

# Evaluation of DG ECHO's Actions in response to the Pakistan Earthquake of 2005



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### Cover Photo

The cover photo shows a young girl playing with water in a village in the Neelum Valley. This village had an emergency water supply, latrines, and medical coverage supported by ECHO after the earthquake.

## Executive Summary

### *Introduction*

3. This report summarises an evaluation of the ECHO response to the Pakistan Earthquake carried out by external independent evaluators between April and June 2007.
4. A magnitude 7.6 earthquake struck near Balakot in the morning of October 8, 2005. The earthquake claimed 75,000 lives and seriously injured another 76,000 people. 98% of those killed lived in either Pakistan's North West Frontier Province (NWFP) or in Pakistan-administered Jammu and Kashmir (AJK). The total damage from the earthquake was estimated at US\$6.9bn.
5. Strong damage from the earthquake stretched over an area of 28,000km<sup>2</sup>. Many roads, especially into the mountains, were cut by landslides. Helicopters were often the only rapid means of transport. Aftershocks and bad weather continued to constrain the relief operation. It was weeks before the last of those wounded in the earthquake were evacuated to hospital.
6. The earthquake was the largest disaster Pakistan has ever faced. Its effects were worse in AJK, in part because of the destruction of the capital Muzaffarabad and the death of many key officials there.

### *The response*

7. The disaster was met by a large-scale response. ECHO announced the first funding on the day of the earthquake and in all made €49.6mn available in six separate decisions. ECHO was the fifth largest funder for the earthquake response and provided 5.2% of the overall funding for it.
8. ECHO quickly drew in staff from as far away as Bangkok and Nairobi to strengthen its team on the ground. ECHO mobilised faster than some of its partners, so ECHO staff often had a better idea of the situation on the ground than partners presenting project proposals.
9. Having ECHO staff on the ground was key to the appropriateness and effectiveness of the ECHO response. ECHO's knowledge of conditions on the ground gave it leverage in both informal donor coordination, and the more formal general coordination mechanisms.

### *Appropriateness*

10. The projects funded by ECHO were appropriate and relevant. They matched the needs of the affected population. There were two key reasons for this:
  - ECHO staff were on the ground early and had a good understanding of the needs. The advice and guidance of ECHO staff on the ground was appreciated by almost all partners.
  - ECHO's discouragement of project modifications encourages partners to submit proposals which they believe are unlikely to need modifications. This means that partners try to base them on needs assessments.

11. However, discouraging project modifications influences the types of projects that partners present to ECHO and prevents a more flexible project model based on increasing levels of beneficiary participation with time.
12. While all the project were relevant, some were particularly relevant including those providing: telecommunications access to beneficiaries; logistics support for the operation; those answering recurring problems such as that of identity documents; integrated winter shelter; and those meeting special needs, such as physiotherapy for those injured.
13. The linkage between the thematic funding for WHO and funding the Disease Early Warning System (DEWS) project on the ground was especially apt. Thematic funding in general is one way in which ECHO can contribute to the first phase of the emergency response. For ECHO, thematic funding may have been more effective than providing response funds, especially given the capacity issues seen in the slow start-up of partners.

### Coverage

14. Needs varied by geographical location, altitude, and sector. Coverage was congruent with the pattern of needs with a good geographical spread of coverage. ECHO's presence on the ground allowed it to identify where there were gaps in aid.
15. Sectoral coverage was largely appropriate, especially in the first year after the earthquake, but there was generally not enough assistance for restarting livelihoods from the whole international community. ECHO did not fill this gap in humanitarian assistance.
16. Damaged livelihoods after the earthquake mean there was a danger of the impact of the crisis worsening once relief aid stops. It would have been right for ECHO to have done more work on livelihoods.
17. Coverage also matched the needs in terms of altitude and the needs in the relief phase. However, there was some evidence (from the low take-up of airlift by partners other than ICRC and IFRC) that less accessible areas had been dropped by partners by the winter of 2006.
18. The most successful health projects seem to have been in primary health support rather than the field hospital or prefabricated clinics.
19. In water and sanitation, the higher tech approach taken by the German ERU was less successful than the lower tech approach of the Swedish ERU. The needs for water and sanitation in rural areas were only partially met.
20. ECHO has a good reputation among other donors for being strategic and has access to key UN and donor agencies. ECHO has the advantage that it may be less influenced by foreign policy concerns than other donors. ECHO failed to use this strong position, bolstered by good on-the-ground knowledge, to act as an advocate on some key humanitarian issues.
21. While aid programmes generally paid close attention to the needs of women, there was little attention to the specific needs of men as a result of the earthquake.

### *Effectiveness*

22. The ECHO funded project portfolio was largely effective. This was due in good part to the work done by ECHO to ensure that proposals had realistic and achievable targets, and to the close monitoring by ECHO.
23. ECHO funding was not available to partners in the first few days of the response, where there is the greatest potential for saving lives, even for agencies with funding under the Primary Emergency Decision.
24. ECHO funding was largely useful for the follow-on relief phase, rather than for the most acute phase in the first week of the response. This is due to the nature of ECHO procedures which stress good financial control over speed of response.
25. Agencies that have invested significantly in their own emergency response capacity were the best able to mobilise quickly with the Primary Emergency Decision funding.
26. ECHO assistance peaked in the first few months and tailed off to less than 10% of the peak level after 12 months. This short funding time-frame limits the capacity of ECHO partners to keep their capacity between emergencies.
27. Thematic funding for WHO has been effective, but there is no similar thematic funding for NGOs.

### *Efficiency*

28. ECHO has many bureaucratic requirements that made ECHO financing less flexible for the Pakistan response than humanitarian funding from other donors. One particular case is that of the rules of nationality and origin for procurement. Another is the treatment of capital assets at the end of ECHO funding.
29. ECHO was alone among the major humanitarian donors in the Pakistan response in not directly funding local NGOs. Local NGOs could benefit for ECHO's scrutiny of proposals, and tight monitoring if ECHO feedback were formalised. However, such direct funding might require a new council regulation for ECHO.
30. The context of each individual relief operation will determine which agencies provide the most useful channel for ECHO funds. There is no simple hard-and-fast rule, as even the same agency may perform differently on different projects.

### *Impact and results*

31. ECHO is a donor of declining importance as global relief funding is growing faster than EC relief funding is. ECHO funded just over 12% of global humanitarian action in 2006, and just over 5% of the funding for the Pakistan Earthquake. This can be compared with the United States which funded one-third of global humanitarian action in 2006. Ten years ago, in 1997, ECHO provided one third of global humanitarian assistance. The fall in ECHO's relative importance as a humanitarian donor can be expected to continue to decline unless there is radical action by the Commission.
32. For NGO partners, ECHO funding is of falling importance and proportion of ECHO funding that is channelled through NGOs is reducing. While particularly marked in this response, this is a wider trend globally. ECHO Funding for the United Nations has grown

as funding for NGOs has fallen. This is of concern given that only UN agencies have direct access to funding from the Central Emergency Response Fund (CERF).

33. ECHO added value to the response through the careful selection and monitoring of projects, and through thematic funding to increase partners' capacity. Such thematic funding is not accessible for NGOs.

34. ECHO could make a larger contribution to the early acute phase of the response by supporting the stockpiling of materials or by prior stand-by funding of selected partners.

35. The overall aid delivered prevented any secondary mortality and reduced suffering after the earthquake. ECHO's assistance contributed towards this especially as ECHO projects were probably more effective than others due to the care ECHO took with the quality of proposals. However, the prudent approach taken by ECHO limited the potential impact of some projects. Funding before the earthquake probably had the biggest impact in the first week of the response.

36. The quality of the work done by partners varied a good deal. However, the worst examples seen were not ECHO-funded. This variability in quality, and the variability in the content of seemingly similar projects, made any unit cost comparisons almost worthless.

37. ECHO played a leading role in promoting coordination, both with finance and with the actions of the field staff. Coordination appears to have been better than after the Tsunami. The cluster coordination approach was first launched in the response, but had mixed results.

38. ECHO played a far more limited role in advocacy than its importance as a donor, and its place as a donor that is less politically driver than some other donors, would justify.

### *Sustainability and Connectedness*

39. The common understanding within ECHO that assistance is limited to temporary and transitory assistance is based more on customary interpretation and practice than on ECHO's legal mandate.

40. ECHO did not pay enough attention to connectedness in the actions that it financed. It is clear that other community financing mechanisms were not connected with ECHO's work in Pakistan. This means that communities might see a worsening in their situation after ECHO relief assistance ended, had not other humanitarian donors funded extensions to projects that had been previously been funded by ECHO.

41. Large earthquakes are a recurring phenomena in the region and ECHO should prepare its own response for them.

### *Communication and Visibility*

42. Partners in the field are still too focused on visibility and do not pay enough attention to communication. Much of the money spent on visibility is wasted as the targets either do not see it (European taxpayers) or do not understand it (beneficiaries).

43. European taxpayers are more likely to "visit" disaster sites through the media or via the web than physically. However ECHO's presence in the immediate aftermath was not prominent in the media presentations and the ECHO website does not present a full

picture of the extent and depth of ECHO's response in the earthquake affected area. The present FPAs do not require links to ECHO's website.

44. There are opportunities for good visibility in the early stages of a response through distributing durable commodities with large ECHO logos. The unavoidable delays in signing contracts and buying, transporting, and distributing goods mean that visibility in the early days, when the television cameras are present, is really only possible with stockpiled commodities.

45. The work of the ICRC requires the highest possible perception of independence in the field and insistence on local donor visibility in the field, or for ICRC project, or project by members of the Red Cross and Red Crescent movement that are managed by ICRC, is inappropriate.

46. The use of the EU flag for visibility risks confusing humanitarian assistance with peace support and other EU activity. This is a growing risk as the EU moves towards a common external policy.

47. The present ECHO logo is not effective on its own at communicating the source of the assistance to beneficiaries.

### *In Summary*

48. ECHO's performance was very good. Projects were carefully selected, were generally appropriate and corresponded to real needs. ECHO's presence on the ground gave it a good overview and was one of the key factors contributing to the success of the operation.

49. The lessons for learning in ECHO's response are largely around broader issues such as the way in which ECHO's mandate is interpreted and the limits that ECHO's predominantly project proposal-based funding approach places on the timeliness of the response.

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50. The following recommendations are made in the text:

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<i>ECHO should consider setting up a mechanism for stand-by funding with selected partners so that funds can be released to them in the first hours of a response.</i>	50
<i>ECHO should consider thematic funding to improve awareness of the cluster approach and the management skills of cluster leads.</i>	66
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<i>ECHO should only fund the deployment of field hospitals where they meet the WHO-PAHO guidelines.</i>	42



<i>Tertiary Recommendations</i>	<i>Page</i>
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## Acronyms and Abbreviations

<i>Term</i>	<i>Meaning</i>
<i>ADB</i>	Asian Development Bank
<i>AJK</i>	Azad Jammu and Kashmir ( <i>azad</i> is Urdu for <i>free</i> )
<i>BBC</i>	British Broadcasting Corporation
<i>DG</i>	Directorate General
<i>DIPECHO</i>	Disaster Preparedness ECHO
<i>ECHO</i>	European Commission Humanitarian Office
<i>ERRA</i>	Earthquake Reconstruction and Rehabilitation Authority
<i>FAFA</i>	Financial and Administrative Framework Agreement
<i>FPA</i>	Partnership Agreement
<i>FRC</i>	Federal Relief Commission
<i>FTS</i>	Financial Tracking System
<i>IASC</i>	Inter Agency Standing Committee
<i>ICRC</i>	International Committee of the Red Cross
<i>IFRC</i>	International Federation of the Red Cross
<i>IFRC</i>	International Federation of Red Cross and Red Crescent Societies
<i>IRIN</i>	Integrated Regional Information Network
<i>NOHA</i>	Network on Humanitarian Assistance
<i>NWFP</i>	North West Frontier Province
<i>OCHA</i>	Office of the Coordination for Humanitarian Affairs
<i>OECD</i>	Organisation for Economic Cooperation and Development
<i>TEC</i>	Tsunami Evaluation Coalition
<i>UNDP</i>	United Nations Development Programme
<i>UNHCR</i>	United Nations High Commissioner for Refugees
<i>WHO</i>	World Health Organisation
<i>STI</i>	Sexually Transmitted Infection
<i>BHU</i>	Basic Health Unit
<i>PED</i>	Primary Emergency Decision

## Map



The names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations  
 Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan.  
 The final status of Jammu and Kashmir has not yet been agreed upon by the parties.

Note: Map adapted from UN map<sup>1</sup> of 10 October. Depiction of most affected area based on information available at that time.

<sup>1</sup> (ReliefWeb Map Centre, 2005)

# 1 Introduction

## 1.1 Acknowledgements

51. The team would like to acknowledge the assistance of the ECHO evaluation unit in Brussels and of the Desk staff there. This assistance was continued by the ECHO field staff.

52. The team also acknowledge the assistance of all those who took the time to talk to them, and who arranged the different visits. The team would also like to especially thank the hundreds of beneficiaries who patiently waited for them and answered their questions.

53. We are particularly grateful to NRC for their efforts in organising a great part of the schedule, to the French Red Cross for their hospitality, and to Oxfam for providing an excellent car and driver for the team and arranging the visit to Bagh.

## 1.2 Context

54. The conditions for the 2005 Pakistan earthquake were set some 200 million years ago when the Indian plate broke off from Pangaea and surged northwards at up to 9m per year. India crashed into the Eurasian Plate between 40 and 50 million years ago, slowing down its rate of movement. The Eurasian plate rode up over the Indian plate leading to the creation of the Himalayas and the rise of the Tibetan plateau.

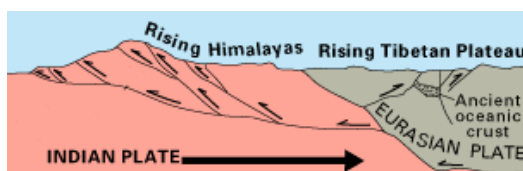


Figure 2: The Indian-Eurasian plate junction. The Himalayas are still rising by over 10mm per year. (Source USGS).

55. The plates have slowed their movement over time and are now only moving 40 to 50mm a year against each other. As the Indian plate slides under the Eurasian plate, the boundaries between the different plate segments sometimes stick. When the pressure builds up enough the sticking point ruptures, and the sudden release of energy leads to earthquakes.

56. The point here is that the processes behind the 2005 earthquake are well understood and the occurrence of earthquakes along the Indian and Eurasian plate boundaries should not come as a surprise. It is this same movement that was responsible for the 1897 Assam earthquake that levelled Nepal, the 1935 Baluchistan earthquake that levelled Quetta, and the 2001 Bhuj earthquake for the for the many earthquakes in Afghanistan. Further

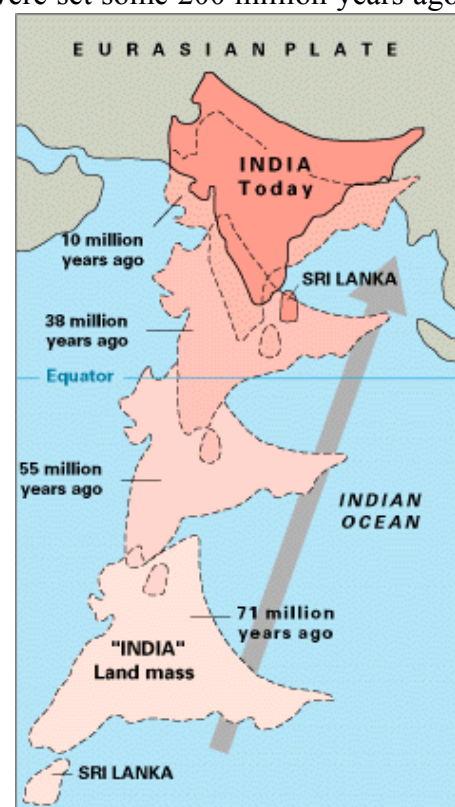


Figure 1: The movement of the Indian plate over 71 mn years (Source USGS).



destructive earthquakes can be expected across this region as each of these earthquakes has only released part of the pent-up energy.

57. However, the earthquake did come as surprise to the community. There has been no large earthquake in the affected area in living memory, apart from the Pattan fault earthquake of 1974, but this was limited to Kohistan in NWFP and was only of magnitude 6.5. There last very large earthquake in the region was in 1555.

58. The earthquake came as a surprise at the national level. Pakistan was simply not prepared for dealing with a disaster on this scale. As the Damage Need Assessment (Asian Development Bank & World Bank, 2005b, pp. 1, Annex 4) noted:

*Although it is prone to a variety of natural hazards, Pakistan has an ad hoc approach to dealing with hazard risk management. Interventions are primarily focused on relief and response as opposed to ex ante mitigation measures.*

### 1.3 The earthquake

59. The magnitude 7.6 earthquake struck at 08:51 local time on the morning of Saturday October 8<sup>th</sup>. The epicentre was near Balakot. The earthquake killed nearly 75,000 people and seriously injured a similar number. Several interviewees stated that the Pakistan Earthquake was a worse disaster than the tsunami, and it is useful to compare the two to test this claim.

60. The total death toll from the earthquake was only one third that of the Indian Ocean tsunami<sup>3</sup>. However, the number of houses destroyed was not that different. The total estimated damage and loss was only 58% of that for the tsunami.

61. However, Pakistan was

Table 1: The Pakistan Earthquake and the Tsunami compared. See footnotes for sources<sup>2</sup>.

<b>Indicators</b>	<b>Pakistan earthquake</b>	<b>Indian Ocean tsunami</b>
Number killed	74,702	227,898
Number injured	75,692	116,000
Houses damaged or destroyed	600,000	514,325
Losses and damage (US\$m)	5,774	9,930
Total funding (US\$bn)	6.9	13.5
ECHO funding (€mn)	49.6	123

<sup>2</sup> Sources: Number killed (73,338) and injured (69,412) in Pakistan and AJK from ERR (2006, p. 9) - The Pakistani Minister for Health gave the total death toll as 86,000 with over 100,000 injured on November 10<sup>th</sup> (Xinhua, 2005); The number killed in Indian-administered Kashmir (1,360) from (Boston Globe, 2005) with injuries there (6,266), and deaths (4) and injuries (14) in Afghanistan from (Wikipedia, 2007). Numbers killed in the tsunami (Telford et al., 2006, p. 33) with the number of injured estimated by back calculating from mortality figures using the mortality to injury ratios presented on page 36 of the same source, (and assuming the Thailand had a similar ratio to Sri Lanka). Housing numbers: Pakistan – 600,000 (ERR, 2006, p. 9); Indonesia – 210,970 (World Bank, 2005, p. 31); Sri Lanka – 145,770 (Asian Development Bank et al., 2005, pp. 1, Annexe 4); India – 153,585 (Asian Development Bank & World Bank, 2005a, p. 50), and Thailand – 4,000 (OCHA, 2005, p. 10), giving a total of 514,325 houses. Only relatively small numbers of houses were destroyed in the other tsunami affected countries. Losses and damage are drawn from (Asian Development Bank & World Bank, 2005b, p. 2) for Pakistan and (BRR & World Bank, 2005, p. 11) for the Tsunami affected countries. Total funding for the earthquake has been taken as pledges (as many donors included their previous humanitarian funding in their reconstruction pledges, plus private funding)

<sup>3</sup> The Asian Earthquake and Tsunamis of December 26, 2004.

far worse affected in terms of the damage and loss than any one of the countries hit by the tsunami. It had nearly 50% more damage and loss and three times as much housing loss as Indonesia, the worst affected country in the tsunami.

62. It is often said that earthquakes do not kill people, but that buildings do. While buildings probably accounted for the majority of casualties, many were killed by large landslides, some with millions of tonne of rock. These landslides buried villages or swept them away. They also closed roads and isolated villages and towns. More than 1,000 aftershocks of magnitude 5 or greater were recorded in the following three weeks. Some of these aftershocks provoked further landslides.

#### 1.4 *The history*

63. The area worst affected by the earthquake was Azad Jammu and Kashmir (AJK), the Pakistan administered part of Jammu and Kashmir, and part of Northwest Frontier Province (NWFP). Both were sensitive areas. Parts of NWFP are sensitive as they border on Afghanistan and the very traditional populations there are said to support those Afghans opposed to the post-Taliban government.

64. AJK was effectively off limits to international aid agencies before the earthquake, and access was only possible under very restricted conditions. With independence and partition in 1947, Kashmir was pressured by both of the new states, India and Pakistan, to join them. The Hindu Maharaja of the majority Muslim state of Kashmir wanted to remain independent, but a Pakistani backed invasion forced him to turn to India, who demanded accession to India as the price for their assistance.

65. That first war ended in 1948, but it was followed by the Indo-Pakistan wars of 1965 and of 1971. While the 1971 war was largely over East Pakistan (Bangladesh) it also involved fighting in Kashmir. There was a further limited conflict between India and Pakistan in 1999 with the Kargil War. In three resolutions, the UN Security Council and the then United Nations Commission in India and Pakistan recommended that as already agreed by Indian and Pakistani leaders, a plebiscite should be held to determine the future allegiance of the entire state.

