

REPORT

**INTER-AGENCY HUMANITARIAN
EVALUATION OF THE RESPONSE TO
THE CRISIS IN NORTHERN ETHIOPIA**



15 May 2024

Management, funding and implementation of the evaluation

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Disclaimer

The contents and conclusions of this evaluation report reflect the opinion of the authors and not necessarily those of the United Nations, OCHA, donors or other stakeholders.

Table of acronyms

AAP	accountability to affected people
ACF	Action Contre la Faim
ACSO	Federal Authority for Civil Society Organizations
AHT	Area Humanitarian Team
ALNAP	Active Learning Network for Accountability and Performance
AoR	area of responsibility
ARRA	Administration for Refugee and Returnee Affairs
AU	African Union
CBPF	country-based pooled fund
CCCM	camp coordination and camp management
CLA	Cluster Lead Agency
CRRF	Comprehensive Refugee Response Framework
CRS	Catholic Relief Services
CRSV	conflict-related sexual violence
DCO	(UN) Development Coordination Office
DHC	Deputy Humanitarian Coordinator
DO	designated official
DRC	Danish Refugee Council
DTM	displacement tracking matrix
EDG	Emergency Directors Group
EDRMC	Ethiopian Disaster Risk Management Commission
EHF	Ethiopia Humanitarian Fund (country-based pooled fund)
ENDF	Ethiopian National Defense Forces
EPRDF	Ethiopian People's Revolutionary Democratic Front
ERC	Emergency Relief Coordinator
ESA	emergency site assessment
ES/NFI	emergency shelter/non-food items
FAO	Food and Agriculture Organization
FGD	focus group discussion
FH	Food for the Hungry
FHE	Food for the Hungry Ethiopia
GBV	gender-based violence
GHO	Global Humanitarian Overview
GoE	Government of Ethiopia
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HeRAMS	Health Resource and Service Availability Monitoring Systems Assessment
HINGO	Humanitarian International Non-Governmental Organizations
HLP	housing, land and property
HNO	Humanitarian Needs Overview
HRP	Humanitarian Response Plan
IAHE	Inter-Agency Humanitarian Evaluation
IASC	Inter-Agency Standing Committee
ICCG	Inter-Cluster Coordination Group
ICHREE	International Commission of Human Rights Experts on Ethiopia
ICRC	International Committee of the Red Cross
ICVA	International Council of Volunteer Agencies
IDPs	internally displaced people
IHL	international humanitarian law
INGO	international non-governmental organization
IOM	International Organization for Migration
IPC	Integrated Food Security Phase Classification
KI	key informant
KII	key informant interview
MG	management group

MSF	Médecins Sans Frontières
MYR	midyear review
NDPPC	National Disaster Prevention and Preparedness Committee
NDRMC	National Disaster Risk Management Commission
NGO	non-governmental organization
NRC	Norwegian Refugee Council
OCHA	Office for the Coordination of Humanitarian Affairs
OECD/DAC	Organization for Economic Co-operation and Development's Development Assistance Committee
OHCHR	Office of the United Nations High Commissioner for Human Rights
OLF	Oromo Liberation Front
OPAG	Operations, Policy and Advocacy Group
OPR	operational peer review
ORDA	Organization for Rehabilitation and Development in Amhara
PAG	Policy Advisory Group
PIN	People in Need
PSEA	prevention of sexual exploitation and abuse
PSNP	Productive Safety Net Program
RC	Resident Coordinator
REST	Relief Society of Tigray
RRM	Rapid Response Mechanism
RRS	Refugees and Returnees Service
SCORE	Survey on the Coverage, Operational Reach and Effectiveness
SDGs	Sustainable Development Goals
SitRep	Situation Report
SLT	Saving Lives Together
SSA	Surveillance System for Attacks on Health Care
TDA	Tigray Development Association
ToC	theory of change
ToR	terms of reference
TPLF	Tigray People's Liberation Front
UN	United Nations
UNCT	United Nations Country Team
UNDSS	United Nations Department of Safety and Security
UNECA	United Nations Economic Commission for Africa
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNHAS	United Nations Humanitarian Air Service
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNSG	United Nations Secretary-General
UNSMS	United Nations Security Management System
USAID	US Agency for International Development
WASH	water, sanitation and hygiene
WFP	World Food Programme
WHO	World Health Organization
WV	World Vision
WVE	World Vision Ethiopia

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Note: This version of the final report includes a correction of two factual errors in paragraph 14, one in paragraph 133 and editorial corrections.

1 Executive Summary

Introduction and approach

1. This Inter-Agency Humanitarian Evaluation (IAHE) is an independent assessment of the collective humanitarian response to the crisis in the three northern regions of Ethiopia, Afar, Amhara and Tigray, from November 2020 until 1 April 2023. The Principals of the Inter-Agency Standing Committee (IASC) activated the IASC System-Wide Scale-Up Protocols for northern Ethiopia on 28 April 2021 in response to the outbreak of the armed conflict in Tigray in early November 2020. This Scale-Up activation, which sought to mobilize system-wide capacities and resources beyond standard levels, triggered this IAHE.
2. This IAHE reviewed the System-Wide Scale-Up and assessed the extent to which the collective humanitarian response met the needs of the people affected by the conflict in northern Ethiopia. Its purpose is to ensure accountability for the extent to which IASC member organizations strategized and worked collectively to maximize the humanitarian outcomes of their work. The findings and recommendations also enable learning for future IASC Scale-Up activations.
3. For the purpose of this evaluation, the evaluation team used documentation and the strategies of the northern Ethiopia response to reconstruct a theory of change at the beginning of the evaluation. This was based on the objectives and rationale for the Scale-Up and the available Ethiopia and/or northern Ethiopia Humanitarian Response Plans, and the Ideal Model—Impact Pathway for humanitarian coordinated action, provided in the IAHE terms of reference.
4. The evaluation relied on a mix of primary and secondary data. Primary data collection included direct observation; 186 key informant interviews; 44 focus group discussions with 325 participants, of which 52 per cent were women and 48 per cent were men; and an online survey targeting providers of humanitarian response that 151 people participated in. Secondary data analysis consisted of an extensive document review, including documents identified by the evaluation team through desk review and/or provided directly by the Evaluation Management Group. The documentation included relevant Humanitarian Response Plans, collective strategies and plans, recent IAHEs and previous or ongoing agency-specific or inter-agency evaluations that assessed the Ethiopian/northern Ethiopia context, such as those undertaken by UN High Commissioner for Refugees and UNICEF, agency meeting minutes, statements and communications. Exceptionally, the review also included audio recordings and related materials of formal and informal meetings.
5. The evaluation team carefully reviewed all primary data and then tagged and catalogued it by theme. The triangulation of the perceptions of stakeholders reflected in interviews, survey responses and documents were key in developing a shared analysis, given that much of the data was qualitative in nature.
6. For each evaluation question, the evaluation team established the strength of evidence available from the main data sources used by this evaluation, i.e., documentation, key informant interviews, focus group discussions and a survey. The survey has mainly been used for triangulation purposes. When evidence is found in multiple sources and the triangulation of the sources shows convergence, evidence is rated as strong. With fewer data sources available, it becomes less strong, and it has been rated as medium or weak.

Background

7. Fighting between the Tigray People's Liberation Front on one side and the Ethiopian National Defense Forces (ENDF), the Eritrean Defence Forces and allied regional special forces on the other broke out in

Tigray in early November 2020. As of July 2021, Tigrayan forces launched offensives into the Afar and Amhara regions. These continued well into the same year, including an offensive towards Addis Ababa. In December 2021, Tigrayan forces announced their retreat from both regions, prompting the Federal Government to announce a halt of the ENDF's advance. Despite this, hostilities of varying degrees continued throughout 2022, particularly around the Afar-Tigray and Amhara-Tigray regional borders, with Afar and Amhara regional forces backed by the ENDF. On 24 March 2022, the Federal Government announced an indefinite humanitarian truce, but fighting continued in the other northern regions. In August 2022, however, hostilities in the three regions rapidly escalated. On 2 November 2022, the federal and Tigray authorities declared a cessation of hostilities, which led to a reduction of the armed conflict. Amhara regional authorities were absent from the negotiations, causing unrest in the region that continues in early 2024 and is further heightened by historical tensions between the Amhara and Oromia regions.

8. The armed conflict was marked by mass killings, serious and gross human rights violations, violence against civilians, conflict-related sexual violence (CRSV) and starvation as a method of war. These crimes, amounting to war crimes and crimes against humanity, have been documented, including by the specially created International Commission of Human Rights Experts on Ethiopia. Some have estimated that 600,000 people were killed in the two-year period of this armed conflict.
9. In this context, humanitarian needs surged. On 28 April 2021, the Emergency Relief Coordinator and the IASC Principals activated an IASC System-Wide Scale-Up for northern Ethiopia. The May 2021 northern Ethiopia Response Plan estimated some 5.2 million people in need of food aid across the region, with additional reports estimating that 350,000 people were faced with catastrophic famine conditions in Tigray and the neighbouring areas of Amhara and Afar. The Ethiopia 2022 Humanitarian Response Plan does not specify numbers for the Tigray region, but the World Food Programme estimated the number of people requiring food assistance to be 4.8 million in May 2022.
10. Access of humanitarian organizations to Tigray and parts of Afar and Amhara and the freedom of movement of affected people were extremely constrained. For much of the armed conflict, the Government imposed a siege and prevented the unhindered delivery of services and materials. Humanitarian aid was blocked, resulting in a situation when, at times, only 10 per cent of aid needed for the Tigrayan population reached the region. A communication blackout, lack of fuel and significant interruptions in UN Humanitarian Air Service to the region also created major challenges, including regarding duty of care for humanitarian staff. Aid worker security reports for 2020 and 2021 showed a rise in targeted violence directed at humanitarian staff, pushing the country into the ranks of the five most dangerous operational contexts globally. As of August 2023, 36 humanitarian staff had lost their lives in Ethiopia since the outbreak of the conflict.

Findings

Scale-Up

11. When the hostilities started in early November 2020, humanitarian actors were not prepared to provide a response in a situation of armed conflict. This was compounded by an under-estimation of the scale of violence and destruction of essential infrastructure. The Scale-Up declaration, made six months into the armed conflict, was not timely. The benchmarks that the Humanitarian Country Team (HCT) developed were not tailored to the context and thus did not move the Scale-Up forward. Though presence and operational capacity improved somewhat, it did not significantly increase, even during times of improved access. The inability to improve and adjust response capacity led to significant levels of dissatisfaction among senior humanitarian leadership, within and beyond Ethiopia. The fact that Scale-Up efforts differed in Afar, Amhara and Tigray and that they focused disproportionately on food

insecurity in comparison with massive protection issues, such as CRSV, further compounded the inadequacy of the Scale-Up.

Humanitarian access

12. The blockade of aid imposed by the Government of Ethiopia was among the top defining characteristics of this crisis, yet there was no collective access strategy for northern Ethiopia. Humanitarian access in armed conflict ties in closely with a principled humanitarian approach founded on the core principles of humanity, impartiality, neutrality and independence and in line with international humanitarian law. For example, the access agreement signed in November 2020 by the Humanitarian Coordinator (HC) with the Federal Government did not include any references to international humanitarian law, and it ignored the HCT-endorsed “Guiding Principles for Humanitarian Operations in Tigray and border areas of Afar and Amhara regions.” In reality, the agreement became a control mechanism for the Government.
13. There was a lack of agreement about what a principled approach entails. Some felt that with the outbreak of the conflict, a more independent course from the Government was needed, while several others favoured continuing close relations. As part of this disagreement, the HCT did not define red lines, i.e., the threshold at which aid agencies make it clear that they are unable to deliver on their mandates and even the most basic humanitarian aid can no longer be provided. The absence of thresholds meant that the system failed to implement the duty of care towards members of staff, which proved to be a significant issue as humanitarian UN and non-UN agency staff were harassed, arbitrarily arrested, detained and tortured. UN and the HCT did not speak out about these incidents.

Coordination and working collectively

14. The disagreements within the HCT on access and advocacy caused tensions and contributed to the lack of collective strategies more broadly. HCT-endorsed documents carried little to no weight, and there was a total lack of accountability. Moreover, two shocks affecting the humanitarian community had far-reaching implications for working collectively. The first shock came in September 2021 when the Federal Government declared seven UN officials as persona non grata and expelled them. Many of the seven officials were known for their advocacy for a principled approach. Ten days later, two UN agency chiefs were removed from their positions by their superiors because they were implicated in conversations expressing opinions that did not correspond to the principles and values of their agencies. More specifically, in the leaked recordings, they can be heard expressing doubt in early evidence of widescale CRSV, calling it anecdotal, and speaking against some of their UN colleagues who favoured the principled stance. The second shock came in May 2023, when a donor government and the World Food Programme paused their food assistance following initial results of an audit pointing to widespread aid theft on an “industrial scale.” The misuse of food aid included beneficiary lists that had not undergone independent verification.
15. The Humanitarian Country Team failed in its function to provide a forum for policy dialogue and strategic decisions. There was a high turnover of participants. A tally for the 28 months that this evaluation covers showed that nearly 350 different agency representatives attended HCT meetings. Further to this, as the HCT is a body that depends on collective leadership, it requires all participants to take responsibility for the mechanism’s success or failure. In this case, however, OCHA-led efforts to produce common plans, positions on key policy issues or strategic advocacy messages yielded no results. When there was agreement on a policy, the follow-up was little to none, resulting in a lack of mutual accountability. As the chair of the HCT, the Humanitarian Coordinator/Resident Coordinator did not make efforts to improve the functioning of the HCT. In late 2021, a Regional Humanitarian Coordinator was deployed. While this role had a positive impact on inter-agency relations and

exchanges, it was a compensatory measure without sufficient transparency and accountability in terms of reporting lines.

16. The early appointment and presence of a Deputy Humanitarian Coordinator for Tigray had a positive impact on inter-agency coordination at the subnational level where structures were put in place, including an Area Humanitarian Team. The Area Humanitarian Team contributed to a spirit of working collectively, although some clusters were more advanced in their work than others. Protection, and in particular the area of responsibility covering gender-based violence, lacked a meaningful presence and strategy. Three agencies shared leadership of this area of responsibility, which contributed to confusion and a lack of accountability. Overall, the collective response lacked coherence and coordination between the global, regional and country levels was weak.

Needs and data

17. It is necessary to preface these findings with an acknowledgement of the fact that flaws in publicly available humanitarian data in Ethiopia are far from new. The IAHE of the 2015–2018 drought responses found that much of the data at the time was unreliable, to the extent that it recommended accountability measures such as verifying the data against the views of drought-affected communities. This recommendation was not implemented by the IASC or HCT.
18. Independently collected key humanitarian data, especially on mortality and malnutrition, was not available for this response. There were few efforts to keep track of certain key statistics: in one instance, the World Health Organization published but then withdrew a report on functioning medical facilities following complaints from the Federal Government. This episode does not stand on its own. When the authorities did not agree with the data collected, humanitarian actors were instructed to use different figures and/or to use beneficiary lists that they could not verify. In addition, government-provided data typically lacks detailed breakdowns by gender, age or special needs, making it challenging to analyse and address specific humanitarian concerns.
19. In general, humanitarian data in Ethiopia can only be published following the Government's approval. As this vetting led to delays and risks of undue interference, agencies preferred using unvetted data, which was more up to date. Different data collection efforts and databases on numbers of people displaced created a degree of confusion and tensions, however.
20. In terms of needs, there was a tendency to frame food insecurity as this conflict's main narrative. Food aid has traditionally dominated the humanitarian response in Ethiopia. The number of people in need of protection was about half the total number of those identified needing food aid. Nonetheless, much of the three northern regions was an active combat zone where protection needs were acute, marked by mass killings, serious and gross human rights violations, violence against civilians and conflict-related sexual violence.
21. The lack of humanitarian access, coupled with a communication blackout, made establishing a consolidated picture of needs and the response highly challenging. For a significant period, OCHA's Situation Reports (SitReps) were the main collective source of data. Further to these SitReps, OCHA also published overviews of available operational humanitarian capacity with regard to cash to pay staff salaries, fuel and supplies, which served as an important advocacy tool. These overviews were disallowed by the Federal Government. The data made available to the evaluation team do not, on their own, allow for meaningful analysis in terms of coverage and delivery. The picture of who received what and where is incomplete.

Coverage and delivery

22. Due to the extreme conditions under which the response was carried out, it was clear from the outset of this evaluation that for much of the two-year armed conflict and the months thereafter, people in need in the three regions did not receive the quantities and quality of humanitarian services they were entitled to.
23. Despite the many challenges, UN and non-UN aid agencies made strenuous efforts to increase their presence and programmes. Participants in focus group discussions for this IAHE were near-unanimous: the little aid that they received helped them to survive and presented a lifeline. To overcome the challenges and to make best use of time in communities outside the main cities, needs assessment, service delivery and monitoring were often done simultaneously. Nonetheless, evidence shows differences between sectors, between organizations within sectors and between regions in terms of the level of success. Tigray was perceived as receiving more attention than Afar and Amhara. Even after the response there was increased, communities in Afar expressed frustrations as they felt left behind.
24. As for the quality aspects of the humanitarian response, consideration was given to protection and accountability to affected people but not to the scale needed. The protection cluster at the national level designed a protection strategy that was too general to be meaningful. Limited capacity further hindered its ability to respond to the enormous challenges. The response to gender-based/conflict-related sexual violence was particularly inadequate and did not consider the need for justice felt by survivors of sexual violence. Limited alternative approaches were developed for engagement with affected communities, given the communication blackout.
25. The evaluation has found various examples that the integration of local capacities in the collective response was valuable. The Ethiopia Humanitarian Fund allocated an increasing percentage of funding to local/national organizations, while the organizations remained frustrated by obstacles to access funding. In general, local NGOs and local staff felt abandoned or isolated in the response and did not feel recognized for the lifeline they kept in place when many international staff had been evacuated at the beginning of the conflict.

Conclusions

26. The brutal non-international armed conflict in northern Ethiopia saw extreme levels of violence against civilians and grave and systematic violations of international law amounting to crimes against humanity and war crimes.¹ In this context, the UN and humanitarian partners had extremely little room to deliver effective humanitarian response in the three northern regions. It is more than commendable, therefore, that humanitarian organizations **stayed and delivered services to communities in dire need under challenging circumstances**. Especially (but not only) in the first months of the conflict, it was mainly national staff and local NGOs, many of whom were experiencing the trauma of the armed conflict first-hand, who kept a lifeline in place where they could.
27. The quality and appropriateness of the limited aid that reached communities, particularly concerning gender-based violence responses, did not align with the actual scale and nature of CRSV experienced in the three regions. The data environment in Ethiopia is complicated, with serious shortcomings found in collecting and processing humanitarian data. This existed prior to this conflict, including the way in which food aid and beneficiary data have been handled. **Public data on humanitarian needs lack the necessary degree of independence**. The dominance of food aid in Ethiopia has overshadowed other

¹ International Commission of Human Rights Experts on Ethiopia, 'Report of the International Commission of Human Rights Experts on Ethiopia (A/HRC/54/55)', Human Rights Council, 14 September 2023.

sectors, particularly protection. Ironically, the changes in the distribution of food aid following the allegations of the diversion of food in May 2023 could have a positive influence on the way in which all humanitarian data was handled in Ethiopia and the principle of independence was operationalized. This change could also further strengthen a humanitarian mindset in the country.

