and Hungary.

As part of its commitment to accountability and learning, the DEC commissioned this Real-Time Response Review, its aim being ‘to instigate collective real-time reflection and learning to inform adjustments across DEC Members’ responses’. It draws on the experience of initial phase of the response to help formulate lessons to be applied in real-time and to the second phase of the response. The approach of the Review was to support real-time learning as part of the Review process and to further support this and future learning with reports and inputs to workshops. In line with the Core Humanitarian Standard (CHS), which is itself at the centre of the DEC’s Learning and Accountability Framework, the Review was centred on affected people. In execution, it was rapid and light in touch, and used participatory and qualitative methods. It sought to hear from all the main stakeholders (affected people, aid workers, local organisations, DEC Members and others), to reflect and report on what was heard and from this to draw conclusions and propose recommendations. In doing so, it used the 9 commitments of the CHS as the main framework for the discussions (further details in Annex).

CHS1 - Humanitarian response is appropriate and relevant: Overall, the first phase of the response was considered to be appropriate and relevant to the needs of affected people. It was delivered well despite the limitations imposed by the challenging Hungarian context, including weak national coordination, a lack of structured needs assessment, the outsourcing of state responsibilities to meet refugee entitlements and state reluctance to permit Cash and Voucher Assistance (CVA). The DEC Member provided valuable support to partners. Challenges included requirements for due diligence, reporting and proposal-writing.

CHS 2 - Humanitarian response is effective and timely: There were delays providing assistance, caused by the lack of presence of the DEC Member and consequent need to establish quick but quality partnerships and for partners to recruit staff. The reluctance of Government to permit CVA combined with the lack of local partner readiness to implement CVA also contributed to delay. There was some misunderstanding related to DEC’s flexibility of funding and the pressure to spend quickly. Due to likely changes in the context in Hungary and across the region, there is a need for further contingency planning, preparedness, and flexibility.

CHS 3 - Humanitarian response strengthens local capacities and avoids negative effects: As Members of the ACT Alliance, the DEC Member (Christian Aid) was well placed to respect and understand the capacities of its partners. DEC further supported partner capacity strengthening across operational programming areas. The DEC Member and partners managed well the challenges of operating in the Hungarian context and were very adept at navigating the challenges and opportunities of delivering programmes through partnerships. The ease of access to CVA expertise within the DEC Member (and regular capacity strengthening visits) as well as presence of a member of staff based in Lviv (Ukraine) appears to have supported programming and capacity strengthening and to have permitted analysis and changes in approach and modality at an opportune moment.

CHS 4 - Humanitarian response is based on communication, participation, and feedback: The approach of the DEC Member and partners in Hungary is based on local and neighbourly knowledge, close working relations, provision of clear information on entitlements and most importantly, face-to-face communications between host communities, volunteer-based community groups and affected people.

CHS 5 - Complaints are welcomed and addressed: The response in Phase 1 involved basic, largely informal, but varied complaints and feedback methods and feedback was seen to have informed adaptations. It is important that these remain in both digital and low-tech formats to increase inclusion and remain available to all affected people and that informal feedback mechanism are considered safe and anonymous.
CHS 6 - Humanitarian response is coordinated and complementary: Formal national coordination systems are lacking in Hungary and partners have relied on local level coordination. Weak coordination has had additional wide-ranging impacts on DEC Member and partner and other agency response, including around; needs assessment, confusion for affected peoples, guidance and capacity supporting, response options analysis and planning, feasibility of CVA programming, coordination of response with minimum duplication and ensuring standards and monitoring of whether the humanitarian response is sufficient to meet refugee entitlements.

CHS 7 - Humanitarian actors continuously learn and improve: Due to the priority on response, structured learning was not a priority in Phase 1, although basic Monitoring, Evaluation, Accountability and Learning (MEAL) systems are in place and some informal learning has occurred. As time went on the DEC Member supported learning and there are plans to further develop this. One important learning area has been on the need for calculation of and coordination about transfer values for CVA.

CHS 8 - Staff are supported to do their job effectively and are treated fairly and equitably: Hiring staff was one of the most significant challenges, mitigated by the valiant efforts of volunteers. The DEC Member’s partners appreciated the capacity strengthening and wide ranging personal and psychosocial support given to them, with the presence of the DEC Member staff nearby in the region being particularly noted. However, there remains a high level of stress and exhaustion amongst staff of the DEC Member and her partners and volunteers, and DEC could usefully support learning in this area.

CH9 - Resources are managed effectively, efficiently, and ethically: The DEC Member is working with established partners, giving a reasonable level of confidence that resources are well managed. The presence of its staff and their support enhances this confidence. The flexibility of DEC funding allowed for funds to be well deployed to meet needs in a good way (e.g., through CVA).

Summary of conclusion: Overall in a challenging context the DEC Member and its partners did well to meet the needs of affected people. An important asset was the DEC Member’s partners' approach based on neighbourly face-to-face interactions with affected people. Significant challenges included weak national coordination, the time needed to set up partnerships, the lack of structured needs assessment and the unwillingness to accept CVA. While hiring staff was a key challenge, partners appreciated the support of the DEC Member in capacity strengthening, noting that more needs to be done to address staff workloads.

2. Introduction and Background

2.1. The review and this report

This is the Country Report for Hungary of the Real-Time Review (RTR) of the response funded by the Ukraine Humanitarian Appeal (UHA). It follows the Aides Mémoire, draft country reports and a draft of the synthesis report, taking on board comments received and recent discussions, such as the learning workshops of 4 November and 9 December 2022. This report complements the Country Reports for Ukraine, Poland, Romania, Moldova and the Synthesis Report.

The primary purpose of the RTR is to instigate collective real-time reflection and learning to inform adjustments across DEC Members’ responses. The Review draws on the experiences in the initial phase of the response in order that lessons be applied in real-time and into the second phase of the Members’ programmes. Recognising the lead role played by national and local actors in the crisis response to date, and the DEC’s own commitments to strengthen localisation efforts, attention to how DEC Members are establishing and scaling up their responses in ways that are complementary to and reinforcing of local humanitarian action was an important part of the picture. The RTR serves an accountability function, both to communities and people affected by crisis¹, as well as to the UK public and other key supporters of the DEC appeal. Complementing this Review, a third party monitoring process is ongoing in Ukraine, being conducted on behalf of the FCDO of the UK.

¹ In line with CHS commitment 7 “humanitarian actors continuously learn and improve”.

DEC UHA RTR - Hungary Country Report
The Review covered the humanitarian response in 5 countries, conducted by 13 Members and supported by the DEC Secretariat, and involved discussions with a wide range of stakeholders. The Review focused on ‘collective learning’ and did not conduct in-depth reviews on the responses of individual DEC Members.

The review was designed as a participatory process, whereby collective learning was facilitated during the course of the review, notably in the use of workshops and Focus Group Discussions (FGDs), both in-country and across the whole of the response. This report is the final stage of this process.