66. However in the 1950s, the Indian Government distanced itself from holding a plebiscite and Pakistan is not in agreement with the suggestion that independence be added as a third option to any plebiscite. The end result of all the conflict is the separation of Jammu and Kashmir into an Indian-administered part (about two thirds of the state) and a Pakistani administered part. They are separated by a cease-fire line, the so called line-of-control.

#### 1.5 *The response*

67. The extensive damage, including that of telecommunications networks, meant that a clear picture of the scale of the disaster was slow to emerge. The Pakistan Military played a key role in the response, but several interviewees made the point that, in some areas, the military was almost fully occupied with rescuing and evacuating military casualties in the first few days.

68. In Islamabad, attention first focused on the impact of the earthquake there (a tower block had collapsed with 73 deaths). The picture became clearer during the day and several NGOs mobilised several joint assessment teams.

69. The main routes into the area were blocked by landslides and had to be cleared. The impact of the continuing landslides made helicopters the only effective means of mechanical transport into affected villages. This became part of the key role for the Pakistan Military, but they also used mule trains and soldiers as bearers to transport material to remote sites.

70. The first international assessment teams found that they were able to enter AJK without the ‘no objection certificates’ that had previously been necessary. The Pakistani authorities dropped the requirement for these from the beginning of the emergency response but reintroduced them in 2007.

71. Some ECHO partners mobilised the same day. The evaluation team even met one (non-refugee) beneficiary who had received a tent from UNHCR on the day following the earthquake. This tent was not ECHO funded – although ECHO immediately earmarked €0.6mn in funding for use by UNHCR, it was end of October before UNHCR made a proposal to ECHO. ECHO raised some queries on this proposal and UNHCR submitted a revised one in mid-November. The agreement was signed in mid-November and only expenditures after November 1<sup>st</sup> qualified for reimbursement by ECHO.

72. Other partners who mobilised the same day included Oxfam and Save the Children UK. They were involved in the first assessment missions that left Islamabad in multi-agency teams alongside the various UN agencies, the evening of the earthquake. Other agencies with logistical and financial means were able to start delivering assistance that weekend through the use of helicopters, AKDN-FOCUS), alongside the military. This initial work was funded from non-ECHO sources.

### *1.6 The Donor Response*

73. Donor response was relatively good to the response with over \$1Bn contributed or committed to date for the humanitarian response. Private giving was the largest single source of funds for the humanitarian response but was only a fraction (8.6%) of the level of private giving for the tsunami.

74. Of the EU members the UK, the former colonial power, was the most generous (Figure 3). The US response was the most generous overall. Some interviewees linked both the UK and US response to their foreign policy objectives in the region, and made the point that this give ECHO an advantage over such donors.

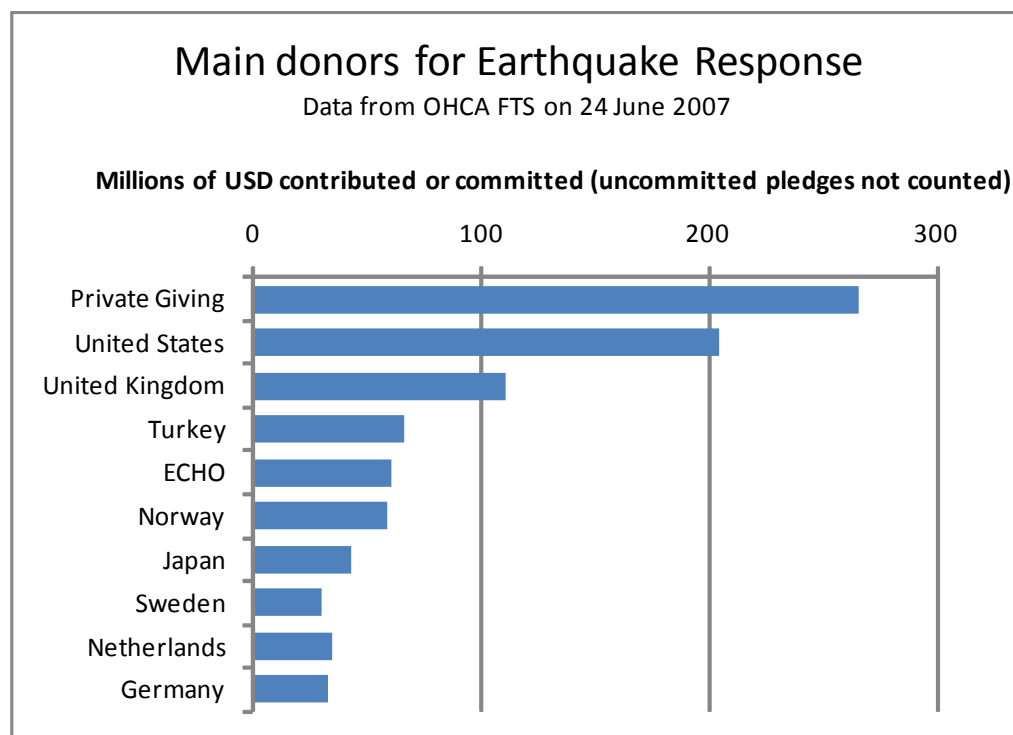


Figure 3: Main donors for the humanitarian response to the earthquake. This does not include outstanding pledges, or reconstruction pledges.

75. The Government held a Donor Conference on November 19<sup>th</sup> and appealed for \$5.2bn for reconstruction and recovery. The conference netted a total of \$6.5bn in pledges, but 62% was in the form of loans, and of the grants only 19% of these were for the government (with a further 2% whose destination was unclear) (Pakistan Ministry of Economic Affairs and Statistics, 2006a). By the following March only 16% of the pledges had been disbursed and 48% committed (Pakistan Ministry of Economic Affairs and Statistics, 2006b).

76. One issue for donors was the repeated complaints by the United Nations that humanitarian needs were not being funded. It was clear from our perusal of the files that UN agencies had been slow to ask ECHO for funds. Unlike some donors, ECHO does not contribute to appeals, only to funding requests. In total, UN agencies and IOM received 45% of all ECHO funding for the earthquake response.

### 1.7 ECHO's Response

77. ECHO was alerted to the disaster on the same day and the emergency room in Brussels was activated on Saturday when total funding of €3.6mn was announced. However, the decision on this funding was formally taken on Monday 10<sup>th</sup> (ECHO, 2005).

78. ECHO staff were sent from Bangkok, New Delhi, and Nairobi to reinforce the ECHO office in Pakistan and assist with the response. The Afghanistan ECHO office also provided a vehicle. ECHO deployed very rapidly and was ahead of many of its partners in this respect. This meant that ECHO staff often had a better understanding of the context, and of the current pattern of need, than ECHO partners making proposals. Of the EU members only the UK deployed a large team to the area to manage their response.

79. ECHO provided €49.6mn of funding<sup>4</sup> via five new decisions and one earmarking from a previous decision.

Table 2: ECHO Funding Decisions

<i>Date</i>	<i>Amount (€)</i>	<i>Decision Type</i>	<i>Reference</i>
10-Oct-05	600,000	Earmarking of previous decision	ECHO/-AS/BUD/2005/05000
10-Oct-05	3,000,000	Primary Emergency Decisions	ECHO/-SA/BUD/2005/05000
14-Oct-05	10,000,000	Emergency Decision	ECHO/-SA/BUD/2005/06000
18-Nov-05	10,000,000	Emergency Decision	ECHO/PAK/BUD/2005/01000
16-Dec-05	25,000,000	Ad Hoc Decision	ECHO/-SA/BUD/2005/07000
18-Dec-06	1,000,000	Ad Hoc Decision	ECHO/PAK/BUD/2006/01000
<b>Total</b>	<b>49,600,000</b>		

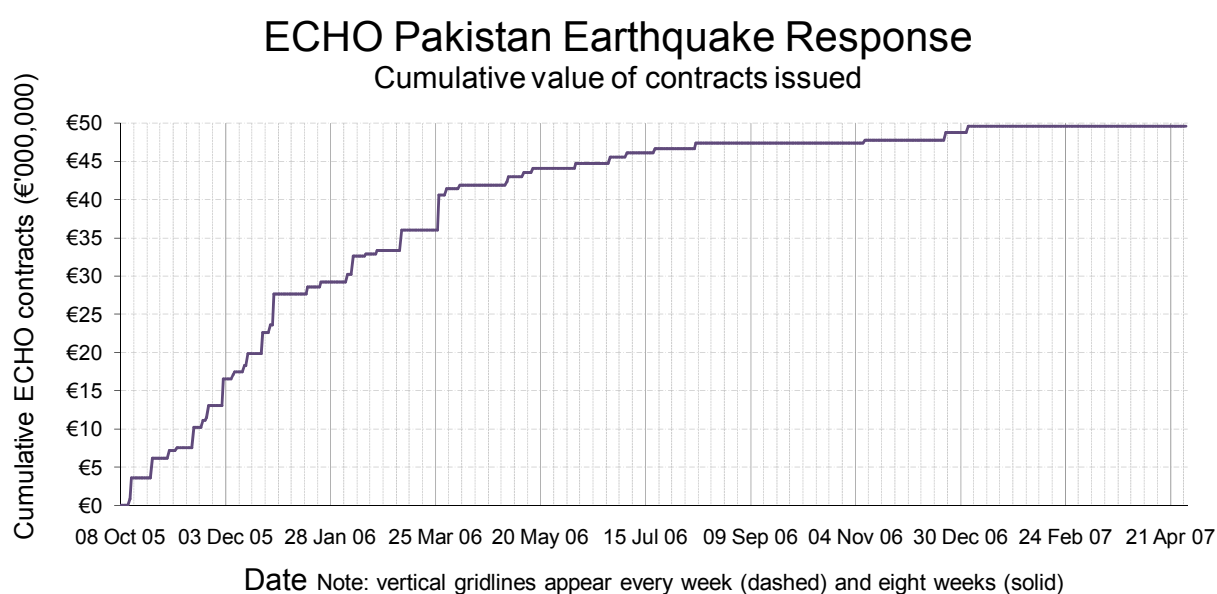


Figure 4: Cumulative value of ECHO contracts

### 1.8 External constraints on the response

80. ECHO faced a number of external constraints on its response. The first of these was the lack of partners with the capacity to respond immediately to the emergency. Few partners were working in the earthquake affected areas prior to the earthquake, a key factor in early mobilisation. Additionally, the need for visas and logistics difficulties slowed the initial response.

81. ECHO has no general fund for response, but every emergency is granted funding through a series of decisions. Even though ECHO funding has grown over the last few years, it has fallen as a proportion of all thematic funding. ECHO's response was limited by the level of funding available to ECHO.

<sup>4</sup> Grants totalling €49,529,357 (99.9%) were made against this allocation.

## 2 Purpose and Methods

*The purpose of the evaluation is more fully set out in the terms of reference in Appendix 1. The consultant's Itinerary is set out in Appendix 4.*

### 2.1 Purpose

82. This evaluation is intended both: to assess whether the humanitarian aid operations financed by ECHO in the response to the 8 October 2005 Earthquake have achieved their objectives; and to provide suggestions for improving the effectiveness of future operations.

83. The evaluation terms of reference notes that the emphasis on this evaluation should be on lesson learning. The lessons learned are reflected in the recommendations made.

### 2.2 Documentary Research

84. The principal document set for this evaluation was the document set provided by ECHO. The final reference set from ECHO had over 600 documents.

85. This was supported by over 5,000 documents on the response on ReliefWeb, as well as over 100 key documents. These were supported by internet searches around specific themes. The documents consulted, other than those provided by ECHO, are listed in the bibliography in the appendices.

### 2.3 Interviews

86. Interviews formed the main data-gathering tool during field work. The evaluation team were encouraged by the desk to focus their field work on beneficiary consultation, and the team spent the bulk of their time in Pakistan visiting field sites. In line with the request of the desk the team gave priority to the beneficiary viewpoint. We held 20 meeting with 134 beneficiary women and 183 beneficiary men – 317 people in total. These group meetings were supported by interviews with another 203 people as set out below.

<b>Category of person interviewed</b>	<b>No</b>	<b>as %</b>	<b>♀ as %</b>
EU staff	5	2%	40%
Government Official	7	3%	14%
Partner Staff (UN, INGOs, Red Cross, etc)	149	73%	25%
Beneficiary (outside of large meetings)	13	6%	15%
Trader	2	1%	
Other	27	13%	19%
Total	203	100%	23%

87. The majority of these interviews were semi structured interviews, where the team followed a topic and question script that the team had prepared. All interviews were conducted under the Chatham House Rule, i.e. non-attribution of information presented in the report to the interviewee.

88. Each interviewee is included only once in the summary and in the full list even if we had several different discussions with them. In all the team met with 520 people. A full list of all interviews is given in Appendix Three.

<i>Type of interview method</i>	<i>No</i>	<i>as %</i>	<i>♀ as %</i>
Semi-structured Interview (Individual)	86	42%	23%
Semi-structured Interview (Group)	81	40%	17%
Group Meeting	15	7%	20%
Focus Group	3	1%	
Brief Discussion	18	9%	56%
	203	100%	23%

## 2.4 Observation

89. The use of direct observation by the team was limited by most of the projects having completed 12 months before the arrival of the team. However, direct observation of the earthquake damage and of some of the ongoing projects allowed the team to understand some of the difficulties faced by ECHO partners in the response.

90. Direct observation also allowed us to see the quality of some interventions, and to assess the quality of the training provided by some partners. Direct observation also played a role in triangulation.

## 2.5 Triangulation

91. The team triangulated between different sources of information. Interviews with different sources enabled the team to verify what they were told. Direct observation and research were also used to triangulate interview data.

92. For example, one partner interviewee said that ECHO were very slow to approve projects and generally took a long time to comment on projects. Our research of the ECHO files showed that this was not the case, but that most of the delays in project iterations occurred because of the time taken for agencies to respond to ECHO queries or suggestions.

93. The field work started with a briefing visit for partners at the ECHO office in Pakistan. Before departing the team held a debriefing that served to triangulate the team's initial findings.

## 2.6 Constraints

94. The biggest constraint faced by the evaluation team was the time that had elapsed between the end of most of the funded actions and the evaluation team's visit in May 2007:

- Half of the ECHO funded projects had ended 12 months before the visit of the evaluation team.

- Nearly five sixths of the contracts (by value) had finished over six months prior to the evaluation visit.

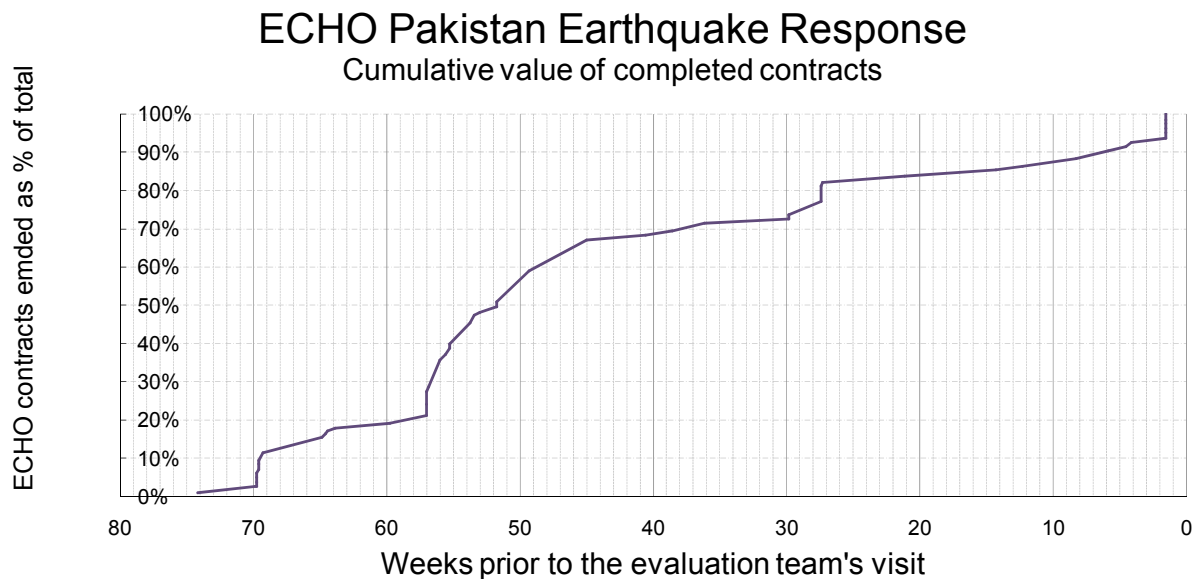


Figure 5: Gap between contract completion and the Evaluation Team's visit

95. This gap had a number of consequences:

- Several organisations had left or key personnel had changed.
- It was not possible to observe projects to confirm, for example, the level of compliance with Sphere standards.
- The evaluation team's views were strongly influenced by conditions in the latter phase of the response rather than the earlier phase. This was influenced by the priority that the team gave to beneficiary interviews as requested by the Desk. Beneficiaries were more concerned about their current problems than about the period that the team were interested in. By contrast, some of the ECHO staff had been more influenced by the demanding conditions at the start of the response and their recall of this influenced their view of the response.

96. Further constraints included lack of time and poor translation on occasion. Additionally, we relied upon the staff of implementing partners as translators and 'guides', so this may have contributed to acquiescence bias in the responses of beneficiaries.

97. The team would suggest that any future such evaluations take place as closely as possible to the time when the bulk of the projects funded are drawing to a close, and not at the end of all of the funded actions.

98. One final constraint is that ECHO only circulates the draft report internally rather than among all of those interviewed. This means that any errors about the actions of individual agencies are not corrected by them, and that comments are only received from ECHO and other commission services.



### 3 Relevance

99. ECHO's assessment of the needs was based on sound information and prior consultation with other humanitarian actors (including NGOs, other donors and multi-lateral organisations). The assessment was based on the best information available at the time in a context where this was rapidly changing at the start.

#### 3.1 ECHO presence

100. ECHO had an existing office in Islamabad with a small staff<sup>5</sup>, largely dealing with Afghan refugees. These staff, along with the staff sent by the regional offices in New Delhi, Bangkok, and Nairobi ensured that ECHO had a good presence on the ground. ECHO deployed two mobile units to the earthquake affected zone. This presence meant the ECHO Technical Assistants (TAs) often had a far better idea of what the situation on the ground was than partners making proposals.

101. However, ECHO had on average, four international staff on the ground during the first three months of the response when the context was changing most quickly. These were organised into two mobile teams and the staff as Islamabad. This limited staff was a challenge given the geographical scale of the response, with five cluster hubs coordinating work in their regions as well as the overall coordination mechanisms in Islamabad<sup>6</sup>.

102. ECHO's knowledge of what was happening on the ground gave ECHO a great deal of influence within donor circles in Islamabad. ECHO was part of what was effectively a joint donor and government strategic oversight group that guided the detailed policies in the response.

#### 3.2 Needs Assessment

103. The quality of partners' needs assessments varied. Some were based on detailed surveys of needs (for example MedAir based their first proposal on a good needs assessment undertaken by foot in the affected area). Others were based on an estimate of likely need based on the experience of previous disasters. The first Télécoms sans Frontières (TSF) proposal was an example of this. TSF presented this on the afternoon of October 9<sup>th</sup>. This was the first proposal received by ECHO.

104. The knowledge of the situation on the ground by the ECHO TAs helped to ensure that projects were only funded if they met significant needs. There were particular problems with the quality of proposals from the UN. On average UN proposals took 26 days from the submission of the first proposal<sup>7</sup> to the submission of the final proposal. The equivalent time for proposals from the Red Cross and Red Crescent Movement was only

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<sup>5</sup> This report uses the terms ECHO staff to refer to both DG ECHO civil servants, and to the ECHO field staff who are normally contractors rather than permanent civil servants.

<sup>6</sup> The hubs took some time to roll out, with approximately one month between the first and the last hub being established. The ECHO mobile teams were often in locations before there was any formal UN-led coordination mechanism there.

<sup>7</sup> This refers to actual proposals and not to Letters of Intent which some UN agencies sent in advance of their proposals.

13 days. NGOs were 21 days, but this reduces to 16 days if the influence of one specific project is excluded.

### 3.3 Level of beneficiary participation

105. The level of beneficiary participation varied between projects. The Fritz Institute found that 97% of surveyed beneficiaries in NWFP had not been consulted by organisations providing them with assistance (Bliss et al., 2006, p. 7). ECHO encouraged partners to involve beneficiaries and van de Rijdt noted that beneficiaries played some role in all of ECHO's water projects (van de Rijdt, 2007, p. 6).

106. However, many of these structures have relatively little control over the project, and seemed to have been set up to meet the agencies agenda. For example, the team found that hygiene education structures did not survive the end of project assistance.

107. Common Standard 1 of the Sphere Minimum Standards states that:

*The disaster-affected population actively participates in the assessment, design, implementation, monitoring and evaluation of the assistance programme.*

108. This standard oversimplifies things somewhat. Different types of project require different levels of community participation. For example, projects that provide services to the relief community (like the Atlas Logistique or WFP logistics projects) need participation from aid agencies rather than from communities. Specialist projects like the WHO DEWS require the participation of health personnel rather than of the community as a whole.