28. While humanitarian organizations strove to deliver assistance and protection within their capacity, the collective response was subject to several crucially important systemic flaws. Two flaws stand out. First, while agencies' interventions contributed to humanitarian outcomes, **a collective response underpinned by joint strategy and planning was missing**. Put in simple terms, agencies were doing their own thing. Second, **the response was not underpinned by the humanitarian principles** and the UN failed to reframe the relationship with the Federal Government in line with international humanitarian law, at the outset of the conflict. These omissions were caused by strong disagreements about the relationship with the Federal Government among country-based senior UN humanitarian leaders.
29. The consequence of the deep division was **a dysfunctional Humanitarian Country Team and a lack of accountability**. Agencies who fell behind in their scaling-up efforts or Cluster Lead Agency responsibilities were neither held responsible nor replaced. Furthermore, HCT members did not hold each other accountable, and there was a gap in oversight from the global level. The extent to which performance appraisals of the Humanitarian Coordinator raised questions such as to the functioning of the HCT, including efforts to establish mutual accountability, is unknown to the evaluation. Efforts of non-UN representatives at the HCT, including NGO and donor representatives, to make the HCT a meaningful leadership forum were insufficient. The Area Humanitarian Team in Mekelle (Tigray) provided a valuable alternative coordination arrangement but was, ultimately, dependent on the leadership of the HCT at the national level.
30. Leadership of the humanitarian response in northern Ethiopia was impacted by the **absence of consistency and coherence in the UN's wide-ranging agenda** in the country. Many of the 28 UN funds and programmes and specialized agencies present in Ethiopia have little or no mandate in humanitarian response. However, the absence of a mandate is not a reason for not being concerned with a large-scale humanitarian crisis and gross violations of rights. On the contrary, the UN Charter establishes as one of the purposes "to achieve international co-operation in solving international problems of a [...] humanitarian character, and in promoting and encouraging respect for human rights and for fundamental freedoms for all."
31. The response made **few, if any, collective statements** against the blockade imposed against Tigray, the harassment, arbitrary arrests and detentions or torture of UN and non-UN humanitarian staff or the practice of starvation as a weapon of war. The centrality of protection, a key humanitarian commitment, does not only mean to keep people in need safe when providing assistance but also to speak out loudly and clearly, in private or public, on gross abuses of human rights and grave breaches of humanitarian law. Protection was not prioritized in the development of strategies and in implementing operations. Instead, the HCT followed an approach that was out of sync with the reality on the ground.
32. Given the weaknesses in scaling up, working collectively and negotiating access, it was inevitable that the delivery of the response was far from optimal. In essence, the framework and conditions to deliver effective humanitarian services during an armed conflict were missing. The serious mistakes made in responding to the needs of the people of Afar, Amhara and Tigray amount to a system failure. The system should have been in a better position to meet the many challenges imposed by the context.

Recommendations

33. The recommendations stem from the findings and conclusions of this evaluation. The recommendations were developed by the evaluation team in consultation with the in-country reference group, the Humanitarian Coordinator and IASC Operational and Advocacy Group (OPAG) and Emergency Directors Group (EDG). The entity responsible for leading the implementation of each recommendation is indicated, but it should be noted that recommendations categorized as “Ethiopia-specific” are also relevant to the system.

Recommendations	Responsible entity
System-wide recommendations ²	
1. Provide guidance to HCT/UNCTs for developing a coherent UN system-wide country strategy. This is essential to fostering clear and effective dialogue with all parties to a conflict and ensuring a common approach leveraging the collective weight and authority of the system. Key to this approach is the alignment of pre-existing UN programs with core humanitarian principles and protection standards regardless of mandates. The strategy should include clear thresholds (red lines) for a principled response.	ERC, IASC Principals, EDG
2. Ensure real-time monitoring of HC/HCT performance in rapidly evolving and/or complex contexts such as non-international armed conflicts. This is essential for the timely identification and resolution of any emergent leadership or coordination deficits. Furthermore, consider the appointment of a dedicated Humanitarian Coordinator early in the response when the Resident Coordinator may not be optimally positioned to lead the humanitarian response. The 2009 HC Terms of Reference should be updated to include leadership responsibilities in chairing the HCT and establishing mutual accountability.	ERC, IASC Principals, EDG
3. Ensure a connection between political-level negotiations on issues related to humanitarian access and the response at the operational level. Ensure that agreements made at senior political levels are transparent, consistent with humanitarian norms and known at the operational level.	ERC and IASC Principals, HC/RC and HCT
Ethiopia-specific recommendations	
4. Enhance the effectiveness of the Humanitarian Country Team. Consider implementing structural changes, such as reducing the HCT’s size or forming a more strategic core group. This can increase focus and decision-making efficiency. Consider reviewing the format and procedures of the HCT meetings to ensure focus on concrete outcomes and the implementation of agreements to promote accountability.	HC/RC, HCT members
5. Ensure responses to crises prioritize the centrality of protection, including support to affected communities facing serious rights violations, such as CRSV. Consider establishing and using cross-cluster analysis to ensure a coherent, balanced response and to identify gaps and discrepancies in data reported by each cluster.	HC/RC, HCT, ICCG
6. Enhance the approaches to gathering, processing and disseminating humanitarian data to improve the accuracy and relevance of the information used in humanitarian programming. These approaches should focus on adopting independent methods by humanitarian agencies to collect and analyse disaggregated data, ensuring that the insights gained are accurate and tailored to the specific needs and circumstances of the communities affected by crises.	HC/RC, HCT, ICCG

² For detailed recommendations on System Wide Scale-Up Activations, please refer to the areas for consideration in the IASC paper ‘From Protocol to Reality: Lessons for Scaling up Humanitarian Responses,’ 2024.

Recommendations	Responsible entity
7. Develop a comprehensive advocacy strategy for principled humanitarian action that goes beyond the binary choice between public messaging and discreet diplomacy. It should promote the centrality of protection and target all parties to the conflict to increase awareness of respect for humanitarian norms and principles.	HC/RC, HCT, ICCG
8. Enhance preparedness and the implementation of a principled response during the armed conflict in Ethiopia through the following steps:	IASC, HC/RC, HCT
<ul style="list-style-type: none"> Routinely engage in independent, systematic conflict analysis and connect political/conflict scenarios with preparedness and planning. 	HC/RC, HCT
<ul style="list-style-type: none"> (Re)assigning cluster leadership responsibilities to ensure accountability for cluster leadership and delivering on commitments.³ And elevating sub-clusters or areas of responsibilities if they require a large-scale response corresponding to the prevailing context. 	HC/RC, HCT, CLAs
<ul style="list-style-type: none"> Activate the Surveillance System for Attacks on Health Care as a standard feature and use the data analysis to underpin advocacy and operations. 	HCT/WHO
<ul style="list-style-type: none"> Ensure that any collective agreement signed with parties to the conflict undergoes a legal review to appropriately account for relevant norms of international human rights and international humanitarian law. 	HC/RC, OCHA
<ul style="list-style-type: none"> Ensure that as part of the duty of care, staff security arrangements and coordination correspond to the scale, urgency and level of incidents and consider the specific vulnerabilities of local staff in armed conflict. The position of designated official should be held by a UN representative who is directly involved in or overseeing the humanitarian response. Ensure appropriate oversight of these security arrangements at the global level. 	HC/RC, ERC, UNSMS

³ This recommendation matches recommendation #4a of the independent review of the humanitarian response to internal displacement, which recommends that “the national or subnational level enabling best-placed operational organizations to lead clusters, or alternative coordination models, rather than global leads automatically and without regard to capacity.” Lewis Sida et al., ‘Independent Review of the Humanitarian Response to Internal Displacement’, 2024.

2 Introduction

35. An Inter-Agency Humanitarian Evaluation (IAHE) is an independent assessment of the results of the collective humanitarian response by member organizations of the Inter-Agency Standing Committee (IASC). They are automatically triggered when the IASC has decided to activate the IASC Scale-Up protocols. The IASC Scale-Up activation is a formal mechanism for the mobilization of system-wide capacities and resources beyond standard levels. IAHEs look at planned collective results in terms of how well they have been achieved and help the humanitarian community improve aid effectiveness to ultimately better assist affected people. As such, IAHEs also evaluate the effectiveness of the IASC Scale-Up mechanism. They are not an in-depth evaluation of any one sector or of the performance of a specific organization.

2.1 Background

2.1.1 Evaluation purpose and scope

36. On 28 April 2021, the Emergency Relief Coordinator and IASC Principals designated a Humanitarian System-Wide Scale-Up for northern Ethiopia. Pursuant to IASC protocols, Scale-Up responses have to be evaluated within nine to twelve months of their declaration; the Emergency Relief Coordinator launched this IAHE in May 2022.
37. The purpose of this evaluation is twofold. First, it enables learning for the humanitarian system by providing valuable lessons for future IASC Scale-Up activations and for the humanitarian responses under conditions similar to those in northern Ethiopia. Second, it ensures accountability of the IASC organizations towards both affected populations and donors.
38. Geographically, the evaluation covers the humanitarian response in Afar, Amhara and Tigray regions affected by the conflict. The temporal scope concerns the period from the Scale-Up activation until the start of the data collection for this evaluation on 1 April 2023. It also looks at the preparedness, planning and actions taken six months prior to the Scale-Up activation, i.e., as of the start of the conflict in early November 2020. Substantively, the evaluation examines whether the results of the collective action met the humanitarian needs of people affected by the conflict in northern Ethiopia.

2.1.2 Objectives

39. The main objective of this evaluation is to provide an independent assessment of the collective action of IASC member organizations to meet the humanitarian needs of people affected by the conflict in northern Ethiopia. More specifically, the aim is to examine the extent to which organizations strategized and worked collectively to maximize the humanitarian outcomes of their actions. This includes:
 - Determining the extent to which **the IASC member agencies' collective preparedness and response** actions were relevant, coherent and effective in addressing the humanitarian needs.
 - **Assessing the results achieved and outcomes generated by the collective response.** Severely limited humanitarian access and availability of reliable and usable data in this response make the exercise of describing, comparing and contrasting precise activities, outputs and outcomes against targets and objectives from a collective angle futile. The evaluation considers the overall response in terms of what it managed to deliver and to what extent the aid delivered reached people in need.
 - Analysing to what extent the IASC member agencies' **efforts to overcome bureaucratic and administrative impediments and other hurdles** to access were relevant, coherent and effective. The evaluation examines to what degree collective and/or coordinated efforts were undertaken in terms

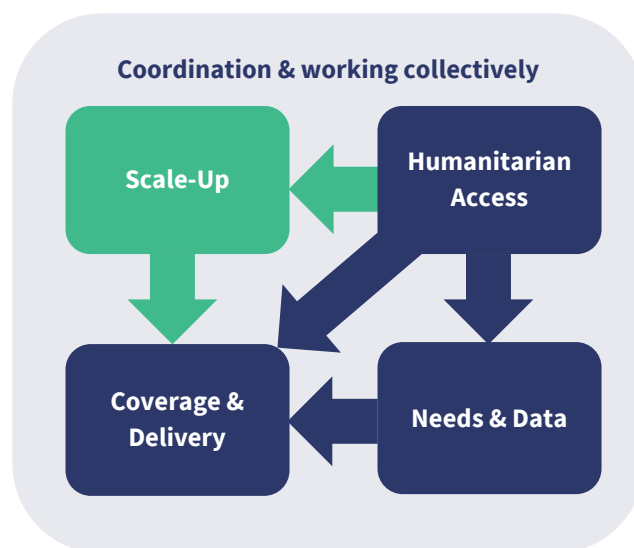
of developing access strategies and/or taking practical steps, undertaking advocacy and humanitarian diplomacy and negotiating access based on human rights and international humanitarian law.

- **Providing knowledge about the relevance and effectiveness of the Scale-Up activation** for the response in northern Ethiopia and contributing to learning across different Scale-Up activations. The evaluation has been carried out in close collaboration with a separate detailed review of the steps taken following the decision to activate the Scale-Up protocols.
- **Identifying good practices, opportunities and lessons learned** that will illustrate how collective response mechanisms might be strengthened or refigured to contribute to a relevant, coherent and effective response. The evaluation highlights efforts demonstrating leadership and courage as traits or behaviours that correspond to humanitarian values and principles.

2.1.3 *Key lines of inquiry*

40. In the inception phase, several of the key evaluation questions as suggested by the terms of reference were refined and rearranged along **five specific lines of inquiry: Scale-Up, Humanitarian Access, Coordination, Needs & Data and Coverage & Delivery**. These five lines of inquiry are closely interconnected and overlapping, as illustrated by Figure 1.
41. Scale-Up is dependent on humanitarian access and, in turn, has an influence on effective coverage and delivery. Similarly, access and freedom of movement for organizations are prerequisites to collect data on needs and delivery. There are overarching questions around coordination and working collectively for all lines of inquiry. The steps and measures called for by the IASC Scale-Up designation require preparedness and collective leadership support. Unhindered humanitarian access requires coordinated efforts based on humanitarian principles. A coordinated approach to data collection is also important in view of reducing gaps in data and delivery. In assessing coordination within the humanitarian response to northern Ethiopia, the evaluation particularly considers the functioning of mechanisms such as the Humanitarian Country Team or Inter-Cluster Coordination Group, which are key coordination forums for developing collective strategies and agreeing on common plans and priorities. Consideration will also be made of the structures that were set up to coordinate aid efforts for northern Ethiopia. To be clear, reviewing collective action in terms of coverage and delivery is not the same as looking at how individual agencies' activities add up, but it assesses the extent to which agencies' actions are underpinned by a collective strategy and plans.

Figure 1: Lines of inquiry



2.1.4 Evaluation questions

42. The evaluation questions have been grouped along the five lines of inquiry.⁴ The questions are set out in Table 1, together with an indication of the associated evaluation criteria. It has used the criteria of the Development Assistance Committee of the Organization for Economic Co-operation and Development (OECD/DAC), the United Nations Evaluation Group and IAHE evaluation guidelines.⁵ The criterion of quality considers the degree to which the collective response is/has been informed by humanitarian principles and human rights, meets global norms and standards (including equitable, inclusive participation and access to all services, especially for women and girls, people with disabilities and minorities) and contributes to strengthening local capacity and systems. The full evaluation matrix with indicators, methods of verification and data sources can be found in annex 2.

Table 1: Evaluation questions

Line of inquiry	Key evaluation questions	Criteria
Scale-Up: To what extent were the objectives of the IASC Scale-Up met?	Were IASC/HCT member agencies able to anticipate the crisis, the changes in the context and adjust their capacities to respond?	Relevance
	To what extent did collective scenario planning and preparations, especially in the period November 2020–April 2021, take place and adapt to a large-scale response?	Relevance
	To what extent is the collective response adapting to more recent changes in the context in northern Ethiopia?	Relevance
	Has the Scale-Up activation and its protocols/guidance contributed to making the response more coherent? How? If not, why not?	Coherence

⁴ It should be noted that the evaluation questions were grouped slightly differently in the Inception Phase. In this report, some evaluation questions that overlapped two lines of inquiry were moved to align them with the narrative. To allow for coherence within this report, Table 1 has been adapted accordingly and hence differs from a similar table provided in the Inception Report.

⁵ Understood in line with OECD-DAC, as adapted for humanitarian evaluations. See ALNAP, 'Evaluating Humanitarian Action Using the OECD-DAC Criteria. An ALNAP Guide for Humanitarian Agencies', 2006, <https://www.alnap.org/system/files/content/resource/files/main/eha-2006.pdf>.

	Has the Scale-Up led to an increase in capacity to respond (including the UN/HCT's capacity to lead)?	Relevance
	What role and function did leadership and leadership arrangements play in the Scale-Up?	Effectiveness
Humanitarian Access: To what extent did the collective response support HC-led efforts to obtain free, timely, safe and unimpeded humanitarian access?	To what extent were HCT members effective in their efforts to negotiate humanitarian access? Did they exchange on what worked and what did not work?	Effectiveness Quality
	To what extent were all HCT participants involved and aligned in these coordination efforts to open access?	Coherence
	To what extent did IASC/HCT members put in place red lines, and did they coordinate on these red lines?	Quality
	To what extent did HCT members and other (non-UN) humanitarian agencies working in northern Ethiopia follow and coordinate on the "saving lives together framework"?	Quality
	To what extent did IASC/HCT member organizations coordinate their efforts responding to the humanitarian needs generally and specifically vis-à-vis the range of imposed restrictions, for example in terms of developing collective strategies to open up access at all levels?	
Coordination: To what extent did the response see collective leadership and coordination (incl. between local, regional and national levels, between clusters and between agencies)?	How well did the way in which the collective response was organized in Ethiopia function in view of ensuring a coherence?	Coherence
	Did the HCT function in view of ensuring coherence?	Coherence
	What was the role of donors on the HCT in working towards a coherent response?	Coherence
Needs & Data: To what extent did the collective response collect, manage and share data reflecting the situation on the ground?	What collective efforts were put in place to undertake needs assessments and analyses?	Relevance
	To what extent did the response take the specific needs and priorities of affected people in the three northern regions into account?	Relevance Quality
	To what extent did HCT members collect, manage and share humanitarian data reflecting the situation on the ground? Did they use alternative data sources in view of the restrictions and known data gaps?	Effectiveness
Delivery/ Coverage: To what extent did the collective response effectively deliver quality humanitarian assistance and protection?	To what extent were HCT members effective in their efforts to respond to needs in the three northern regions?	Effectiveness Coherence
	To what extent did agencies use public information campaigns and external communications to highlight the non-partisan identity and impartial character of humanitarian aid? If so, did they measure the success of such efforts?	Quality
	To what extent did HCT members apply the four humanitarian principles and prioritize the principle that aid should be given first to people most in need?	Effectiveness
	What evidence is there of collective efforts to put humanitarian principles, protection, AAP, PSEA gender, at the centre of the response? What practical actions were taken? To what extent are AAP feedback mechanisms effective?	Quality Effectiveness
	How did agencies manage to conduct required (inclusive) consultations and inform programming despite certain constraints? What worked, what did not and what can be learned?	Relevance
	To what extent has the HCT members' collective response been able to ensure equitable, inclusive participation and access to all services, especially for women and girls, children, people with disabilities and minorities?	Quality
	Did the response consider equally the rights and needs of women, girls, men and boys and other vulnerable groups, including children, people with disabilities, the elderly and minority groups affected by the conflict?	Quality
	To what extent was the response provided in a conflict-sensitive way/mindful of local conflict dynamics?	Quality
	To what extent were various local response capacities utilized and integrated at coordination and response level?	Coherence
	To what extent has the collective response generated significant positive or negative, intended or unintended effects for all people in need, including those with special needs?	Effectiveness

2.2 Methodology

2.2.1 *Conceptual framework*

43. The conceptual framework in Figure 2 summarizes the utilization-focused evaluation approach, including data collection and analysis methods, evaluation criteria and benchmarks (i.e., the benchmarks that the evaluation team has considered in making its evaluative judgements) and evaluation outcome.

2.2.2 *Process*

44. An overview of the evaluation process, including indications on the methods for data collection and analysis can be found in Figure 3, with a more detailed account of the methods and tools used given in annex 6. Figure 4 provides an overview of all respondents for the key informant interviews, focus group discussions and triangulation survey.
45. Focus group discussions involved individuals whose households received assistance; individuals whose households did not receive assistance; male and female heads of households; individuals over the age of 65, both male and female; individuals aged 15–29, male and female, including boys and girls in their mid- to late teens who are in displacement camps alone without their parents/families; individuals with disabilities or chronic mental or physical illnesses; and ethnic minorities (given the ethnic diversity among conflict-affected internally displaced persons).