Further details on the review purpose, approach and methodology are given in the Annex.

2.2. Background and context

The Disasters Emergency Committee (DEC) brings together 15 of the UK’s leading aid charities to raise funds in response to major international humanitarian crises. In order to support Members’ activities, harness lessons and inform real-time revisions to ongoing humanitarian programmes, the DEC Secretariat commissioned this Review of programmes funded by the Ukraine Humanitarian Appeal (UHA).

Since 24 February 2022, the conflict in Ukraine has escalated and led to a massive humanitarian crisis, with millions of people in need, including those who have fled across borders and many more who are on the move inside the country or unable to leave encircled towns and cities. Currently over 5.6 million people are displaced internally and more than 7.8 million refugees from Ukraine have fled to European countries.

The majority of those fleeing Ukraine are women and children. Over 4.3 million refugees from Ukraine have registered for temporary protection or similar national protection schemes in different European countries, out of which around 1.5 million are registered in Poland.

The Ukraine crisis has triggered exceptional levels of support and solidarity. Neighbouring Governments have mobilised quickly, as have local communities in those countries. In contrast with their approach to refugees from other conflicts, EU countries have been fast to provide temporary protection and access to jobs and services to Ukrainians. The UN humanitarian flash appeal for Ukraine is one of the biggest and most generously funded ever. Public appeals in many European countries have also been very well supported.

As part of this support, the DEC launched the UHA on 3 March 2022. 13 Member Charities have responded as part of the DEC appeal, working with partners in Ukraine and 4 neighbouring countries: Poland, Romania, Moldova and Hungary, and providing cross-border support from Romania and Slovakia.

At the time of writing, the DEC fundraising campaign has raised over £400 million. The 13 Member charities taking part in the appeal will spend DEC funds over a period of at least 3 years, split into Phase 1 (the first 6 months) and Phase 2 (the following 30 months) of the response. During Phase 1 £215 million was allocated to DEC Members to support humanitarian programmes.

The response priorities for DEC Members and their partners in Phase 1 were:

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2 https://reports.unocha.org/en/country/ukraine/
3 Ukraine Situation Flash Update #33 (21 October 2022).
5 https://cdnodi.org/media/documents/Navigating_Ukrainian_dilemmas_in_the_Ukraine_crisis.pdf
6 Action Against Hunger, ActionAid, Age International, British Red Cross, CAFOD, Care, Christian Aid, Concern Worldwide, International Rescue Committee, Oxfam, Plan International, Save the Children and World Vision. Islamic Relief Worldwide and Tearfund will respond at a smaller scale with their own funds but will participate in DEC MEAL activities.
• Health: provision of primary healthcare services, providing items like trauma kits and first aid kits, as well as supporting healthcare facilities with oxygen compressors and vital pharmaceutical products.

• Cash: support affected populations needs (Internally Displaced Persons (IDPs), refugees, as well as members of the host communities) through Multi-Purpose Cash (MPC) delivered using a variety of approaches: pre-paid cards, digital transfers etc to meet vital basic needs and protection services.

• Food: food assistance, hot meals or using cash transfers like supermarket vouchers.

• Water, sanitation & hygiene: safe drinking water, hygiene information and hygiene kits.

• Protection: psychosocial support for affected people, stress management training sessions.

• Shelter: bed linen, blankets, towels, kitchen sets, Jerry cans, buckets for displaced people and host communities.

Large scale and rapidly evolving context: As the data shows, this is a large scale, sudden onset crisis, and the scale of the response has been very large, in a region where many Members had little presence. While this large-scale response is welcome, it brings a range of ‘scaling-up’ challenges, including establishing partnerships, recruiting staff and developing support systems, that were particularly evident in the early stages of the response.

In recent months, the humanitarian situation in Ukraine, which was already dire, has further deteriorated, with winter having come and the systematic destruction of critical infrastructure by the Russian military. A notable development is a call7 from Ukraine’s Government for those who have left the country not to return until after winter. Public statements have also been made about the possible need to evacuate Kyiv, due to the destruction of its energy and water infrastructure. Ukraine’s Government reports8 that the country has lost 50% of its power production. On 19 November, the CEO of DTEK (Ukraine’s major energy company) stated9 that Ukrainians should consider leaving the country for at least for 3-4 months to help save energy. With continuing attacks on infrastructure, the situation is likely to deteriorate further.

Another reason for a likely increased demand for humanitarian aid is related to liberation of Ukraine’s regions in September-November 2022, especially parts of Kharkiv, Donetsk and Kherson regions. Firstly, people who lived under occupation are now encouraged by the Government to leave these areas for safer regions, because the liberated areas are now heavily shelled by the Russian military and continue to be mine-contaminated. These people will need continued assistance. Secondly, for those who remain, improved humanitarian access allows aid to be brought to the several hundred thousand residents of these areas who remain, and who are badly in need of assistance.

3. Who we heard from

With support from the DEC Member and its partners in Hungary, we conducted remote Focus Group Discussions (FGDs) and Key Informant Discussions (KIDs) with:

• 5 KIDs with staff at global, regional, and national level.
• 1 FGD with partner staff.
• National level partner staff: 2 KIDs with partner staff.
• 2 KIDs with partner staff Members.
• 1 KID with partner in Hungary.

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4. Findings

This section presents the findings of the Review, structured according to the 9 CHS commitments. The findings in this report present an overall view of the response in the country; they do not assess specific Members and their performances.

The DEC funding to Hungary was used to respond to the needs of both refugees within Hungary and Internally Displace Persons (IDPs) in Western Ukraine largely in areas of Ukraine bordering Hungary, Transcarpathia and in Lviv (Ukraine) area also. These findings concentrate on the work in Hungary primarily but refer on occasion to the work with IDPs in Ukraine.

4.1. CHS 1: Humanitarian response is appropriate and relevant

Overall, the first phase of the response was appropriate and relevant and have been delivered in line with the strategies of the DEC Member despite the limitations imposed by the challenging Hungarian context.

In Hungary the Phases 1 and Phase 2 responses were designed based on informal needs assessments, rather than a structured and formal assessment. Restricted formal coordination structures in Hungary reduced the sharing of information on needs. The lack of political acceptance for refugees and some minorities, and the Government of Hungary’s delegation of assistance for refugees (and other asylum seekers)\(^{10}\) to largely faith-based organisations, has led to a situation where (including DEC local partners) are compensating for this gap in state provision and lack of access to state services. A specific example is the need for the partners to respond to the complex disability and medical needs of refugees\(^{11}\) that in other neighbouring countries would be referred to State service providers. All of this has made Hungary a very challenging environment in which to meet refugee entitlements.