109. However projects which deal directly with meeting community needs must have good levels of participation to ensure that the assistance is relevant to the needs. Some of the most appropriate projects were those which were demand driven (like the NCR legal aid project) or owned by the community (like the AKDN project or one of the Oxfam water projects).

110. The most sophisticated community structures seen by the evaluation team were the groups developed by the Aga Khan Development Network. Of all of the different groups seen, the team considered that, because of the approach taken, with the group taking the decisions themselves about how to spend the funds, the AKDN groups were those most likely to survive the end of external assistance. While this project started seven months after the earthquake, it was the ceding of ownership that made this project unique, rather than the time elapsed since the earthquake.

111. It was argued by ECHO staff that high quality participation is impossible in the emergency phase of the crisis. It is certainly more difficult in the first weeks of the response, but only 8% of ECHO expenditure was spent in the first month of the response.

112. Clearly there needs to be a balance between participation and action. One way of dealing with this is by starting the project with low levels of participation and increasing the level of participation during the project life. However, this implies that project may need to be modified in response to feedback from the community. Partners noted that while ECHO generally accepted requests for zero-budget extensions with good reasons, getting agreement for substantive changes was far more difficult. The most common

reason for requesting zero-budget extensions in the Pakistan response was the delays introduced by changes in the Pakistani Government's regulatory framework.

### 3.4 Particularly relevant interventions

113. The evaluation team considered that the following types of intervention were particularly relevant at different times:

- Telecommunications support for the affected population – at the very start of the response.
- Logistics support, especially helicopters in the first three months.
- Legal aid and assistance to allow people to access their entitlements, especially once the compensations schemes were announced.
- Winter shelter in general, especially during the first winter.
- Thematic funding (especially for WHO) and the complementary funding of the WHO Disease Early Warning System (DEWS).
- Physiotherapy for those injured by the earthquake.

114. This is not to suggest that the other projects in health, psycho-social, livelihoods, or water were inappropriate, but that the projects listed above were especially relevant and appropriate. The team did not see any project that was, in their view, inappropriate and irrelevant.

#### 3.4.1 TELECOMMUNICATIONS SUPPORT FOR THE AFFECTED POPULATION

115. One part of the TSF programme provided telecommunications facilities to families. Although limited (the project lasted only about 5 weeks with 2,714 personal calls<sup>8</sup>), this was very appropriate in areas where there are significant remittance flows. While damage to the telecommunications network was less severe and less prolonged than might have been expected (Currion, 2006, p. 10), there were still significant communication problems from those in rural areas or in urban areas with large amounts of damage.

116. As well as the psychological importance of having news of family members, telecommunications access allowed people to tell family members working in other parts of Pakistan or abroad if they needed to return home, and what alternatives they could use for remittance flows. The evaluation team fully agree with Suleri and Savage's (2006, p. 20) survey of remittances in the wake of the earthquake that:

*More effort should be made to assist those affected by disasters to access communications.*

117. Savage and Harvey (2007, p. 41) surveyed the impact of emergencies on remittance flows in six different emergencies and concluded that among the implications of remittances for humanitarian action was that:

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<sup>8</sup> The personal calls for survivors were only one part of the TSF project. It also included support for agency telecommunications.

*There should be a focus on supporting the restoration of communications systems after disasters, and enabling people to get in touch with relatives.*

118. Experience in other emergencies where there have been significant remittance flows have shown a very high demand for telecommunications access by the affected populations. Remittances flows are growing faster than any other financial flows to developing countries (World Bank, 2006, p. 88) and telecommunications after disasters are of growing importance. The TSF project had the smallest grant of all the projects funded by ECHO during the response. It was appropriate that this project was so brief given the quick restoration of communications.



Figure 6: Short wheel base 4x4 vehicles were the only vehicles that could reach many villages before the earthquake. Other could only be reached by mule-trains. Landslides meant that there was no vehicle access to many villages after the earthquake, and even mule-train access was difficult.

#### 3.4.2 LOGISTICS SUPPORT, ESPECIALLY HELICOPTERS

119. Logistics was a key constraint in the wake of the earthquake. Satellite images showed large numbers of landslides, some involving millions of tons of rock, throughout the area. Many roads were cut by landslides or by the failure of bridges.

120. Helicopters were the only way of reaching remote villages. ECHO supported the supply of helicopter transport mainly by WFP, but also by the Aga Khan Foundation and Merlin. This was particularly appropriate in this context. Although there were a large number of military helicopters in the response, the helicopters hired by WFP had a far larger capacity, up to ten times the capacity of military helicopters in some cases.

121. Other appropriate ECHO projects in logistics were Atlas Logistique projects. These provided a general land logistics support system for the humanitarian community. The service was much appreciated and in high demand. However, it should be noted that Atlas Logistique had now merged with Handicap International and will no longer be providing this type of general support for the humanitarian community.

122. The evaluation team note in passing that small NGOs with a narrow technical focus face a difficult time surviving financially in the lulls between major crises. This is even harder for NGOs providing general services to the sector rather than directly to beneficiaries, due to the difficulty of getting support from the general public for such ‘back-room’ activities.

#### 3.4.3 LEGAL AID AND ASSISTANCE TO ALLOW PEOPLE TO ACCESS THEIR ENTITLEMENTS

123. Every natural disaster brings problem for the affected population through the loss of documents and other legal problems<sup>9</sup>. This was the case after the 2004 Tsunami and for many other natural disasters<sup>10</sup>. In the aftermath of the Pakistan earthquake, there were issues around documents, inheritance, and other legal issues such as title to land.

<sup>9</sup> Documentation issues are also a very important area of protection in complex political emergencies.

<sup>10</sup> This is not a new problem. There were so many legal disputes after the Great Fire in London of 1666 that Parliament set up a special “Fire Court” to hear them (Tinniswood, 2004, p. 240).

124. Identity documents were a big concern, as without these people could not get access to the government compensation schemes. Many lost their documents in the earthquake or in the subsequent fires. The poor, who previously had not really needed identify documents, now found that they could not access compensation without them. Many people simply could not afford the repeated journeys and days of lost work involved in getting the prerequisite forms. Such journeys were particularly difficult for women in this social context. In some cases those seeking identity documents met with demands from corrupt officials<sup>11</sup>.

125. The Norwegian Refugee Council (NRC) established an Information, Counselling and Legal Assistance project (ICLA) through support from ECHO. ECHO took a long time to decide on this project<sup>12</sup> as it was concerned about whether it fitted within its mandate. The team consider that it did and that this was a particularly appropriate project. The team also thought that this project established a model that should be expanded in future emergencies.

#### 3.4.4 WINTER SHELTER

126. Many ECHO partners undertook winter shelter projects. All agencies had difficulty in obtaining winterised tents as these were in short supply. Some inappropriate tents were distributed. Family members of the affected population also provided tents and other winterisation material.

127. The provision of material for winterising shelters at high altitude was very appropriate. It not only reduced suffering during the winter, it also reduced the risk of further displacement from high altitude locations to the camps at lower altitudes.

128. The best projects in this area (such as the MedAir project) combined training in safe construction, and the distribution of relief items, with the distribution of shelter materials. Such projects were particularly appropriate as they allowed people to use their own resources to build winter shelter, and also allowed them to recycle the shelter material for their permanent housing.

#### 3.4.5 THEMATIC FUNDING (ESPECIALLY FOR WHO)

129. ECHO granted €20.5mn of Thematic Funding in 2005 (Table 3) (ECHO, 2006d, p. 18). Thematic funding for major institutional partners allows them to strengthen their response capacity and improve the delivery of humanitarian assistance.

130. The Tsunami Evaluation Coalition highlighted the limited capacity of the humanitarian response system and the need to improve capacity (Telford et al., 2006, p. 117). The limited capacity of the international humanitarian

Table 3: Thematic funding in 2005

Organisation	Amount
ICRC	€4mn
IFRC	€3.5mn
OCHA	€4mn
UNHCR	€5mn
WHO	€4mn

<sup>11</sup> The evaluation team were told of one case where a bank official was demanding a payment of €12 for a bank account application form. The forms are freely issued by the bank, but the official exploited the huge demand for new accounts after the earthquake as the compensation was paid in the form of a crossed cheque that could only be lodged to the recipients bank account.

<sup>12</sup> It took 140 days from the first proposal to the final successful one.

system was seen in the Pakistan earthquake response as many agencies faced problems recruiting suitable staff.

131. The impact of thematic funding was very clear in the case of the World Health Organisation (WHO) which used it to develop their Health Action in Crises capacity. This capacity allowed the rapid establishment of the Disease Early Warning System (DEWS) in Pakistan (also funded by ECHO). Without ECHO thematic funding, WHO would not have been able to mount the DEWS in a timely manner in Pakistan.

132. In the Pakistan earthquake, as in other disaster responses, agencies build up their capacity over time, but the paradox is the greatest capacity is needed in the first few days following the disaster and not the 31<sup>st</sup> day. Investment in thematic funding meant that agencies like ICRC, IFRC, WHO, UNHCR, and OCHA had greater capacity earlier on in the response, irrespective of any emergency specific funding that they had. The earlier that relief capacity is available, the greater is the potential for saving lives.

133. WHO reported that it is much harder to attract financing for developing capacity than for emergency response. It would therefore seem that ECHO's investment in thematic funding is less likely to be substituted by other donors than funding for emergency response.

134. While there is a negligible risk of disease outbreaks after earthquakes (Floret et al., 2006), outbreaks do threaten large numbers of lives. The fact that people from remote villages are gathered into camps brings increased risks (Topley, 1988). ECHO support for the DEWS was particularly appropriate as it allowed rapid action to prevent epidemics. It was also appropriate as it meshed very closely with the thematic funding provided by ECHO.

135. In addition, WHO felt that the work they had already initiated for the DEWS had laid the foundations of a communication network among other health actors, including the government health services and non-governmental agencies. This facilitated communications and collaboration during the response to the earthquake between agencies and health centres.

#### 3.4.6 PHYSIOTHERAPY

136. Those injured after the earthquake needed physiotherapy to prevent their condition worsening and to help them recover as much as possible of their former mobility. This was a service that was lacking in much of Pakistan even before the earthquake, and the earthquake hugely increased demands. ECHO funded two physiotherapy projects by Handicap International that helped to ensure that those injured in the earthquake, or had suffered amputations as a result, had appropriate physiotherapy to enable their rehabilitation.

### 3.5 Conclusions

137. The projects funded by ECHO were generally appropriate and relevant. They corresponded to the needs of the affected population. There were two key reasons for this:

- ECHO staff were present on the ground from early on and had a very good understanding of the level of needs. The advice and guidance of ECHO staff on the ground was appreciated by almost all partners.

- ECHO's discouragement of project modifications encourages partners to submit proposals which they believe are unlikely to require modifications. This means that partners attempt to base them on needs assessments.

138. Partners said that the discouragement of project modifications by ECHO influences the types of projects that they submit to ECHO. Clearly the need to clearly define everything in advance prevents a more flexible project model based on increasing levels of beneficiary participation with time.

139. While all the project were relevant, some were particularly relevant including those providing: telecommunications access to beneficiaries; logistics support for the operation; those answering recurring problems, such as that of identity documents; integrated winter shelter; and those meeting special needs, such as physiotherapy for those injured.

140. The linkage between the thematic funding for WHO and the funding of the DEWS project on the ground was very appropriate. Thematic funding in general is one way in which ECHO can contribute to the initial phase of the emergency response. For ECHO, thematic funding may have been more effective than providing response funds, especially given the capacity issues seem among partners.

### 3.6 Recommendations

141. The rapid deployment of staff to Pakistan gave ECHO a good information base to assess the quality of partners' proposals.

Primary Recommendation ***ECHO should continue the practice of quickly building staff numbers at new emergencies.***

142. However, ECHO may have been able to have a greater strategic input to each sector had there been more staff to simultaneously cover all coordination sites.

Secondary Recommendation ***ECHO should consider increasing the number of technical assistants that can be deployed to new emergencies.***

143. Telecommunications after disasters for the affected population are of growing importance.

Tertiary Recommendation ***ECHO should consider providing thematic funding to strengthen the capacity of emergency telecoms providers for the affected population after disasters.***

144. Documentation is a critical issue after disasters.

Tertiary Recommendation ***ECHO should, where relevant, support legal advice and document facilitation projects in future disasters.***

145. Thematic funding can contribute to the strengthening of the capacity of the humanitarian response community. At present this is effectively limited to large international organisations, with only minor grants for NGOs<sup>13</sup>.

Primary Recommendation ***ECHO should consider extending thematic funding to a wider range of humanitarian actors.***

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<sup>13</sup> The Grant facility for partners is the nearest thing to ECHO thematic funding for NGOs. This is very small scale –worth just over €0.5 in 2005, split between four partners.

146. Any such funding should of course be linked to clear capacity building measures such as developing rapid deployment resources or stocks.

147. ECHO's funding of the DEWS system worked well because it complemented ECHO's previous thematic funding for WHO.

Tertiary Recommendation      *ECHO should try to link some of its emergency response funding to support the field implementation of previous thematic funding.*



## 4 Coverage

### 4.1 Patterns of need

148. The team found distinct patterns of need in different geographical areas. In NWFP issues around house ownership were delaying permanent housing solutions for rural tenants. AJK did not generally have such tenants as rural land-ownership is the norm. There were differences as well in the types of damage. AJK saw a large number of very bad landslides.

149. The team also found wide variations in the way in which the Government's compensation scheme was being applied. Near Bagh, almost every house was regarded as being compliant with the Earthquake Rehabilitation and Reconstruction Authority (ERRA) guidelines. In parts of NWFP the authorities were much stricter, and the evaluation team were told of new houses that had been demolished at the insistence of the ERRA inspectors in one village.



Figure 7: This widow near Mansehra was forced to knock down her half-built house because it did not comply with the latest ERRA guidelines, although it was in compliance with the initial guidelines. (Photo S Nam).

150. The patterns of livelihoods also influenced the patterns of need. The levels of remittance income vary greatly over the affected area, with some villages having large numbers of men working away from home. Agriculture and livestock varied in their importance, and many families had a mixed range of income sources. The importance of different livelihoods strongly influenced the pattern of needs.

151. Altitude was another strong influence on the pattern of needs. Winterised shelter was a far higher priority at altitude. Water for household use and for agriculture was a big issue in the higher altitudes, as many water systems were damaged by the earthquake and were beyond the short term resources of the communities to repair.

152. The position of women was very different in AJK compared with NWFP. The role of women was very circumscribed in NWFP. By contrast, women could be seen working in the fields in AJK and they also attended general meetings with the evaluation team.

### 4.2 Geographic coverage

153. The earthquake affected a huge area. Both the North West Frontier Province (NWFP) and Pakistan administered Azad Jammu and Kashmir (AJK) were affected. ECHO made a determined effort to have a geographically dispersed programme. ECHO's strong presence on the ground helped identify the geographical areas most in need of assistance and to fill those gaps.

154. The bulk of ECHO funding was appropriately concentrated in Pakistan, reflecting the pattern of needs after the earthquake. Within the affected area in Pakistan, ECHO funding was spread over the whole of the area, largely in proportion to unmet needs.

155. Mapping the health facilities supported by ECHO shows a wide range of areas served. Some of the ECHO facilities were in locations that were difficult to reach. However, generally Kohistan and Shangla got relatively little assistance. The first of these is a very conservative area that is difficult for NGOs to work in.

156. WFP suggested that the poor take up of their helicopter logistics service in the winter of 2006/2007 reflected a move by many agencies away from the most difficult areas and a concentration on the most accessible locations.

### 4.3 Altitude Coverage

157. It was clear in the early stages that populations at lower levels were receiving large amounts of assistance and that those at higher levels were receiving less assistance. Those at higher altitudes had a greater need for winterised shelter. ECHO assisted people at all altitudes, but paid particular attention to those at high altitude during the ‘race against winter’.

158. When the team asked beneficiaries about who had benefited more for overall assistance, they generally answered that those in the urban areas had benefited most at the start. However, in the long run they pointed out that many people at lower levels were still in transitional shelters while those at higher altitudes were well on their way to rebuilding their shelters. Those in urban areas included people who lived in Red Zones, where permanent reconstruction was forbidden and those who were tenants (NWFP) or who had lost their land due to landslides (mostly in AJK).

### 4.4 Sectoral Coverage

159. ECHO assistance covered a range of sectors. This was largely appropriate. Initial

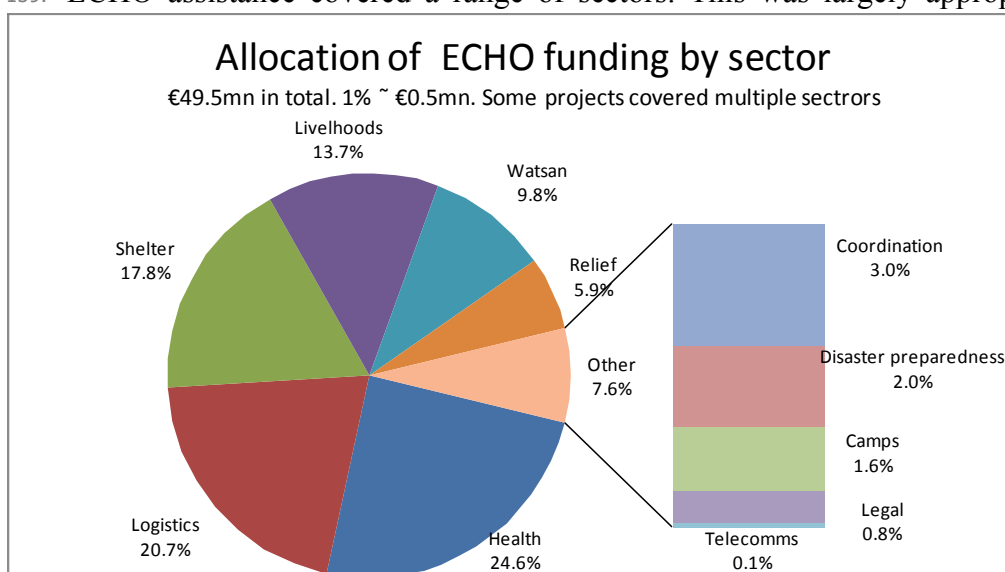


Figure 8: Breakdown of ECHO funding by sector

assistance focused on immediate needs and then changes to assistance to allow people to return to their areas of origin and re-establish their lives.

#### 4.4.1 HEALTH

160. ECHO funded a significant *number of health activities* (nearly one quarter of all the expenditure). ECHO's Regional Health TA has produced a concise report on health activities (Lenzi, 2007) which the Evaluation Team is broadly in agreement with.

161. In the emergency phase, finding for activities that contributed to life saving in the initial phases of the response included: medical evacuations (Atlas Logistique as well as Merlin, WFP and AKDN-FOCUS helicopters) the establishment of emergency response health units (ERUs -Finnish and Spanish Red Cross); support to local hospitals for injuries leading to potential disabilities (HI).

162. The largest of the Health grants was for the Finnish Red Cross's field hospital which was managed by ICRC. The decision to fund the Field Hospital, which opened on October 21<sup>st</sup>, was sound, but this only went into action nearly two weeks after the earthquake<sup>14</sup>. The field hospital was a large, unwieldy unit creating several logistical issues that led to a slower than desirable implementation.

163. The WHO-PAHO guidelines for the use of such field hospitals in the aftermath of sudden impact disasters (WHO & PAHO, 2003) suggest that field hospitals for early emergency medical care should be operation within 24 hours of the disaster, and that field hospitals intended for follow-up trauma and medical care should be fully operational within 3-5 days. The ECHO funded field hospital met neither of these requirements.

Box 1: WHO-PAHO guidelines for the use of foreign field hospitals in sudden impact disasters

<i>Criteria for foreign field hospitals (FFH) for early emergency medical care</i>	<i>Criteria for foreign field hospitals for follow up trauma and medical care</i>
<i>Essential Criteria</i>	<i>Essential Criteria</i>
<ol style="list-style-type: none"> <li>1. Be operational on site within 24 hours after the impact of disaster</li> <li>2. Be entirely self-sufficient</li> <li>3. Offer comparable or higher standards of medical care than were available in the affected country prior to the precipitating event</li> </ol>	<ol style="list-style-type: none"> <li>1. Be fully operational within 3–5 days</li> <li>2. Minimal need for support from the local communities</li> <li>3. Basic knowledge of the health situation and language, and respect for the culture.</li> <li>4. Availability of selected specialties</li> <li>5. Sustainability (appropriate technology)</li> <li>6. Evaluation of the cost-effectiveness and cost-benefit associated with the use of the FFH</li> </ol>
<i>Optional Criteria</i>	<i>Optional Criteria</i>
<ol style="list-style-type: none"> <li>4. Be familiar with the health situation and culture of the affected country</li> </ol>	<ol style="list-style-type: none"> <li>7. Cultural similarity</li> <li>8. Broad range of medical disciplines</li> </ol>

<sup>14</sup> There was nearly a week's delay due to the need to clear and prepare the site.