Figure 2: Conceptual framework

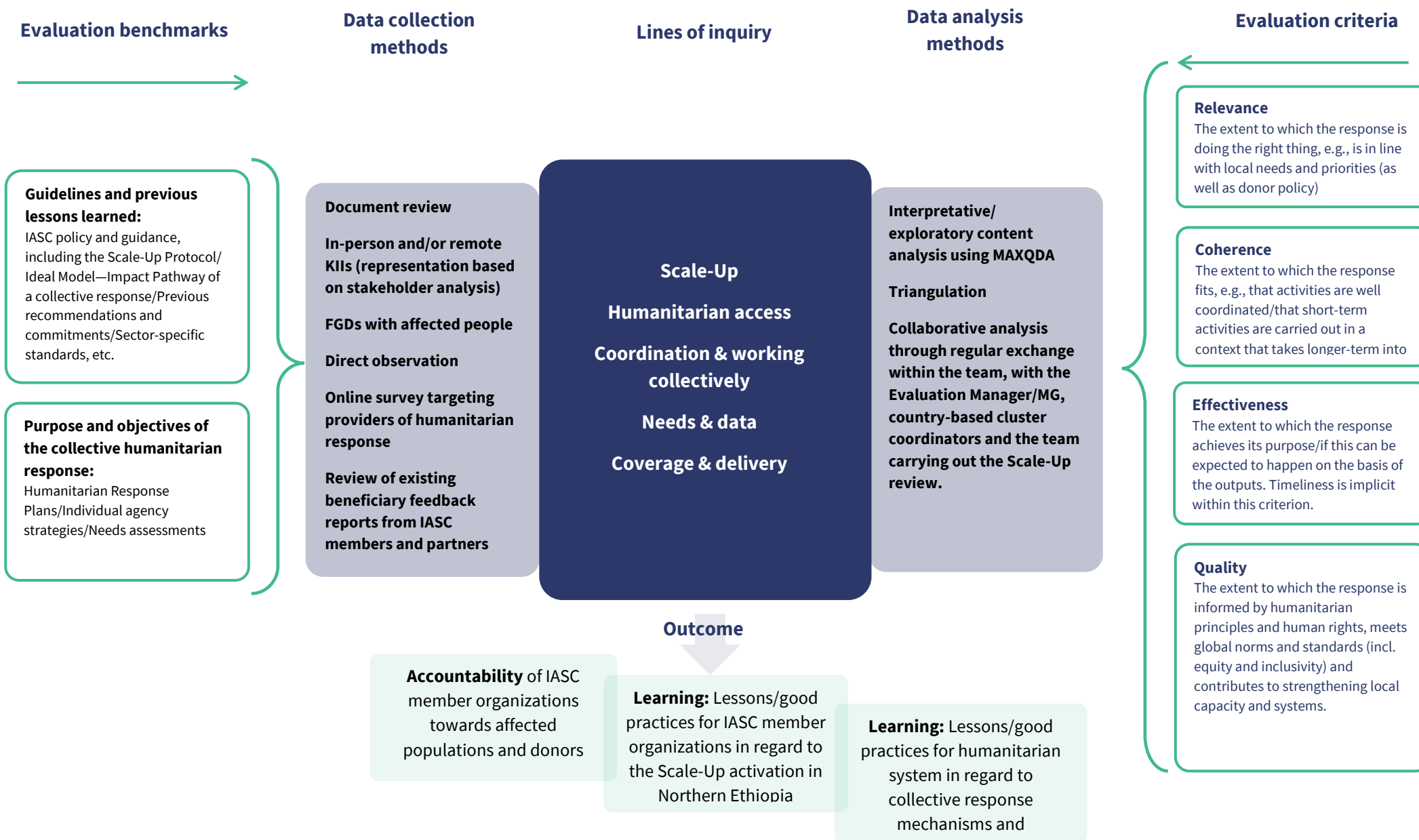


Figure 3: Overview of Evaluation process and methods

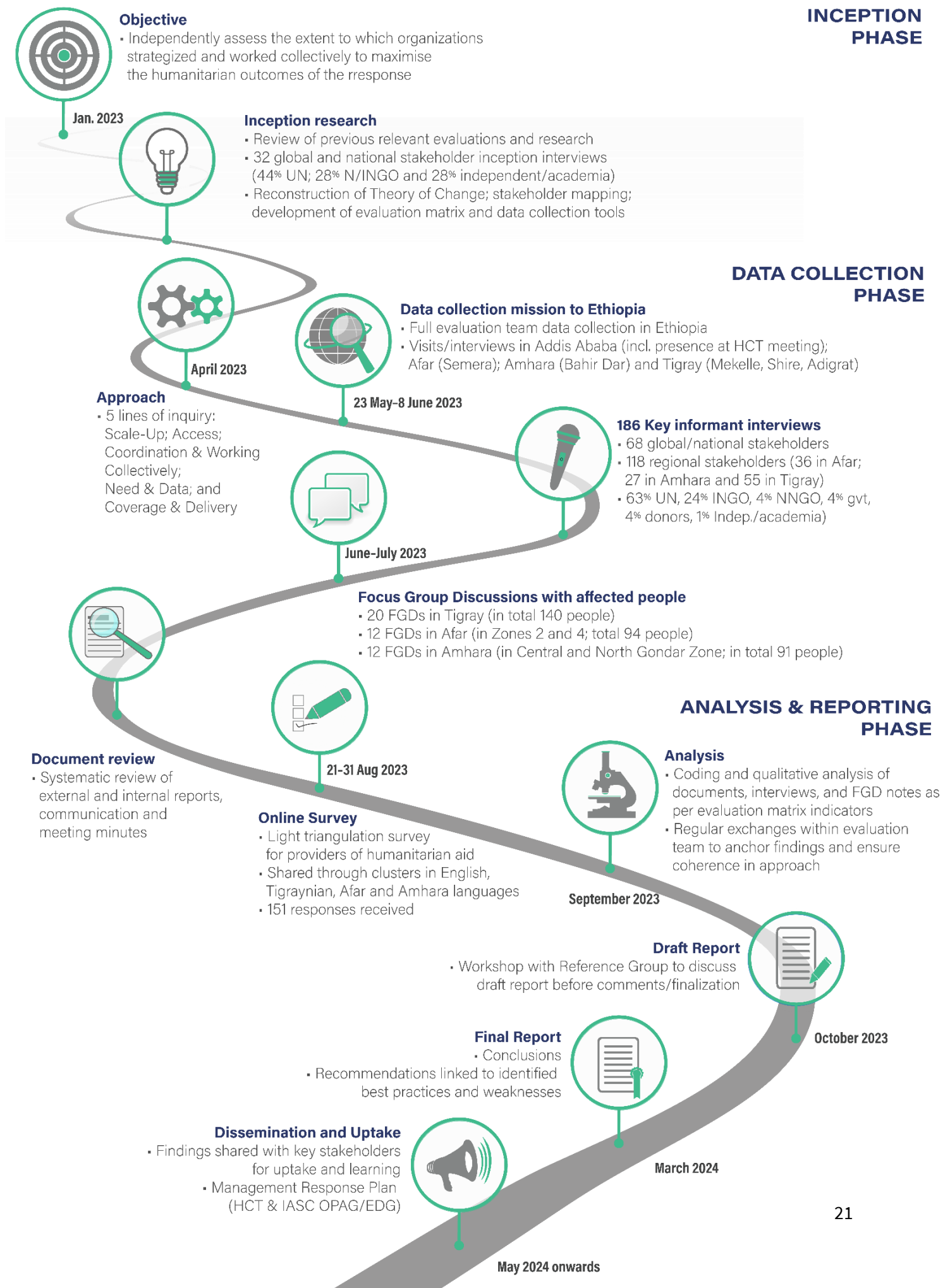
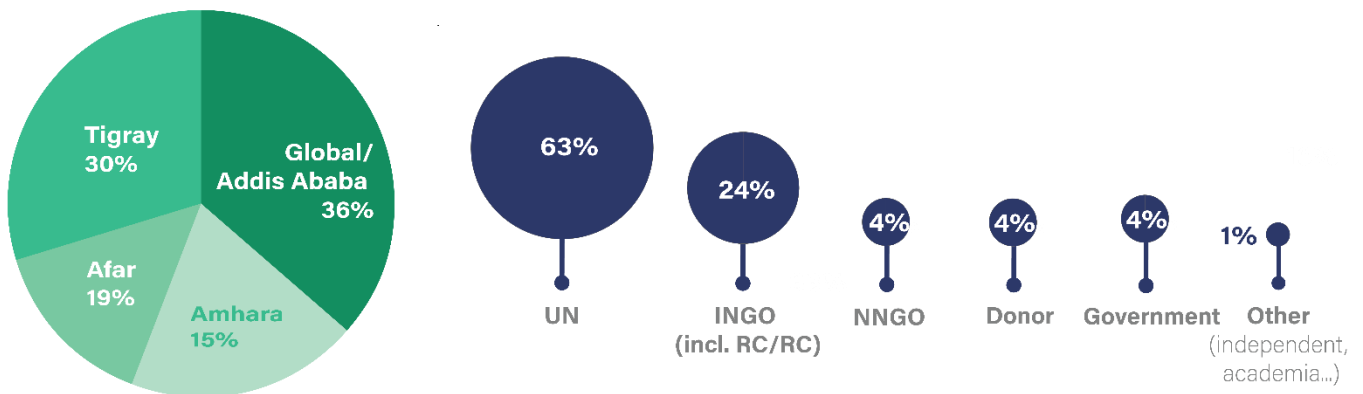
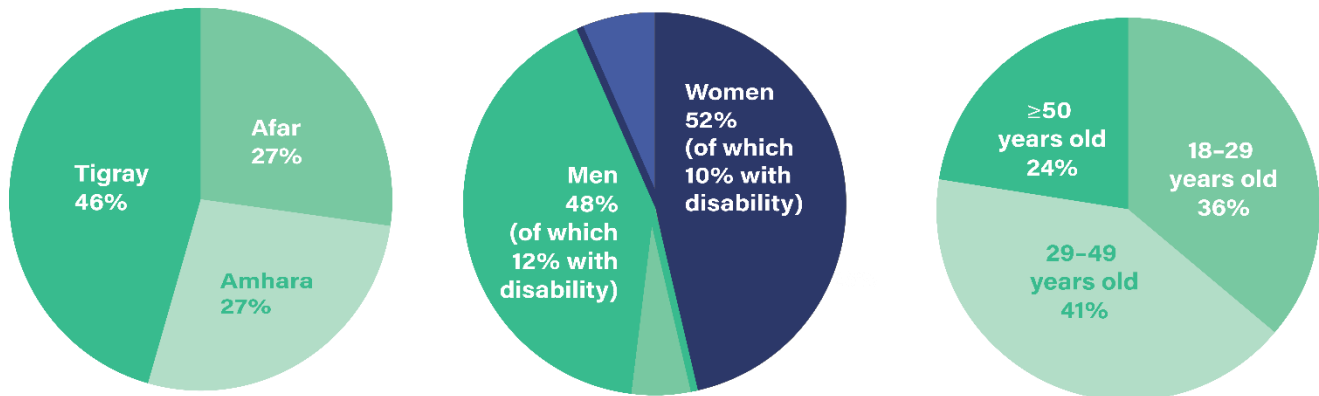


Figure 4: Overview of key informants and respondents

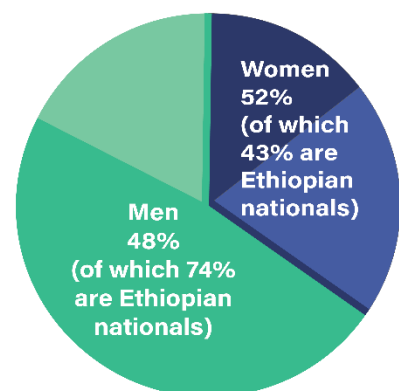
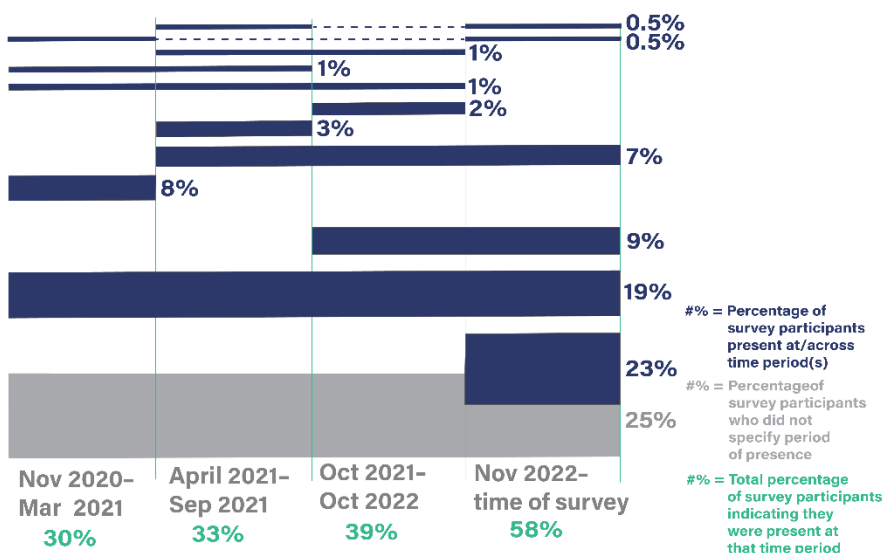
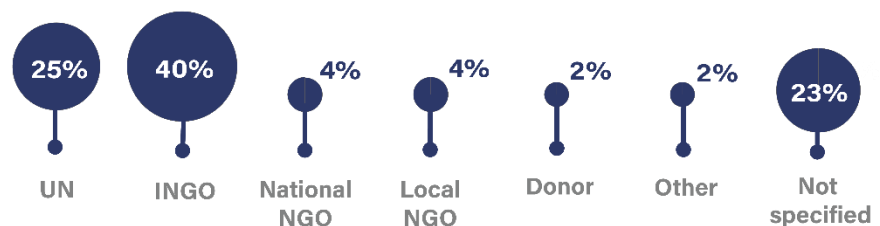
186 KEY INFORMANT INTERVIEWEES:



325 FOCUS GROUP DISCUSSION PARTICIPANTS:



151 SURVEY PARTICIPANTS:



2.2.3 Limitations

46. The limitations to the methodology and its implementation, as well as measures taken to mitigate them, are detailed in Table 2. There is one more important and overarching observation to note with regard to the limitations that this evaluation had to consider. As standard practice for an evaluation, the terms of reference describe the key questions that the evaluation should address. The terms of reference for IAHes are largely similar no matter the context, although, for this context, the management group made some adjustments in the evaluation questions, as it was clear that the actual implementation of the response met with extreme challenges. While this adjustment went some way to take the specifics of the context into account, it did not fully address the issue of the specific characteristics of working in the armed conflict. Priorities such as accountability to affected people, localization, gender and inclusion are given as much importance in the terms of reference as humanitarian principles and protection. Humanitarian access, staff security and the relevance of working in an international humanitarian law framework are not even mentioned. These latter issues would take precedence in terms of working in a context of an armed conflict.
47. Against this background, the evidence is robust enough to ensure a credible evaluation.

Table 2: Limitations and mitigation measures

Limitation	Mitigation
Highly politicized environment and distrust. Lack of written records of sensitive discussions (e.g., on access) and operational decisions and the reluctance of senior staff/stakeholders to be explicit about how such decisions were reached.	<ul style="list-style-type: none"> - The Evaluation Manager/MG supported the evaluation team in ensuring that relevant actors understood and recognized this evaluation exercise. - The team clarified the confidentiality measures of the evaluation with each key informant and FGD participant. - The team approached former members of the UNCT/HCT for interviews to form as complete a picture as possible. - The evaluation team emphasized its independence throughout the process, including in presenting the final report.
The team was not able to interview most senior levels in the humanitarian domain to understand the full picture of the politicization of the response.	<ul style="list-style-type: none"> - The team raised this issue several times during the data collection and analysis phase.
The workload of busy field staff limited the time and attention they gave to the evaluation.	<ul style="list-style-type: none"> - The learning purpose of the evaluation was emphasized. - The evaluation team endeavoured to coordinate with ongoing evaluations, especially the UNICEF L3 evaluation and harness pre-existing information, especially from the UNHCR L3 evaluation. - The team established an appropriate scope and number of interviews. - The evaluation team consulted concerned stakeholders to find suitable time frames for interviews/workshops. Follow-up contacts by telephone or videoconference were frequently arranged.
Gaps in available data in terms of quality and disaggregation and lack of comparability across HCT partner reports and information systems or lack of data due to inability to access areas.	<ul style="list-style-type: none"> - Data availability/accessibility was assessed in the inception phase and the evaluation matrix adapted accordingly. Data for different years were compared to discern trends, but there are variations in the indicators and geographic areas that make such a comparison less than watertight. - Previous evaluation reports served as relevant proxy sources of information and data. - Where only anecdotal evidence or data was available, this was triangulated to the extent possible with the limitation transparently recognized in the final report.
Lack of clear programme goals against which to assess results.	<ul style="list-style-type: none"> - The question of effectiveness was not understood as a question on whether agencies achieved set results/targets but what they managed to do given the circumstances and whether they did their utmost to overcome the obstacles.
As in every emergency response, staff turnover has been high. It was not always possible to track staff key informants from earlier phases of the response.	<ul style="list-style-type: none"> - The team sought opportunities for face-to-face meetings or remote phone/video interviews with relevant stakeholders where tracing their new duty station was possible. The large professional network of the evaluation team proved helpful in connecting with former staff.

2.2.4 Structure of the report

48. Following this introduction and overview of the methodology, a section on the country context outlines the causes of the northern Ethiopia crisis and the structure of the humanitarian response. The evaluation findings can be found in section 3, which is structured along the five lines of inquiry and looks at each evaluation question as set out in the evaluation matrix and the inception report. A summary of findings, as well as relevant lessons to be learned/best practices going forward, is provided for each line of inquiry. The last section contains conclusions followed by recommendations.
49. Quotations from respondents are used throughout the text to illustrate or extend points. The evaluation team has chosen these particular quotations based on a criterion of representativity, i.e., they reflect opinions that were (1) expressed by a majority of those respondents who voiced an opinion on a particular matter or (2) made with sufficient frequency to indicate a pattern meriting mention in the report in view of the indicators and the evaluative judgements based therein. Where the analysis revealed a pattern of diverging opinions, these are accounted for in the selection of quotes. Where a significant divergence of opinion could be seen between different stakeholder groups, this fact is clarified in the text.

2.3 Country Context

2.3.1 General

50. Despite high economic growth rates in recent years, high levels of poverty, inequality and unemployment persist in Ethiopia. The country has further experienced a range of humanitarian crises throughout past decades. In all major crises, international aid actors have worked under the leadership of and in partnership with the Government to support people in need. In the mid-1980s, Ethiopia experienced a severe famine that resulted in the deaths of an estimated one million people despite close global attention. Since then, the country has periodically faced droughts, particularly severe ones in 2015 and 2017, and the current drought affecting the whole Horn of Africa has been characterized as the worst in 40 years.⁶ In addition to climatic shocks, violent conflict affected Ethiopians throughout the country's recent history. During the 1990s, the country went through a civil war between the Government, led by the Ethiopian People's Revolutionary Democratic Front, and several rebel groups, including the Tigray People's Liberation Front and the Oromo Liberation Front. In the years 1998–2000, Ethiopia also fought a deadly border war with its neighbour, Eritrea, which only formally ended in 2018, a step for which Ethiopia's Prime Minister Abiy Ahmed received the Nobel Peace Prize. To this day, many of the regions in Ethiopia experience some form of conflict, intercommunal tension or violence due to competing claims over resources, land rights, administrative boundaries and political influence, with hotspots in Afar, Amhara, Benishangul Gumuz, Oromia and Tigray.
51. In addition to internal conflicts and the displacement they caused, Ethiopia is also a major destination for refugees fleeing conflicts in neighbouring Eritrea, Somalia, South Sudan and Sudan. The UN and international partners worked with the Government to implement and improve its response, particularly its refugee management system. Ethiopia was an early leader in pursuing the Comprehensive Refugee Response Framework, which was officially launched in Ethiopia on 28 November 2017. It also adopted a new Refugee Proclamation (Proclamation No. 1110/2019) in

⁶ OCHA, 'Horn of Africa Drought, Regional Humanitarian Overview and Call to Action', September 2022, 3.

January 2019, granting a wide-ranging set of additional rights to refugees, in line with the Global Compact on Refugees.

52. Beyond the humanitarian sphere, Ethiopia is a crucial actor in the African Union, which it hosts, and also a major contributor to UN peacekeeping missions, including in several African countries. As for the UN, its presence in Addis Ababa is among the largest in the world. Ethiopia's UN Country Team comprises representatives of 28 UN funds, programmes and specialized agencies. Specifically, Addis Ababa is home to the UN Economic Commission for Africa, the Office of the UN Special Representative for the Horn of Africa, the UN liaison office with the African Union and the recently established international intergovernmental Organization of Southern Cooperation.

2.3.2 *Conflict and needs in northern Ethiopia*

53. Fighting initially broke out in Tigray in early November 2020 between the Tigray People's Liberation Front on one side and the Ethiopian National Defense Forces, the Eritrean Defence Forces and allied regional special forces on the other.⁷ As of July 2021, Tigrayan forces launched offensives into the Afar and Amhara regions. These continued well into late in the same year, including an offensive towards Addis Ababa. As both Ethiopia and Eritrea are State parties to the four Geneva Conventions, all parties to the conflict are bound by Common Article 3 to the Geneva Conventions as well as by customary international humanitarian law. Ethiopia is also bound by Additional Protocol II.⁸
54. In December 2021, Tigrayan forces announced their retreat from both regions, prompting the Federal Government to announce a halt of the ENDF's advance. Despite this, hostilities of varying degrees continued throughout 2022, particularly around the Afar-Tigray and Amhara-Tigray regional borders, with Afar and Amhara regional forces backed by the ENDF. On 24 March 2022, the Federal Government announced an "indefinite humanitarian truce effective immediately" in Tigray; fighting continued in the other northern regions. The truce broke in August 2022, and hostilities rapidly escalated. On 2 November 2022, the federal and Tigray authorities declared a cessation of hostilities, which led to a reduction of the armed conflict in the region. Amhara regional authorities were notably absent from the negotiations, causing unrest in the region that continued at the time of writing and was further heightened by historical tensions between the Amhara and Oromia regions.⁹
55. There are no reliable numbers on the number of people killed in the armed conflict. Estimations by scientists and researchers vary from 311,000 to 808,000 people.¹⁰ They have also provided a breakdown of the causes of death as follows: approximately 10 per cent of the number of deaths is due to massacres, bomb impacts and other killings, 30 per cent is due to the total collapse of the health-care system and 60 per cent is due to severe food shortages.¹¹ The massive destruction of health centres and hospitals and the targeting of other civilian infrastructure has been detailed in a

⁷ ACAPS, 'Ethiopia—Conflict in Tigray—Thematic Report 22 December 2020'. See also OCHA, 'Northern Ethiopia Response Plan', May 2021.