The combination of more effective coordination at local level, good partner communication with affected people, good local knowledge and support and humanitarian expertise from the Member organisation has helped to keep the DEC actions relevant and appropriate, though it is not possible to evaluate whether refugee entitlements are being met overall. However, the DEC Member has started to increase capacity support to local partners for improved quality needs assessment, including improved complaints and feedback. This support includes on the job support and advice, access to tools and guidelines and training.

Partners have responded to the needs of women and children well\(^{12}\), and the case management work with the most vulnerable has gone some way to address the shortcomings of state service provision. However, the Review could not assess the adequacy of focus upon specific needs of the high proportions of elderly and those with disabilities in the activities outside of the case study management aspects.

The DEC Member and partners reported problems with the timing of the rather heavy Phase 2 proposal writing, as it coincided with phase one reporting deadlines and with the arrival of recently recruited staff. This may have had an impact on needs or assessing, analysis and planning for Phase 2. Overall, it was felt that a longer Phase 1 could have been considered and that the timing of the Phase 2 proposal stage was too early.

4.2. CHS 2: Humanitarian response is effective and timely

Partners confirm that in Phase 1 there were delays in refugees gaining assistance through DEC-funded programming. This was caused by the need for the DEC Member to establish effective partnerships in a place where it was not previously present, noting this happened relatively quickly through the ACT Alliance. Another cause was due to the need for partners to recruit staff. However, DEC systems and procedures and funding

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10 Such as offering some financial incentives for agencies to ‘Help points’ at the border and other reception points (e.g. airport, bus and railway stations) which partially covered the costs of such state services.

11 Through in-kind and CVA modalities and referral to private and other charitable providers.

12 Reporting includes gender disaggregated information but does not routinely disaggregate by age or disability.
remained adaptable to a degree to these difficulties; for example, DEC adapted its due diligence requirements to help reduce programming delays.

DEC flexibility of funding in terms of sector and modality was much appreciated.

The time required for partnership establishment, staff recruitment and procurement, led to significant operating challenges and considerable stress, especially in light of the perceived pressure to spend quickly. As a result of taking the needed time, there was an underspend in Phase 1, especially for the Member’s partner. Unfortunately, the DEC Member was not aware of DEC’s flexible approach, noting that other Members negotiated extensions. As a result, the DEC Member opted for a budget revision, when even a very limited no-cost extension of just a month could have made a considerable difference and improvement in outcomes and staff stress levels. A useful reflection for the DEC is whether more could be done to communicate the flexibility on funding.

There is scope for more preparedness and contingency planning as Phase 2 progresses to cater for possible expansion and evolution in needs.

The reluctance of Government to support more unrestricted CVA posed challenges. However, it is reported that: “cash-based interventions [including vouchers] represent value for money, especially group cash grants where the multiplier effect is more significant”\(^{13}\). Some concerns were raised on the cost effectiveness and efficiency of the ‘complex, integrated case management approach’ deployed by the partner. The partner concerned indicated however that the individuals targeted by the response are those with the most complex medical, disability and psychosocial support needs and that though case management is time and resource heavy, it can yield impactful results when the refugee supported receives services which support them in the longer term and in finding their feet as well as their confidence in a new environment.

There is scope for DEC Members to further learn from each other for example in relation to surge capacity, partnering approaches and the targeting of certain types of need (age, ability, gender).

4.3. CHS 3: Humanitarian response strengthens local capacities and avoids negative effects.

The selection of partners was managed effectively in Hungary. As Members of the ACT Alliance, the DEC Member was well placed to respect and understand the capacities of its sister partners, and its partners have already to varying degrees committed to common policies and standards and been involved in ACT Alliance capacity strengthening measures (including safeguarding). DEC funding has further supported partner capacity strengthening in operational programming, through support for on-the-job training, access to guidelines and tools and learning opportunities and face-to-face and online training including Monitoring, Evaluation, Accountability and Learning (MEAL) and reporting, accountability to affected people, safeguarding and other programming standards, and CVA capacity. Although the training and capacity strengthening was good, the partners reflected that it would have been preferable at an earlier point. National partners felt they gained from accessing capacity strengthening support from two international partners. Quality programming and capacity strengthening was reported to have been significantly enhanced through the presence of a key staff member from the DEC Member nearby in Lviv (Ukraine) that improved programming effectiveness and efficiency and steered modifications in approach.

The due diligence processes undertaken by the Member’s partners in-county prior to the crisis permitted a modification in the requirements for the DEC Member to complete its due diligence; this allowed timely programming. It may be that more could be done to reduce bureaucracy for partners through advocacy for the development of standardised due diligence policies (with flexibility for amendment to local context\(^{14}\)) and MEAL and reporting requirements across donors.

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\(^{13}\) DEC Ukraine Humanitarian Appeal (Hungary) Final Narrative Reporting Template – Christian Aid (CA).

\(^{14}\) Such as the legislation in Hungary that reportedly prohibits the disaggregation and reporting on disabilities and ethnicities etc.
The DEC Member and partners appear to have managed well the challenges of operating in the Hungarian context. The ease of access to CVA expertise within the DEC Member (and regular capacity strengthening visits) as well as presence of a member of staff based in Lviv appears to have not only supported understanding and capacity strengthening but also to have permitted analysis and brought forward changes in approach and modality at an opportune moment. This was evidenced by the identification of significant weaknesses in the registering and meeting of refugee needs through Multi-Purpose Cash Assistance (MPCA) by the relevant agencies in Hungary and the decision by the DEC Member to adapt and implement more targeted ‘Cash for Protection’ (C4P) programming.

Though there is more limited opportunity for a member and partners to contribute to strengthening the capacities of national authorities in Hungary, partners have worked closely with local and some regional authorities and the continuing advocacy and influencing work of the partner with the Hungarian Government may also have contributed to better understanding of CVA potential and thus minimised the potential negative effects of restricted modality options.

4.4. CHS 4: Humanitarian response is based on communication, participation, and feedback

The approach of the DEC Member and partners in Hungary (and their work in Ukraine along the border with Hungary) is based on local and neighbourly knowledge, close working relations, provision of clear information and most importantly, face-to-face communications between host communities, volunteer-based community groups (largely faith-based congregations) and affected people. Though there are cultural, faith, ethnicity and language and other differences, that may have led to biases, partner staff report that through regular personal interactions, the programmes have been designed and modified over time to try to ensure that the response as far as possible meets the individual needs of the IDPs and refugees. The Member reports that it has recently increased its training related to such issues more recently.

The response design relies on good communication with refugees and IDPs on arrival (or ‘identification or registration in the case of IDPs) and on partners are working hard to ensure that people have access to the information they need to understand their rights and entitlements. Though much of communication is digitalised, partners report that more traditional community action methods (leafleting, posters, phone lines and talking to people) continue to be deployed to ensure that people without access to digital technologies or skills are not left behind. This appears to have continued throughout the response. Gathering a detailed understanding of household and individual needs is very much at the heart of the approach of both Hungarian partner programmes. Both programmes begin by talking to people in person or by phone or other digital means to assess household and individual needs and thereby to inform assistance and targeting decisions. The partners’ approach then involves a further detailed (20 minute+) discussion and analysis of the ‘complex integrated’ needs of individuals who have been identified as having additional needs and vulnerabilities (largely disability, medical or psycho-social in nature), followed by provision of assistance (CVA, in-kind or service provision) or referrals to other specialist services or agencies.