164. Typically, most hospital admission occur within the first three days after an earthquake (Sever et al., 2001). This was the pattern on the Indian side of the line of control the relatively small number of patients meant that the injured were in hospital fairly quickly<sup>15</sup>. The very large numbers injured in the earthquake on the Pakistani side of the border meant that it took some time to locate and airlift all the earthquake injured to hospital. In addition, the earthquake destroyed or severely damaged major health facilities, and killed or injured many health workers on the Pakistani side. As a result there was a need for emergency temporary health facilities and staff

165. The ICRC field hospital received 193 trauma patients in October and 124 in November. Although it undoubtedly contributed to life-saving activities for those patients (e.g. those at risk of sepsis or worsening of disabilities without specialist treatment), patient case load was lower than expected. The total case load included 849 admissions and 803 out-patient department consultations, far less than the figure of 40,000 injured beneficiaries<sup>16</sup> given in the initial plan. This raised the unit cost from €87 to €2,326 per patient, assuming that no OPD consultations were admitted to the hospital.

166. The low number of OPD consultations was due in part to the German Red Cross (whom ECHO funded for watsan activities) setting up a basic health unit at the hospital site and conducted nearly 11,000 consultations during the life of the hospital. A smaller unit is under development by the Norwegian Red Cross for possible deployment in future emergencies. WHO felt that earmarked funding (separate from implementation funding) for coordination activities would have facilitated more efficient coordination.

167. In the recovery phase, ECHO funded several partners to conduct primary health care (French Red Cross, Merlin, WHO, UNFPA), physiotherapy (HI) and psycho-social (Danish Red Cross) activities. The selection of partners and proposed projects was on the whole sound, for those partners with a track record in emergency relief experience.

168. Two significant projects were those with UNFPA and WHO that both aimed to provide prefabricated basic health units. While both of these projects suffered delays, the UNFPA project was particularly slow off the ground, and its effectiveness within the period of funding is very questionable.

169. The quality of health activities on the whole was very good. However, several partners failed to utilise the crude health indicators that were available by district from the National Feedback Reports. Basing programmes on such indicators is essential to enable effective and complete reporting on achievements. Proposals and reports submitted later in the recovery and rehabilitation phases have done this. Health organisations (with one exception) generally met the Sphere Standards for health in relation to health systems and infrastructure and control of communicable and non-communicable diseases. It was disappointing to see one organisation was not able to demonstrate whether it had achieved such standards (as it reported only crude data rather than, for example, proportion of target

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<sup>15</sup> The Bone and Joint Hospital in Indian administered Kashmir received 463 patients in the first 5 days and 5 patients over the next five days, with the peak of admissions on the third day (Dhar et al., 2007).

<sup>16</sup> This number of people to be assisted seems to be completely unrealistic for a 120 bed hospital. Even assuming a hospital stay on only 5 days on average, suggests that the maximum number of admissions was only 360 a month.

population vaccinated, etc.). This was due to lack of staff with experience in managing health programmes.

170. One of the Sphere Standards for health was not addressed by any of the clinical services: that for the control of HIV and sexually transmitted infections (STIs). None of the organisations had trained health staff in syndromic management of STIs, which can have important health consequences (including infertility that has important cultural implications for women). Brief reviews of the registers in clinics visited revealed that although urinary tract infections were recorded among men (which is not common), no such infections were recorded as STIs. It is likely that STIs are going unnoticed and/or inappropriately diagnosed or treated.

171. Further, while all health projects addressed women's health well, the neglect of men in reproductive health programmes was evident.

172. ECHO's experience with funding primary health care was less problematic as there was a clearly defined need and partners were timely. Primary health care access was poor prior to the earthquake as many health staff were often absent, and there was a general lack of senior female medical staff. All the health interventions provided better quality health care than previously existed in the affected region, particularly in those more remote areas. Communities told the evaluation team that they now enjoyed higher levels of access to health services than previously but also expressed concern about this possibly coming to an end. However, the difficulty in attracting skilled human resources to work in remote areas, particularly female clinicians, remains an issue. This will require long term planning, possibly provision of training to provide local capacity and this is an area that the EC could have had some input.

173. While some interventions were intended for the emergency phase only (such as the ERUs) and for the recovery phase only (French Red Cross), other health partners aimed to continue their assistance to this region for a longer duration. All those partners seeking to continue into this phase expressed a wish that ECHO had been able to provide funding to enable a longer-term strategy to hand over to longer-term partners. Having said this, all partners had managed to hand over to other partners, although some programmes (such as the psycho-social programme and the French Red Cross primary health care programme) could have benefited from extensions to their interventions. There was no linkage between ECHO funded relief and rehabilitation and the EC funding mechanisms in the health sector (Lenzi, 2007).

#### 4.4.2 LOGISTICS

174. One fifth of ECHO expenditure went on logistics support. As already noted, ECHO support for logistics was very appropriate and was very closely aligned with the need in this particular emergency. The funding of common services like logistics was particularly appropriate for ECHO.

175. As noted earlier, the final logistics project, for helicopter operations by WFP in the winter of 2006/2007 had less take-up than WFP expected. WFP gave two reasons for this: relatively few agencies were now working in the less accessible villages; and the winter was milder than expected.

176. ECHO, commented on the lower than planned utilisation that "it is the responsibility of implementing partners to identify appropriately the needs they propose to address in

order to avoid such a lack of uptake of services”. This again illustrates ECHO’s belief that projects should not need modification if they are properly designed. However, it is simply not possible in advance to accurately predict what the uptake of such services will be in the context of such a service may be.

#### 4.4.3 SHELTER

177. Over one sixth of ECHO’s assistance was spent on shelter, with 8 projects<sup>17</sup> with an average size of €1.1mn. Most of the ECHO assistance was concentrated in emergency shelter with tents or shelter kits. The funding of shelter kits by ECHO was very appropriate given the global shortage of winterised tents.

178. Shelter was repeatedly highlighted by beneficiaries as a key concern, both at the time of the evaluation and in earlier studies (Bliss et al., 2006). It was therefore fully appropriate for ECHO to fund this sector. The ECHO funded shelter projects were generally effective.

179. In the case of the Pakistan earthquake, permanent shelter was being taken care of by the government grant programme of approx €2,200 per house. However many people in some areas are having difficulty in accessing the grants. One ECHO-funded project, the NRC ICLA project, was helping people to access this compensation. ECHO did some considerable soul searching before deciding to fund it. At the end of ECHO funding it was not clear if the project could continue, despite the clear need for such assistance to continue, and the opportunity to learn lessons for dealing with documentation issues in future disasters.

#### 4.4.4 LIVELIHOODS

180. The explanatory memorandum for the €25mn *ad hoc* decision of December 2005 noted that “livelihood support (in the form of replacing livestock, fodder, seeds, etc.) will arise as an urgent need” in Spring 2005. Livelihood support was the fourth largest sector of ECHO assistance, receiving just under one-seventh of all ECHO funding with 3 projects having an average project size of €2.3mn.

181. The problem with livelihoods is that they can be damaged by disasters. However this damage is far less obvious than broken bones or collapsed houses. Livelihoods and shelter are often closely related issues. In Pakistan this link manifested itself in damage to housing preventing men from returning to jobs away from the earthquake zone due to the need to remain with their families until they again had permanent housing.

182. There is always a danger that natural disasters like the earthquake can push people into cycles of poverty due to them never being able to fully recover from the damage to their livelihoods (Figure 9). It often takes some time for this to become evident as the

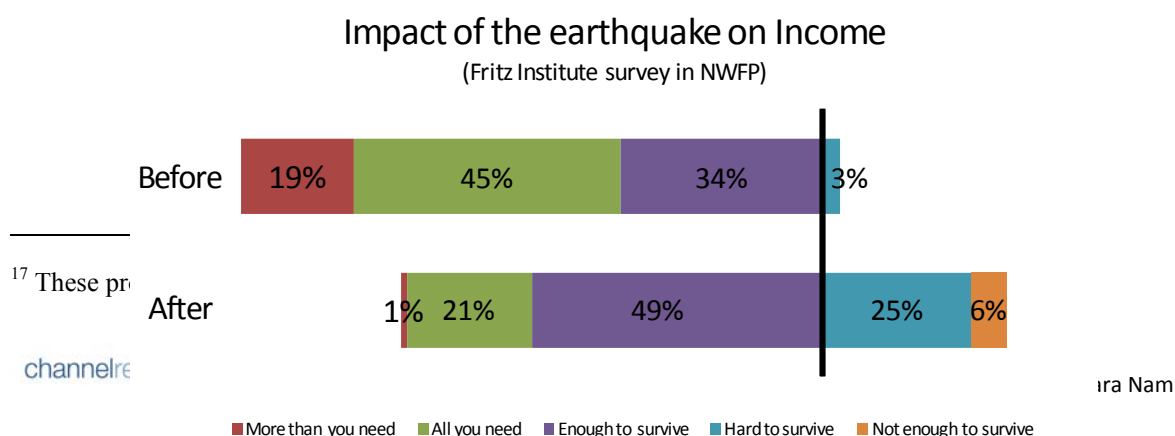


Figure 9: Pushed into poverty by the earthquake: Source Bliss et al., 2006

initial relief assistance obscures the effect of damaged livelihoods. Damaged livelihoods can have as large an impact on health and survival as broken bones.

183. The largest of the ECHO funded livelihood projects was the ICRC's project which addressed the needs of rural communities. This was an excellent project that met real needs in an effective and timely way. The other two livelihood projects were for seed distribution. Of these projects, one by an NGO was quite successful. The other by a UN agency did not meet its original objectives as the agency were slow to recruit the necessary staff and had not properly assessed the market for seeds.

184. In Brussels, ECHO stated its approach to livelihoods had been to support to initial phase of re-establishing livelihoods by bridging gaps to allow coping mechanisms to work again. ECHO's intention was to provide seeds early enough for the rural communities to be able to harvest maize and fodder for their animals and then start again with crop production. Although ECHO had never intended this to be a comprehensive livelihoods programme, the slow delivery of sometimes poor quality seeds did represent a missed opportunity to assist communities in achieving some food security for the following harvest.

185. This ECHO view of livelihoods as being primarily agriculturally based was a mistaken one. Key informants and beneficiaries indicated that livelihoods in the affected areas were far more complex and that few were wholly based on agriculture. For those that were based on agriculture, the key problem was often damage to irrigation systems rather than seeds.

186. Article 2 of Council Regulation 1257/96 states that one of the objectives of EC humanitarian assistance include: "...preventing the impact of the crisis from worsening and starting to help those affected regain a minimum level of self-sufficiency ...". Interviews with beneficiaries and key informants demonstrated that the impact of the crisis did worsen over time through damage to livelihoods.

187. Livelihood assistance was one of the largest unmet needs at the time of the evaluation visit. This issue is discussed further below in chapter on Sustainability and Connectedness. The team note that the evaluation of the response to the 2001 Earthquakes in Gujarat and El Salvador also found that livelihoods were one of the weakest areas of those response (Mottet, 2002, p. 6).

#### 4.4.5 WATER AND SANITATION

188. About one tenth of ECHO expenditure was on water supply and sanitation. ECHO funded 9 projects in this sector, with an average grant size of €538,000. ECHO's regional technical advisor produced a good report on the sector (van de Rijdt, 2007) with which the team is largely in agreement.

189. Even at the time of the evaluation, water was mentioned as a continuing unmet need by beneficiaries (both for household use and for agriculture). The nine water and sanitation projects were largely of two different types: water supply systems and sanitation in urban areas; and water supply with sanitation in rural areas.

190. Two of the projects involved German and Swedish Red Cross emergency response units. However, these projects did not meet their objectives as the number of beneficiaries assisted was less than had been planned. The German Red Cross project in particular used a sophisticated plant whose appropriateness was questionable. This plant produced small

quantities of water per beneficiary (for drinking only) without it being clear what other sources beneficiaries were to use. The Swedish Red Cross one was less sophisticated.

191. ECHO had more success with general water and sanitation projects which largely met their objectives. However, one problem was that much of the ECHO assistance was unsustainable. This is a particular issue with the rural water projects. Rural water projects in this region normally use mountain springs as sources with a storage tank and distribution system. The Pakistan Government estimated that nearly 4,000 water schemes had been damaged (ERRA, 2006, p. 3) by the earthquake with damage ranging from the drying-up of springs to the sweeping away of distribution networks by landslides. However, by June 2006 work had started on only 300 of these schemes (ERRA, 2006, p. 49).

192. It is well established that improved water and sanitation can significantly reduce morbidity from water related diseases (Esrey et al., 1991) and thereby reduce child mortality by 20% to 82% (Esrey et al., 1990, p. 26). A corollary of this must be that damage to water and sanitation infrastructure must increase morbidity and mortality. Therefore, as long as people have less access to water than they had before the earthquake the impact of the crisis worsens through diarrhoeal disease morbidity and mortality. Water and sanitation is another area where there are large unmet needs at the time of the evaluation visit.

#### 4.5 Camp management

193. The Camp Management Cluster (led by UNHCR) decided that support for camps should be concentrated on camps of 50 tents or more (having first proposed a size limit of 200 tents). UNHCR coined the Orwellian phrase “*camp-like situation*” (UNHCR, 2005) to describe such small camps<sup>18</sup>. These camps fell outside the official camp management process. Assistance to camps of over 50 tents was monitored to ensure that there were no gaps.

194. Assistance to camps under 50 was supplied on an ad hoc basis. This was a breach of humanitarian principles, which hold that assistance should be proportionate to need<sup>19</sup> rather than based on administrative convenience. ECHO raised no objection to this policy even though they were funding UNHCR for camp management.

195. ECHO was asked by one partner to lobby on this issue but did not do so. Another issue where ECHO was asked by partners to lobby was on the failure of the protection cluster to address general protection rather than just child-protection issues. This failure to take a lead role in advocacy was unfortunate given ECHO’s very strong position for such advocacy. It is a strategic and, in Pakistan, a well-informed donor. It was free of the suspicion that attached to some other donors that their response was driven by broader regional issues rather than humanitarian concerns.

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<sup>18</sup> The phrase echoes the term “refugee-like” situation used by UNHCR to describe IDPs with protection concerns.

<sup>19</sup> This is Principle 2 of the Code of conduct for the International Red Cross and Red Crescent Movement and non-governmental organizations (NGOs) in disaster relief (Steering Committee for Humanitarian Response & ICRC, 1994).



#### 4.6 Gender

196. ECHO partners paid significant attention to the needs of women. The Earthquake improved female medical assistance to many communities and hugely increased access to health services for women, particularly in NWFP. ECHO partners encouraged the formation of women's groups, trained women in areas such as hygiene education, employed women, and targeted assistance at widows. The role model offered by the female staff of partners was also positive.

197. There was a conservative backlash against the use of female staff in some specific areas just before the visit of the evaluation team, but it became clear that this issue had been exaggerated for political reasons<sup>20</sup>.

198. However, agencies addressed gender as a women's issue rather than being about the differential social roles of men and women. One gender issue that agencies did not deal with was the impact that the earthquake had on male migrant employment. Male heads of household returned from migrant employment as they could not leave their families in tents without a male presence to protect them and maintain family honour in line with cultural norms and expectations. This meant that families were denied a remittance income until they were again in permanent accommodation. Another overlooked issue was the reproductive health of men.

#### 4.7 Conclusions

199. Needs varied by geographical location, altitude, and sector. Coverage was generally congruent with the pattern of needs with a good geographical spread of coverage. ECHO's presence on the ground allowed it to identify where there were gaps in assistance.

200. Coverage also corresponded to the needs in terms of altitude and to the needs in the initial phase. However, there was some evidence (from the low take-up of airlift by partners other than ICRC and IFRC) that less accessible areas had been dropped by partners by the winter of 2006.

201. The most successful health projects seem to have been in primary health support rather than the field hospital or prefabricated clinics.

202. In water and sanitation, the higher tech approach taken by the German ERU was less successful than the lower tech approach of the Swedish ERU. The needs for water and sanitation in rural areas were only partially met.

203. Sectoral coverage was largely appropriate, especially in the first year after the earthquake, but there was generally insufficient assistance for the restarting of livelihoods from the whole international community, and ECHO did not plug this gap.

204. Impaired livelihoods after the earthquake mean that there was a danger of the impact of the crisis worsening once relief assistance stops. It would have been appropriate for ECHO to have done more work on livelihoods.

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<sup>20</sup> The biggest backlash was in Bagh. However, knowledgeable local interviewees made that point that the real grievance was economic rather than cultural, as they objected to agencies bringing in large numbers of national staff from elsewhere instead of providing more local employment.

205. ECHO has a good reputation among other donors for being strategic and has access to links of key UN and donor agencies. ECHO has the advantage that it may be less influenced by foreign policy concerns than other donors. ECHO failed to use this strong position, bolstered by good on-the-ground knowledge, to act as an advocate on some key humanitarian issues.

206. While assistance programmes generally focused on the needs of women, there was little attention to the specific needs of men as a result of the earthquake.

#### 4.8 Recommendations

207. The overall utility of the field hospital was questionable.

Tertiary Recommendation *ECHO should only fund the deployment of field hospitals where they meet the WHO-PAHO guidelines.*

208. Large foreign field hospitals are often slow to deploy and can be inflexible.

Tertiary Recommendation *ECHO should consider funding smaller field hospital units that are faster to deploy and establish.*

209. ECHO failed to use its strong position to lobby on some key humanitarian.

Secondary Recommendation *ECHO should use its strategic position to advocate and lobby on humanitarian issues, particularly when requested to do so by implementing partners.*

## 5 Effectiveness

### 5.1 Planned outputs

210. Generally, the projects seen by the evaluation team achieved the planned outputs. Some projects far exceeded them: - Medair's shelter project assisted 55,000 people instead of the 28,800 planned<sup>21</sup>. Some other projects fell short: - the Finnish Red Cross field hospital had far fewer patients than expected. Where projects fell short, there were generally good reasons for this linked to changes in the context. In the case of the Finnish Red Cross Field Hospital, there were far less patients than had originally been foreseen, partly because of the number of hospitals and medical teams, and partly because of the large numbers of people that were airlifted out for medical attention outside the earthquake zone<sup>22</sup>.

211. By and large though, projects generally came close to their planned targets. Echo put a lot of effort into ensuring that project proposals stated reasonable targets, given the knowledge that was available at the time of writing. When coupled with close monitoring by the field staff, this ensured that the project portfolio was broadly effective.

### 5.2 The speed of response

212. ECHO presents itself as an acute phase responder. The ECHO webpage about the response to the Pakistan Earthquake (ECHO, 2006e) contains the statement that:

*On the day of the disaster, the European Commission contributed €3.6 million in emergency aid for immediate relief operations focusing on medical services and supplies, shelter, food and blankets.*

213. However, it was two days after the earthquake before the adoption of the formal decision to release €3mn (with the reallocation of a further €0.6mn<sup>23</sup> was taken (ECHO, 2005, 2006a). No contributions<sup>24</sup> were made until after contacts were signed, in line with good accounting practice, and the first of these contracts was signed three days after the earthquake.

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<sup>21</sup> Non-ECHO funding enabled MedAir to reach the increased numbers.

<sup>22</sup> As already noted the initial planning figure for this project was probably not realistic in any case.

<sup>23</sup> However, the actual contract for the use of this money was only approved on 15 November, and signed on 16 November.

<sup>24</sup> ECHO noted that the original press release in French used the term *alloué* to refer to the funds, which can mean allocated (rather than granted or contributed). The French web-page on the Pakistan earthquake also used the term *alloué*.

214. ECHO responded very quickly with staff on the ground, faster than many partners<sup>25</sup>. However, the rules under which ECHO operates means that contracts were signed at a slow pace. (Figure 10).

215. The slow speed of contract signature is not a criticism of the ECHO staff, who worked hard, and with commitment, but of the constraints imposed by the approach taken by ECHO. For ECHO, activities need to be well defined, with targets that are specific, realistic, and achievable, before ECHO will consider funding them. While this approach improves the quality of projects and makes revisions less likely and simplifies monitoring and audit, it also makes

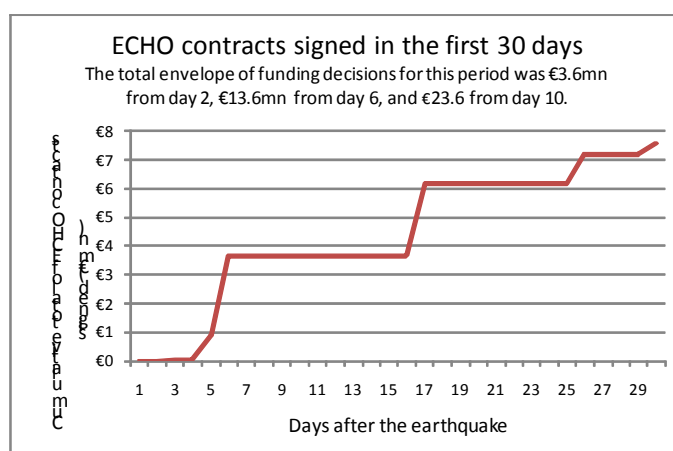


Figure 10: ECHO Contracts signed in the first 30 days.

the funding process slower. The way in which ECHO worked in Pakistan makes it a donor primarily for the latter parts of the initial response rather than for the acute stage.