⁸ Human Rights Council, 'A/HRC/51/46. Annex II—Applicable Law', 2022.

⁹ International Crisis Group, 'CrisisWatch. Tracking Conflict Worldwide—Ethiopia', n.d., <https://www.crisisgroup.org/crisiswatch/database?location%5b%5d=116>.

¹⁰ Jan Nyssen, 'Documenting the Civilian Victims of the Tigray War', 19 January 2022, https://www.researchgate.net/profile/Jan-Nyssen/publication/367272415_Documenting_the_civilian_victims_of_the_Tigray_war/links/63dce751c97bd76a82613a5ae/Docum. See also 'War in Tigray May Have Killed 600,000 People, Peace Mediator Says', *Financial Times*, 15 January 2023; 'Ethiopia's Forgotten War Is the Deadliest of the 21st Century, with Around 600,000 Civilian Deaths', *El Pais*, 23 January 2023.

¹¹ Nyssen, 'Documenting the Civilian Victims of the Tigray War'.

report issued by the health cluster team noting that 78 per cent of health posts, 72 per cent of health centres and 80 per cent of hospitals have been destroyed.¹²

56. While the exact number of people killed is unknown, there is ample evidence that the armed conflict saw mass killings, widespread and systematic sexual violence against women and girls, deliberate starvation, forced displacement and large-scale arbitrary detentions. Many of these crimes are war crimes and crimes against humanity.¹³ The UN Human Rights Council-mandated International Commission of Human Rights Experts on Ethiopia (ICHREE) submitted a first report with its initial findings to the Human Rights Council in September 2022.¹⁴ It came after a UN Human Rights Office (OHCHR) and Ethiopian Human Rights Commission report published in November 2021.¹⁵
57. These reports highlight the widespread scale of conflict-related sexual violence (CRSV). CRSV refers to rape, sexual slavery, forced prostitution, forced pregnancy, forced abortion, enforced sterilization, forced marriage and any other form of sexual violence of comparable gravity perpetrated against women, men, girls or boys that is directly or indirectly linked to a conflict.¹⁶ CRSV, as a subset of sexual and gender-based violence (SGBV), is a better-suited term for the situation in northern Ethiopia. However, due to the sector's common use of the term SGBV, this report periodically refers to SGBV as interchangeable with CRSV.¹⁷
58. With the conflict in Tigray expanding and intensifying, humanitarian needs surged, notably regarding protection, food security and nutrition, but also health, water, sanitation and hygiene and shelter linked to mass internal displacement. Figure 5 and Tables 3 and 4 reflect the estimations of the number of people in need due to the conflict in northern Ethiopia. As discussed in more detail in section 3.4, all data provided with regard to the humanitarian response in Ethiopia should be understood as indicative of trends only, given that the data available in the country is widely recognized as being limited and/or unreliable.

¹² Health Cluster Team, Tigray, Ethiopia, 'Deafening Silence as Thousands Perish Due to Human-Made Humanitarian Catastrophe—No Food, No Water, No Medicine ...', Tigray, Ethiopia', 2022.

¹³ UN, 'ID: Commission of Human Rights Experts on Ethiopia—18th Meeting, 51st Regular Session of Human Rights Council', UN Web TV, 22 September 2022, <https://media.un.org/en/asset/k1b/k1bsmioeaz>.

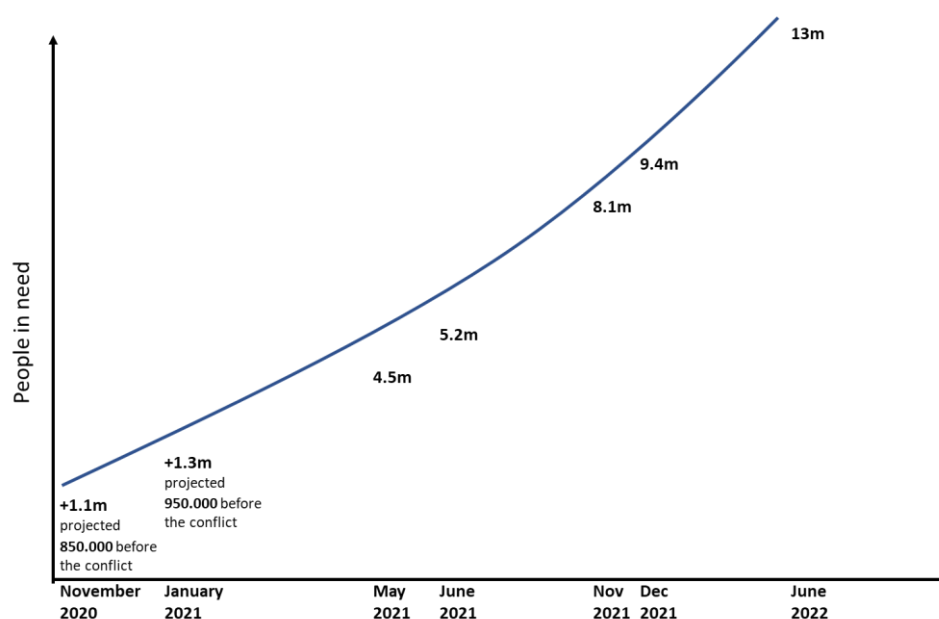
¹⁴ International Commission of Human Rights Experts on Ethiopia, 'Report of the International Commission of Human Rights Experts on Ethiopia. A/HRC/51/46 (Advance Unedited Version)' (Human Rights Council, 19 September 2022).

¹⁵ Ethiopian Human Rights Commission and OHCHR, 'Joint Investigation into Alleged Violations of International Human Rights, Humanitarian and Refugee Law Committed by All Parties to the Conflict in the Tigray Region of the Federal Democratic Republic of Ethiopia', 3 November 2021.

¹⁶ UN, 'Conflict-Related Sexual Violence. Report of the Secretary-General (S/2019/280)', 29 March 2019, <https://digitallibrary.un.org/record/3799661?ln=en#record-files-collapse-header>.

¹⁷ In general, when this report talks about the crime we will use CRSV, when it covers the response it refers mostly to gender-based violence.

Figure 5: Number of people in need in Northern Ethiopia*



[Compiled by the evaluation team using OCHA situation reports for Northern Ethiopia/Tigray. *Count includes Afar and Amhara only as of November 2021.]

Table 3: Estimated number of IDPs due to conflict in Afar, Amhara and Tigray

Period of the assessment	No. IDPs	Remarks
December 2020–January 2021	131,590	Data not fully available for the period.
February 2021	423,651	
March–April 2021	1,715,176	
June–July 2021	2,107,185	
December 2021–January 2022	2,452,077	
August–September 2022	31,182 (Afar) 510,625 (Amhara)	Tigray: no comprehensive data available

[Table developed by the evaluation team using the Ethiopian national displacement report 14, published in December 2022 by IOM (March–April 2021: Emergency Site Assessment round 5, June–July 2021: round 7, Dec 2021–January 2022: round 9).]

59. The May and November 2021 editions of the northern Ethiopia-specific response plans¹⁸ describe the people in need per sector and type of population, as shown in Table 4, for Tigray only.

Table 4: Estimated number of people in need (PIN) due to conflict in Tigray 2021

Sector	PIN (May 2021)	Revised PIN (Nov 2021)	% children	% women	% men	% people with disabilities
Food	5.2M	5.2M	50%	28%	22%	18%
WASH	4.5M	5.2M	50%	28%	22%	18%
Agriculture	2.0M	3.7M	49%	27%	24%	18%
ESNFI	3.2M	4.2M	42%	28%	31%	17%
CCCM	1.8M	1.8M	43%	28%	28%	5%
Health	3.8M	3.9M	49%	28%	23%	18%
Nutrition	1.6M	1.6M	66%	34%	0%	0%
Education	1.4M	1.4M	96%	2%	2%	14%
Protection	2.7M	3.0M	32%	52%	14%	3%

[Table developed by the evaluation team using the May and November 2021 editions of the Ethiopia-specific HRP.]

While there was no specific response plan for northern Ethiopia in 2022, Tables 5 and 6 present the number of People in Need and People Targeted in northern Ethiopia for 2022, split by regions and sectors, based on the OCHA northern Ethiopia Response Dashboard: January–December 2022.

Table 5: People in need and people targeted, Northern Ethiopia 2022

2022	People in need	People targeted
Northern Ethiopia	13.0M	12.6M
Tigray	5.3M	5.2M
Afar	1.3M	1.1M
Amhara	6.4M	6.0M

[Table developed by the evaluation team using the OCHA Northern Ethiopia Response Dashboard; January–December 2022.]

Table 6: People targeted by regions and sectors in 2022

2022 People targeted	Tigray	Afar	Amhara
Agriculture	1.9M	0.58M	2.6M
CCCM	0.43M	0.16M	0.81M
Education	0.45M	0.15M	0.26M
ESNFI	1.1M	0.54M	0.77M
Food	5.3M	0.99M	5.8M
Health	2.0M	0.53M	1.6M
Nutrition	0.86M	0.26M	0.53M
WASH	2.0M	0.9M	0.4M
Protection	1.9M	0.19M	0.55M

[Table developed by the valuation team using the OCHA Northern Ethiopia Response Dashboard; January–December 2022.]

¹⁸ There was a specific response plan for Northern Ethiopia in 2021, but as of 2022, the humanitarian response in Afar, Amhara and Tigray is integrated into the countrywide Humanitarian Response Plan, and hence there are no region-specific figures/targets.

60. As shown in Table 4, the northern Ethiopia Response Plan estimated that some 5.2 million people were in need of aid in 2021.¹⁹ This number is the number of people having food needs. However, as noted, due to the severity of the violence against civilians, protection was at least equally important, although not reflected as such by the numbers quoted by the response plan. As part of Ethiopia's history with foreign aid, food needs were prioritized. Response plan data show that food aid became an area of particular concern as the conflict escalated, even though Tigray had relatively low food insecurity prior to the conflict.²⁰ The Integrated Food Security Phase Classification (IPC) anticipated that the number of people facing emergency (Phase 4) conditions in the Afar, Amhara and Tigray regions would rise past 400,000 in the third quarter of 2021.²¹ As the conflict spread beyond the Tigray region, the food security situation deteriorated, and in November 2021, the Famine Early Warning Systems Network reported that "most of Tigray and some neighbouring areas of Afar and Amhara, faced Emergency (IPC Phase 4) outcomes, with populations likely in Catastrophe (IPC Phase 5)." ²²
61. An emergency food security assessment released by World Food Programme (WFP) in January 2022 estimated 4.6 million people in Tigray to be food insecure,²³ while a multi-agency assessment from the end of 2021 put that number at 6.5 million.²⁴ The Ethiopia-wide 2022 Humanitarian Response Plan does not specify numbers for the Tigray region, but the WFP estimated the number of people requiring food assistance to be 4.8 million as of May 2022.²⁵
62. The Global Humanitarian Overview (GHO) estimates that 28.6 million people in Ethiopia need humanitarian assistance in 2023.²⁶ While the GHO considers the November peace agreement a promising step to scale up humanitarian assistance, it also notes that the humanitarian situation across Ethiopia is not expected to stabilize in 2023 due to "yet more forecasts of poor rainfall and the ongoing effects of conflict and violence." In addition, as of October 2022, more than 4.7 million people across the country were estimated to be internally displaced, mostly due to conflict and drought. It should also be kept in mind that the Covid-19 pandemic, in terms of the impact of the virus on the population and in terms of the related travel and movement restrictions, had a further exacerbating effect on the needs in the northern regions.

¹⁹ It should be kept in mind that in Ethiopia, the number of people in need of food aid is used as the general number for people in need.

²⁰ IPC, 'Ethiopia: Belg Pastoral and Agropastoral Producing Areas Analysis', September 2020, https://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC%20Ethiopia%20AcuteFoodSec%202020July2021June%20Report.pdf. According to this analysis, "Out of the 8.5 million people in IPC Phase 3 (Crisis) and above requiring urgent action to save lives, reduce food gaps, restore livelihoods and reduce malnutrition, 45.1% in Oromia, 16.9% in Somali, 16.9% in SNNPR, 5.6% in Sidama, 19.4 % in Amhara, 4.4% in Afar and 0.7% in Tigray."

²¹ This is also noted in OCHA, 'Revision of The Northern Ethiopia Response Plan, May–December 2021', October 2021.

²² FEWS NET, 'Expanding Drought and Conflict Are Expected to Drive Severe Food Insecurity in 2022', Ethiopia Food Security Outlook, November 2021, <https://fews.net/east-africa/ethiopia/key-message-update/november-2021>.

²³ WFP, 'Emergency Food Security Assessment—Tigray Region, Ethiopia', January 2022, <https://www.wfp.org/publications/tigray-emergency-food-security-assessment>.

²⁴ 'Multi Agency Seasonal Assessment Regional Report (Food Security and Agriculture). Duration 16 November–7 December 2021', January 2022, <https://www.ethiopia-insight.com/wp-content/uploads/2022/05/Final-report-Multisectoral-Seasonal-assessment-2021-food-security-and-agriculture-part.pdf>.

²⁵ WFP, 'WFP Ethiopia Tigray Emergency Response Situation Report #7—March–May 2022'. This figure was also quoted by ACAPS in ACAPS, 'Ethiopia-Northern Ethiopia Crisis: Update on Humanitarian Needs—Thematic Report', 28 July 2022.

²⁶ OCHA, 'Global Humanitarian Overview 2023', December 2022, <https://www.un-ilibrary.org/content/books/9789210024136>.

63. During the two-year conflict, humanitarian organizations' access to Tigray and parts of Afar and Amhara and the freedom of movement of affected people were particularly constrained, effectively creating a blockade for humanitarian service provision. In September 2021, with the "de facto blockade" in place for three months, several high-level officials, including the Emergency Relief Coordinator, noted that this had resulted in a situation where only 10 per cent of aid needed for the Tigrayan population was actually reaching the region.²⁷ The October 2021 revision of the Response Plan for northern Ethiopia notes that of the estimated 100 trucks per day needed to deliver the quantities of aid planned to meet the targets, a mere 1,111 trucks had made it into Tigray between 12 July and 19 October 2021. This comes down to nine per day.

64. The ICHREE found that the "Federal Government and its allies have consistently denied or obstructed humanitarian access to Tigray" and "obstructed the import of cash, fuel, and commercial goods into Tigray by establishing roadblocks and checkpoints, resulting in an extreme shortage of medicines and medical equipment; water and sanitation equipment; fertilizers, seeds, pesticides, and agricultural equipment; and food in a region that relies primarily on subsistence agriculture."²⁸ Population displacements, loss of harvest and livelihood assets and dysfunctional or non-existent markets contributed to immediate food shortages.²⁹ Electricity, banking, telecommunication, media and basic services were cut off from July 2021 to November 2022.³⁰ One legal investigation concluded that "the use of starvation tactics has been a hallmark of the conflict."³¹

Text box 1—Three periods of no access

While access to people in need has been highly challenging for humanitarian organizations for the full period of the war, three periods can particularly be observed in which access was severely limited within and to Tigray. The first period was in the first weeks of the war, in November and December 2020. The second period ran from around early July 2021 to March 2022. The Government of Ethiopia's announcement of a "humanitarian truce" on 24 March 2022 marks the end of this period. The third period, also referred to as the second or third war by a number of Tigray-based key respondents, ran from August to late October 2022.

It should also be noted that access has been uneven within the three regions. Western Tigray, for example, has been off-limits to most humanitarian organizations for the entire period of the armed conflict and months thereafter. Likewise, a number of the border regions have remained so-called hard-to-reach areas, as several of these areas have been combat hot spots.

²⁷ UN, 'Humanitarian Catastrophe Unfolding Before Our Eyes, Secretary-General Tells Security Council, Warning Ethiopia's Youth Will Be Ultimate Casualties—SG/SM/20866', 26 August 2021, <https://press.un.org/en/2021/sgsm20866.doc.htm>. See also, Michelle Nichols, 'U.N. Aid Chief to Ethiopia on Famine in Tigray: "Get Those Trucks Moving"', *Reuters*, 28 September 2021, <https://www.reuters.com/world/africa/un-aid-chief-ethiopia-famine-tigray-get-those-trucks-moving-2021-09-28/>.

²⁸ ICHREE, 'Report of the International Commission of Human Rights Experts on Ethiopia. A/HRC/51/46 (Advance Unedited Version)', Human Rights Council, 19 September 2022.

²⁹ IPC, 'Ethiopia IPC Acute Food Insecurity Analysis—May–September 2021', 10 June 2021, <https://reliefweb.int/report/ethiopia/ethiopia-ipc-acute-food-insecurity-analysis-may-september-2021-issued-june-2021>.

³⁰ ACAPS, 'Ethiopia-Northern Ethiopia Crisis: Update on Humanitarian Needs—Thematic Report', 31 January 2023.

³¹ See Catriona Murdoch, Prachiti Venkatraman and Rebecca Bakos Blumenthal, 'A Global Rights Compliance OSINT Investigation of Starvation Crimes in Tigray', Global Rights Compliance, 4 October 2022, <https://starvationaccountability.org/publications/a-global-rights-compliance-osint-investigation-of-starvation-crimes-in-tigray/>.

65. The blockade remained in place until 24 March 2022, when the Government announced a humanitarian truce. On 1 April, the first convoy of trucks reached Tigray. Access remained erratic until August 2022, when what little aid going into Tigray was cut off entirely. On 2 November 2022, federal and Tigrayan leaders signed a permanent cessation of hostilities agreement. Since the signing of this agreement, humanitarian aid has been scaled up with approximately 3,000 trucks carrying more than 105,000 metric tons of food and other supplies that had reached Tigray.³² The UN Humanitarian Air Service (UNHAS) and Ethiopian Airlines also resumed regular flights to Tigray. By February 2023, commercial flights and telecommunication had been restored in Tigray. Banking services were resumed in December 2023.³³ However, needs remained extremely high in parts of Afar and Amhara, which were impacted by the conflict.³⁴
66. For much of the two years, the armed conflict also impacted in a major way the safety and security of the staff of humanitarian UN and non-UN agencies. Aid worker security reports for 2020 and 2021 showed a rise in targeted violence directed at humanitarian responders, pushing the country into the ranks of the five most dangerous operational contexts globally. Although fatal incidents dropped in 2022, as of August 2023, 36 humanitarian staff had lost their lives in Ethiopia.³⁵ Other than direct attacks, the communications blackout, for example, created major challenges in managing staff security as part of the duty of care.
67. One more issue created a particular safety and security challenge: the image of the humanitarian response painted on social media. Misinformation and even disinformation about the humanitarian efforts in the north was spread frequently. In particular, the extreme and toxic character of the messages circulated by members of the Ethiopian diaspora, whether linked to the Government or Tigray People's Liberation Front and/or other parties, on channels such as X (previously Twitter), and leveraged against the UN and other international humanitarian agencies created a direct threat to these agencies' staff.
68. It was only when the parties to the conflict agreed to the cessation of hostilities and a commitment to restore services that the access situation started to significantly improve. Federal authorities committed to ensuring "unhindered humanitarian access to all in need of assistance and the expedition of humanitarian aid to all those in need in Tigray region and other affected areas."³⁶ Armed hostilities ceased through northern Ethiopia, and relief convoys resumed from November 2022 onwards.³⁷

³² OCHA, 'Today's Top News: Ethiopia', 13 January 2023, <https://www.unocha.org/news/todays-top-news-ethiopia>.