4.5. CHS 5: Complaints are welcomed and addressed

In the first phase response complaints and feedback methods were basic, largely informal, and varied (written, phone and digitally based to avoid exclusion of the non-digitalised). It is important that these remain in digital and low-tech formats to increase inclusion and remain available to service users, and non-service users. These are reported to be used in both partner programmes and have been used by affected people for feedback.

The DEC Member admits to having set inappropriately high targets for feedback indicators (90% of feedback within one week\textsuperscript{15}) at the beginning of Phase 1. In the second phase, the DEC Member aims to offer capacity strengthening in their ‘case management’ approach which should allow a more systematic following-up of complaints/feedback to close the loop. The partners are not yet reporting feedback response times but after recruitment of a regional MEAL advisor, they have imminent plans to do so soon.

\textsuperscript{15} This assumed recruitment of or surge accountability adviser which did not transpire.
As personal contact is at the centre of both partners response, feedback is most often given directly and in person. The challenge with this more informal feedback is to ensure that safe and anonymous systems and procedures are in place to capture feedback and to respond and act on it where appropriate. An example of a modification in approach, related to feedback, is the cancellation by the partner of SIM card distributions at border points after other organisations were found to be providing them.

Another example of adaptation following learning from feedback and community engagement is that the Member’s partner, by talking to community leaders and refugees through its Refugee Support Centre in Budapest and their local partners discovered that they needed to move to C4P to better reach disabled, older, and other vulnerable people. This also included training staff on psychological first aid and referral16.

4.6. CHS 6: Humanitarian response is coordinated and complementary

Overall, national coordination structures in Hungary are weak, with little coordination with or by national level Government authorities. Though national coordination structures exist in Hungary, these are not the usual kinds of Government or UN formal coordination mechanisms. The Government has given the responsibility for coordination to the largely faith-based ‘Charity Council’17, and the DEC partners are involved in this to varying degrees. The DEC Member’s partner has a uniquely strong access to and communications with national Government. The weakness of national coordination poses wide ranging challenges for good programming for humanitarian actors.

Partners report that they have mitigated, to some extent, the weaknesses in national coordination through strengthening local coordination. This has permitted them to design programmes that complement the work of other actors.

The two DEC partners report more coordination and communications between them than previously.

Despite the limited formal coordination between agencies, there is some evidence of improved informal coordination at field level with some small improvements in sharing of information and informal learning between the DEC partners and with other agencies. The DEC Member did bring the two partners together for staff ‘well-being and resilience’ training, and there may be other opportunities for more joint capacity strengthening activities and trainings.

To mitigate the weakness of national level coordination, there may be an opportunity for humanitarian donors and actors to come together to conduct a coordinated, high quality joint agency assessment. DEC may need to adapt its Phase 2 funding plans to support such an assessment and respond to its findings.

4.7. CHS 7: Humanitarian actors continuously learn and improve

DEC Member and partners in Hungary have not prioritised learning in Phase 1 and, though basic MEAL systems are in place, partners’ priorities have been in other areas. Having said that, there is evidence that informal learning has occurred.

The DEC Member conducted some online work on inclusion and diversity and has plans to do more capacity strengthening and formal learning work around the ‘cash and group grants’ approach with partners and other agencies18. The partner has plans for upgrading MEAL after the recent appointment of a regional MEAL advisor and have a specific intention to improve upon the quality of surveys.

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16 "DEC Ukraine Humanitarian Appeal (Hungary) Final Narrative Reporting Template – Christian Aid.
17 The ‘Charity Council’ whose members are faith-based plus the Hungarian Red Cross (The Catholic Caritas, the Hungarian Reformed Church Aid, the Hungarian Charity Service of the Order of Malta, the Hungarian Interchurches Aid, the Hungarian Baptist Aid and the Hungarian Red Cross).
18 With Finnish and Danish Church Aid / DCA and potentially the DCA partner Save for non-faith-based independence.
Partner staff gave examples of where learning has encouraged minor and quite major modifications in approach, from cancelling SIM card distributions when others were identified as doing to a change in targeting and focus on C4P. The capacity strengthening work on CVA has also led to vital learning within the partner that has been instrumental in promoting a more pro-CVA stance and facilitated some acceptance within national authorities.

Like many agencies, the partner has indicated that, despite being relatively experienced in CVA, it has learned a great deal about the need for careful calculation and coordination over the setting of transfer values across the region. In Hungary agencies like the partner were uncertain about the appropriate cash amount to transfer to refugees (linked to weak coordination, see above), particularly due to inflation and other price rises. In the end, it was decided to link transfers to a State welfare payment; in Ukraine this was the state pension and in Hungary the welfare payment for the unemployed. This was quite a low amount as it was not calculated to meet the emergency needs of a refugee. This has meant that if refugees were not fortunate enough to have access to shelter / accommodation or access to other basic needs (such as food distributions from charitable means), then the CVA transfer amount was not sufficient to meet even basic needs. Although in other countries agencies have adjusted CVA transfers to meet changing circumstances, in Hungary this has not happened, partly because of poor coordination.

Equally, partner agencies have learned the importance of preparedness for emergencies in Eastern Europe and readiness for CVA programming in particular, this includes the implications of Government reluctance to accept CVA programming, and the importance of advocacy and work arounds for CVA in such circumstances. The partner and her partners have learned that Government restrictions on refugees registering for bank accounts and other potential financial service providers has led to more use of direct cash in hand distributions but that vouchers.

Where there are gaps in learning, DEC could be open to supporting the filling of these gaps. For example, The DEC Member is sponsoring a learning event on group cash grants as a way of promoting group grant approaches.

4.8. CHS 8: Staff are supported to do their job effectively, and are treated fairly and equitably

Hiring staff experienced in emergency response was one of the most significant challenges for the DEC Member’s partner and others who already had long standing programming relations. All partners were significantly helped to fill staffing gaps by the valiant efforts of their volunteers.

All the DEC Member’s partners were unanimous in praising it for formal and informal capacity strengthening and wide ranging personal and psychosocial support they and some of their volunteers were able to access from the Member. The presence of the DEC Member staff in the region was particularly noted. However, there remains a high level of stress and exhaustion amongst staff of the DEC Member and her partners, and the Member is very keenly aware of this. As above on learning, DEC may be able to play a useful role in facilitating or supporting learning in this area (for staff and volunteers).