216. A further lag is introduced by the fact that ECHO staff cannot really invite proposals from partners until there are funds that can be allocated. Hence proposals, contracts, and ECHO-funded humanitarian action inevitably lag behind the decisions. This lag is illustrated below (Figure 11) where it can be seen that there were significant delays between decisions and the full allocation of those decisions. While the first €3.6 was contracted within 6 days, it was a further 48 days before the next decision was fully allocated, and another 26 days before the third decision was fully allocated.

217. It should be noted that ECHO emergency decisions are limited by Council Regulation 1257/96 to €10mn. This might have been a reasonable limit in the mid-90s, but it does not reflect the changes in humanitarian response and the scale of humanitarian emergencies since then.

<sup>25</sup> However, mobilisation for partners is far more complex than for ECHO. Partners need to mobilise large numbers of staff, set up logistics, support structures etc.- this is far more demanding than ECHO's own mobilisation for assessment, monitoring, and reporting.

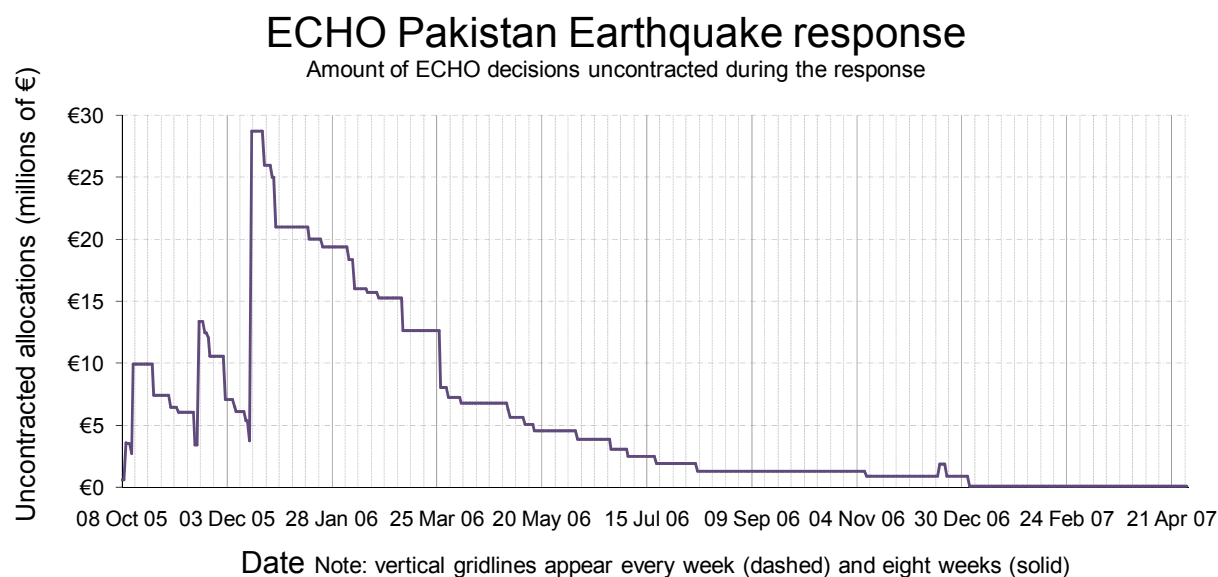


Figure 11: Available pool of ECHO funding over time, showing the total funds decided but not contracted.

218. ECHO make the case that their allocation of funding was faster than partners were mobilising on the ground. It was clear that some partners with Primary Emergency Decision funding were slow to mobilise. However a brief consideration of the pattern of ECHO contracting (Figure 11 and Figure 4) contradicts the idea that ECHO funding was available faster than partners could mobilise. The limit after the first few weeks was very clearly ECHO's capacity to attract and process good project proposals.

219. For example, ECHO contracted just over €7mn in the thirty days after the earthquake: One member state (the UK) had contracted €25mn in the same period with a further €8.8mn committed (DFID, 2005c). UK NGOs has already received over €44mn for the UK public in the same period (Disasters Emergency Committee, 2005). ECHO partners interviewed in Pakistan made it very clear that for most of them, ECHO is not their first port of call when looking for emergency response funding.

220. By October 12<sup>th</sup>, ECHO has signed only one contract for less than €50,000. DFID had already contracted €3mn<sup>26</sup> (DFID, 2005a) and had already delivered a plane-load of tents and blankets to Islamabad (DFID, 2005b).

### 5.3 The importance of timeliness

221. Clearly the greatest potential for saving lives occurs at the very beginning of the emergency response. This is because this is normally the part of the response when people are most reliant on external assistance. Earthquakes present a very sharp peak in post-earthquake morbidity and mortality in the days after an earthquake (Noji, 2003a, 2003b).

222. One key life-saving intervention is search and rescue for people trapped in collapsed buildings and medical assistance. The post-earthquake survival rates for those trapped reduce with each day (de Bruycker et al., 1983, p. 1023), and rescues after five or six days

<sup>26</sup> Exchange rate of €1.46885 per GBP.

are rare (Macintyre et al., 2006). The rescued who do not receive medical treatment are six times as likely to die as those who do (de Bruycker et al., 1983, p. 1022).

223. The only ECHO-funded project that encompassed Search and Rescue was the Aga Khan Foundation project. The contract for this project was signed only on October 25<sup>th</sup> and ECHO staff noted that it was engaged more in medical evacuation rather than in search and rescue. ECHO did not fund any international search and rescue teams in Pakistan and the team consider that this was wholly appropriate as such teams are rarely cost effective when compared with local efforts.

224. The next threats to life include medical treatment for crush injuries, wounds, and the prevention of infection. Crush injuries and their associated acute kidney injuries are an area of particular concern as kidney injuries can be treated if timely assistance is given (Vanholder et al., 2007). However, not one of ECHO's partners<sup>27</sup> made reference<sup>28</sup> to this issue, nor were they really in time to treat such injuries, except possibly for the Spanish Red Cross which became operational on the 16<sup>th</sup>. However, several partners were in time to provide some assistance for sepsis cases. Natural disasters also see increases in other diseases such as heart attacks, spontaneous abortions and other stress related problems (Naghii, 2005; Noji, 2003a).

225. The other aspects of assistance that prevented further deaths were water, food, and shelter. These generally made some contribution to preventing deaths and suffering, but not immediately after the earthquake when ECHO was still preparing to fund. ECHO often grants a date prior to the signing of the contract as the date from which expenditures are eligible, but partners in Pakistan made the point that they could not spend money that they did not have. While being able to recharge prior expenditures to ECHO projects is very useful, the expenditures recharged would not have been made if partners had not had other funds available.

226. The potential for saving is greatest immediately after the disaster. The potential for any one actor or group of actors to save lives on the second day is less than on the first as the pool of those in need of assistance will have reduced, both by deaths, and by some having been removed from danger by their own actions or the actions of others. Similarly, there is even less potential for saving lives on the third day and so on.

227. This pattern, of a reducing potential for life saving with time only applies where assistance is available or where the affected population have access to a reasonable level of resources.<sup>29</sup> If this is not the case the affected population are almost wholly dependent on outside assistance and do not get enough as was the case in the Hartisheik camps in 1989 where refugees from Somalia had arrived in good physical condition but then got too little food (Toole & Bhatia, 1992).

228. The pattern of reducing potential live saving is reflected in reducing mortality rates or hospital admissions with time. This is very clear from large emergencies where daily mortality rates have been tracked. These typically show mortality rates diminishing at a

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<sup>27</sup> MSF which did not have ECHO funding, worked on this issues back in 1999 in the Marmara Earthquake in northwestern Turkey (Vanholder et al., 2001). They flew four dialysis machines into Pakistan as well as a team of kidney specialists (MSF, 2005).

<sup>28</sup> The only reference is in fact in the review by the ECHO health specialist (Lenzi, 2007).

<sup>29</sup> In such cases the greatest life saving potential may occur later in the crisis.

over time where assistance is adequate. Despite the complaints from the UN about low levels of support for the flash appeal, the Pakistan earthquake did attract pledges of over US\$6bn for 3mn affected persons, or over US\$2,000 per head from international sources, a generous level of assistance in comparison with many other emergencies.

229. The beginning of the response is also the time when the agencies responding know least about the context. Alexander observes that it usually takes two weeks and sometimes longer to establish the full nature of casualties caused by a major earthquake (Alexander, 1996, p. 245). Agency proposals are in proportion to their knowledge, and ECHO staff commented on the low quality of some of the initial proposals by agencies, written before agencies understood the context.

230. Clearly learning about the context is subject to the law of diminishing returns, the greatest opportunity for learning exists when the learner knows very little about the context. The same rule applies to the quality of project proposals. The longer an agency takes to properly prepare a proposal, the better its potential quality. Proposals that are made early on are more likely to contain errors of understanding regarding the context, and the projects may need to be modified after a few weeks.

231. The fact that life-saving potential decreases with time, while the quality of proposals can increase with time can be visualised as shown in Figure 12. This provides one of the basic paradoxes for those financing humanitarian response. The greatest potential for saving lives is also the time of the greatest potential for getting the assistance plan wrong.

232. Good quality proposals protect the European taxpayer from wasted spending. They can also protect the affected population from inappropriate assistance. However, the quality of proposals is obtained at the cost of intervening in the very early stages as it

takes time for agencies to learn enough to both learn enough about the context, and to invest the staff time in preparing such proposals. Interviewees stated that ECHO proposals, with requirements for procurement plans etc., were more time consuming to prepare than proposals for other major humanitarian donors. ECHO's policy of demanding good quality proposals in the Pakistan earthquake meant that the interventions took place after the window for the greatest amount of live-saving.

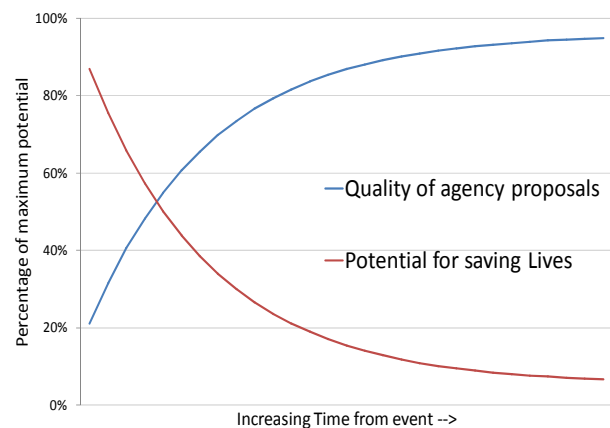


Figure 12: Changes in life-saving potential and potential proposal quality with time

#### 5.4 The Primary Emergency Decision

233. In theory, ECHO's Primary Emergency Decision (PED) mechanism allows a rapid response at the start of an emergency. The money was announced on the Saturday, and it was formally made available on the Monday after the earthquake, but it was Friday before

all the contracts under the PED were signed<sup>30</sup>. This is simply too slow for the first week of the response when needs are greatest. Five agencies got funding under the Primary Emergency Decision for €3mn (Table 4), with a sixth getting reallocated funding.

234.

Table 4: Primary Emergency Decision grants

<i>Organisation</i>	<i>Grant</i>	<i>Sector</i>	<i>Application submitted</i>	<i>Contract signed</i>
Telecoms Sans Frontières (TSF)	€43,870	Telecommunication	Sun 9 Oct	Tue 11 Oct
International Federation of Red Cross and Red Crescent Societies (IFRC)	€810,747	Health, shelter, food	Sun 9 Oct	Thu 13 Oct
ActionAid (for Pakistan)	€509,676	Health, shelter, food	Tue 11 Oct	Fri 14 Oct
Oxfam	€600,000	Emergency shelter	Mon 10 Oct	Fri 14 Oct
ActionAid (for India)	€535,707	Shelter, NFI, food		
Save the Children UK	€500,000	Food, NFI, shelter	Tue 11 Oct	Thu 13 Oct
UNHCR	€600,000	NFI (reallocated funding)	Fri 28 Oct	Wed 16 Nov

235. In the very initial phases of the response, only those agencies which had made considerable investments in preparedness, or had existing operations in the affected area or nearby, were able to play an effective role. Of the agencies getting funds from the Primary Emergency Decision, TSF deployed very rapidly with the first team of four technicians on the ground with their communications equipment in Islamabad on the day after the earthquake. Oxfam deployed reasonably quickly with their first flight with relief materials leaving from the UK three days after the earthquake.

236. Other agencies with Primary Emergency Decision funding were slower to mobilise effectively. ActionAid's first relief delivery in Pakistan was looted, partly because beneficiaries were not clearly identified before-hand. Save the Children (SC) was criticised by ECHO staff for their slow mobilisation, although SC began distributing shelter kits six days after the earthquake. The International Federation of Red Cross and Red Crescent Societies (IFRC) faced some problems mobilising as the Pakistani Red Crescent initially took the view that no international assistance would be needed. IFRC was also hampered by not having any legal status in Pakistan<sup>31</sup>.

237. The difference between those with fast and slow mobilisation lies in the level of investment that agencies have made in disaster response. TSF is dedicated to emergency response and Oxfam has a huge investment in emergency response with a warehouse full of relief items near Oxford and large numbers of emergency service personnel. ActionAid has very good community based programmes, but does not have the level of investment in emergency response the permits a fast and effective international response. IFRC has

<sup>30</sup> As well as the €3 in the PED there was a further €0.6mn of reallocated funding for UNHCR. However this was only contracted on November 16<sup>th</sup>, due to UNHCR taking time to submit a proposal acceptable by ECHO (November 15<sup>th</sup>). UNHCR only submitted their first proposal on October 28<sup>th</sup>.

<sup>31</sup> It should be noted that despite these problems, ECHO regarded IFRC as having mobilised quickly.



238. Save the Children does not have anything comparable to Oxfam in terms of emergency preparedness. IFRC has set up an emergency response department since the Earthquake, in recognition of some of the mobilisation problems encountered.

239. The evaluation team interviewed one beneficiary (not a refugee) who had received a tent from UNHCR on the day following the earthquake. While ECHO had agreed to allow UNHCR to use €0.6mn from a previous decision on the day after the earthquake, it was nearly three weeks before UNHCR submitted a proposal and five weeks before an agreement was signed with UNHCR.

240. ECHO made the point that partners sometimes mobilised on the basis of verbal indications that ECHO funding would be approved. While there were no examples of such verbal assurances not being kept in the Pakistan case, partners wary of relying on them from past experience in other countries. Partners interviewed by the evaluation team made mobilisation only took place where they had other funding that could cover the expenses if ECHO funding were not provided, or was very limited otherwise.

### 5.5 Assistance over time

241. As noted already, the first few days of any emergency is typically the period there is the greatest potential for saving lives. The only ECHO funding that had an impact on this vital first few days was:

- Prior ECHO funding for other programmes in the region. One of the reasons that ICRC and UNHCR were able to act so quickly was because they already had significant programmes in the region with ECHO and other funding. This meant that they had staff and resources on the spot that could react quickly.
- Prior ECHO thematic funding. This helped some agencies, such as OCHA and WHO to respond quickly to the emergency.
- Prior ECHO funding for agencies at other locations. This helps them to maintain their emergency response capacity.

242. The last of these points probably needs some explanation. The capacity of the overall international humanitarian system is one of the constraints highlighted by the Tsunami Evaluation Coalition (TEC) studies. The TEC studies suggested that the episodic and unpredictable nature of funding contributed to this lack of capacity (Telford et al., 2006, pp. 117-118). Simply put, agencies cannot create capacity out of thin air. If they are short of funds between emergencies, this reduces their capacity to respond to emergencies.

243. ECHO notes that the availability of effective partners is a constraint on its capacity to place contracts. This is in part a reflection on the capacity limits of the humanitarian system. ECHO has in the past worked to increase the capacity of the humanitarian system such as initiatives like the Network on Humanitarian Assistance (NOHA) project to provide masters courses in Humanitarian Assistance.

244. Examination of the pattern of ECHO funding shows that 50% of funding was contracted within 3 months, and 80% within 6 months of the earthquake. This is fine, but then new contracts tail off. This rapid trailing off contributes to the longer term lack of capacity in the humanitarian response system.

245. ECHO also provided thematic support to international organisations to support their development. Interviewees reported that this thematic support was well appreciated and has contributed to the development of their capacity. However, such support is currently confined to large institutional partners.

246. A second wave of potential mortality was feared due to: mass population movements, crowded living, inadequate water and sanitation facilities, the onset of winter with a lack of appropriate shelter and food insecurity. This did not occur, and is largely attributed by agency respondents to the overall response, particularly in reducing further population movements of communities living at high altitude to escape the typically harsh winters without shelter. However, beneficiaries suggested that such a movement was not a risk and that those who had not descended to lower altitudes immediately after the earthquake were not likely to do so in the weeks that followed.

247. Nevertheless, the strategic decisions made by ECHO to fund key sectors of logistics, health, shelter, food and nutrition, and watsan, met the humanitarian imperative to reduce suffering.

## 5.6 Conclusions

248. The ECHO funded project portfolio was largely effective. This was due in good part to the work done by ECHO to ensure that proposals had realistic and achievable targets, and to the close monitoring by ECHO.

249. ECHO funding was not available to partners in the first few days of the response, where there is the greatest potential for saving lives, even for the Primary Emergency Decision.

250. ECHO funding was largely useful for the follow-on relief phase, rather than for the most acute phase in the first week of the response. This is due to the nature of ECHO procedures which emphasise good financial control over speed of response.

251. Agencies that have invested significantly in their own emergency response capacity were the best able to mobilise quickly with the Primary Emergency Decision funding.

252. ECHO assistance peaked in the first few months and tailed off to less than 10% of the peak level after 12 months. This short funding limits the capacity of ECHO partners to maintain their capacity between emergencies.

253. Thematic funding for WHO has been effective, but there is no similar thematic funding for NGOs.

## 5.7 Recommendation

254. ECHO funding was not available in the first few days of the response even though some partners who later got ECHO funding were operating early on. If ECHO wants to play a larger role in life-saving assistance ECHO needs to get funds out to partners far more quickly.

Secondary Recommendation *ECHO should consider setting up a mechanism for stand-by funding with selected partners so that funds can be released to them in the first hours of a response.*

255. Such a mechanism could include a facility for releasing funds immediately that the ECHO decides to take action, based on prior generic project agreements with selected partners.

256. Agencies investment in their own emergency response capacity has a strong influence on their ability to mobilise quickly. Not all of the partners funded with the PED had made such an investment

Tertiary Recommendation *In future emergencies, ECHO should prioritise Primary Emergency Decision funding for partners with a large investment in their emergency response capacity.*

257. The short duration of ECHO funding contributes to the episodic nature of funding, which limits capacity in the humanitarian system overall. ECHO itself suffered from these capacity limits in the Pakistan response.

Primary Recommendation ***ECHO should consider funding for the duration of the recovery phase, with priority for those partners whose response was the most effective.***

258. The primary recovery phase, during which over 80% the affected population suffer significantly from the negative effects of the disaster can be expected to last three to four years for a major disaster like the Pakistan.

## 6 Efficiency

### 6.1 *The response overall*

259. The geography of the regions severely constrained operations, and added significant cost to the operation. However several interviewees commented favourable on the efficiency of this response in comparison to the tsunami response, where it was stated that competition between agencies had led to inefficient aid.

260. While coordination was described as chaotic in the early stages, close coordination at the donor level between ECHO, DFID, and USAID prevented double funding by the main donors. The team found no glaring examples of inefficient operations.

### 6.2 *Procurement*

261. ECHO partners, unless they are granted derogation, are bound by the rules on nationality and origin in their procurement. Essentially these require the goods be sourced either in a country receiving EC assistance, or from Europe or the members of the OECD's Development Assistance Committee. While good in principle, such restrictions can make procurement more complex. Other leading donors have no such rules for humanitarian operations. Even USAID, which have very tight rules for development aid, applies no such requirement to humanitarian assistance.

262. Items purchased prior to the period of eligibility for expenditure cannot be charged to ECHO. This means that agencies cannot charge the cost of items supplied from their emergency stocks to ECHO. Neither could they replenish emergency stocks with ECHO funding (as ECHO decisions examined here were emergency specific). These policies, rooted in the EC's financial rules, do not encourage agencies to stockpile goods for emergencies.

263. One partner found that the procurement they had made prior to their grant application to ECHO could not be funded by ECHO as it was prior to the period of eligible expenditures. However the issue here seemed to be poor management by the partner rather than

264. Another requirement obliges partners to hand over capital assets to local partners at the end of an ECHO funded project, unless there is a follow-on project financed by the EU. Many partners have continuing projects funded by other donors, where such capital items could be used, but cannot defer handover under the present rules<sup>32</sup>.