³³ Carolyn Tackett and Felicia Anthonio, 'After Years in the Dark, Tigray Is Slowly Coming Back Online', AccessNow, 1 February 2023, <https://www.accessnow.org/tigray-shutdown-slowly-coming-back-online/>; Reuters, 'Some Banks Re-Open in Parts of Ethiopia's War-Torn Tigray', 20 December 2022, <https://www.reuters.com/world/africa/some-banks-re-open-parts-ethiopias-war-torn-tigray-2022-12-20/>; AfricaNews and AFP, 'In Tigray, Tears and Grief with the Return of Telecommunications', Africa News, 13 January 2023, <https://www.africanews.com/2023/01/13/in-tigray-tears-and-grief-with-the-return-of-telecommunications/>.

³⁴ OCHA, 'Today's Top News: Ethiopia'. See footnote 28 for the link.

³⁵ UN Ethiopia, 'The Humanitarian Community in Ethiopia Condemns the Killing of Two Humanitarian Workers', 13 April 2023, <https://ethiopia.un.org/en/227554-humanitarian-community-ethiopia-condemns-killing-two-humanitarian-workers>. According to Humanitarian Outcomes' Aid Worker Security Database, 41 aid workers were killed in Ethiopia between November 2020 and April 2023: Humanitarian Outcomes, 'Aid Worker Security Database', n.d., <https://www.aidworkersecurity.org/incidents/search?start=2019&detail=1&country=ET>.

³⁶ The Government of the Federal Democratic Republic of Ethiopia and the Tigray People's Liberation Front (TPLF), 'Draft Agreement for Lasting Peace Through a Permanent Cessation of Hostilities Between the Government of the Federal Democratic Republic of Ethiopia and the Tigray People's Liberation Front (TPLF)', 2022.

³⁷ OCHA, 'Northern Ethiopia Access Snapshot—As of 30 November 2022'.

69. Despite these improvements, some areas remain hard to reach around the time of data collection for this evaluation, including several border areas in the north and areas off the main roads. Humanitarian needs also remain extremely high in parts of Afar and Amhara affected by the conflict, including in areas where people are returning to their homes. Against this backdrop, the exact level of need in hard-to-reach areas is still unknown.

2.3.3 Humanitarian coordination

70. Historically, the Ethiopian Federal Government has played a leadership role in humanitarian coordination. It leads humanitarian assessments and implements responses with its partners. In general, the international humanitarian community has benefited from the constructive partnership with the Federal Government. The Government itself is also a donor to the Humanitarian Response Plan (HRP). Overall, it tends to favour and focus on development work with humanitarian response also framed in achieving the Sustainable Development Goals.
71. In terms of humanitarian coordination, at the heart of it is the collective responsibility of all actors involved to ensure a coherent and principled response.³⁸ In Ethiopia, there are a range of structures and mechanisms involving government bodies, humanitarian inter-agency structures and joint government-humanitarian forums, operating at the regional, operational, strategic and political levels.
72. The clusters were rolled out in Ethiopia in 2007, with government departments, such as the then National Disaster Risk Management Commission—now the Ethiopian Disaster Risk Management Commission— as the Chair.³⁹ The clusters come in addition to Government-led sectoral task forces. There is a sizeable Humanitarian Country Team involving humanitarian donor representatives as well as representatives from international and national NGOs. According to the Resident Coordinator's office, Ethiopia hosts one of the largest UN country teams in the world with 28 specialized agencies, funds and programmes working in a harmonized manner through the joint UN and Government Strategy, the United Nations Development Assistance Framework. It is framed around the Sustainable Development Goals and is in line with the national priorities.⁴⁰ In relation to the conflict in northern Ethiopia, OCHA initiated the creation of subregional humanitarian coordination structures in towns including Mekelle and Shire (Tigray), Semera (Afar), Gondar and Bahir Dar (Amhara).
73. The space for humanitarian organizations, including NGOs, to deliver humanitarian action in Ethiopia has been contested at times. Given the interdependence of the UN and NGOs in humanitarian action, restrictions on either family affect the other. For example, the 2009 Charities and Societies Proclamation required international NGOs to have a local partner in Ethiopia. The restrictions imposed by this law, which prevented organizations receiving more than 10 per cent of their funding from foreign sources from engaging in human rights advocacy, promoting gender equality and advancing democratic values, were somewhat alleviated by a new law in 2019; however, challenges remain. The Ethiopian Government, and more precisely the Federal Authority for Civil Society Organizations (ACSO), retains oversight over the NGO sector with regulations regarding registration, funding allocation and reporting.⁴¹ In July 2021, for example, ACSO decided

³⁸ Coordination as described on the archived website humanitarianresponse.info.

³⁹ Tasneem Mowjee, 'NGOs and Humanitarian Reform: Mapping Study—Ethiopia Report', 1 January 2009, <https://assets.publishing.service.gov.uk/media/57a08b4d40f0b64974000aa6/ethiopia-rep.pdf>.

⁴⁰ See 'How the UN Is Supporting the Sustainable Development Goals in Ethiopia', <https://ethiopia.un.org/en/sdgs>.

⁴¹ See Broeckhoven et al. (2020), cited in ACAPS, 'Ethiopia—The Pre-Crisis Situation in Tigray—Secondary Data Review', 22 February 2021.

to suspend the work of three NGOs: the Dutch section of Médecins Sans Frontières, the Norwegian Refugee Council and the Al Maktoum foundation, allegedly for violating certain rules.⁴² A further issue was seen in September 2021 when it was decided that only those humanitarian workers with Ministry of Foreign Affairs-issued residence permits could fly into Tigray with UNHAS.

74. Motivated by drastically increasing humanitarian needs, the IASC Principals activated the System-Wide Scale-Up for northern Ethiopia on 28 April 2021 and later extended several times: in October 2021 until 29 April 2022; on 23 May 2022 until 29 October 2022 when they also extended in geographically to other areas in Ethiopia affected by drought and complex protection and access issues; and on 2 November 2022 when they extended it for three months until 31 January 2023. On 9 March 2023, the Scale-Up was extended until 6 September 2023. On 2 October 2023, the Scale-Up was deactivated. The Scale-Up aimed to ensure the rapid mobilization of necessary operational capacities and resources by IASC member organizations and partners. It marks the first Scale-Up in an active conflict setting since the current protocols were introduced in 2018, and the first one was limited to a single geographic region in a country with simultaneous humanitarian responses throughout. A Deputy Humanitarian Coordinator position was established for Tigray in late 2020. Many principals of UN agencies, donor institutions and other high-level representatives made visits to the country in the course of the following months, especially to support efforts to open up humanitarian space to three northern regions.
75. These efforts came as the conflict gave rise to significant tensions in the relationship between humanitarian organizations and the Ethiopian Government. Emphasizing its primary responsibility, the Government downplayed the need for more immediate humanitarian assistance, also claiming that it was distributing aid to Tigray.⁴³ These tensions culminated at the end of September 2021 when the Ethiopian Government decided to expel seven senior humanitarian coordination and other UN staff for “they had sidelined their oath, the rules of professional conduct and the principles of humanitarian assistance.”⁴⁴ The UN Secretary-General denounced this decision on 6 October 2021. Meanwhile, sharp divisions within the Humanitarian Country Team had also emerged, creating a shock to the system (see Text box 2). Public advocacy remained a source of tension at the country level, while at the global level, high-level officials, such as the UN Secretary-General and the World Health Organization (WHO) Director-General, spoke out forcefully at times.
76. According to the Government, it continued to deliver aid to Tigray during the conflict, especially in late 2022.⁴⁵ In fact, the Government, represented by the Ethiopian Disaster Risk Management Commission, has been one of the three main food aid actors in Tigray. Food distribution in Tigray was split between three actors: the Government covering western Tigray, a consortium known as

⁴² ACAPS, ‘Ethiopia—Understanding Humanitarian Concerns Across the Country—Thematic Report’, 24 January 2022.

⁴³ See, e.g., The Economist, ‘After Two Months of War, Tigray Faces Starvation’, 21 January 2021, <https://www.economist.com/middle-east-and-africa/2021/01/23/after-two-months-of-war-tigray-faces-starvation>. In addition, numerous reports provide evidence of the Government’s refusal for humanitarian aid reach Tigray as of the early days of the outbreak of the war in November 2020, in spite of an agreement to allow “unimpeded, sustained and secure access” for humanitarian supplies. See UN, ‘Ethiopian Government and UN Strike Deal for “Unimpeded” Humanitarian Access in Tigray’, UN News, 2 December 2020, <https://news.un.org/en/story/2020/12/1079112>. See also footnote 29.

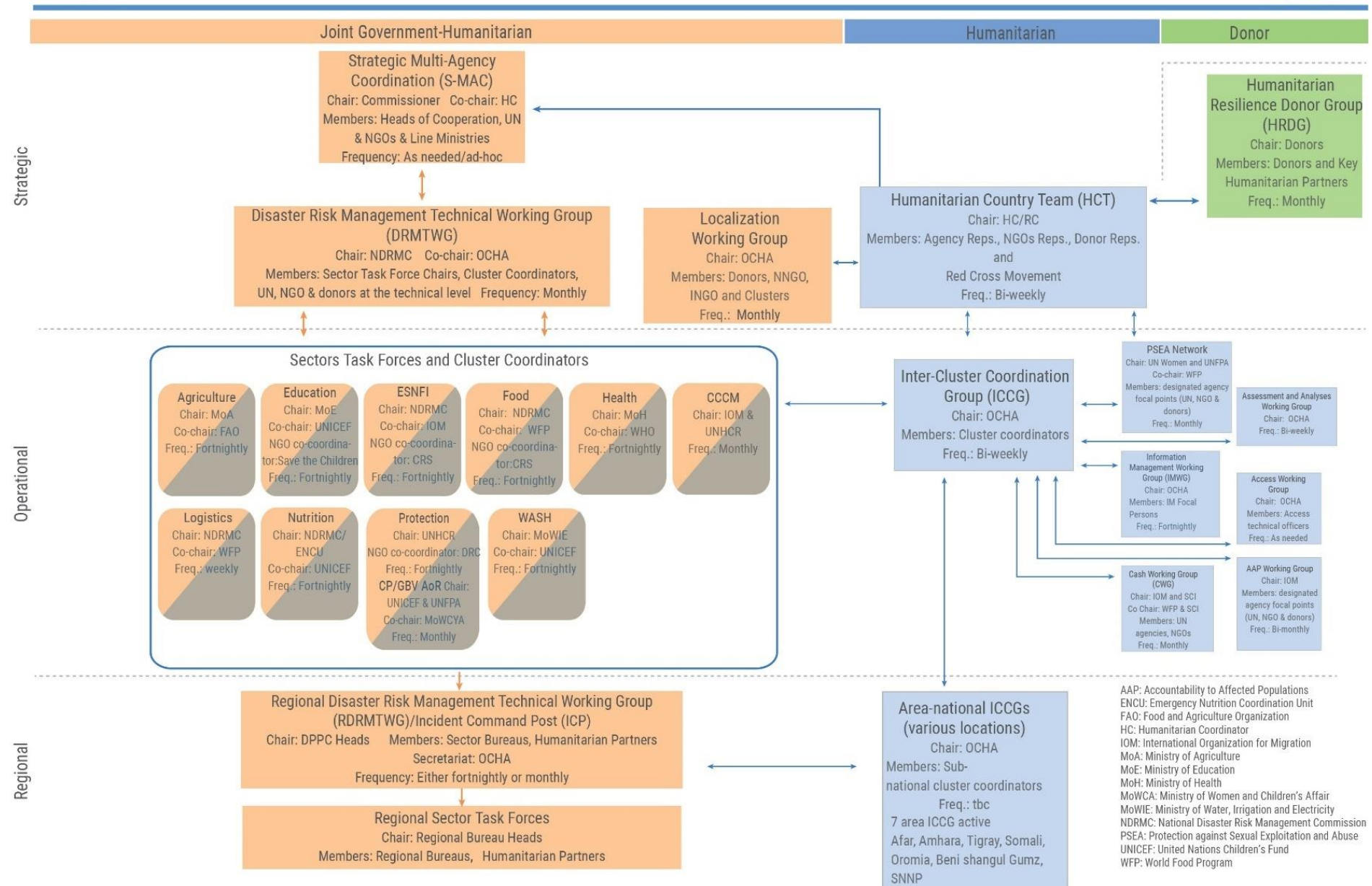
⁴⁴ UN, ‘Secretary-General Denounces Ethiopia’s Expulsion of Senior United Nations Officials as Security Council Delegates Differ on Potential Response. SC/14657’, 6 October 2021, <https://press.un.org/en/2021/sc14657.doc.htm#:~:text=Ethiopia%20is%20violating%20international%20law,the%20detriment%20of%20the%20host>.

⁴⁵ FDRE Government Communication Service, ‘Statement on the Resumption of Humanitarian Aid and Services’, 18 October 2022.

Joint Emergency Operation and World Food Programme (WFP). With food aid dominating the response, unconfirmed reports of food diversion resulting in a food aid pause first emerged in late March 2023.⁴⁶ This food aid pause became official in early May 2023 and created a second shock (see Text box 3). Figure 6 below provides an overview of the current humanitarian coordination structure in Ethiopia.

⁴⁶ See, e.g., Duke Burbridge, 'The Suspension of Food Aid to Tigray Expected to Kill Innocent Civilians', TGHAT, 8 May 2023, <https://www.tghat.com/2023/05/08/the-suspension-of-food-aid-to-tigray-expected-to-kill-innocent-civilians/>.

Figure 6: Humanitarian Coordination Structure in Ethiopia



[Source: OCHA Ethiopia, May 2023.]

Text box 2—The first shock to the system: A schism in the HCT

Deep divisions over the approach to the humanitarian response in Tigray emerged primarily among UN Chiefs, including the Humanitarian Coordinator/Resident Coordinator and UN agency country directors, towards the end of 2020 and strongly impacted the effectiveness of the HCT in the following 24 months.

The split among the UN Chiefs centred around what approach to the response to the armed conflict in Tigray would be most effective. One perspective was that the armed conflict required a principled humanitarian response, including robust (public) messages and an independent approach to prevent the instrumentalization of the humanitarian effort. Proponents of this approach felt that the UN in Ethiopia was too weak in its advocacy from the start of the conflict. They pointed, for example, to the muted reaction from the UN following the attack on a UN convoy in December 2020. On the other side were those who envisioned responding to the needs in Tigray with the same approach as all other aid that is delivered in Ethiopia. This was an approach in line with the Government’s policy and messaging, avoiding confrontation with the Government of Ethiopia. The two perspectives became deeply entrenched and were publicly equated with taking sides with the parties to the conflict, either the Government of Ethiopia or the TPLF.

One particular episode revealing the sharp differences was seen in March 2021 when members of the UN Country Team met on the issue of conflict-related sexual violence. While their principals had issued statements at the global level on “rape and other horrific forms of sexual violence,” a leaked audio recording and transcript of a meeting revealed that some of the UN representatives doubted widescale CRSV, calling it “anecdotal,” as they claimed there was no data to substantiate this claim. Two of the UN country directors who doubted the scale of CRSV were later removed from their positions by their headquarters. In referring to the deep divisions among several of the UN directors, sentiments of racism, white saviourism and coloniality were also mentioned, though in reality, the divisions cut across nationalities, gender and ethnicities, as also illustrated by another leaked audio recording of a meeting between a freelance Canadian writer and two UN country directors illustrates.

The divisions not only emerged within the Ethiopia HCT, but also between several of the HCT members and their headquarters. To bypass the ineffective coordination mechanisms at the Addis level, some agencies made efforts to establish direct reporting lines from their representatives in Tigray to regional or global offices.

The divisions in the HCT escalated in late September and early October 2021. On 30 September, seven senior UN officials were declared persona non grata by the Ethiopian Government for allegedly “meddling in the internal affairs of the country.” Many of them were identified as part of the group pushing for a more principled approach and/or as working on issues related to human rights. Two UN directors were removed from their positions 10 days later by their headquarters. In one case, this removal was explained as follows: “[T]he views did not correspond to the agency’s principles and values and should not in any way be considered as expressing the agency’s position.” To be clear, both directors participated in conversations with a Canadian blog writer, the audio recordings of which appeared in the public domain.

Consequently, the HCT was everything but a team, leading to a serious dysfunctionality.

Text box 3—The second shock to the system: Food aid pause

On 3 May 2023, US Agency for International Development (USAID) announced the “difficult decision to pause all USAID-supported food assistance in the Tigray region until further notice.”¹ This decision came following the initial results of a US Government audit pointing to widespread theft of American aid “on an industrial scale.” Messages that the US Government was conducting a food aid audit started circulating in March 2023. Around a month later, it was reported that World Food Programme had informed its partners that the agency was temporarily suspending deliveries of food to Tigray amid reports of food misappropriation. The formal decisions from the US Government, as the main international donor of food aid, and World Food Programme followed in early May. On 8 June, both actors extended the pause to the whole of Ethiopia. In July 2023, at least three different investigations by the Government of Ethiopia, the US Government and World Food Programme were under way.

To cope with droughts, wars and severe food insecurity, Ethiopia has experienced decades of food aid, which has become part of the country’s political economy. For the many years that food aid has been delivered, there have been accounts of the manipulation of food security data and controversies between government officials and aid agencies on survey results or assessment methodologies. Press reports cite aid officials who note that the “manipulation of humanitarian aid has long been the norm in Ethiopia.”² The same press reports quote USAID officials describing the food aid diversion as “extreme and coordinated.”³ As of 2023, the US Government remains the largest donor in Ethiopia. However, political food aid games have been played in Ethiopia for decades.⁴

1) Declan Walsh and Abdi Latif Dahir, ‘U.S. Suspends Food Aid for Ethiopia, Citing Widespread Theft’, *The New York Times*, 8 June 2023.

2) Elissa Miolene and Colum Lynch, ‘Exclusive: “Rot Is So Much Deeper”—Decades of Ethiopia Aid Manipulation’, *Devex*, 28 August 2023.

3) *Ibid.*

4) E.g., Jack Sheperd, ‘Ethiopia: The Use of Food as an Instrument of U.S. Foreign Policy,’ *Issue: A Journal of Opinion* 14 (1985): 4–9, <https://www.jstor.org/stable/1262530>.

2.3.4 *The IASC partners' response*

78. Following the outbreak of the conflict in Tigray, humanitarian partners in Ethiopia developed an emergency response plan for November 2020 to January 2021. An updated version of this plan was made available in December 2020.⁴⁷ In May 2021, a specific response plan for northern Ethiopia was released to guide partners in response to the growing humanitarian needs within the Tigray region, to track delivery against targets and to provide a benchmark to determine emerging needs.⁴⁸ It was revised and published in October of the same year for the period October–December 2021. The northern Ethiopia-specific response plan covered the needs in the Tigray region, including the Western Zone, while a midyear review of the 2021 HRP for Ethiopia was provided to cover the rest of Ethiopia (outside Tigray) as of early August 2021. As such and as highlighted in the October 2021 revision of the response plan for northern Ethiopia, some of the growing needs in Afar and Amhara regions as a result of the spillover of the Tigray conflict were then reflected in the midyear review of the 2021 HRP for Ethiopia.
79. While the northern Ethiopia Response Plan includes sector-/activity-specific targets, it does not link back to more overarching strategic objectives due to the 2021 Ethiopia-wide HRP not being published. Its midyear review/revision does not make any mention of strategic objectives.⁴⁹ The 2022 Ethiopia-wide HRP, which lists three strategic objectives (see Table 7), does not provide details on the specific needs deriving from the armed conflict in northern Ethiopia.
80. For this evaluation, a theory of change was reconstructed by the evaluation team during the inception phase (see annex 3). The reconstructed theory used the 2021 response plan for northern Ethiopia and the countrywide strategic objectives of the 2022 Ethiopia HRP and was informed by the Scale-Up Protocol and the Ideal Model—Impact Pathway.⁵⁰
81. The response the IASC partners envisaged in northern Ethiopia as of May 2021 is a multi-sector response. With regard to funding, a general picture can be provided for the year 2021 through the two iterations of the northern Ethiopia response plans (June 2021 and November 2021). A similar picture is more difficult to provide for 2022, given that the specific needs deriving from the conflict in northern Ethiopia were not detailed in the Ethiopia-wide HRP.

⁴⁷ 'Updated Humanitarian Response Plan for Northern Ethiopia: November 2020 to January 2021', December 2020.

⁴⁸ OCHA, 'Northern Ethiopia Response Plan'.

⁴⁹ Mid-year reviews and appeals do not require strategic objectives.

⁵⁰ The Ideal Model—Impact Pathway was provided in the terms of reference for this evaluation and can hence be found in annex 1.