4.9. CHS 9: Resources are managed effectively, efficiently, and ethically

The only DEC Member reported that it was a difficult decision for them to decide whether to respond or not, particularly given the overstretched staff capacities and need to protect their own staff well-being19. In the end, it was decided that the UK public and the Member’s long-term supporters expected a response and that it would access DEC funds to support its sister partners and the Hungarian national partners and to increase efficiencies through shared resource use with other partners (including shared offices in Kyiv and Lviv, Ukraine).

The RTR does not lend itself well to an assessment against this standard. A few brief comments can be made. The DEC Member is working with established partners, giving a reasonable level of confidence that resources are well managed. The presence of Member staff and their support enhances this confidence. The flexibility of DEC funding allowed for funds to be well-deployed to meet needs in a good way (e.g. through CVA).

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19 The decision was taken to not respond in Pakistan for primarily this reason.
Given the scale of the response, there is a question on the adequacy of funds devoted to learning support, including the RTR.

5. Conclusions

Overall, in Phase 1 the DEC Member and partners did their best to ensure that the response met the needs of affected people, including refugees in Hungary and Internally Displaced Persons (IDPs) in Ukraine. This was despite various significant challenges, including the attitude of the Hungarian Government and the lack of structured national coordination. The response was informed by the knowledge of local Hungarian faith-based groups and their daily interactions with and feedback from affected people, including refugees and host communities, and IDPs in Ukraine.

There were no large-scale structured needs assessments for Phase 1 and programming for Phase 2 would benefit from such structured assessments. A major challenge was on Cash and Voucher Assistance (CVA) and low Multi-Purpose Cash Assistance (MPCA) transfer rate. The partner was able to play an important part in persuading national authorities to make the first transfer, a substantial achievement.

Local agencies were much more familiar with in-kind and service provision, so these modalities were used at the start of the response. Subsequently CVA was increasing used as capacities and readiness for cash and support from the DEC Member and partner increased, and as the approval for CVA programming was authorised by Government.

As a Member of the ACT Alliance, the DEC Member has a useful added value in supporting partners by bringing global humanitarian experience and capacity strengthening to complement local knowledge and capacity. This included a focus on the needs of the most vulnerable, the promotion of inclusion and an intersectional approach.

The issue of perceived pressure for ‘speed of spend’ was problematic at the beginning of the response, especially given the time needed to set up partnerships in Hungary, but the financial reports and figures showed that the DEC member and its partners were able to spend over 30% of their budget during the first phase.

More progress is needed on streamlining of bureaucratic aspects, including standardisation on due diligence, assessment, and reporting formats.

The DEC Member and its partners focused on accountability to affected people approach founded on ‘neighbourly’ face-to-face interactions between affected people and volunteers from host communities and partner staff. This fitted well with the group assistance and complex case management approaches that the different partners deployed. This was the fastest and most appropriate way to respond and the DEC Member and partners worked hard to upgrade the capacities, standards and complaints and feedback procedures in the short time available and have plans to do more. The Review noted that the monitoring of action and the collection of feedback, although informal, provided useful information which resulted in adaptations to the response.

In Hungary, the responsibility for coordination and indeed, much of the delivery of the response has been delegated by the Government to faith-based organisations, leading to poor performance in meeting refugee entitlements. Coordination at national level has been weak. The DEC Member partners have been able to work around limitations in formal coordination at national level and have concentrated on more local and informal coordination. The relative lack of well led or supported national Government or UN or other coordination mechanisms may increase the risk of duplication of effort, confusion for affected peoples, or missing of gaps in provision.

Hiring staff quickly enough has been a real challenge for agencies in Hungary and this has led to staff being overworked, supported by the valiant efforts of volunteers.
The DEC Member were praised for formal and informal capacity strengthening and wide ranging personal and psycho-social support. The presence of the DEC Member staff in the region was particularly noted as supportive. However, there remains a high level of stress and exhaustion amongst staff and volunteers with the DEC Member and her partners, something that the DEC Member is very keenly aware of. There is a need for enhanced support in this area to ensure improved practice.

It would also be timely to review, at a more strategic level, how funds are allocated across the region to best meet needs; this links to the issue of ‘access over need’.

The experience in Hungary underlines the need for humanitarian actors, including DEC Members, to challenge Governments to live up to their commitments under international refugee law and to provide basic support including coordination. The DEC Members and the DEC itself, need to improve preparedness for responses in crises where they lack a presence on the ground.

6. Recommendations

The recommendations in this section are based on the findings and conclusion discussed above for Hungary.

<table>
<thead>
<tr>
<th>Keep, maintain and enhance the strong points of the response</th>
<th>Who</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Working hard in difficult conditions, striving to meet the needs of people at risk in line with best practice.</td>
<td>All involved.</td>
</tr>
<tr>
<td>2. The flexibility of DEC funding and ensure this is well understood.</td>
<td>DEC Secretariat.</td>
</tr>
<tr>
<td>3. The constructive approach to partnership by the DEC Member.</td>
<td>DEC Member.</td>
</tr>
<tr>
<td><strong>Even Betters:</strong></td>
<td></td>
</tr>
<tr>
<td>4. Explore how national level coordination in Hungary can be strengthened. Do this in conjunction with other donors and key humanitarian actors in Hungary.</td>
<td>DEC Member.</td>
</tr>
<tr>
<td>5. Continue to work around the lack of national level coordination and promote more structured joint needs assessment.</td>
<td>DEC Member and partners.</td>
</tr>
<tr>
<td>6. DEC and Member to decide what are non-negotiable areas of programme quality, and which are the areas to take a step back on and give space to partners to lead the way?</td>
<td>DEC secretariat and Member.</td>
</tr>
<tr>
<td>7. Explore how to support preparedness for further crises, including policy guidance on the use of CVA and ‘preparedness to partner’.</td>
<td>DEC Secretariat and Member.</td>
</tr>
<tr>
<td>8. DEC to support collective learning when and where there are no more appropriate fora doing so.</td>
<td>DEC Secretariat and Member.</td>
</tr>
</tbody>
</table>
After weeks of escalating tensions, the conflict in Ukraine began in the early hours of 24 February 2022. Intense clashes and aerial attacks forced thousands of families to flee as their homes were destroyed and essential infrastructure such as water supplies, hospitals and schools were damaged.

Within a week, more than one million people had fled Ukraine and many more were displaced inside the country. Hundreds of thousands of people began to cross the borders into neighbouring countries, mostly women and children who arrived with only what they could carry. With the country on the brink of a humanitarian crisis, the Disasters Emergency Committee (DEC) launched an appeal on 3 March 2022 for people affected by the conflict, including refugees, those displaced within Ukraine and people still in situ. 13 DEC Member charities are responding with DEC funds to the crisis in Ukraine, Poland, Romania, Moldova and Hungary.