### 6.3 *The choice of partners*

265. ECHO has a range of partners from among NGOs, UN organisations, and Red Cross and Red Crescent organisations. One group was absent from the list of ECHO funded partners: local NGOs. While Council Regulation 1257/96 specifies that the Commission can fund implementation by NGOs from countries in receipt of Community Aid, or whose

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<sup>32</sup> Partners can however depreciate the assets and charge the depreciation to the ECHO project if they have included such depreciation in their project budget.

headquarters are in countries in receipt of community aid, Article 7.1(a) requires that NGOs eligible for Community financing must be:

*non-profit-making autonomous organizations in a Member State of the Community under the laws in force in that Member State;*

266. As the NGO's main headquarters may be in a country receiving community assistance, it seems that this article requires NGOs to have a registered office in a member state. This contradicts the basic humanitarian principle that humanitarian assistance should be independent of other objectives. It is interesting to note that the two principle funders of NGOs in the earthquake response (DFID and USAID) funded both local NGOs and NGOs from third countries.

267. ECHOs close proposal scrutiny and project monitoring might assist local NGOs to develop their capacity. ECHO notes that they encouraged partners to work with professional local NGOs, but why should not professional local NGOs get funds directly

268. One unusual feature of the ECHO response in Pakistan was the distribution of funding. Over the last five years there has been a global decrease in ECHO funding for NGOs, from 62% of grants to 52% in 2006. Funding for the UN has risen at the same time from 29% to 37% over the same period (ECHO, 2007).

269. This trend was even more pronounced in the Pakistan response where UN funding was higher than INGO funding. Part of this stemmed from a deliberate decision to give priority to UN proposals after public complaints from the UN that donors were not funding the activities in the Flash Appeal.

270. The UN was complaining about a lack of funding even though many UN organisations had not applied to ECHO for funding. Some interviewees suggested that this was driven by the UN's need to build a case for the Central Emergency Response Fund. It was noticeable that one of the NGOs that advocated most strongly for the CERF also added its voice to that of the UN in calling for more funding for the UN during the earthquake response.

Allocation of ECHO funding by partner type

Total of €49.6mn for Pakistan earthquake

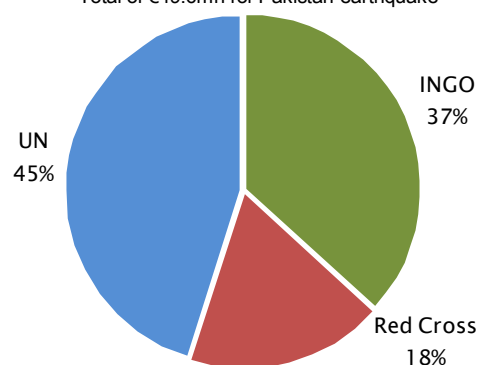


Figure 13: Distribution of value of ECHO grants by partner type

Allocation of ECHO funding by decision

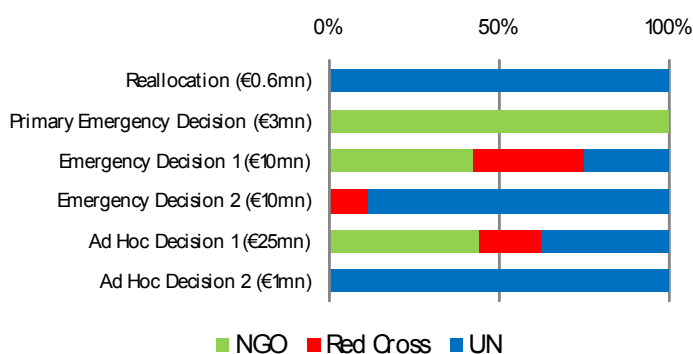


Figure 14: Allocation of grants by partner type for each decision.

## 6.4 Unit Cost comparison

271. Unit costs varied hugely, even with sectors. This response had particular problems in allowing sensible comparisons of unit costs due to a variety of factors including:

- Variations in the logistics costs in reaching different sites (large town or mountain villages, and whether those costs were paid or were received as a free
- Whether partners had pre-existing offices and staff in country;
- What level of support was required to provide or refurbish infrastructure;
- Staffing levels required.

By way of example, costs per beneficiary were calculated for the health sector programmes, building on the work done by Lenzi (2007). Table 5 below illustrates some of the difficulties in this type of comparison but is provided reluctantly as a demonstration of why caution must be used in examining such figures.

Table 5: An illustration of the problems of using unit costs

Partner & contract code	Total Cost	Cost of Goods only	Main Activities	Number of: contacts beneficiaries	€ total cost per contact per beneficiary	€ goods cost per contact per beneficiary	Comments
DK-RC 01001	760,342	448,934	PSP in camps	94,085 na	8.08 -	4.77 -	Undefined, registration of beneficiaries was poor.
WHO 01005	1,000,000	1,345,084	PHC services; 60 BHU + teams	62,000 na	16.13 -	21.69 -	Crude cost does not account for differences in costs between curative versus preventive activities.
SF-RC 06001	2,000,000	3,243,036	Surgery	1,652 795	1,210.65 2,515.72	1,963.10 4,079.29	Modified from PHC and surgery to surgery only, does not account for length of inpatient stay.
SP-RC 06004	380,000	112,872	ERU clinic	7,364 5,944	51.60 63.93	15.33 18.99	
FR-RC 06006	498,657	152,339	ERU - 2 mobile teams	18,429 6,853	27.06 72.76	8.27 22.23	Does not include hygiene kits provided or 19,000 participants receiving health promotion. Number of consultations does not match with total number of patients seen (? Poor registration)
HI 06012	545,195	221,930	Support to patients with acute disabilities	na 1,081	504.34 -	205.03 -	Does not account for provision of orthotic aids, duration of support to each individual. Does not account for cost saved by local hospitals in time of nursing care.
UNFPA 07002	1,694,859	-	PHC with focus on Reproductive Care	na na	- -	- -	not reported - final report not available at time of evaluation visit.
Merlin 07003	1,024,365	623,594	6 BHUs	na 143,773	- 7.12	- 4.34	Does not include 19430 NFI, 98457 health promotion.

Partner & contract code	Total Cost	Cost of Goods only	Main Activities	Number of: contacts beneficiaries	€ total cost per contact per beneficiary	€ goods cost per contact per beneficiary	Comments
HI 07009	450,791	134,560	fully equipped semi permanent rehab (1 str – 3,000 cases)	na 4,700	- 95.91	- 28.63	mobile home care (2 teams - 6000 cases). Does not account for number of visits or severity of disability.
FR-RC 07018	555,137	51,000	2 mobile clinic, covering 6 BHU, 30,000 cons, 2 containers	Na 26,745	- 20.76	- 1.91	does not include those 19,952 who received hygiene education. B. data not finalised, and only includes data from the pre-final report (to end of Feb. 2007. Additionally, there is some discrepancy in the figures provided.
WHO 07020	700,000	-	Disease early warning and response.	na na	- 0.20	- -	To measure the cost efficacy of preventing 85 outbreaks would require sophisticated disease modelling. 3.5m people in theory benefited from the health centres covered under the DEWS scheme.
Merlin 07022	574,848	100,902	PHC for IDPs (10 static structures, includes temporary structures).	Na 70,997	- 8.10	- 1.42	63,951 cur, 1,418 fp, 6,863 EPI, 183 deliveries (total 72,415) (figures provided do not add up). Does not account for extensive network of Health promoters and individuals who benefit from their home visits.
DK-RC 07023	669,767	202,263	PSP in villages.	na na	- -	- -	Number of direct beneficiaries not recorded. Final report not available at time of evaluation.

## 6.5 Comparing partners

272. The terms of reference ask the evaluation team to compare different partners to identify 'who did what best', *with a view to guiding the most appropriate allocations of DG ECHO funds in similar future crises*. The evaluation team consider that it is not possible to draw up simple rules as:

- Different types of partners had different strengths in the Pakistan response. ACF demonstrated the greater flexibility of NGOs over the UN in the setting up of a seeds distribution programme<sup>33</sup>. IFRC played a key role in combining other Red Cross societies with the national one. ICRC made a significant contribution to the capacity of the humanitarian system at an early stage. WFP managed a very large logistics operation that no other partner could have managed so efficiently, because no other partner has the numbers of logistics staff can call on.

<sup>33</sup> FAO's internal rules slowed down the recruitment of staff.

- Variability within each category of partner is higher than between the partners as a class. For example, WFP mobilised very quickly, but FAO was very slow to mobilise.
- Performance in the field was not always correlated with quality of reporting. For example, the evaluation team considered that UNHCR's initial NFI distribution had been effective, but noted that UNHCR's reporting was very weak.
- There were differences in the performance of the same partner. The team were far more impressed by NRC's counselling and legal advice project than by their camp management project. The legal advice project helped all those in need in line with humanitarian principles, whereas camp management assistance excluded camps with 50 tents or less.
- The humanitarian funding context has changed dramatically since the Pakistan Earthquake. UN agencies now have access to the Central Emergency Response Fund<sup>34</sup>.

273. However, a few general lessons can be drawn from the Pakistan response:

- The likely utility of different types of partners and of partners within each type in a particular context should be the key to allocating DG ECHO funds. It is simply not possible to predict what this will be in advance. However, partners which a significant investment in emergency response capacity (like WFP, OXFAM, ICRC, IFRC, or TSF<sup>35</sup>) are likely to be useful partners in all emergencies.
- Partners that have a strong local presence and knowledge of the context are also likely to make good partners for ECHO (e.g. the Aga Khan Development Network in this case).
- Agencies with a primary focus on development sometimes moved too slowly to implement their projects. This was the case with FAO and UNFPA.

274. A further consideration for ECHO for future funding is the CERF. CERF funds are directly available only to UN agencies and, as with funding via cluster-leads, NGOs have had difficulty accessing them in a timely manner. Both ICRC and IFRC have taken the position that using CERF or Cluster funds would compromise their neutrality. ECHO therefore needs to look long and hard at funding requests from UN agencies and ask what value it can add when these have full access to CERF and cluster funds.

## 6.6 Reporting quality and project modifications

275. The quality of reporting was related in many cases to the quality of proposals. Where proposals and targets were based on good detailed information and known denominators (such as estimates of district population, or baseline vaccination rates) reporting could be made with good information on the outcome of the assistance.

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<sup>34</sup> 78% of the funding for the CERF in 2007 (up to 267 July) has been provided by EU member states. The EC does not contribute to the CERF. Neither does USAID.

<sup>35</sup> Another organisation that fits this categorisation is MSF, which did not want any ECHO funding in the Pakistan response.



276. The team saw several instances where queries from ECHO staff on draft reports led to improvements in their quality. Several partners complained that ECHO's single format is limiting and that they would like to be able to report more creatively. The evaluators do not agree with this viewpoint. ECHO's single format is an improvement on the format used by many donors in that it encourages agencies to report on what they proposed to do initially. It also encourages transparency about what has been achieved.

277. Of the 51 projects funded, the documents supplied to the evaluation team show that 9 (18%) were modified<sup>36</sup>, and 8 of these included zero-budget extensions, with the other being from a minor (€1,700) modification to the project activities. Of the 8 modifications with extensions: half consisted of a time extension alone; one included a reduction in beneficiary numbers; two changed the location or geographical range; and one proposed an additional activity (that was later dropped). The level of substantive modifications is surprisingly low. Previous work conducted by one of the authors for other donors, revealed that up to half of those donors' emergency projects had substantial modifications during their implementation.

278. There are two reasons for the low number of modifications:

- ECHO staff put a lot of work into guiding partners towards proposals that wouldn't need modification.
- Partners stated that they were careful to request funding for ECHO only for projects for which they expected no significant modifications.

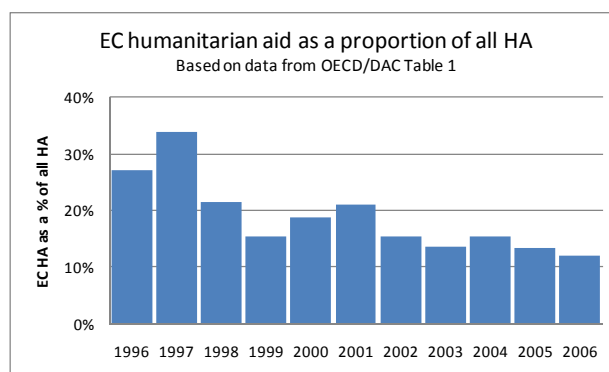
## 6.7 Where does ECHO add value?

279. ECHO's website (ECHO, 2006b) announces that:

*The European Commission provides nearly 30% of global humanitarian aid...*

280. This claim was true in 1996, and understated EC humanitarian aid in 1997. However, since 1997, EC humanitarian assistance is falling as a proportion of global assistance. Data from the OECD DAC shows that the European Commission provided only 12.1% of global humanitarian aid in 2006. This is despite a 24% increase in EC humanitarian aid from (in Euro terms) over the last five years.

281. Global humanitarian aid is growing fast. It has more than doubled (an increase of 107%) in the last five years in dollar terms. The EC's humanitarian assistance has risen by 47% in dollar terms in the same period. EC humanitarian assistance is falling as a proportion of all humanitarian assistance as global assistance is increasing far faster than the EC's assistance is.



<sup>36</sup> The number of modifications may have been greater. For example the AKDN project was extended by two weeks, but this was not recorded in the ficheops supplied to the team.

282. The world's biggest humanitarian donor is the United States which accounted for 36% of all humanitarian assistance in 2006, three times the EC's contribution. Next after ECHO in size is a member state, the UK, which provided 9% of all humanitarian aid in 2006.

283. ECHO Funding for the Pakistan earthquake was only 5.2% of the total. To put this into context this was less than UK NGOs received from the general public in the UK. The Disasters Emergency Committee raised £61mn<sup>37</sup> (€90 at the then exchange rate) in the UK for UK NGOs and the Red Cross. This was 14.2% of the total humanitarian funding for the Pakistan Earthquake.

284. As noted earlier, ECHO sees itself as an acute phase responder. However, the effort the ECHO puts into ensuring the proposals can be implemented without major changes acts against working in the most acute phase of the Pakistan emergency response<sup>38</sup>. Partners reported that the very complexity of ECHO proposals (with staffing tables and procurement plans) slow their preparation. Nevertheless, ECHO did issue the available funds relatively quickly. Over half the total amount for the earthquake response was contracted within the first three months, and five-sixths within the first six months.

285. Where ECHO adds value is in the technical appraisal and monitoring of projects. Experienced humanitarian workers noted that having an ECHO funded project requires more discipline than with some other donors. All of the files that the team viewed showed that projects had been carefully considered by ECHO staff. While a few partners found ECHO's close involvement irritating, most acknowledged that ECHO's input improved the quality of their projects.

286. Careful project selection and monitoring is one of the ways in which ECHO adds value. ECHO's close follow-up is needed more by some partners than by others. Where organisations like the ICRC already have high internal standards and good control systems, ECHO monitoring is less useful than it is with partners that have weaker internal controls.

287. Of the EU member-states, the UK provides a similar level of proposal review and monitoring through the Conflict, Humanitarian and Security Department (CHASE) Operations Team. The CHASE team was active in Pakistan and had close links with ECHO.

288. ECHO has also added value through the thematic funding to build the capacity of large institutional partners. However, this type of assistance is not available to NGOs.

### 6.8 How could ECHO add more value?

289. All interviews from partners made it clear that ECHO is not their donor of choice when they need money quickly. The documents demanded by ECHO, such as the procurement plan and the staffing plan, take time to produce and make the application

<sup>37</sup> This consisted of £41mn of pooled funds and an additional £20mn that the public gave for specific DEC agencies (Disasters Emergency Committee, 2006, 2007). Exchange rate taken as the average for the six weeks after the appeal launch (from [www.oanda.com](http://www.oanda.com)).

<sup>38</sup> This is especially true for a sudden onset disaster like an earthquake. Needs can peak much more slowly in a complex political emergency.

slower. Two interviewees described ECHO as the “donor of last resort”, and several made the point that agencies need to have other sources of funding to subsidise costs that ECHO won’t cover. However, more experienced agency staff stated that ECHO has improved significantly since the mid 90’s.

290. NGO partners noted that the costs of meeting ECHO’s bureaucratic requirements and the difficulty of modifying projects make ECHO a secondary donor for many of them. In theory project modifications should be straightforward, but the evaluation team noted that while proposals were processed very quickly, requests for modifications were processed slowly. All modifications, no matter how minor, have to be referred to Brussels.

291. Examples quoted by interviewees included one where the authorisation for a no-cost extension was received on the last day of the project. Another example was where the dropping of a project element with a price tag of less than €2,000 generated a detailed correspondence. Interviewees contrasted the legalistic ECHO approach with that of other donors, where modifications could be agreed in principle with local Donor representative and formalised in the final report.

292. Effectively ECHO has bureaucratic controls more suitable to secondary acute and recovery phase, but wants to be a key player in the acute phase. One way in which ECHO could play a larger role in the acute phase is through the financing of stocks of relief material. During the Pakistan Earthquake there was a shortage of tents. This was nothing new. We saw the same thing in the Kosovo crisis and after the Tsunami. There were delays also with other relief supplies, as agencies had to wait for items to be manufactured.

293. Stockpiles allow the immediate dispatch of relief items to the disaster zone. The United Arab Emirates Government in Dubai is providing free warehousing for humanitarian agencies there, and a number of agencies have already established stockpiles there. WFP has established a chain of emergency stockpiles in Dubai, Ghana, Malaysia, and Panama in addition to the existing facilities in Brindisi.

## 6.9 Conclusions

294. ECHO has many bureaucratic requirements that made ECHO financing less flexible for the Pakistan response than humanitarian funding from other donors. One particular case is that of the rules of nationality and origin for procurement. Another is the treatment of capital assets at the end of ECHO funding.

295. ECHO was alone among the major humanitarian donors in the Pakistan response in not funding local NGOs. Local NGOs could benefit from ECHO’s close scrutiny of proposals, and tight monitoring. However, such a change would require a change of ECHO’s mandate.

296. The context of any relief operation will determine which agencies provide the most useful channel for ECHO funds. There is no simple hard and fast rule, as even the same agency may perform differently on different projects. However, the easy access that UN agencies enjoy to CERF funds means that applications from NGOs and the Red Cross should probably be given priority by ECHO in the initial stages of the emergency response.

297. ECHO is a donor of declining importance as global relief funding is growing faster than EC relief funding is. ECHO only funded just over 12% of global humanitarian action in 2006, and only 5.2% of the humanitarian response to earthquake. This is a dramatic fall from ten years ago when ECHO provided 30% of humanitarian funding. The emergence of new donors means that this decline can be expected to continue unless there is radical action by the Commission.

298. NGOs are partners of falling importance to ECHO as a channel globally, and the UN, with 45% of all ECHO funding was the biggest channel for ECHO funding in this response. This may be a reflection of the costs of meeting ECHO's bureaucratic requirements and the availability of less onerous alternative funding to NGOs. The increasing percentage of ECHO funding for UN agencies is a concern given the greater access that such agencies now have direct access to CERF funding.

299. ECHO adds value to the response through the careful selection and monitoring of projects, and through thematic funding to increase partners' capacity. Such thematic funding is not accessible for NGOs.

300. ECHO could contribute to saving lives in the acute phase through supporting the stockpiling of materials.

### 6.10 Recommendations

301. ECHO's bureaucratic requirements are more onerous than those of other major humanitarian donors.

Primary Recommendation ***ECHO should commission a review of their procedures to determine which of them could be changed to increase flexibility to meet humanitarian needs without unduly compromising financial accountability.***

302. The rules on nationality and origin are not suitable for humanitarian operations.

Tertiary Recommendation *ECHO should seek a global derogation from the rules on nationality and origin for all ECHO projects.*

303. The rules on the transfer of capital items are particularly onerous where projects are continuing with non-EU funding.

Tertiary Recommendation *ECHO should consider a mechanism for deferring the handover of capital assets until the end of the life of a project.*

304. Such a mechanism might take the form of a tripartite agreement between ECHO, the partner, and the intended recipient of the capital assets.

305. Such a programme could include financial support for specific measures to increase the surge capacity of agencies.

306. Shortages of relief items are a common feature of emergency operations.

Primary Recommendation ***ECHO should invest in emergency stockpiles to improve the response in the acute phase of humanitarian operations.***

307. However, a special mechanism, possibly with a framework agreement to cover transportation, would be needed to authorise use of the stockpiles within 3 hours of the emergency.

## 7 Impact and results achieved

### 7.1 *The overall impact*

308. It was not really possible at this stage to separate the impact of the ECHO funded assistance (just over 5% of the total recorded by OCHA) from the impact of funding by other donors. What the team can say is that:

- The overall assistance was a success as there was no large scale avoidable mortality following on from the earthquake. Beneficiaries confirmed that the assistance they receive dealt with their greatest needs, and that this had reduced suffering.
- The care taken by ECHO in developing realistic and achievable projects probably meant that these were more effective than others. ECHO's presence on the ground meant that ECHO projects generally focussed on the greatest needs.
- Despite the greater effectiveness, the potential impact of many ECHO funded projects is reduced by the time taken to get the proposal right. For example the ACF seeds project got funding barely in time to buy seeds. Interviewees suggested that these delays may have reduced yields in that the optimal time for planting may have already passed before distribution in some locations.