Table 7: Overview of HRP 2020, 2021 and 2022 (Ethiopia and Northern Ethiopia)

HRP	PIN	Target	Requirement	Strategic objectives
Ethiopia HRP 2020 (published Jan 2020)	8.4M	7.0M	\$1000M	SO1: The physical and mental well-being of 5.7 million crisis-affected people is improved SO2: 5.7 million most vulnerable crisis-affected people are supported with basic services SO3: The protection needs of 1.9 million IDPs and other groups with specific needs are identified, recognized and addressed by Government, humanitarian and development actors SO4: Contribute to strengthening the recovery and resilience of 1.1 million crisis-affected people and systems
Ethiopia HRP 2020 midyear review	19.2M	15.1M	\$1440M	No specific mention
Northern Ethiopia, May 2021	5.2M	5.2M	\$853M	No specific mention. A certain focus was given to AAP, PSEA and the use of cash
Northern Ethiopia, Revision Oct 2021	5.2M	5.2M	\$957M	No specific mention
Ethiopia (excl. Tigray) 2021 midyear review	14.8M	Food: 12.8M Non-food only: 2M	\$1488M	No specific mention
Ethiopia (incl. north), July 2022	>20M	>20M	\$3090M	SO1: Reduce loss of life and physical and psychosocial harm among the most vulnerable population affected by conflict and drought, including 5 million IDPs and 12.3 million non-displaced, by decreasing the prevalence of hunger, acute malnutrition, public health threats and outbreaks and exposure to protection risks, by the end of 2022 SO2: Sustain the lives of 16.5 million people requiring humanitarian assistance, including 12.5 million non-displaced, 3.9 million IDPs and persons with disabilities across 88+9 <i>woredas</i> , by ensuring safe, dignified, accountable and equitable access to livelihoods, protection and other essential services by the end of 2022 SO3: Enhance the protection environment and avoid and reduce harm by mainstreaming protection and gender and age considerations in the multisectoral response and contribute to protection outcomes
Ethiopia (incl. north), review Nov 2022	>20M	+11%	\$3335M	No specific mention
Ethiopia (incl. north), HRP Feb 2023	20.5M	20.1M	\$3990M	SO1: Reduce morbidity, mortality and suffering due to multiple shocks for 22.6 million of the most vulnerable people by the end of 2023 SO2: Provide protection and safe access to critical, integrated and inclusive basic services to enable 8.8 million most vulnerable people to meet their basic needs by the end of 2023 SO3: Support 9.4 million vulnerable people to start recovering from crisis and natural hazards through targeted programming to support rebuilding coping capacities and livelihoods and strengthen linkages with development actors by the end of 2023

[Table developed by the evaluation team using HRPs for Ethiopia and Northern Ethiopia.]

2020

- War breaks out between Tigrayan forces and ENDF supported by EDF (allegedly) and allied regional special forces
- PM Abiy issues ultimatum giving Tigray forces 72 hours to lay down arms
- Abiy announces capture Mekelle and federal forces' victory; immediately denied Tigray's president and leader of TPLF

- 4 Nov Statement by Under-SG for Humanitarian Affairs and Emergency Relief Coordinator (ERC) on Ethiopia
- 17 Nov Ethiopia HCT Guiding Principles for Humanitarian Operations in Tigray, and border areas of Afar and Amhara regions
- 22 Nov Ethiopian Government and UN sign agreement for 'unimpeded' humanitarian access in Tigray
- 26 Nov Appointment of Deputy Humanitarian Coordinator (DHC)
- 28 Nov A statement from the UN HCHRs, at a press conference mentions reports of ethnic profiling of Tigrayans, of gross HR and IHL violations and abuses
- End Nov Updated Humanitarian Response Plan for Northern Ethiopia

2.3.5 Timeline

Figure 7: Timeline of key political and humanitarian events

2021

- High Rep. of the EU for Foreign Affairs and Security Policy, refers to Eritrea's involvement as fact
- International pressure on Ethiopia re allegations of serious crimes
- Authorities announce withdrawal of Eritrean troops; claim rejected by the UN on 15 April
- Letter by Eritrean ambassador to the UN addressed to the UNSC officially confirms the presence of Eritrean forces in Tigray, stating agreement to withdraw

- 9 Dec ZOA staff member killed on duty in Hitsats Refugee Camp
- 11 Dec Visits by senior UN officials, incl. High Commissioner for Refugees; Executive Director of the WFP; and Under-SG for Safety and Security
- 30 Dec Daily Press Briefing by Office of the Spokesperson for the SG: "most of the critical staff needed to scale up the response have still not been able to access the area"
- Jan - Feb Tigray Humanitarian Update Sitrep: "the humanitarian situation in the region continues to rapidly deteriorate"
- 15 Jan Joint UN-Gvt Tigray mission highlights humanitarian needs/path forward
- 26 Jan Ethiopia: Government approves 'first step' towards Tigray emergency assistance
- 4 Feb UN declares Tigray faces a "very critical malnutritional situation"
- 6 Feb UN HCHR statement "Deeply distressing reports of SBGV"
- 8 Feb The IASC Principals issue a Statement on Gender-Based Violence in Tigray Region of Ethiopia
- 19 Feb The Office of the UN HCHR and the Ethiopian Human Rights Commission announce a joint investigation
- March Appointment of new DHC
- 4 Mar UNSC statement on Tigray; call for a "scaled-up humanitarian response and unfettered humanitarian access"
- 22 Mar Activation L3 (IASC System-Wide Scale-Up for Northern Ethiopia) for an initial period of 6 months
- 25 Mar
- 3 Apr
- April
- 16 Apr
- 22 Apr
- 28 Apr

Key political moment

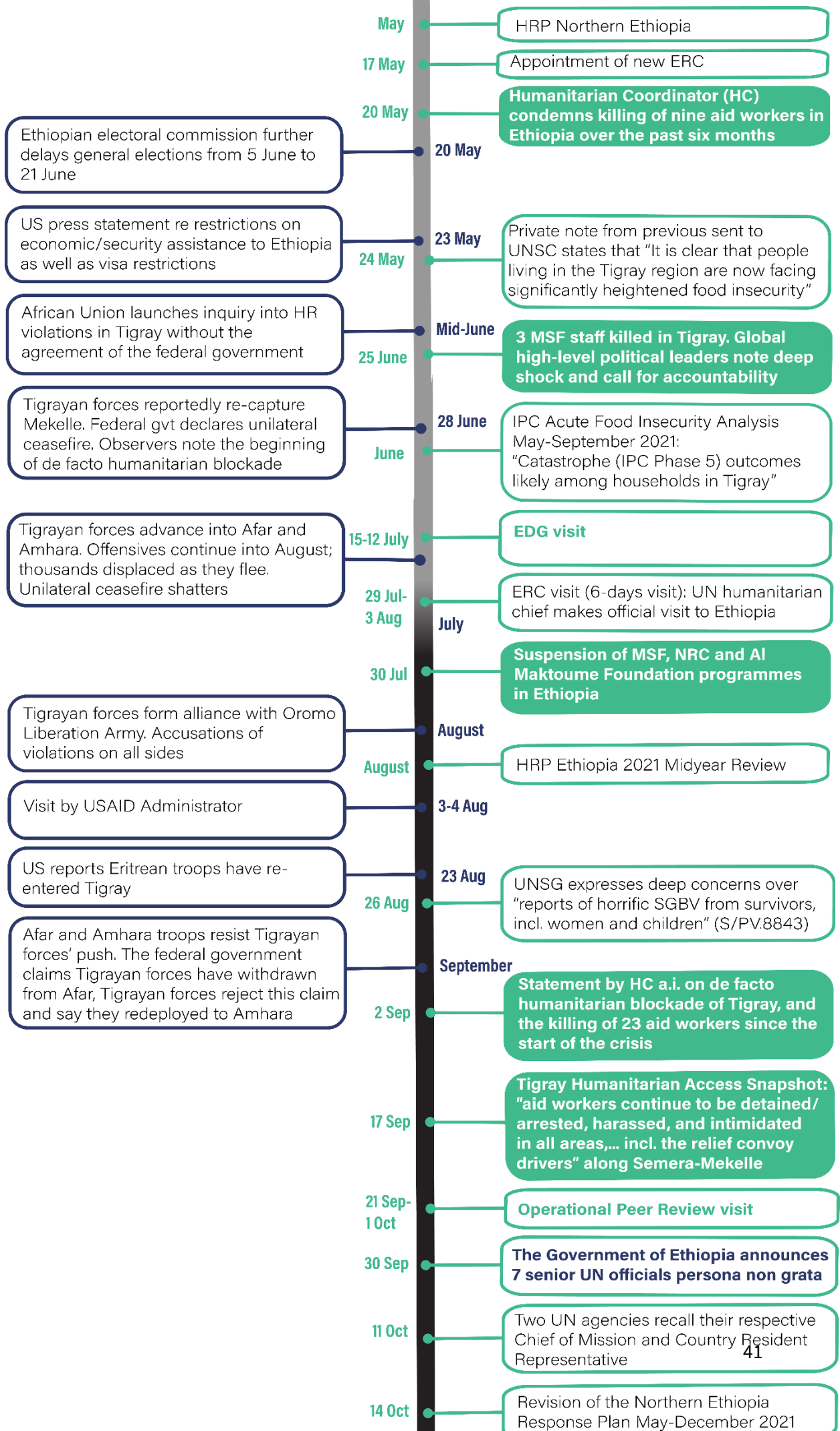
Key humanitarian moment

Political/Humanitarian

Scale-Up related

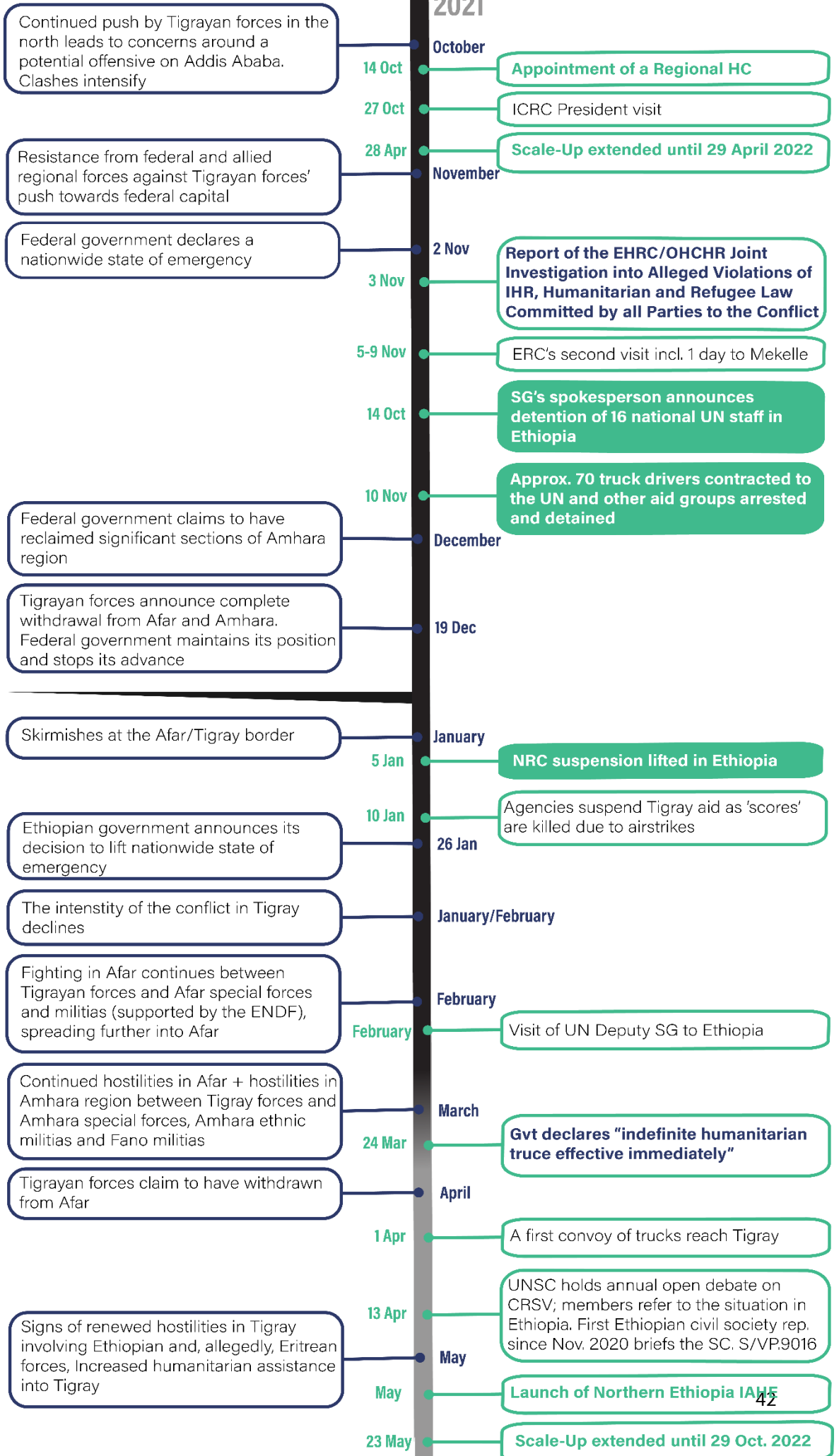
Harassment/killing aid workers

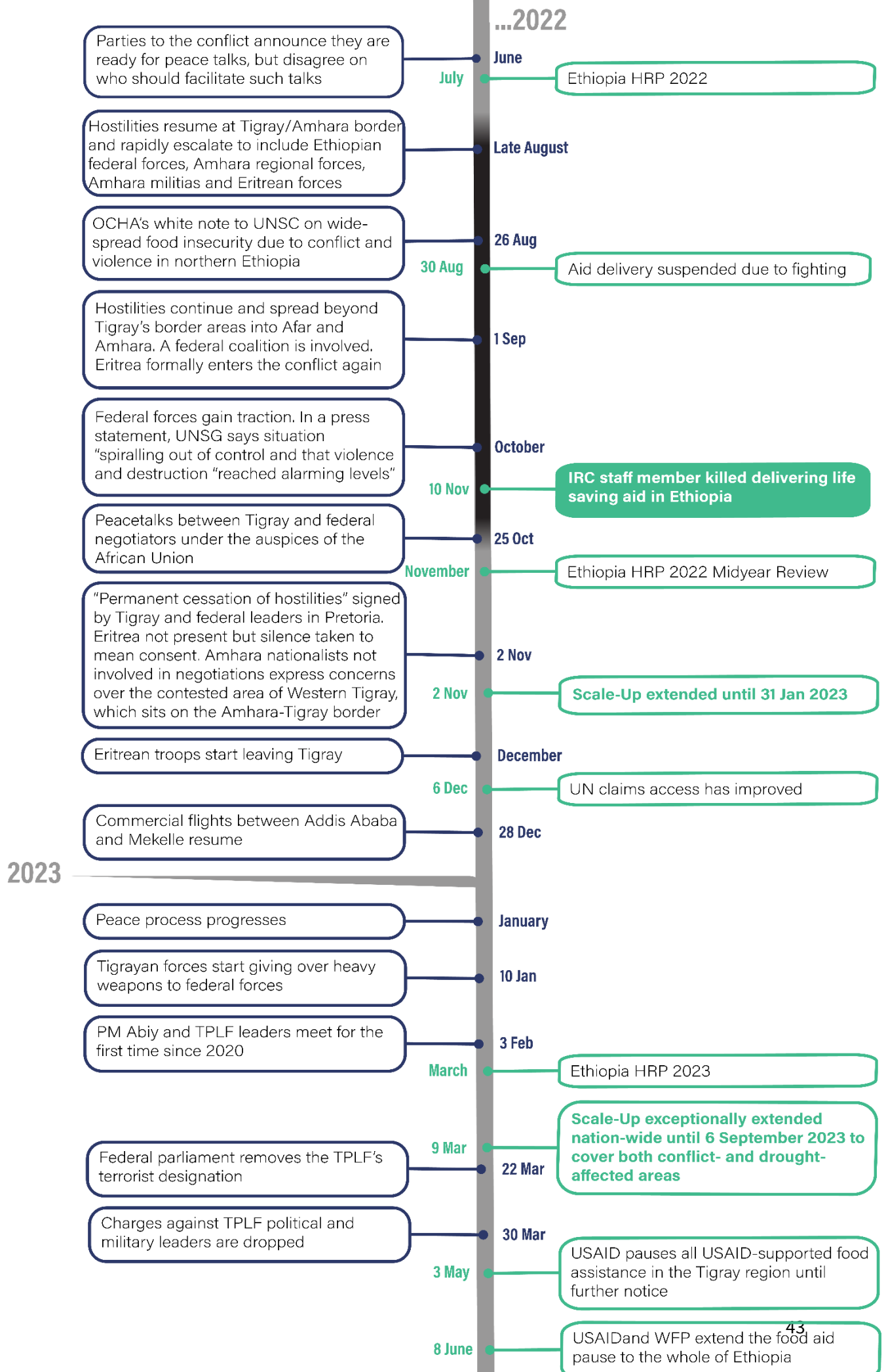
The darker the timeline, the less humanitarian access



2022

2021





3 Evaluation Findings

3.1 Scale-Up

To what extent were the objectives of the IASC Scale-Up met?

Evaluation criteria: Relevance, Effectiveness, Coherence

Summary findings

Collective scenario planning and preparedness

- The humanitarian community in Ethiopia was not prepared for the crisis.
- The humanitarian community was not prepared to provide a response in a situation of armed conflict.

Adjustments of presence and response capacity

- The response did not see a sufficient increase in presence and operational capacity.
- Scale-Up efforts were not adequately balanced across the three northern regions.
- The Scale-Up was framed in terms of a food insecurity narrative and did not address the capacity to cover access and protection issues.

Process and leadership of the Scale-Up

- The response capacity was not adjusted—this created significant levels of dissatisfaction among senior leadership.
- The Scale-Up declaration was not timely.
- The Scale-Up benchmarks the HCT developed did not move the Scale-Up forward.
- The geographical coverage and timing of the Scale-Up was unclear.
- The lack of a significant Scale-Up is also due to a lack of accountability.

Strength of evidence:



Good practices

- Appointment of DHC even before the system-wide Scale-Up.
- Global, high-level engagement from the first weeks of the armed conflict.
- Continued emphasis and advocacy on the need for scaling up.
- Local staff recruitment procedures and practices tailored to the prevailing context.

Emerging recommendations

- Connect political/conflict scenarios to preparedness and planning.
- Frame the response in an international humanitarian law context in relation to the context.
- A system-wide Scale-Up may not be the appropriate way to strengthen the humanitarian profile of a response.
- Adjust the Scale-Up benchmarks in relation to the context.
- Ensure that there are collective exchanges in the HCT on discussing progress in achieving the benchmarks.

82. Responding to a recommendation from the Emergency Directors Group, the Inter-Agency Standing Committee (IASC) Principals agreed on a System-Wide Scale-Up in their meeting on 26 April 2021. This decision also came after a statement from the UN Security Council in which they called for “a scaled-up humanitarian response and unfettered humanitarian access.”⁵¹ According to the IASC, such a decision is aimed at boosting “a system-wide mobilization in response to a sudden-onset, or significantly deteriorating, humanitarian crisis, where the capacity to lead, coordinate and deliver assistance and protection does not match the scale, complexity and urgency of the crisis.”⁵² In practice, a Scale-Up serves a few more purposes than increased presence and operational capacity, including a (re)focus on humanitarian principles and a signal to donors and others on the relative importance of the crisis at hand.⁵³ Since the first activation in April 2021, the System-Wide Scale-Up was extended three times for either three or six months and geographically to cover other crisis-affected areas in Ethiopia. It was formally deactivated on 2 October 2023.⁵⁴ With regard to the Scale-Up line of inquiry, this evaluation has focused on the extent to which the objective to bring about a collective response at scale was met and if not, why. The sections below will present findings with regard to the degree to which the response could rely on collective scenario planning and preparations (3.1.1), the adjustments in presence and capacity that were undertaken (3.1.2) and the number of aspects related specifically to the process and leadership arrangements around the Scale-Up (3.1.3).