The conflict caused Europe’s fastest growing displacement crisis since World War II. Nearly 13 million people fled their homes in less than two months – almost a third of the population. There has been widespread urban devastation and destruction of civilian infrastructure. Around 300 health facilities are in conflict areas and many health workers have been displaced or are unable to work. Almost half of Ukraine’s pharmacies are thought to be closed. In April 2022, it was reported that 1.4 million people in Ukraine had no access to water, and another 4.6 million people had only limited access. By June 2022, 15.7 million people were in urgent need of humanitarian assistance; this figure rose to 17.7 million by October 2022.

20 From the DEC’s 6 month report, March to August 2022.
8. Purpose and Scope of Review

8.1. Purpose

The primary purpose of the Real-Time Review is to instigate collective real-time reflection and learning to inform adjustments across DEC Members’ responses. The Review draws on the initial phase of the response in order that lessons be applied in real-time and into the second phase of the Members’ programmes. Recognising the lead role played by national and local actors in the crisis response to date, and the DEC’s own commitments to strengthen localisation efforts, attention to how DEC Members are establishing and scaling up their responses in ways that are complementary to and reinforcing of local humanitarian action was an important part of the picture. The RTR serves an accountability function, both to communities and people affected by crisis\(^21\), as well as to the UK public and other key supporters of the DEC appeal.

The Review aims to:

- Provide an overview and assessment of the response so far against the Core Humanitarian Standard commitments (CHS).
- Draw out key lessons, at operational level, that can inform real-time adjustments and be utilised during implementation of on-going DEC programmes.
- Highlight good practice in the humanitarian operations funded by the DEC.
- Where relevant, identify gaps, areas of unmet needs, and challenges to the humanitarian operations funded by the DEC, from both a sectoral and cross-cutting perspective.
- Inform the partnership approach of DEC Members (including their relationship with national and local partners).
- Explore the extent to which the implementation of the CHS contributes towards high quality and accountable programme plans.

8.2. Scope and limitations

The Review covered the humanitarian response in 5 countries, conducted by 13 Members and supported by the DEC Secretariat. For this, a total of 202 consultant-days\(^22\) was available. In line with this and the scope of the humanitarian action, the Review included in-country fieldwork in Ukraine and Poland, remote missions for Romania and Moldova and a more limited remote mission for Hungary.\(^23\) Due to the breadth in scope and in line with the TOR, the Review focused on ‘areas of enquiry most relevant and meaningful to them (DEC Members) as a collective.’

A limitation was the fact that not all DEC Members and local partners have physical presence in one location. Instead, their main offices are scattered around Ukraine and Europe, requiring their staff to regularly depart for travels, which due to security concerns, take a long time. Therefore, it was impossible to gather representatives of DEC Members operating in Ukraine and their local partners in one place, so online discussions were necessary. Furthermore, the busy schedules of stakeholders made it impossible for everyone to participate in the Review and prevented certain Members from delegating the same representatives for different discussions in the Review, which would have helped with consistency. In Ukraine, an additional limitation was the security situation, which limited travel within the country.

As the Review focused on what was heard from a wide range of stakeholders about the overall response, it was not generally feasible to disaggregate that part of the response funded by the DEC. Similarly, given the breadth of the Review, it was not practical to go into depth on the responses of any one Member. In this regard, it is noted

\(^{21}\) In line with CHS commitment 7 “humanitarian actors continuously learn and improve”.

\(^{22}\) One consultant working for one day gives one consultant-day, a team of 4 working for 50 days gives 200 consultant-days.

\(^{23}\) Ukraine and Poland were chosen as this is where the majority of the affected people are, which has also translated into where DEC and its Members plan to spend the majority of funding – 54% in Ukraine and 20% in Poland.
that individual Members have been conducting their own reviews, and this review should be seen as complimentary to those.

9. Review Concepts and Approach

9.1. Concepts

Key aspects of the conceptual framework of the Review are outlined briefly below. These align closely with the concepts underpinning the Terms of Reference (TOR) and the DEC strategy.

Guided by TOR: The Review adhered closely to the key requirements of the TOR, noting, in particular, the requirement for ‘real-time reflection and learning to inform adjustments across DEC Members’ responses,’ bearing in mind the DEC’s plans for Phase 2. It also provides a strong element of accountability, notably through its engagement with affected people and allowing another, independent, channel for their voices to be heard by the DEC.

Centred on affected people and communities, participation by humanitarian actors: The Review centred on the people and communities affected by the crisis. As illustrated in the simplified diagram below, the Review aimed to act as an independent channel for the voice of affected people to reach the DEC, complementing the current mechanisms through which the DEC hears their voices.

This centre on affected people aligns with the DEC Accountability Framework and the Grand Bargain commitment (No. 6) to a ‘Participation Revolution’. In line with this, the Review notes the work of Ground Truth Solutions (GTS), which the DEC has commissioned to ascertain the perceptions of people on the humanitarian response.

The Review is informed by a ‘risk-informed approach,’ which seeks to understand how affected people cope with the risks they face, including considerations of the main hazards faced, and their capacities and vulnerabilities that affect their ability to manage their risks. This understanding is informed by an intersectional approach, noting how risk varies with characteristics such as age, gender, ethnicity, class and location.

In so doing, the Review explored how the humanitarian action is enhancing the agency of affected people and their communities, supporting their resilience and ‘doing no harm.’

recruited, trained, supported and released. Recognising this, and complementing the voice of affected people, the review sought to hear directly from and give voice to the aid workers on the ground.

The Review examined briefly the structure and architecture of the humanitarian system, noting in particular how it supports and builds local capacity in a spirit of partnership and the nature of coordination with local actors. In

Linking the above, noting the need to review how the affected people participate in decisions that affect them, the Review will ask how humanitarian actors engage with affected people and participate in their decisions and actions in managing their risks. In doing so it examined the role that DEC plays, and can play, in this complex set of relationships.

**Engaging with the aid worker:** Within the complex set of relationships that form the humanitarian system, the relationship between the aid worker and the affected people is key, as the aid worker is one of the main interfaces with affected people. As has been learned over decades, and as is reflected in Core Humanitarian Standard (CHS) commitment No. 8, the competence of the aid workers is crucial to an effective response; this includes how the aid workers are recruited, trained, supported and released. Recognising this, and complementing the voice of affected people, the review sought to hear directly from and give voice to the aid workers on the ground.

The Review briefly examined the structure and architecture of the humanitarian system, noting in particular how it supports and builds local capacity in a spirit of partnership and the nature of coordination with local actors. In this examination, the role of DEC Members was explored, particularly in relation to their engagement with local actors and through them with affected people.

**Learning and improving:** It has long been recognised that learning is central to effective humanitarian action, bringing learning in from previous operations, sharing and supporting learning within an operation, and taking that learning out for other contexts. The Review examined how such learning was fostered within this operation and how lessons are identified and applied in practice to bring about improvements, including ‘are we doing things right, are we doing the right things?’. In doing so, it notes that learning is a mutual, two-way process.

**Truth to power:** The consultants understand the need for an external, independent and professional source of information ready to ‘speak truth into power’ and acknowledge the full support of the DEC in this regard. It gives due regard to confidentiality, especially for key informants.