309. ECHO staff sometimes argue that delays in the proposal approval process are not so important as spending before contract signature can be reimbursed. ECHO funded projects often have a qualifying date for expenditures prior to the signature of the contract. This is a useful feature, and is much appreciated by partners. However, partners also made clear that they cannot commit to employing staff or assume responsibility before communities unless they have funding.

310. Some of the ECHO funding that had the biggest impact in the acute phase was probably the funding prior to the earthquake that permitted partners to develop and maintain their capacity. ICRC would not have been able to react on the scale that it did without the continuing support it received from ECHO. Previous funding for UNHCR also meant that it had stocks of non-food-items that it could quickly dispatch to the earthquake affected areas.

### 7.2 *Quality of partner's work*

311. The team noted very wide variety in the quality of work carried out by partners. The best water project seen was undoubtedly that of the Aga Khan Development Network (AKDN). The technical quality was on a par with the ICRC water projects seen (not funded by ECHO), but AKDN's social mobilisation was better, as the community themselves controlled the construction of the project.

312. Most<sup>39</sup> of the damaged schemes were gravity water projects. Such schemes are communal rather than family supplies, and need some system for communal management.

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<sup>39</sup> 82% of damaged schemes in NWFP were gravity water schemes and 99% in AJF (ERRA, 2006, p. 47).

Gravity water schemes are technically attractive as there is no pump running cost, and the use of spring water means that the water does not usually need biological treatment. The biggest cost of such schemes is usually the pipework, which can be several km in length.

313. One common problem observed with these schemes during the evaluation team's visit was the failure to bury pipes adequately. This inevitably leads to leakage, lower levels of service, failure of the distribution system, and a wasted investment.

314. In terms of health, some partners such as Merlin and UNFPA who were supporting clinics seemed to have higher standards of cleanliness and of equipment than other partners. Training of health staff also varied with only some agencies (Merlin and WHO) measuring the effectiveness of their training.

315. One of the areas of greatest discrepancies was in the area of hygiene education. Some of the people selected as hygiene promoters got what was effectively several weeks of training and follow up. Others got only half-a-day of training. They were expected not only to understand and internalise a series of health promotion message in this half-day, but also to understand the techniques for community health promotion.

316. This huge variability between activities with the same nominal label is the reason why unit cost comparisons are fairly useless. For example, latrine construction was normally accompanied by health education, but the 'health educators' got very different levels of training. Some communities were completely unused to latrines, and other communities had previously had them. These factors made any cost comparison between the full cost of latrine programmes fairly pointless.

317. Winter shelter kits and NFI kits were another case in point. These varied widely in terms of the contents. They varied not only in the number and size of corrugated galvanised steel roofing sheets, but also in the number of blankets, and quilts etc. Some supplied timber, others did not. Some supplied plastic to supplement the roofing sheets and so on. Comparing one "winter shelter kit" with another is like comparing apples and oranges.

318. The review by the ECHO Regional Health expert noted that *Unit costs per treatment or per patient are very difficult to evaluate* (Lenzi, 2007). The Regional Watsan Expert noted that latrine unit costs varied from €50 to €77 for latrines, but that the analysis was biased as transport costs were not included, nor was the beneficiary contribution. In fact the analysis was even more biased as some partners reported receiving slabs or plastic sheeting from UNICEF.

319. Several partners stated that they would be happy to provide unit costs if ECHO could be precise on how these should be calculated. Many projects used assets such as vehicles or equipment that were funded by other than ECHO, or received assistance in kind from other agencies. All of these constitute part of the cost of providing assistance, but are not borne by ECHO.

### 7.3 Coordination

320. Coordination has a large influence on efficiency, but it also significantly affects the overall impact of the response. Pakistan was the first trial of the IASC's Cluster approach

to coordination. This topic has been extensively covered in other evaluations and review<sup>40</sup>, so the evaluation team will limit their comments here.

321. The introduction of the cluster approach is one of the fruits of the UN's March 2005 Humanitarian Response Review (Adinolfi et al., 2005). Another fruit of the reform process, the revised Central Emergency Response Fund (CERF), did not become effective until March 2006. While the CERF was not active, it was still possible to channel funds via the clusters. Norway tried to do this for a number of clusters but found cluster leads reluctant to take on this responsibility. The review of Norwegian assistance for the Earthquake concluded even with the CERF the inability of the UN system to get resources out quickly enough meant that there was still an need for direct funding of NGOs and the Red Cross (Strand & Borchgrevink, 2006, p. 16). This supports the position taken by ECHO on the direct funding of NGO and Red Cross partners.

322. ECHO coordinated well with UN's Office of the Coordinator for Humanitarian Affairs (OHCA) and the key donors. ECHO supported the work of coordination with financial support, with both thematic and earthquake specific for OCHA. ECHO also supported the setting up of the cluster system as a tool to improve coordination.

323. The decision to establish the cluster approach was made before it had been officially endorsed by the UN, or even had basic working rules established<sup>41</sup>. The first general meeting of over 200 people was conducted in week one, where agencies were sent into working groups. While nine clusters were established at the start of the crisis, this later grew to eleven. However, there were a number of clusters and sub-clusters, making full participation simultaneously more difficult and less useful.

324. The clusters started off slowly. One month after the earthquake only one cluster lead had published a terms of reference for their cluster (Anon, 2005). It was some 5 weeks before the five cluster hubs were working. Although the clusters were reportedly slow to become effective, the Flash Appeal was compiled by the cluster system.

325. Many ECHO partners played a key role in cluster coordination both as cluster leads and as cluster members. Interviewees offered four main criticisms of the cluster system from their experience in Pakistan:

- Cluster leadership was very uneven, with some clusters being effectively led, and others very poorly led. Poor management of the clusters was a general problem except for a few cases. Basic meeting management and information management were poor, with the biggest information gaps between clusters and between the field and Islamabad. Interviewees often cited poor management as the reason for the decline in attendance at some cluster meetings. Interviewees reported that cluster meetings were more effective in the field and less effective at HQ level in Geneva and Islamabad.

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<sup>40</sup> Including, among others: (ActionAid, 2006; Inter-Agency Standing Committee, 2006; Ministry of Health Government of Pakistan & WHO, 2005; OCHA Donor Support Group, 2006; Strand & Borchgrevink, 2006)

<sup>41</sup> It was 28 November before the cluster management guidelines were agreed by the Cluster Head Meeting and these were later further revised with a final version (OCHA office in Mansehra, 2005) published by OCHA on December 12<sup>th</sup>

- A lack of understanding of the cluster coordination role with many cluster leads trying to take a directive rather than a coordinating role. None of the cluster leads had any training for their role.
- The conflict between agency mandates and cluster mandates<sup>42</sup>. This was reflected more generally in the unwillingness of many cluster leads to accept funding for the cluster as a whole rather than just for their own agency (Strand & Borchgrevink, 2006), and in such specific examples as IOM's inclusion of promoting IOM's image as a cluster lead responsibility in the shelter cluster (Anon, 2005).
- Cross cutting issues (e.g. gender, human rights, and environment) were not adequately addressed. The mandates of some agencies necessitated presence at multiple hubs which was difficult. The lack of adequate attention to cross-cutting issues is recognised in the IASC's own review of the cluster system in Pakistan (Inter-Agency Standing Committee, 2006, p. 3).

326. Despite these issues, the general feeling expressed by interviewees who had experience of both the tsunami response and the earthquake response, was that coordination was far better in the earthquake response. This is not automatically due to the existence of the cluster system. Some it may have been due to the awareness of the importance of coordination that agencies brought from their tsunami experience. Some may have been due to the discipline imposed by the greater role for donor funding of NGOs in the earthquake response in comparison to the tsunami.

327. There was good coordination between ECHO, USAID and DFID, but the introduction of the cluster system may have had an impact on broader donor cooperation. Strand noted that no specific donor coordination mechanism was introduced and that this seemed to be a reaction to the introduction of the cluster response mechanism.

328. ECHO was a strong supporter of the cluster initiative for coordination, but ECHO did not support the cluster initiative as a fund-channelling mechanism<sup>43</sup>. This was wholly appropriate as cluster coordination is an important area of the whole humanitarian reform process. ECHO's use of direct funding was wholly appropriate as ECHO had a better overview of overall humanitarian needs than did the cluster leads and was better placed to channel funds than the cluster leads were.

329. While it was appropriate for ECHO to support efforts at cluster coordination in Pakistan, it is still not clear if the UN can raise the quality of cluster leadership enough to make the process effective<sup>44</sup>. Training about the cluster approach is a possible target for ECHO thematic funding, both for potential cluster leads and for other humanitarian actors.

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<sup>42</sup> Two interviewees suggested that the cluster lead in one UN agency was sacked because she placed cluster interests before the agency's own agenda.

<sup>43</sup> Similarly ECHO does not currently support the CERF. The biggest objection to ECHO funding via the cluster leads (rather than directly) was that ECHO had a better overview of overall humanitarian needs than did the cluster leads.

<sup>44</sup> While the cluster deployment in response to the Mozambique Floods in February 2007 was better than in Pakistan in October 2005 many of the same problems could still be seen 16 months later (Cosgrave et al., 2007).



## 7.4 Advocacy

330. Advocacy is a good tool for leveraging inputs to achieve greater impact. The NRC's Legal aid project is an example of one type of advocacy. Here, the investment in assisting people to get documents enabled them to access government compensation.

331. Several interviewees were critical of ECHO for not playing a greater role on advocacy. They made the point that ECHO has less of a political axe to grind than the other major humanitarian donors, and so is in a good position to advocate on humanitarian first principles.

332. ECHO make the point that the priority was on addressing needs, and that advocacy could have compromised this in such a sensitive environment as Pakistan. ECHO also make the point that different partners may have different (or even opposing) on any one advocacy position.

333. Some interviewees thought that ECHO should have been more active on advocacy within the humanitarian community on issues such as cluster leadership, in that some cluster leads did not fulfil their roles very well. For example, UNICEF took the lead for the protection cluster, but concentrated only on the protection of children. Interviews complained that when this issue was first raised with ECHO staff they were unwilling to press it, although they eventually raised it.

334. Advocacy is not a well developed arm of ECHO strategy. The fact that ECHO field staff are contractors, rather than Commission civil servants may be a factor in this, as may the placement of ECHO delegations within the EC Delegations. Interviewees noted that EC delegations are more concerned about the long term relationship with the government than with short term humanitarian concerns, especially if raising such concerns may damage relations with the government.

## 7.5 Conclusions

335. The overall assistance prevented any secondary mortality and reduced suffering after the earthquake. ECHO's assistance contributed towards this especially as ECHO projects were probably more effective than others due to the care taken with ensuring that the proposals were of high quality. However, the prudent approach taken by ECHO limited the potential impact of some projects. Funding prior to the earthquake probably had the biggest impact in the first week of the response.

336. The quality of the work done by partners varied a good deal. However, the worst examples seen were not ECHO-funded. This variability in quality, and the variability in the content of apparently similar projects, made any unit cost comparisons almost pointless.

337. ECHO played a leading role in promoting coordination, both with finance and with the actions of the field staff. Coordination appears to have been better than after the Tsunami. The cluster coordination approach was first used in the response to the Pakistan earthquake, but had mixed results. There is a potential role for ECHO in supporting training for both cluster leads and other cluster members.

338. ECHO played a far more limited role in advocacy than its importance as a donor, and its place as a donor that is less politically driver than some other donors, would justify.

## 7.6 Recommendations

339. ECHO supported cluster coordination, but could enhance this with thematic support for better cluster management.

Secondary Recommendation *ECHO should consider thematic funding to improve awareness of the cluster approach and the management skills of cluster leads.*

340. Any such ECHO supported training should also target NGOs and not just UN agencies.

341. ECHO undertook relatively little advocacy.

Tertiary Recommendation *ECHO should develop guidelines for advocacy in emergencies and consider recruiting specialists to conduct advocacy in emergency operations.*

342. Such guidelines should take account the need to preserve humanitarian access and the potential impact of such advocacy on ECHO partners.

## 8 Sustainability and Connectedness

### 8.1 Sustainability and humanitarian action

343. Humanitarian action is not intended to be sustainable, but to meet urgent needs. Guidance for humanitarian evaluation often substitutes connectedness for sustainability. Connectedness is the "to assure that activities of a short-term emergency nature are carried out in a context which takes longer-term and interconnected problems into account" (OECD/DAC, 1999, p. 22).

344. Whereas ECHO's 1999 evaluation guide talked about "viability" (ECHO Evaluation Unit, 1999, pp. 20, 58), but the 2002 edition refers to connectedness instead (ECHO Evaluation Unit, 2002, p. 25). Principle 8 of the Code of Conduct for the Red Cross and NGOs in disaster relief states that "Relief aid must strive to reduce future vulnerabilities to disaster as well as meeting basic needs" (Steering Committee for Humanitarian Response & ICRC, 1994). Article 2(d) of Council Regulation 1257/96 refers to the need to take long-term development concerns into account where possible.

345. While humanitarian action may be ephemeral, there is a requirement to consider the longer term context, and to ensure that actions are connected.

### 8.2 Plastic or concrete?

346. Despite the need for humanitarian action to consider the long term context, this seemed to be placed in the back seat in Pakistan. One partner reported that they were advised that their rural family latrine construction proposal would not be accepted as they proposed to use concrete latrine slabs instead of plastic ones. While there is little cost difference between concrete and plastic latrine slabs<sup>45</sup> there is a major difference in the lifespan. A concrete slab can be expected to last ten times as long as a plastic one.

347. There are times when plastic slabs are the most appropriate. In the initial phase of an emergency response, when using plastic slabs means that latrines can be ready a week earlier than they might otherwise be, they are wholly appropriate. However, when latrines are intended for longer-term family use then plastic slabs are less appropriate.

348. There was a similar issue with water projects. Laying plastic pipes on the ground in the first few days is a perfectly acceptable



Figure 15: This good quality ECHO-funded standpost is likely to provide water for many years.

<sup>45</sup> Oxfam's equipment catalogue suggests that the unit weight for a plastic latrine slab is around 22kg (Oxfam Humanitarian Department, 2003, p. 203). Given that airfreight costs are typically several euro per kg, the delivered cost of a plastic slab is likely to be far higher than for a concrete slab. However, many ECHO partners got plastic latrine slabs as donations in kind from Unicef.

practice. But to use this approach after a few months is not good practice as failing to bury pipes reduces the life of the system. The standpost shown in Figure 15 was part of a scheme built by the Aga Khan Development Foundation with ECHO funding. Of all of the water schemes seen, this was the one most likely to be sustainable.

349. ECHO experts criticised this scheme saying the level of service provided was too high for ECHO and that perhaps more people could have been assisted with a lower level of service. The relationship between service levels and cost is not linear, but it obviously cost more to have a higher level of service. However, high levels of service make water schemes more sustainable as people are often more willing to invest their time and energy in schemes providing higher levels of service than those providing lower levels of service.

350. There was a similar issue with people getting better levels of service after the earthquake than they had before. This is justifiable on efficiency grounds; it would hardly be efficient for the European taxpayer to pay for a half-baked project now, and a more complete approach later on through other mechanisms.

351. Agency computation of unit costs often only include costs from the agency perspective, without including costs to beneficiaries (as is the case of the unit costs presented in the reports by the Health<sup>46</sup> and WatSan experts). This approach ignores the cost of projects to beneficiaries, which is a major determinant in sustainability. The AKDN project was obviously more expensive per head than other projects, but can be expected to work for 20 years, whereas some of the other water projects seen are unlikely to last even one tenth as long. When looked at from the beneficiary perspective the AKDN project has a far lower lifelong unit cost than the projects from other partners.

352. Some partners were told that their execution of projects was “too good” as they executed them with a view to the longer term. Interviewees reported that ECHO staff repeatedly made the point that ECHO can only fund temporary or transitional solutions<sup>47</sup>. This is a common view within ECHO, but team regard this view as stemming from customary practice rather than having a legal basis. The legal basis for ECHO, Council Regulation 1257/96 says in Article 2 that the objectives of humanitarian aid operations shall be (among others):

*(d) to carry out **short-term** rehabilitation and reconstruction work, especially on infrastructure and equipment, in close association with local structures, with a view to facilitating the arrival of relief, preventing the impact of the crisis from worsening and starting to help those affected regain a minimum level of self-sufficiency, taking long-term development objectives into account where possible.* (Highlight added)

353. It is clear from the reference to long-term development objectives that it is intended that the rehabilitation and reconstruction work is intended to be short-term in terms of being quickly executed rather than being short-term in duration. Quickly executed here refers to projects with a time-span with ECHO’s time frames, rather than the type of

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<sup>46</sup> The ECHO Health expert noted that the bulk of unit costs is made up of transport costs, which vary by geography, and staff costs (which vary with agency policy) and that medical consumable costs accounted for only 5% (Lenzi, 2007, p. 3).

<sup>47</sup> At the same time, there was some attention to sustainability in the consideration of project proposals.

reconstruction project that the multi-year projects that the World Bank or regional development banks get involved in.

354. This view is supported by the language of Article 3 which states that:

*Community aid referred to in Articles 1, 2 and 4 may be used to finance the purchase and delivery of any product or equipment needed for the implementation of humanitarian operations, **including the construction of housing or shelter for the victims...** (highlight added)*

355. This reference to “construction”, rather than simply “the provision of”, suggests that the framers of the council regulation had permanent housing in mind. Article 2 (e) also supports this interpretation where

*(e) To cope with the consequences of population movements (refugees, displaced people and returnees) caused by natural and man-made disasters and carry out schemes to assist repatriation to the country of origin and resettlement there ...*

356. Again, resettlement normally implies the construction of permanent housing, especially when one remembers the context in which the Council Regulation was written (after the Balkans and Rwandan operations). Now, the evaluation team are not suggesting that ECHO should have funded permanent housing<sup>48</sup>, but we are saying that ECHO's legal basis is less restrictive than in commonly thought.

357. From all of the above it is clear that ECHO can legally fund long-lasting construction within its mandate. This has a number of practical concerns. Partners in water project were being encouraged to take approaches that provided water in the short term rather than in the long term.

358. The justification for short-term approaches was that assistance could be provided more quickly in this way than if a more sustainable approach were taken. This is certainly true in the first few days and weeks, but it is not true after 3 months.

359. Health projects raised particular issues of sustainability as the earthquake response brought better standards of medical care than had been the case beforehand. The issue here was that one of the primary reasons for poor health services (very low attendance levels by staff within the health service, especially at rural locations) were not generally being addressed directly, but were being worked around by paying supplements to staff.

### 8.3 The transition phase

360. As noted earlier, ECHO spent its money relatively quickly in the Earthquake response. This contrasts with the tsunami response where a decision for €20mn (16% of

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<sup>48</sup> One of the reasons why the team is not suggesting that ECHO should have been involved in permanent housing is that the Pakistan model of owner-built housing through cash grants has been far more successful than the Indonesian post-tsunami model with agency-built housing. In many of the upland villages in AJK where the government compensation scheme has been working well over 90% of the permanent houses will be completed by the second anniversary of the earthquake. This figure overstates the progress as there are problem areas around tenant's houses, around the operation of the compensation scheme, and around the red zones where reconstruction has been forbidden due to seismic risks. Two years after the tsunami, less than 50% of the needed permanent houses had been built in Indonesia (BRR, 2006).

the total) was made nearly 12 months after the tsunami (ECHO, 2006c). By contrast, over 95% of the total funds for the earthquake response were contracted one year after the earthquake.

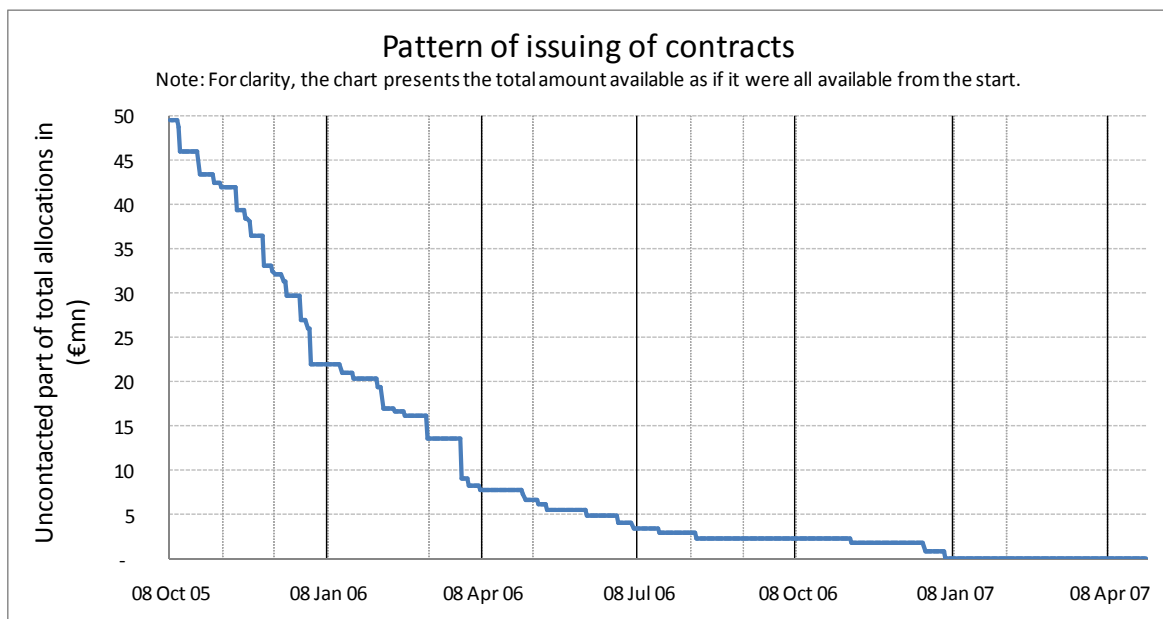


Figure 16: Pattern of ECHO contract issuance

361. In theory, ECHO fund for the acute phase and other community funding mechanisms then take over for the longer term where such funding is needed. In reality, it does not work like this.