3.1.1 *Inadequate collective scenario planning and preparedness*

83. **The humanitarian community in Ethiopia was not prepared for the crisis.**

It was well-known that tensions between the central Government and the Tigray People’s Liberation Front had been rising for months. An internal UN document, the Ethiopia Analysis and Strategy Document, shared among members of the UN Secretariat’s Executive Committee in early 2020, signalled growing political and security crises as well as regional and ethnic tensions in the country as a result of the Government’s reform programme and rapid transition. In August 2020, the International Crisis Group reported that although the Prime Minister had ruled out military intervention, other “federal officials threatened other punitive measures that could lead the parties to blows.”⁵⁵ At the same time, respondents explained that the overwhelming reaction among humanitarians when the conflict erupted was one of surprise with regard to its scale. It should be kept in mind that models forecasting conflict do so at a relatively small scale and, even more so, that predicting the humanitarian impact of a conflict remains a challenge.⁵⁶

“When November 3rd happened, it was a surprise, but it was in the making, to be honest.”

(Key Informant 63–UN)

“We knew there were tensions, but we were still caught off guard re how quickly it escalated.”

(Key Informant 31–UN)

“The situation in Tigray completely overwhelmed most imagination. We couldn’t even look at the contingency plan, it was so far off.”

(Key Informant 44–UN)

⁵¹ UN, ‘Security Council Press Statement on Ethiopia (SC/14501)’, 22 April 2021, <https://press.un.org/en/2021/sc14501.doc.htm>.

⁵² IASC, ‘Protocol 1. Humanitarian System-Wide Scale-Up Activation: Definition and Procedures’, 13 November 2018, 1.

⁵³ Glyn Taylor and Raphael Gorgeu, ‘IASC System Wide Scale-Up Mechanism: From Protocol to Reality: Lessons for Scaling up Collective Humanitarian Responses, 2023, forthcoming.

⁵⁴ See also para. 74.

⁵⁵ International Crisis Group, ‘Toward an End to Ethiopia’s Federal-Tigray Feud—Briefing N° 160 / Africa’, 14 August 2020, <https://www.crisisgroup.org/africa/horn-africa/ethiopia/b160-toward-end-ethiopias-federal-tigray-feud>.

⁵⁶ See OCHA, Centre for Humanitarian Data, ‘Assessing the Technical Feasibility of Conflict Prediction for Anticipatory Action’, 26 October 2022, 6, <https://centre.humdata.org/assessing-the-technical-feasibility-of-conflict-prediction-for-anticipatory-action/>.

84. Humanitarian leadership representatives in Addis Ababa spoke of highly confusing days following the outbreak of hostilities, with a scramble among agencies to get “non-essential” staff out of Tigray. The fact that a violent armed conflict had broken out in the country was yet to sink in among all members of the UN Country Team. This degree of uncertainty and ambiguity among humanitarian actors on the escalating conflict was understandable, also because communication between Tigray and Addis Ababa was not possible. However, it also raises the question of the extent to which humanitarian preparedness and planning scenarios have been infused with political analyses. Key informants described warning signs that had been shared with and within senior UN levels, including with the Department of Political Affairs in New York.
85. **The humanitarian community was not prepared to provide a response in a situation of armed conflict.** Survey respondents who found that the System-Wide Scale-Up⁵⁷ did not lead to an increase in the humanitarian capacity to respond were asked to rank internal and external factors hindering its success. They put “Level of humanitarian preparedness” in second place among internal factors (joint with “Global humanitarian leadership”), preceded only by “Humanitarian leadership in Ethiopia (at Addis Ababa level)” (see Figure 8). Conversely, respondents who found the Scale-Up to have led to an increase in capacity indicated “Humanitarian preparedness” among the factors that had contributed least to its success in their view. Similarly, 80 per cent of key informants assessed the level of humanitarian preparedness of humanitarian actors in Ethiopia negatively (see Figures 9 and 10).
86. Gaps in terms of preparations are noticeable, many of which have to do with an under-estimation of the scale of the violence and destruction of essential infrastructure, including health facilities and health, water, sanitation and hygiene infrastructure. In relation to medical care, two trauma and emergency surgery kits covering the needs of 100 patients in total were pre-positioned in Mekelle for the whole of Tigray. No emergency reproductive health kits had been pre-positioned. In terms of preparedness to address protection needs, the main problem observed was that protection actors had been focused on refugees or developmental issues. A scenario that would see massive violence, including conflict-related sexual violence (CRSV), was absent from planning. Part of the insufficient preparedness can be explained by the indicators that showed that Tigray was in a better situation in many sectors compared to other parts of Ethiopia.⁵⁸
87. The shortcomings in preparations can be explained by the general mindset of the humanitarian community, which was not orientated towards humanitarian response in a situation of armed conflict but on development. Most of the 28 UN funds and programmes and specialized agencies present

“There was chaos in first two months of war. Nobody knew what to do, and many were paralysed.”

(Key Informant 36–UN)

“Collectively across UN and NGOs we were caught off guard in terms of emergency capacity, preparedness...”

(Key Informant 43–INGO)

“The steps taken in Ethiopia follow the development speed, not the speed that you would expect in a humanitarian response, where you would expect a stronger level of facilitation for opening up space and reaching people in need.”

(Key Informant 1–UN)

“It is true that predominantly a development context previously, and no one was staffed appropriately.”

(Key Informant 39–INGO)

⁵⁷ This question was asked only the 70 respondents (out of the total of 151) who clarified that they were aware of the System-Wide Scale-Up.

⁵⁸ ACAPS, ‘Ethiopia: The Pre-Crisis Situation in Tigray, Secondary Data Review’, 22 February 2021.

in the country are not working, or at least not exclusively, on humanitarian response. As a multi-mandate organization par excellence, these various UN representations cover a range of spheres. This is a strength and weakness of the UN system: it has a wide-ranging mission in Ethiopia and can leverage its collective influence, but its broad agenda also gives rise to questions or even confusion as to which mandate or set of priorities should come first at times of crisis. At the global level, for example, high-level internal UN meetings held in early 2021 particularly mentioned support from UN to the Government of Ethiopia in moving the nationwide elections forward.⁵⁹ Around the same time, early recovery remained a topic of discussion among members of the Humanitarian Country Team (HCT) in Ethiopia, even while the armed conflict was still unfolding.

“It was very clear from the beginning that the UN’s set-up in Ethiopia was not fit for purpose if there would be a war.

(Key Informant 61–UN)

88. That said, emergency response was not a novelty in the country. Responses related to drought, food insecurity and forced displacement have long been common. Independent research done in 2019 found that in previous conflict-induced displacement crises in Ethiopia, the humanitarian community had failed to adjust to the context. It found that not only did the timeliness and effectiveness of the response hence suffer, but also that tensions surfaced between organizations’ humanitarian identity and principled stance and the government humanitarian/development agenda largely followed until then.⁶⁰ For instance, at the time of the large and fast displacement in the Somali region in 2018, it had become clear that a principled humanitarian operation was not possible as the Government ran the operation. Ten years earlier, in 2009, research also found that the International Committee of the Red Cross (ICRC) and UN High Commissioner for Refugees (UNHCR), in spite of their mandates, were not able to operate in the conflict-affected Somali region and that the UN’s leadership had not challenged the Government enough about upholding humanitarian principles in that region.⁶¹
89. It follows that an emergency response is not synonymous with a humanitarian response. The latter implies not only responding with urgency but also in line with humanitarian principles such as impartiality, neutrality and independence and in line with international humanitarian law when there is an armed conflict.⁶² Instead, with the focus on development, the work of humanitarian and development actors in northern Ethiopia had been on resilience building actions and gaps.⁶³

“When I came to Ethiopia, everyone was saying that people had had to adapt and were not used to emergency. This is wrong: there is an emergency every year in Ethiopia!”

(Key Informant 54–UN)

⁵⁹ This issue was raised in a high-level UN meeting on 26 January 2021, an audio recording of which was shared with the evaluation team.

⁶⁰ Marzia Montemurro and Karin Wendt, ‘The Path of Least Resistance. HERE “Mandates” Study Ethiopia Report’, HERE-Geneva, 2019, https://here-geneva.org/?smd_process_download=1&download_id=4659.

⁶¹ Tasneem Mowjee, ‘NGOs and Humanitarian Reform: Mapping Study—Ethiopia Report’, 1 January 2009, footnote 45, <https://assets.publishing.service.gov.uk/media/57a08b4d40f0b64974000aa6/ethiopia-rep.pdf>.

⁶² Further explained in the access chapter.

⁶³ ICCG, ‘Updated Humanitarian Response Plan for Northern Ethiopia, November 2020 to January 2021’, December 2020.

Figure 8: Survey respondent rankings of factors hindering the success of the Scale-Up

Survey respondent perceptions of the extent to which various factors hindered the success of the Scale-Up.

The factors listed to the left are ordered as per the overall average ranking by all survey respondents, with 5—at the top—being a/the main obstacle and 1—towards the bottom—not being an obstacle at all. The lines show how survey respondents from different regions ranked the items differently.

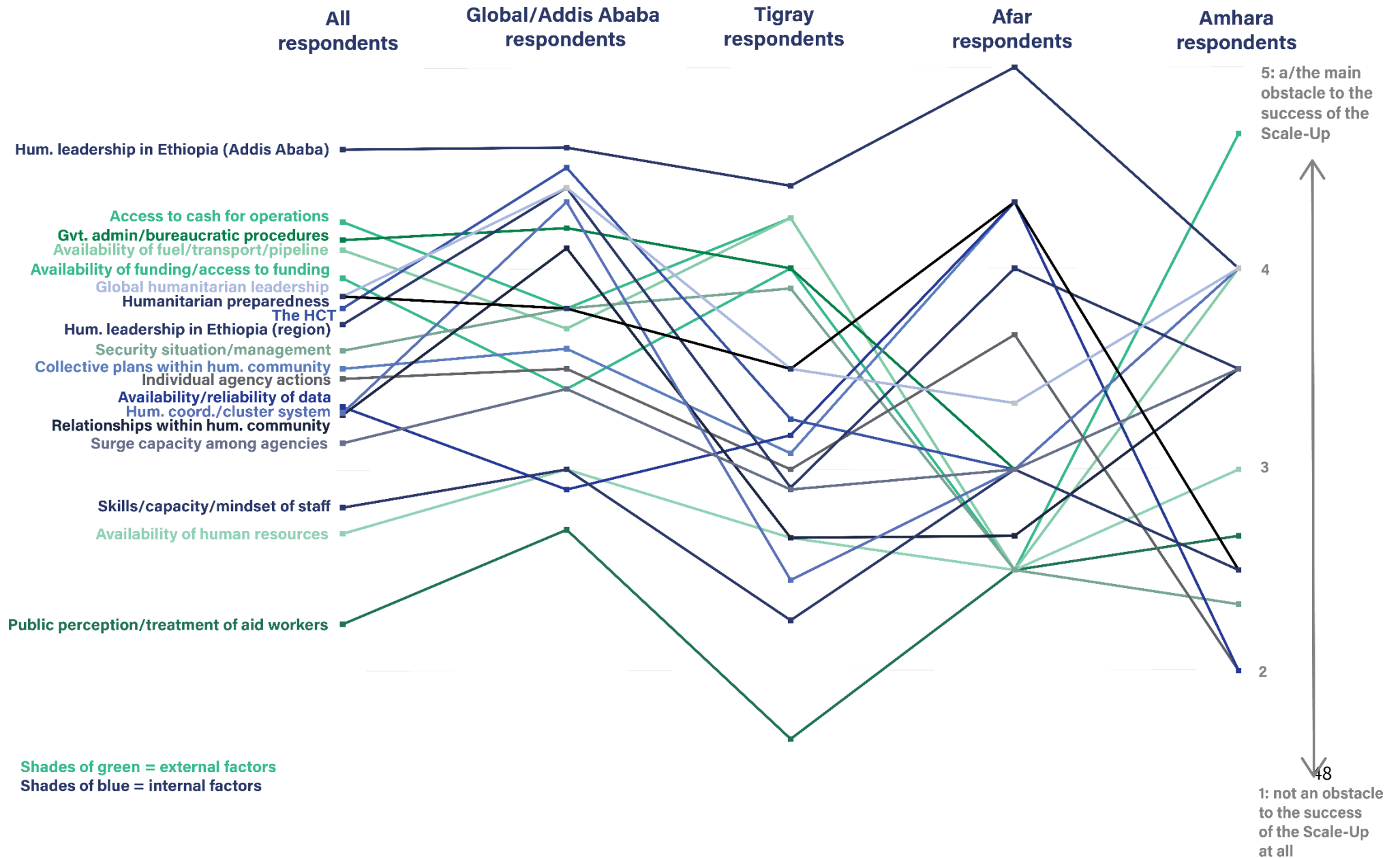


Figure 9: Overview of KI perceptions—what was done well and less well

Overall KI perception/assessment of factors in Northern Ethiopia response.

The dots are sized relative to each other: the larger the dot, the more frequently different KIs linked the factor to a particular perception/assessment. All KIs were weighted equally in the analysis, and their opinion counted no more than once per interview.



[Table developed by the evaluation team based on qualitative coding of all semi-structured interviews. The figure illustrates the number of KIs who voiced a particular viewpoint about the issues listed, relative to each other. The larger the dot, the higher the number of KIs who expressed themselves accordingly.]

Figure 10: Overview of KI perceptions—aspects linked to particular challenges

Overall KI perceptions of which factors of the response resulted in/links to particular challenges/failures.

The dots are sized relative to each other: the larger the dot, the more frequently different KIs linked a factor to a particular challenge/failure. All KIs were weighted equally in the analysis, and their opinion counted no more than once per interview.



90. The lack of orientation to a humanitarian crisis is also illustrated in HCT records, which showed a lack of a sense of urgency for much of the first quarter of 2021. Meeting frequency was fortnightly, and discussions focused on the launch of the Humanitarian Response Plan (HRP) for 2021 or on other areas in Ethiopia that were confronted with droughts. Although operational leadership and response coordination for northern Ethiopia became focused in Mekelle, weekly HCT meetings would have been more appropriate given the severity of the crisis. As for the HRP, in several HCT and Inter-Cluster Coordination Group (ICCG) meetings in the first and second quarter of 2021, it was mentioned that the launch of this plan was imminent, with Government endorsement presented as a matter of days and dates for the publication set. In reality, the plan was never made public as the Government of Ethiopia withheld its approval. As an alternative measure, OCHA shared a non-government endorsed northern Ethiopia Response Plan with partners, mainly to justify resource mobilization, while efforts were still under way to clarify targets.⁶⁴
91. The lack of a humanitarian mindset is evident from both key informant interviews, and an analysis of strategy documents and meeting minutes. Months into the armed conflict, part of the HCT did not have an adequate sense of the implications for the humanitarian response, given that it was taking place in the context of armed conflict. It was hoped that the activation of a System-Wide Scale-Up would change this. Key informants from the donor community in Addis Ababa noted that they contacted their colleagues at the capital level, who in turn contacted UN agencies' headquarters, raising the pressure to activate the Scale-Up.
92. The value of a System-Wide Scale-Up activation is important not only in terms of increased capacity on the ground but also in sending a key signal on behalf of the 'whole system' that a different approach and pace are needed.⁶⁵ Key informants also shared that a signal was needed to strengthen the humanitarian identity of the response. In practice, however, the Scale-Up activation did not lead to the necessary changes.⁶⁶ As explained above, the attempts to adopt and implement policies to ensure a principled approach did not materialize, nor was there a change in the position of a number of high-level UN representatives who were members of the HCT. Key informants noted that many of them lacked operational humanitarian experience in situations of armed conflict. Pointing to a later phase in the response in 2022, five key informants felt that the response had adopted a more humanitarian mindset over time. Three of them said this was also in reaction to what they had heard about or seen at the Addis Ababa level before.

3.1.2 *Adjustments of presence and response capacity*

93. **The response did not see a sufficient increase in presence and operational capacity.** Only 70 survey respondents out of the total 151 participants (46 per cent) answered that they knew about the System-Wide Scale-Up. This is likely partly due to the fact that, as seen in Figure 4, a large portion of the survey respondents were not active in the response at the time of the Scale-Up activation. It could, however, also indicate the coordination around the scale-up activation was not sufficiently inclusive to ensure widespread awareness and/or that the scale-up of activities did not make a remarkable difference across the response. And indeed, among the 70 survey respondents who said they were aware of the System-Wide Scale-Up, only 27 per cent agreed that it led to an increase in the humanitarian community's capacity to respond.

⁶⁴ ICCG Minutes, 4 May 2021.

⁶⁵ See also Taylor and Gorgeu, 'IASC System Wide Scale-Up Mechanism'.

⁶⁶ The Emergency Directors made this finding during their visit to Tigray from 5 to 12 July 2021.

94. Similarly, evidence from key informants and focus group discussions suggests that the humanitarian community in Ethiopia largely struggled to increase its presence and response capacity in a timely manner. As seen in Figure 9, a majority of key informant interviewees—79 per cent—found that the Scale-Up had not been done well, with 19 per cent saying it was done well and 2 per cent being neutral/saying they did not know. Figure 10 shows how interviewees felt that the timeliness, reactivity and adaptiveness of the response were negatively influenced by a variety of factors, external and internal to the humanitarian community. An external factor seen as particularly important in slowing down the increase of staff after the initial influx in April–May 2021 is the severe bureaucratic access obstacles, including delayed or denied visas; cap on money transport amid suspended banking and telecommunication and high living costs in Tigray; prohibition of carrying essential medicine, basic food, etc., for individual use amid no availability of such goods locally; etc. Notable internal factors that negatively influenced the Scale-Up are skills, capacity and mindset of staff, as well as coordination and prioritization challenges. The fact that the aid was too slow to arrive was also raised in 27 of the 44 (61 per cent) focus group discussions with affected people (which makes an overall of 61 per cent, but with the issue of timeliness being raised in 80 per cent of the focus group discussions in Tigray, 58 per cent in Afar and 33 per cent in Amhara). Individually, some agencies did better than others, but this had little impact on the whole. In October 2021, 11 months after the start of the armed conflict, the UN Secretary-General noted that “humanitarian aid is still not reaching the area at anywhere close to the levels needed.”⁶⁷ See Figure 11 for an overview of focus group discussions’ responses.
95. As for keeping track of staff numbers in relation to the progress of the Scale-Up, OCHA Situation Reports (SitReps) provide these numbers for 2021.⁶⁸ It should be noted that discrepancies exist with regard to numbers of UN staff quoted in different documents in that year. For example, an internal UN document refers to a UN Department for Safety and Security (UNDSS) report and notes that 245 national UN staff deployed in Tigray in March 2021.⁶⁹ In April, one month later, the OCHA SitRep refers, however, to 170 national UN staff, which suggests a significant reduction. One explanation given is that UNDSS, which usually keeps staff numbers for security purposes, did not have sufficient capacity at the time. Keeping track of the numbers of humanitarian staff should, however, not only be a quantitative exercise for security purposes only. To assess progress in Scale-Up, there is also a need to understand the sectors in which these staff work and the capacities they have. Such consolidated data was not available. In terms of counting staff numbers, data from OCHA show that between April and May 2021, i.e., at the time of the Scale-Up decision, the total number of staff more than doubled (see Table 8). Following this initial influx, the number of staff continued to increase, but at a much slower rate. Following the missions from several Emergency Directors in July 2021, they recommended that “to support the rapid scale-up, humanitarian partners need over 2,000 additional emergency experienced staff.”⁷⁰ One key informant familiar with this recommendation noted that even though the Scale-Up had resulted in increased capacities, operations on the ground still did not correspond to the needs.

⁶⁷ UN, ‘Secretary-General’s Remarks to the Security Council on Ethiopia’, 6 October 2021, <https://www.un.org/sg/en/content/sg/statement/2021-10-06/secretary-generals-remarks-the-security-council-ethiopia#:~:text=I%20urge%20all%20sides%20to,of%20Africa%20region%20and%20beyond.>

⁶⁸ No data was obtained for 2022.

⁶⁹ The document dated March 2021, on file with the ET.

⁷⁰ ‘EDG Operational Visit to Ethiopia, 5–12 July, Summary of Findings/Key Messages’, n.d., 4.

Table 8: Number of staff in Northern Ethiopia in 2021

	April 2021	May 2021	June 2021	Aug 2021	Sept 2021	Oct 2021	Nov 2021
UN	186	392	393	472	519	400	400
<i>Mekelle</i>							
International	33	94	86	99	103		
National	170	170	179	221	240		
<i>Shire</i>							
International	3	22	25	21	39		
National	34	106	103	131	137		
NGOs	>1500	1850?			1560 (at least)	1700	1700
International		108?					
National		1141?					

[Table developed by the evaluation team based on information provided by OCHA. The evaluation team has seen no data on staff presence for Afar and Amhara. The information available until September 2021, which has been used for Table 8, does not include Afar and Amhara.]