### 9.2. Approach and priorities

The Review was conducted in line with the DEC’s Accountability Framework (see below), noting the centrality of communities and people affected by the crisis, the Humanitarian Principles and the nine CHS commitments.

The nature of the Review was light-touch, qualitative and participative; it aimed to harvest and document real-time key learnings.

- Light, rapid and participatory.
- Use of appreciative inquiry (what is working well, how to improve, key challenges).
- A critical friend / sparring partner stance, promoting dialogue, constructive criticism and learning.
- Open and adaptive, learning within the review and adapting the review as needed.

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25 In this context an ‘aid worker’ is anyone providing assistance or support to affected people, whether working informally or for an ‘official’ agency.

26 An example was the formation of ALNAP (the Active Learning Network for Accountability and Performance).
• Practical and realistic, recognising the human and logistical constraints involved in the response and the Review.
• Rigorous and evidence-based, as far as possible within the constraints of this Review.

The Review was concerned to learn was the response ‘doing the right things and doing them in the right way.’ Arising from the consultations and review in the inception phase, the following 5 priorities were identified to guide the Review:

• Are affected people at the centre and is their voice being heard and acted on?
• How healthy and functional is the relationship between DEC Members and local organisations (including Government): is the DEC engaging as well as it could?
• Are ‘frontline’ aid workers / volunteers / local groups being well supported in their work?
• Is the DEC and its Members able to respond quickly and well to rapidly changing circumstances, predicted (such as winter) and unpredicted (such as changes in the conduct of the conflict)?
• Is learning being promoted at all relevant levels (including DEC board level) through structures and processes that work and result in improved practice (both in Ukraine and elsewhere)?

10. Review Methodology and Deliverables

10.1. Methodology

A mix of methods and tools were used, and a wide variety of information sources were consulted to facilitate triangulation and verification of data. The mix was developed during the initial inception, during the country briefing workshops and adapted in line with the realities on the ground. The tools included:

• A focused review of secondary data, including key documents, agreed with the DEC\textsuperscript{27}.
• Key Informant Interviews (KII), semi-structured in nature.
• Focus Group Discussions (FGDs).
• Observation, including onsite visits and attendance at operational meetings (where possible).
• Participatory analysis, incorporated in the FGDs.

The Review questions were developed to expand and better understand the implementation and performance of DEC funded programmes. A review matrix was developed during the inception phase and was used to inform the conduct of the review.

The phasing of the review is outlined and discussed briefly below:

\begin{center}
\begin{tabular}{|c|c|c|c|c|c|}
\hline
Inception & Field work with briefing & Initial Analysis, Aide Memoire & Early Feedback and Discussion & Data analysis & Reporting & Presentation \\
\hline
\end{tabular}
\end{center}

\textsuperscript{27} Secondary data will also be obtained from Ground Truth Solutions (GTS), with whom CMC will coordinate throughout the assignment. CMC have contacted with GTS in the inception phase and are liaising with them, with support from DEC. CMC will explore how to utilise the data from GTS to inform the review and in particular to triangulate the findings from the qualitative data collected in the review. Additionally, during the inception phase the data collection tools will be informed by the initial findings of GTS, and CMC will make sure that there is complementarity.

DEC UHA RTR - Hungary Country Report
**Inception:** During this phase, the team conducted a preliminary desk review, a range of inception interviews, drafted the inception report, held a participatory inception workshop, finalised the inception report and made the necessary logistical preparations for the field work.

**Field work with debrief:** The field work was conducted from late September into November 2022, starting with the in-person field missions to Ukraine and Poland, and followed by remote missions to Romania, Moldova and Hungary. The fieldwork involved a considerable amount of discussion between DEC Members and with others, so facilitating reflection and learning throughout the process.

**Initial analysis and Aide Memoire:** After the field work, an Aide Mémoire for each country was prepared and shared with the DEC Secretariat and through them with the DEC Members. This was to allow for early feedback to inform the design and implementation of Phase 2, in advance of the more formal country and synthesis reports.

During this phase, the initial findings, conclusion and tentative recommendations were presented and discussed at an online learning workshop held on Friday 4 November.

**Data analysis and reporting:** During this phase, the review team conducted further analysis of the data and drafted the country reports.

**Reporting and Presentation:** During this phase, drafts of the reports will be reviewed and discussed, and a final presentation made.
10.2. Deliverables

The deliverables are as follows:

<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>An inception report submitted to the DEC Secretariat and presented to Members as part of an inception meeting in London or online.</td>
<td>12 Sep 2022</td>
</tr>
<tr>
<td>Facilitation of the inception workshop sessions with DEC Members and their partners.</td>
<td>12 Sep 2022</td>
</tr>
<tr>
<td>Facilitation of in-country briefing workshops for DEC Members and partners.</td>
<td>3 Oct 2022</td>
</tr>
<tr>
<td>Contribute to DEC Members Humanitarian Directors’ Meeting.</td>
<td>4 Oct 2022</td>
</tr>
<tr>
<td>Facilitation of in-country learning / debriefing workshops at close of field work phase.</td>
<td>17 Oct 2022</td>
</tr>
<tr>
<td>5 Aides Mémoire, one for each country, submitted after completion of field work.</td>
<td>End Oct 2022</td>
</tr>
<tr>
<td>Contribute to a DEC Membership and Accountability Committee Meeting.</td>
<td>3 Nov 2022</td>
</tr>
<tr>
<td>Contribution to a response wide learning workshop at the end of the field work.</td>
<td>4 Nov 2022</td>
</tr>
<tr>
<td>Five brief draft country reports (this report) and a draft Synthesis report.</td>
<td>Late Nov 2022</td>
</tr>
<tr>
<td>Presentation at debriefing meetings with DEC Secretariat and Members (and possibly FCDO) in London or online.</td>
<td>Early Dec 2022</td>
</tr>
<tr>
<td>Receive comments from DEC Members &amp; Secretariat.</td>
<td>Late Dec 2022</td>
</tr>
<tr>
<td>Finalise the 5 country reports and synthesis report.</td>
<td>Early Jan 2023</td>
</tr>
<tr>
<td>Submit the final reports.</td>
<td>Late Jan 2023</td>
</tr>
</tbody>
</table>

It is noted that a key result of the real-time review is collective real-time reflection and learning on the part of the DEC Members, the Secretariat and local organisations. In addition to reports and other knowledge documents, this reflection and learning has been facilitated during the course of the review by the discussions at the interactive and participatory workshops listed above.

11. Reflections from the Real-Time Review (RTR)

11.1. Using the Core Humanitarian Standard (CHS)

These notes are provided to give some reflections on the use of the Core Humanitarian Standard (CHS) in the response and in the review itself. It is not intended as a comprehensive review, which is beyond the scope of this Real-Time Review (RTR).