362. Although the commission made €50 available for disaster recovery, the team found very little trace of this on the ground. Of the ECHO partners, FAO had received some of this money for seeds, and WFP was being paid to handle the logistics of the seeds. No other ECHO partner reported receiving any of this funding<sup>49</sup>. The evaluation team are not in a position to comment on the use of this funding, but it is very clear that there were no linkages between ECHO's funding and other Commission instruments. The lack of longer-term funding for ECHO partners reduced their ability to maintain their capacity between crises.

363. The team saw many projects which had initially been funded by ECHO but were now funded by DFID (Merlin's health project) or USAID (Premier Urgence's water project). It was quite clear that these two donors and not the EC are providing the follow-on funding for many projects that had been begun with ECHO funding. ECHO staff made the point that ECHO funding is only appropriate when it adds value and that there is no need for follow-on funding from ECHO if others are willing to fund.

364. This point was raised by partners who made the point that ECHO funding is typically of much shorter duration than other humanitarian funders and other humanitarian funders are more likely to fund a series of projects rather than a once-off intervention. Longer terms funding would provide ECHO with a better return on its investment in getting to know the context and would develop linkages with partners. ECHO could have continued

<sup>49</sup> Of the €50 million, ADP got €30 and UNDP and Unicef shared the remainder.

to add value by improving the quality of partners' planning through insisting on good quality proposals and the quality of implementation through close monitoring. ECHO has a strategic interest in pushing partners to improve quality throughout the whole of the response as this contributes to developing the capacity of partners to execute higher quality programmes in the next emergency.

365. The short period for ECHO funding is justified on the basis that ECHO funding is just for the acute emergency phase. One ECHO staff member said "*what could we fund after the first period?*" The reality is that the affected community have continuing needs due to the earthquake, and that these needs will continue for several years. For as long as communities have these needs, as long as their access to water is reduced, or their livelihoods are significantly reduced, there is a risk that the impact of the earthquake may worsen.

366. Ideally, from the viewpoint of the EU taxpayer, EC funding should be coherent, so that the gains gained under ECHO funding are not lost with the transition to other EC mechanisms. This did not happen as ECHO pursues a policy of funding carefully selected individual projects to a mix of UN, NGO and Red Cross partners, whereas the EC recovery funding was concentrated on what was effectively programme funding from the UN and the Asian Development Bank. Some of the UN funding went to UNICEF, but for education, a sector that ECHO does not normally fund.

367. The effective lack of follow-on funding for ECHO's partners from the EC means that some of the advantages from ECHO's work in the first twelve months, including a detailed knowledge of partner capacity, are lost. Another loss is that ECHO is not in a position to continue support its best partners to improve their capacity to respond to the next emergency.

#### 8.4 Disaster Risk Reduction (DRR)

368. As noted in the introductory chapter, the Indian plate is driving north by 40 to 50mm a year. This means that there will be further destructive earthquakes in the region. ECHO has a separately managed Disaster Preparedness programme (DIPECHO) that is not covered by this evaluation. ECHO did provide a €1mn grant to OCHA for an ISDR project to increase earthquake risk awareness that was effectively managed by DIPECHO.

369. ECHO incorporated elements of DRR into the decisions but some identified this more specifically (eg ECHO/-SA/BUD/2005/06000). Some partners incorporated DRR into their ECHO funded projects (e.g. Oxfam's water project). This most typically took the form of training for improved construction techniques, or training communities to build earthquake resistant winter shelters. However, the slow development of the ERRA construction standards, and the subsequent amendments to them, made training in earthquake resistant construction more difficult as only some techniques were approved.

370. Several partners, independent of ECHO funding, also developed their own emergency contingency planning. Interviewees generally acknowledged that their Pakistan offices were not prepared for the earthquake or any similar large-scale disaster.

371. Apart from any preparedness by governments and communities in the region, there must be the issue of ECHO's own preparedness for the next big earthquake. This might be anywhere along the arc of the plate boundaries, perhaps near Kathmandu, or even a deeper earthquake under Afghanistan. ECHO could prepare for such an event by building

stockpiles of materials, and streamlining the systems that would allow it to field a team of up to ten technical staff on the ground.

## 8.5 Conclusions

372. The common interpretation within ECHO that assistance is limited to temporary and transitory assistance is based more on customary practice than on ECHO's legal mandate.

373. ECHO does not pay enough attention to connectedness in its actions that it finances. It is clear that other community financing mechanisms are poorly connected with ECHO's work. This means that communities may see a worsening in their situation after ECHO relief assistance ends, unless other humanitarian donors come to the rescue.

374. Large earthquakes are recurring phenomena in the region and ECHO should prepare its own response for them.

375. Other EC funding mechanisms do not follow on from the ECHO funding of effective partners. It would be better if ECHO controlled some of this funding to build on its existing knowledge of partners and meet the continuing needs of the affected population.

## 8.6 Recommendations

376. ECHO's mandate allows ECHO a wider range of action than ECHO officials commonly assume.

Secondary Recommendation *ECHO should formulate guidelines for its staff based on humanitarian principles with the widest possible interpretation of what ECHO can fund within its mandate.*

377. ECHO relief projects are not leading into Commission funded recovery projects. Funding for recovery did not reach most of the partners that had been funded by ECHO. Instead they had to rely on follow on funding from other donors when they could get it. However continued ECHO funding can bring added value through the high quality of proposal overview and monitoring seen in Pakistan.

Primary Recommendation ***The EC should allocate part of the recovery funding to be managed by ECHO to build on the excellent work done by ECHO during the initial relief phase***

378. Earthquakes are recurring phenomena in the region. They are becoming more dangerous due to increasing populations and changes in building practice.

Secondary Recommendation *ECHO should improve its own preparedness for the next big earthquake disaster in the region.*

379. This could include stockpiling relief supplies and establishing stand-by arrangements for staffing the ECHO response.

380. Livelihoods were an area that did not get sufficient attention. Damaged livelihoods can have major consequences.

Tertiary Recommendation *ECHO should pay more attention to helping those affected re-establish a minimum level of self sufficiency after disasters in order to prevent negative effects after the end of relief assistance.*





## 9 Communication and visibility

381. Visibility is a requirement for all ECHO partners. Both the Framework Partnership Agreements (FPAs) for Humanitarian Organisations and for International Organisations and require partners to:

*... contribute to the visibility of the humanitarian Operations financed by the European Community...*

382. The Financial and Administrative Framework Agreement (FAFA) with the United Nations requires that:

*... the UN shall take all appropriate measures to publicise the fact that an Action has received funding from the European Union...*

383. In the past visibility has taken the form of displaying the ECHO logo (and later the EU logo) on equipment, vehicle, or major supplies. The current FPAs take a more sophisticated approach, and refer to Visibility and Communication.

384. However there is still a very strong emphasis on visibility through stickers and signs. Fully twenty-five of the *ficheops* for the Pakistan response refer to stickers. In the *ficheops* one can read comments by TA's on visibility that:

Logistics project: *"Very good on the ground through hundreds of trucks on the roads with ECHO stickers."*

Shelter project: *"Good, visibility boards in both English and Urdu were erected in every village where distribution took place. There were banners erected in the field camp, and stickers fixed to all vehicles used during the project."*

Watsan project: *"OK, stickers on the latrines, wash rooms, German red cross compound and cars."*

NFI Distribution: *"... put up EU visibility stickers at their field offices and banners were posted at the distribution points mentioning the contribution made by ECHO."*

Initial relief: *"The TA saw a lot of cars and trucks on the road from Batgram to Bana with Echo stickers. The distribution points were also advertised with banners and Echo visibility."*

385. ECHO partners with greater experience are more likely to think along these traditional lines that newer partners (Kulenovic, 2007). Overall, partners' STATED visibility and communication strategies focused more on visibility than on communication. A positive communication initiative was the development of a travelling exhibition by the Finnish Red Cross that was presented at a series of public events in Finland.

386. There were a number of problems with local visibility:

- The increasing political role of the EU could lead to problems due to the association of ECHO funded programmes with wider political action by the EU.

For example, the recent EU report on Kashmir (Nicholson, 2007) led to a demonstration Islamabad. Fortunately there were no protests in AJK to the report, but there easily could have been.

- Visibility may be undesirable as circumstances changes. Save the Children in Sri Lanka faced problems after two boats marked “Donated by Save the Children” were found in a Tamil Tiger base by the Sri Lankan military (Save the Children in Sri Lanka, 2007).
- The use of the European Flag as a logo by ECHO may lead to ECHO projects being targeted as a result of political or other developments in Europe. After demonstrations in the region about the publication in a Danish newspaper of cartoons caricaturing the Prophet Mohammed many agencies removed the stickers from their vehicles.

387. During the demonstrations over the Danish cartoons the ECHO office themselves removed their EU stickers from their own vehicles. The removal of stickers by partners was in line with the provision of the FPAs that visibility is subject to the condition that:

*this does not harm Organisation’s mandate or the safety of its staff.*

388. The 2006 evaluation of the partnership between DG ECHO and the ICRC (Grünwald et al., 2006) described visibility and communication as:

*a recurring problem in the ECHO-ICRC partnership and an altogether painful topic for both partners.*

389. This issue surfaced during the earthquake response. The point of issue was ECHO visibility at the ICRC hospital in Muzaffarabad. The Hospital was a joint venture by the Finnish Red Cross and the Norwegian Red Cross. ECHO granted €2mn to the Finnish Red Cross for the hospital. However, the hospital was managed by the ICRC and they initially strongly objected to the placing of ECHO stickers on the hospital tents, because of the risks that this poses to the perceived neutrality of the ICRC.

390. ECHO pointed out that while there effectively a derogation on visibility for ICRC, there is no such derogation for visibility on the part of the national Red Cross societies involved. In the event, a local solution was arrived at, with some stickers being placed on the tents at the entrance to the hospital.

391. ICRC’s main funders, in order of the level of support are:

1. The United States Government.
2. The British Government.
3. The Swiss Government.
4. ECHO.

392. ECHO is the ICRC’s fourth largest funder and an important one. ICRC objects to local visibility for donors for the following reasons:

- The large number of donors that they have would require a ridiculous number of logos.
- The negative impact that providing donor visibility would have on the perception of their neutrality, and the damage that this could do to their freedom to operate.

393. This latter argument is compelling as ICRC's ability to work in areas of conflict depends on them being perceived as neutral and independent.

### 9.1 *The purpose of visibility and communication*

394. Visibility and communication have a number of functions:

- To increase awareness among European taxpayers of how their money is being used to help people, and to increase support for such assistance among European taxpayers.
- To let the affected population know the source of the assistance that they have received.
- To increase accountability by making it clear which donor has funded what. Clear signage prevents partners from presenting the same project to different donors as having been funded by them.

#### 9.1.1 INCREASING AWARENESS AMONG EUROPEAN TAXPAYERS

395. The heavy emphasis by partners on ECHO stickers was misplaced. European taxpayers are simply not likely to visit the disaster affected region physically, but many may do so electronically via television or the web.

396. However, media coverage quickly fall after a natural disaster (Figure 17), and television coverage falls even more quickly than print media coverage. Few ECHO funded activities were underway during the peak of television coverage, limiting the value of visibility. The first contract was signed on October 11<sup>th</sup>, some three days after the earthquake, and agencies need time to get ECHO stickers printed. Less than €8 million of contacts were signed in the first 30 days following the earthquake (Figure 10).

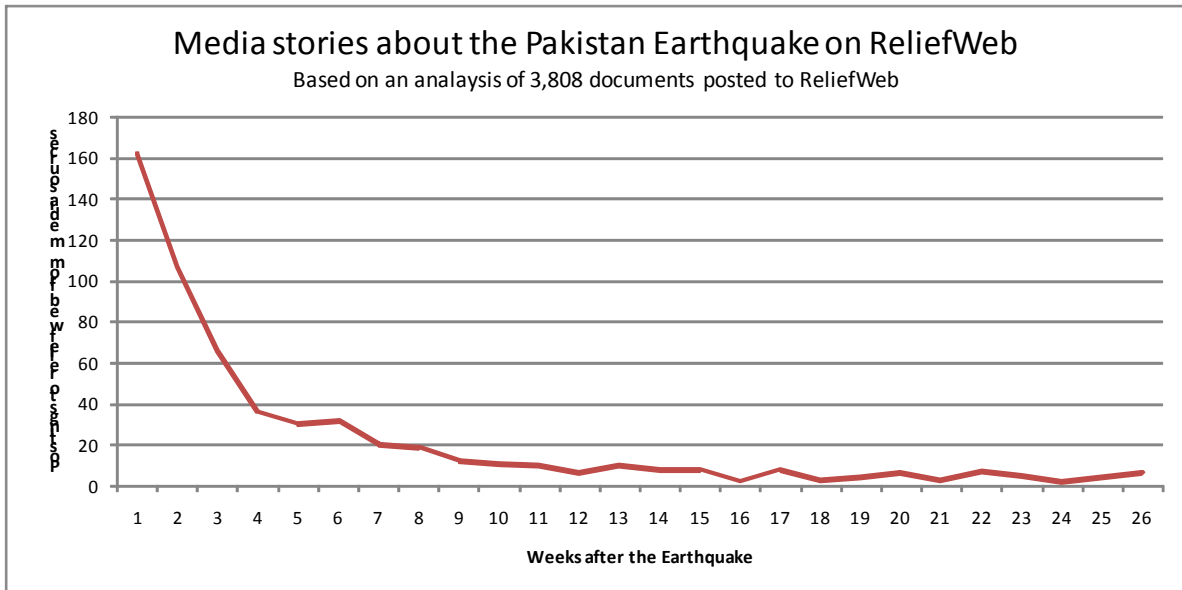


Figure 17: Decay of media interest in the Earthquake

397. Currently the ECHO has a page for the ECHO response (ECHO, 2006e) but this does not reflect either the diversity or the depth of ECHO assistance. There is for example, no list of projects on the web page. Lists of projects are published on an annual basis, but the public does not have easy access to the basic details of the grants made in response to any crisis.

398. Several partners mentioned links to the ECHO website as part of their visibility and communication plan. Some had links to ECHO in general, but none were found with links to the ECHO page for the response. Oxfam linked to the general ECHO site (complete with the ECHO logo), both from their introductory page on response (Oxfam, 2007) and from their list of institutional donors. There were no links from project pages to ECHO.

399. Malteser International linked from their home page to the general ECHO site (complete with logo), but there were no links to the Earthquake response. The page on the ECHO funded project (Malteser International, 2007) specifically referred to ECHO but had no link to ECHO. A test using the Google “link” search found no incoming links to ECHO’s earthquake page, even using the former address.

400. The lack of web links to ECHO’s earthquake page, and the lack of detail of the full range and depth of ECHO funding are limiting. The web is one of the chief ways in which European taxpayers could inform themselves about what ECHO has spent on their behalf.

#### 9.1.2 INFORMING THE AFFECTED POPULATION

401. In any emergency the affected population are surrounded by a sea of agency logos, many of which are in languages that they do not understand. One ECHO TA noted:

*Small stickers (around 10x10 cm) on each shelter displaying [Agency] and ECHO logos. But, when asked, beneficiaries had no idea about the European Commission.*

402. In another case an ECHO TA noted that visibility was limited, explained by the urgency of the action, but that in any case:

“... no beneficiaries had a clue of what ECHO means...”

403. The use of logo stickers etc. in informing the public about the source of assistance is very questionable. Interviews with beneficiaries confirmed this. They were able to identify few organisations, other than the Pakistani military and WFP, who have provided relief in the initial stages. They were generally not aware of the function or scope of donor organisations.

### 9.1.3 INCREASING ACCOUNTABILITY

404. In theory, clearly marking projects as having been funded by a particular donor prevents partners from representing the same project to different donors. However, during the field work, the team noted that while some partners had clearly erected signs from the start of the projects, another had erected signs only two days before the field visit by the evaluation team.

405. However, the signs seen were sometimes in English only, making them unintelligible to the majority of the affected population. Reference to ECHO on the signs usually consisted just of the logo, in some cases old forms of the ECHO logo were used rather than the current version. Signs did not provide information about where beneficiaries could raise issues about the project, thus limiting one opportunity for promoting accountability.



Figure 18: This sign has some information in Urdu, but does not explain who ECHO is.

406. The evaluation team found that villages' names were complex and that the same location might be known by different names, or that different parts of a dispersed village might share the same name. For accountability, it would seem better if project sites were identified in partner reports by geographic coordinates as well as by their names.

## 9.2 Conclusions

407. Partners in the field are still too focused on visibility and not enough on communication. Much of the money spent on visibility is wasted as the targets either do not see it (European taxpayers) or do not understand it (beneficiaries).

408. European taxpayers are more likely to visit disaster sites electronically than physically. However the ECHO website does not present a full picture of the extent and depth of ECHO's response in the earthquake affected area. The present FPAs do not require links to ECHO's website.

409. There are opportunities for good visibility in the early stages of a response through the distribution of durable commodities with large ECHO logos. The inevitable delays in the signing of contracts and of procurement mean that visibility in the early days, when the television cameras are present, is really only possible with stockpiled commodities.

410. The work of the ICRC requires the highest possible perception of independence in the field and insistence on local donor visibility in the field, or for ICRC project, or project by

members of the Red Cross and Red Crescent movement that are managed by ICRC, is inappropriate.

411. The use of the EU flag for visibility risks confusing humanitarian assistance with peace support and other EU activity. This is a growing risk as the EU moves towards a common external policy.

412. The present ECHO logo is not effective on its own at communicating the source of the assistance to beneficiaries.

413. Village names were not always sufficient to identify locations unambiguously. It would be better if partners also provided the geographic coordinates of the locations where they work.

### 9.3 Recommendations

414. Partners still give too much attention to visibility and too little to communication.

Tertiary Recommendation *ECHO should change the heading “visibility and communication” to “communication and visibility” in the next revision to the FPAs and FAFA.*

415. References to visibility on its own should be similarly amended.

416. ECHO’s website does not present the full breadth and depth of ECHO funding for the earthquake response.

Secondary Recommendation *In future emergencies, the ECHO website should present information about all the grants made for a particular emergency in an accessible format.*

417. This could be done by using a database server to use information from ECHO’s project database with relatively little coding.

418. It is sometimes difficult to determine if a particular piece of work has been funded by ECHO or not. Signboards are not a very effective means of assuring accountability.

Tertiary Recommendation *ECHO should ask its partners to provide the geographic coordinates of all the locations served by a particular project.*

419. This information could be combined with the project descriptions to allow web-site visitors to click on a map to see all the relevant projects at that location.

420. Photos are a very powerful tool for communicating the reality of assistance to the general public.

Tertiary Recommendation *ECHO should ask partners to provide illustrative photos of their work with their progress reports for placing on the ECHO website.*

421. . These photos could be linked to the project details, to demonstrate the range and depth of ECHO funding.

Tertiary Recommendation *ECHO should grant ICRC a full and permanent derogation from the requirement for local visibility.*

422. This derogation should also cover any Red Cross or Red Crescent projects managed by ICRC.

423. ECHO partners do not always link to the ECHO website.

Tertiary Recommendation *The next revision of the FPAs and FAPA should include the requirement for partners to link to the ECHO website, and to any disaster specific index page, from their own website pages on the disaster.*

424. ECHO could reward partners who provide adequate levels of such visibility by linking back to their disaster specific pages.

425. Consumer durables some of the longest term visibility at the field level:

Tertiary Recommendation *ECHO should limit the marking of relief items to the marking of consumer durables that are likely to be seen in public, such as water buckets.*

426. A previous recommendation referred to the creation of an emergency relief items stock-pile or stock-piles by ECHO.

Secondary Recommendation *Key items in the ECHO emergency stock-pile should be marked with the ECHO logo to promote visibility in the first phase of the response when television cameras are present.*



427. Such markings could include not only screen-printing on consumer durables, but the reproduction of the ECHO logo on such a scale on plastic sheet and on tents that it can be distinguished from a considerable distance.

Figure 19: This bucket in Angola provides continuing visibility for ECHO