For the Review: The CHS gives a useful framework for the Review and discussions. It helps keep discussions structured but is not too complicated.

For a full learning exercise, it would be a useful part of the package.

For supporting the response: DEC Members were familiar with it – so that is good.
In the view of the review team, it provides a useful framework for checking that the response is doing what it should be doing. However, it must be used as part of a package, alongside assessment (risk-informed approach), planning (the logical planning framework) and implementation methods (project cycle) and linked to a credible Theory of Change.

**Suggested improvements:**
- CHS 1 and 2 Amalgamate them – very hard to separate these in discussions or analysis.
- CHS 4 – Review this to ensure participation is the right way around – that agencies recognise they are participating with affected people, local organisations and Government. There is still a strong (and understandable) tendency for aid workers to see ‘participation’ as meaning how ‘beneficiaries’ participate in the response, rather than how agencies participate with affected people. Review wording in light of the proposed principle set out below.
- CHS 8: This needs strengthening, for example “Policies are in place, are implemented in practice and regularly reviewed” for the various items.

**Statement of principle: ‘our rights respected and risks managed’:** We, the people affected by disaster, assert our right to assistance that helps ensure our rights are respected and that supports us in managing the risks we face and in coping and developing as communities and individuals. Such assistance will be based on a sound assessment of the hazards we face, respect for our capacities as well as our needs and will be designed and provided in a framework that is people-centred and community-led, with appropriate external agency participation, and which enhances our resilience to future risks.

As affected people, we have a right to participate in the governance of the assistance provided by external actors, by having meaningful representation in oversight and governance mechanisms.

A key competency of external actors and their staff shall be their ability to engage with us as affected people, with competence and respect. Their selection, preparation and training shall include this aspect.

**11.2. Learning about learning**

Good responses are supported by good learning and a RTR can be one useful component of the learning support package, alongside others. DEC as a collective is well placed to support this process, and perhaps even to extend it, seeing it as an ‘investment not a cost.’

In looking at what constitutes a learning support package for a response, the following points may be considered. Firstly, a useful question to guide the design of the learning is: *What do we need to learn and how can we best meet the learning needs of the organisation as well as groups of individuals within the organisation?*

**Theory of Change for learning:** In current parlance, work with an evidence-based theory of change that supports effective learning, at all relevant levels, including individual, organisational and institutional.

Agree on the key metric for effective learning, proposed as an improvement in practice (not simply more knowledge).

**Who needs to learn?**

- Affected People, the starting point: what do we (affected people) need to know and learn in order to cope with our situation?

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28 https://www.alnap.org/help-library/from-real-time-evaluation-to-real-time-learning
• Individual aid workers (MASKS\textsuperscript{29}, Technical & Operational Competence including Welfare).
• Country team and operations (MEAL, the Project Cycle, Systematic Induction and Briefing of staff).
• DEC Members: from board to field worker, linking to organisational capacity, recognising key drivers of learning.
• Between Members – supporting collective learning.
• DEC Secretariat – including as a facilitator.
• DEC Board – strategic lessons to be learned, including monitoring the learning process itself.
• Broader humanitarian community, recognising the convening and advocacy potential of the DEC.

**Cycle of learning:** Consider the full cycle of learning:

- **Before:** Bringing learning in from previous experiences.
- **During:** Sharing learning around and developing learning.
- **After:** Taking learning out and incorporating into practice, using policies, procedures and support.

**Learning Process:** At the DEC level, provide for linking current learning exercises to learning from previous exercises, including reviews and/or evaluations by the DEC, and taking on board external sources of good practice (e.g. ALNAP, see below). As part of this process, check how previous learning has been incorporated by the DEC (at board, Secretariat, and Member level).

During a crisis look at how learning is supported, developed and shared during the course of the crisis, at all levels. Consider developing a simple mechanism to support further learning between DEC Members, including regular exchanges and sharing of key information (such as learning from Member reviews).

**From ALNAP\textsuperscript{30}**

<table>
<thead>
<tr>
<th>Plan and launch the RTL</th>
<th>Implement the RTL</th>
<th>Analyse information and emerging learning</th>
<th>Feed learning back into decision-making</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Identify the focus and scope</td>
<td>• Engage users in collective analysis and co-creation of recommendations</td>
<td>• Design a communications strategy at the outset</td>
<td>• Design a communications strategy at the outset</td>
</tr>
<tr>
<td>• Identify whom the exercise is intended to benefit and how to secure their buy-in</td>
<td>• Sense-check the emerging narrative</td>
<td>• Identify and be clear about information gaps/what the RTL does not cover</td>
<td>• Engage users in collective analysis and co-creation of recommendations</td>
</tr>
<tr>
<td>• Select the most appropriate approach to RTL</td>
<td>• Choose learning criteria (OPEF DAG, CHS or other) and approach</td>
<td>• Identify and be clear about information gaps/what the RTL does not cover</td>
<td>• Collaborate on the learning process and how to incorporate learning</td>
</tr>
<tr>
<td>• Consider whether an internal/external/mixed team is most appropriate</td>
<td>• Develop the analytical framework and identify questions</td>
<td>• Identify and be clear about information gaps/what the RTL does not cover</td>
<td>• Collaborate on the learning process and how to incorporate learning</td>
</tr>
</tbody>
</table>

\textsuperscript{29} Motivation, Attitude, Skills, Knowledge and Support - elements of competence

\textsuperscript{30} [https://www.alnap.org/help-library/from-real-time-evaluation-to-real-time-learning](https://www.alnap.org/help-library/from-real-time-evaluation-to-real-time-learning)
11.3. Real-Time Review (RTR) Process

The RTR was appreciated by all the stakeholders. In addition to being seen as good practice, it also gave them a forum to feed back to the DEC through an independent channel. This is also an important point for DEC governance. The emphasis on collective reflection and learning was well judged.

How can this process itself be improved?

- Results focus: clarify the desired learning result (e.g. improvement in practice).
- Strengthen the focus on learning, reduce that on evaluation. Review the language used in the TOR.
- Keep: light-touch, rapid, qualitative, participative.
- Enhance: Participatory nature with a focus on real-time learning during the review e.g. emphasise in-country learning workshops. Note the action taken on the proposal for coordination between DEC Member.
- Timing – Consider starting earlier in the response; start commissioning process as soon as possible after appeal is launched, use ‘light touch reporting’ even more, participatory workshops and Aides Mémorial.
- Duration – Run the RTR in parallel with the response, not just as a ‘one-off’ review.
- Framework: Clarify from the start that the CHS is to be used as the basic framework for the review
- Scope: Encourage a more strategic ‘whole of the response’ approach, including initial decision to launch, the allocation of funds and the engagement by DEC Members. Link to overall DEC learning process, ‘before and after’ (see below). Avoid going into low-level operational detail at Member level.
- Reporting: Reduce the amount and time involved, use the Aide Memoire format for country reports and one synthesis report.