96. In terms of partners involved in the response, Tables 9 and 10 provide the number of partners indicated as having an increased operational presence in January 2022 (until December 2022) compared to June 2021. However, key informants noted that these numbers should not be equated with operational capacity on the ground, let alone delivery of the response. Few organizations were able to move out of the main hubs for large parts of the two-year conflict. Those who did noted it was mostly for one-off deliveries depending on where access was possible on a certain day.

Sector	Number of partners involved	
	June 2021	January 2022
Total	54	60
Food	7	9
WASH	18	30
Agriculture	6	12
ESNFI	26	32
CCCM	3	5
Health	23	28
Nutrition	12	19
Education	15	8
Protection	22	36

Table 9: Number of partners involved in response per cluster

[Table developed by the evaluation team combining information from the OCHA Northern Ethiopia Humanitarian Update Situation Reports of 24 June 2021 and 27 January 2022. The numbers in this table include local NGOs that were engaged in the system.]

Table 10: Number of partners involved in the response per region and type

Sector	Jan 2021 ⁷¹	Sep 2021 ⁷²	Jan 2022 ⁷³	Aug 2022 ⁷⁴	Dec 2022 ⁷⁵
Tigray	18	42	46	59	59
INGOs	10	25	25	29	33
UN Agencies	4	6	4	9	8
NNGOs	1	11	15	18	16
Government	3	0	2	3	2
Afar	N/A	N/A	N/A	32	25
International NGOs	N/A	N/A	N/A	19	15
UN Agencies	N/A	N/A	N/A	2	2
National NGOs	N/A	N/A	N/A	10	5
Government	N/A	N/A	N/A	1	3
Amhara	N/A	29	47	46	51
INGOs	N/A	15	22	28	30
UN Agencies	N/A	5	6	2	4
NNGOs	N/A	4	14	13	15
Government	N/A	5	4	3	2

[Table developed by the evaluation team combining information from the OCHA 3W Operational Presence dashboards.]

⁷¹ OCHA, 'Tigray Region: 3W Partners Operational Presence', 26 January 2021.

⁷² OCHA, 'Tigray Region: 3W Operational Presence, 26 September to 25 October 2021' and OCHA, 'Ethiopia Amhara Region: 3W Operational Presence—As of 30 September 2021', November 2021, <https://reliefweb.int/report/ethiopia/ethiopia-amhara-region-3w-operational-presence-30-september-2021>.

⁷³ OCHA, 'Ethiopia: Tigray Region: 3W Operational Presence from 17 December 2021 to 17 January 2022', January 2022, <https://reliefweb.int/report/ethiopia/ethiopia-tigray-region-3w-operational-presence-17-december-2021-17-january-2022>, and 'Amhara Region: 3W Operational Presence', 31 January 2022.

⁷⁴ OCHA, 'Tigray Region: 3W Operational Presence, 1–31 August 2022', 'Afar Region: 3W Operational Presence', 31 August 2022, 'Amhara 4W Operational Presence 1–31 August 2022'.

⁷⁵ OCHA, 'Tigray Region: 3W Operational Presence, 1–31 December 2022', 'Afar Region: 3W Operational Presence', 31 December 2022, 'Amhara 4W Operational Presence 1–31 December 2022'.

Figure 11: Overview of perceptions of affected people/FGD participants

Overall FGD perceptions/judgements

The dots are sized relative to each other: the larger the dot, the more frequently the issue was raised in different FGDs in terms of a certain perception/judgement. All FGDs were weighted equally. It should be noted that more FGDs were done in Tigray, which explains the comparatively larger dots across.



97. Numbers alone do not provide the full picture of staff capacities: limitations in terms of access and differences between national and international staff also have to be taken into account. Notably, international staff were evacuated at the time of the outbreak of hostilities in November 2020. Key informants from some of the agencies known for their emergency response capacities and risk appetite noted that they saw few agencies operating in areas beyond the main hubs in Tigray in the early months of the crisis. Clearly, the restrictive framework within which agencies were forced to operate meant that it was extremely challenging to increase staff levels in Tigray, especially regarding international staff.

“It is the problem that we see in general. International staff leave the scene as soon as the fighting starts. But you cannot leave local staff alone.”

(Key Informant 58–INGO)

98. The fact that (international) staff levels fell short of expectations is also seen in relation to cluster coordination.⁷⁶ The Inter-Cluster Coordination Group minutes refer to a matrix to keep track of filled and unfilled cluster coordination positions.⁷⁷ By 11 May 2021, more than six months into the response, the ICCG reported that only half of the clusters had dedicated coordinators.⁷⁸ One particular reason the ICCG noted is the slow recruitment of coordination staff. However, one month later, in June 2021, the same body notes that dedicated staff for cluster coordination and information management in Tigray remains below 50 per cent.⁷⁹ These figures contrast with the benchmark set by the IASC Protocol on System-Wide Scale-Up activation, which triggers immediate deployment of appropriate coordination capacity within 72 hours. One key informant knowledgeable on the matter of Scale-Up questioned the feasibility of this benchmark more in general, i.e., even under conditions that are more conducive for scaling up.

“The accusation of bias towards Tigray at the expense of the other two regions had some truth to it, but not as much as the Government would put it.”

(Key Informant 43–INGO)

99. **Scale-Up efforts were not adequately balanced across the three northern regions.** Key informants noted that the response in general, and the Scale-Up in particular, focused on Tigray and less so on the other two northern regions. This was perhaps natural in the first months when the effects of the conflict were still concentrated largely within Tigray, but even when internally displaced persons (IDPs) began to arrive in Afar and Amhara and the conflict spread, the perception among an overwhelming majority of key informants is that the focus continued to be on Tigray for too long, at the expense of Afar and Amhara. It was not until the second half of 2021 that the response officially included also Afar and Amhara, with the response being labelled for “Northern Ethiopia” and not only Tigray.⁸⁰ By that point, many months post-activation, it appears likely that another round of surge deployments was

“Afar and Amhara suffered, and never, even today, they haven’t received the same level of support and buy-in from humanitarian agencies.”

(Key Informant 28–UN)

“I must say there was a big bias towards just Tigray for a long time in terms of attention and visibility of the crisis. The way the narrative was portrayed also affected the way resources were allocated.”

(Amhara Key Informant 10–UN)

⁷⁶ The evaluation team asked several times, but no overview data on coordination staff positions was obtained from UNOCHA in Ethiopia. Yet ICCG minutes refer to certain data.

⁷⁷ In particular, ICCG Minutes, 7 July 2021. This matrix was not part of the documents provided to the evaluation team in spite of repeated requests for full documentation. Generally, key informants frequently expressed a concern felt that there were more dedicated cluster coordination staff in Mekelle than in Shire and in Tigray, compared with the other two regions.

⁷⁸ ICCG Minutes, 11 May 2021.

⁷⁹ ICCG Minutes, 1 June 2021.

⁸⁰ The section on delivery further elaborates on the unevenness of the response.

hampered due to ‘scale-up fatigue’, together with waning donor interest and increased government restrictions.

100. The lack of access was raised by more than 75 per cent of respondents from Tigray as a, if not the main, hindrance to the Scale-Up. Lack of funding did not appear to be a challenge for the delivery of humanitarian assistance in Tigray. This is also due to the access constraints, which meant that there were difficulties in expanding the delivery. However, more than 85 per cent of key informants in Afar and 60 per cent of key informants in Amhara noted the lack of funding itself as the most significant factor behind the lack of Scale-Up in those regions. A similar pattern can be seen in the survey responses. Participants were asked to rank the external obstacles to the Scale-Up, from 1 to 5, with 1 being no hindrance at all, and 5 being a significant hindrance. As seen in Figure 8, respondents from Afar ranked “availability of funding or access to funding” highest (at 4.67). Tigray respondents ranked “access to cash for operations” and “availability of fuel, means of transport, pipeline” highest (both at 4.25), and those from Amhara saw “administrative and bureaucratic procedures” as the most important external hindrance to the Scale-Up, though only at the average ranking of 3.
101. Importantly, the skewed balance in the response is not only felt among humanitarian respondents but also among affected people. The perception that aid efforts were better in Tigray was raised in seven of 12 focus group discussions in Amhara and three of 12 in Afar.
102. The difference in attention is partly related to different types of needs. In Afar, for example, the impact of droughts over time has created longer-term needs. This issue is further discussed in section 3.5 Coverage and delivery. Keeping in mind the principle that humanitarian aid should be given first to people most in need, the priority given to Tigray is justified to some degree.⁸¹
103. The Scale-Up was framed in terms of a food insecurity narrative, while there was a major gap in the capacity to cover rights and protection issues. The Scale-Up followed the dominant narrative in terms of humanitarian services in Ethiopia, which is focused on food aid. This narrative has the tendency to overshadow other priority needs, especially protection. The outbreak of the armed conflict in Tigray was marked by gross violations of human rights and serious breaches of international humanitarian law. Early reports pointed, in particular, to rampant CRSV against women and girls. An August 2021 study found that in the first months of the armed conflict, more than 43 per cent of women were affected in Tigray.⁸² In March 2021, the IASC Principals showed their significant concern regarding the lack of protection for the civilian population in Tigray by issuing a public statement calling for “an

“We feel excluded and disregarded by aid providers who have turned all their attention to Tigray.”

(Participant–Afar FGD 4)

“The crisis was presented as a food crisis. This was the main narrative. In reality, however, it was a protection crisis. The cases of rape and conflict-related sexual violence were staggering. Every doctor would tell you.”

(Key Informant 56–UN)

“This has been a protection crisis, and they were unable to do anything meaningful when it came to protection. Instead, they have been counting trucks.”

(Key Informant 48–INGO)

“In Tigray, protection was a huge undertaking, and the capacity to address the people with protection needs was low.”

(Amhara Key Informant 9–UN)

⁸¹ The proportionality element of the core principle of impartiality directs agencies to prioritize aid to those who are most in need. Whether this principle was explicitly considered, however, is another matter when prioritizing Tigray over Afar and Amhara. No evidence was found that suggests this.

⁸² See Girmatsion Fisseha et al., ‘War-Related Sexual and Gender-Based Violence in Tigray, Northern Ethiopia: Community-Based Study’, *BMJ Global Health*, 2023, <https://gh.bmj.com/content/8/7/e010270>.

independent investigation into conflict related sexual violence in Tigray.”⁸³ They noted that “only one [health] facility provides the full range of services for clinical management of rape survivors, and emergency contraception is fully available in less than half of the facilities assessed.”

104. The principals’ concern was also reflected in the statements of a large group of key informants who expressed that the armed conflict had caused a protection crisis. It was not matched, however, by an increased protection presence as part of the Scale-Up on the ground. The commitment to the centrality of protection as a priority in humanitarian action remains yet to be fully implemented.⁸⁴ While comprehensive data on protection services and capacities was not available until 2022, key informant interviews indicated that the protection cluster was unable to mobilize the number of protection officers needed to monitor the situation on the ground in the first months of the armed conflict. Some key informants whose agencies were present with international staff in Tigray reported their agencies’ efforts to collect data on cases of rape and other forms of sexual violence, which was recorded by the remaining staff of what health clinics kept functioning. In other words, the available data provided more than enough evidence of how rampant CRSV was and of rape being used as a weapon of war. More capacity, however, was needed to record accounts from survivors and develop a comprehensive picture of the precise scale of the sexual violence. In their statement, the IASC Principals stressed the need for an independent investigation into CRSV in Tigray with the involvement of the UN Office of the High Commissioner for Human Rights (OHCHR), which had an office in Addis Ababa. This statement, albeit welcome, gave rise to another issue: OHCHR’s limited capacity.⁸⁵ Key informants indicated that OHCHR’s capacity was largely insufficient in comparison to the scale of the abuse. There is reason, therefore, for the protection sector to boost its capacity in relation to Scale-Up activations to strengthen its role in terms of protection by presence, as OHCHR alone cannot cover such large-scale violations.
105. On the health response side of gender-based violence, the capacity at the start of the armed conflict was not much better. Data showed that at least 70 per cent of health facilities were destroyed or looted.⁸⁶ A report from the health cluster notes that the “destruction of the health system, starvation and gender-based violence have been used as instruments of war.”⁸⁷ WHO and UN Population Fund (UNFPA), two key UN agencies addressing the components of medical and psychosocial care in gender-based violence responses, did not have a sufficient number of staff on the ground until several months into the crisis. While UNFPA increased its presence and capacity on the ground somewhat, the agency’s main scale-up to address gender-based violence happened two years after the start of the conflict.⁸⁸

“It started with denial, and then despite repeated advocacy they refused to invest in a proper monitoring system that can actually be used. So we only have guess-numbers of GBV.”

(Key Informant 42– INGO)

⁸³ IASC Principals, ‘Statement on Gender-Based Violence in Tigray Region of Ethiopia’, 22 March 2021.

⁸⁴ Jane Cocking et al., ‘Independent Review of the Implementation of the IASC Protection Policy’, ODI and HPG, 31 May 2022, <https://odi.org/en/publications/independent-review-of-the-implementation-of-the-iasc-protection-policy/>.

⁸⁵ OHCHR’s limitations in terms of capacity are also laid out in an independent evaluation. Staff from the OHCHR regional East Africa office based in Addis Ababa and from Geneva, understandably, were reassigned or reorientated to the joint investigation with the Ethiopian Human Rights Commission, which led to many other constraints and shortcomings. See Mark Singleton and Stanley Wobusobozi, ‘Evaluation of the OHCHR Ethiopia Country Programme’, March 2022.

⁸⁶ IASC Statement. The source of this data appears to be WHO-managed Health Resource and Service Availability Monitoring Systems Assessment (known as HeRAMS).

⁸⁷ See footnote 12.

⁸⁸ UNFPA, ‘Partnering with Ethiopia’s Ministry of Women, the World Bank and UNOPS to Address Gender-Based Violence After Two Years of Conflict’, 2023, <https://www.unfpa.org/updates/partnering-ethiopias-ministry-women-world-bank-and-unops-address-gender-based-violence>.

At the global level, UNFPA fulfils the lead-agency role for the gender-based violence response. But global cluster leadership arrangements are not automatically replicated at the country level. It is the Humanitarian Coordinator (HC)/Resident Coordinator (RC) who formally appoints cluster lead agencies.⁸⁹ In this case, the leadership of the gender-based violence area of responsibility has been problematic. In practice, at the subnational level, the UN Children’s Fund (UNICEF) fulfilled this role for many months while the UNFPA recruited a substantive post-holder at the Field Office level. UNFPA, however, maintains that it always kept the lead-agency role formally. The agency stressed that it assumed this role together with the Bureaus of Women Affairs in Amhara in 2015, Tigray in 2016 and Afar in 2021.⁹⁰ In practice, at the subnational level, UNHCR led the gender-based violence response in Shire (Tigray). With UNFPA, UNHCR and UNICEF contending that they all played a leadership role, it is clear that the leadership arrangement of this key area was unclear and potentially also impacted scaling-up capacity.

3.1.3 *Process and leadership of the Scale-Up*

- 106. The response capacity was not adjusted—this created significant levels of dissatisfaction among senior leadership.** In early June 2021, the IASC Principals held an ad hoc meeting to review the status of the Scale-Up activation. At this meeting, the UN Secretary-General, who exceptionally had attended it, expressed strong disappointment over how the Scale-Up had gone until that point.⁹¹ Importantly, he raised the issue of reputational risk should the collective of agencies not rise to the challenge and urged the principals to accelerate the Scale-Up.⁹² He also asked them to report back to the Emergency Relief Coordinator, from whom he expected a progress report within a week. Examining the follow-up, the evaluation team obtained no evidence of further reports fulfilling the UN Secretary-General’s request. In essence, this shows what can be described as the limits of the system, i.e., leadership that is aware of a Scale-Up falling behind and acts upon it but that is unable to accelerate the system’s mobilization.
- 107.** The global-level criticisms of the lack of Scale-Up do not stand alone. At the country level, the Deputy Humanitarian Coordinator repeatedly made similar remarks for several months, as evidenced by HCT meeting minutes. On several occasions, it was noted that the response remained too slow and that too much aid remained in the pipeline. With so much critique levelled, the key question is the extent to which the lack of Scale-Up can be attributed to shortcomings in the system itself, at its leadership or operational levels. Several variables, such as lack of access and security (see section 3.2), can, of course, be of such a degree that they render an effective Scale-Up quasi-impossible. There are, however, variables, such as the internal politics of the system or bureaucratic hurdles, that the system can or should address.
- 108. The Scale-Up declaration was not timely.** Eighty-four per cent of key informant interviewees speaking about the System-Wide Scale-Up declaration held the view that it should have come much sooner and/or that the process of scaling up was much too slow. Only 16 per cent of key informants found that the declaration was made in a timely manner and could not have been made with more speed. They mostly referred to the set-up of the system and the context in Ethiopia to explain why

⁸⁹ IASC, Guideline on using the cluster approach, November 2006, 5. Commenting on the draft of this report, UNFPA noted that “the national lead role in Ethiopia was established in Addis Ababa, co-led by UNFPA and Federal Ministry of Women and Social Affairs (MOWSA), in 2009.”

⁹⁰ UNFPA, comment on the draft version of this report.

⁹¹ According to the IASC Secretariat, it is extremely rare for the UN Secretary-General to attend an IASC Principals meeting in relation to a specific crisis.

⁹² IASC, ‘IASC Principals Ad Hoc Meeting Summary Record and Action Points—7 June’, 2021.

things would naturally take time—a comment that resonates with those who pointed to the way in which emergency (and humanitarian) response is carried out in Ethiopia. Indeed, the decision to activate the Scale-Up protocols in late April 2021 came nearly six months into an armed conflict that very quickly saw violence spiralling out of control.

109. As for the date of the System-Wide Scale-Up, there is the general view that this decision taken towards the end of April 2021 came very late.⁹³ Some agencies declared some form of expansion of their operations in Tigray months before April 2021, while others only did so after the IASC activation of the System-Wide Scale-Up. For example, several key informants noted their organizations' decision to extend their presence in Ethiopia and to become active in Tigray in an emergency mode soon after the outbreak of hostilities in early November 2020. Others explained how their agencies implemented a phased scale-up. UNHCR, for example, internally decided on a higher-level emergency response (a Level 2 emergency) long before April 2021 but only activated a corporate scale-up in the wake of the IASC decision of 28 April 2021.⁹⁴ WFP, however, declared the crisis a corporate emergency in March 2021.
110. The first public messages from UN agency heads referring to an at-scale humanitarian response in relation to the needs are dated December 2020.⁹⁵ Evidence showed that the Emergency Directors' Group, as the IASC body that advises on strategic and operational issues requiring urgent collective action, noted the need for a scaled-up response as early as January 2021. In those days and weeks, external and internal messages within and between UN agencies seen by the evaluation team highlighted that the response did not meet the scale and capacities needed to address the situation. The OCHA SitRep of 8 March 2021 noted: "Despite ongoing efforts, the overall humanitarian response remains deeply inadequate compared to the needs on the ground."⁹⁶ In their press statements and other public messages, several IASC heads of agency and the UN Secretary-General also pointed to the need for a scaled-up response.⁹⁷
111. The press statement from the UN Security Council made a few days before the IASC Principals' decision is also worth noting. The call "for a scaled-up humanitarian response and unfettered humanitarian access to all people in need, including in the context of the food security situation" followed several efforts by a number of member states, especially Ireland, to put the spotlight on the armed conflict in Tigray.
112. **The Scale-Up benchmarks the HCT developed did not move the Scale-Up forward.** According to the IASC Scale-Up protocols, the HCT was expected to develop and maintain a set of benchmarks to assess Scale-Up progress. The evaluation team found a single such document for 2021, dated 30 May 2021, which was only updated once. Using colour coding, it highlighted progress on 24 identified benchmarks. At that moment in late May, one of the benchmarks was indicated as achieved: the creation of the Deputy Humanitarian Coordinator position, something which was, in

⁹³ See also Taylor and Gorgeu, 'IASC System Wide Scale-Up Mechanism'.

⁹⁴ UNICEF activated a Corporate Emergency Activation Process (CEAP) for Northern Ethiopia on 10 May 2021. UNHCR did so on 20 May 2021.

⁹⁵ See the timeline in section 2.3.5.

⁹⁶ OCHA, 'Ethiopia-Tigray Region Humanitarian Update—Situation Report. Last Updated 8 March 2021', 2021, <https://reliefweb.int/report/ethiopia/ethiopia-tigray-region-humanitarian-update-situation-report-8-march-2021>.

⁹⁷ See, e.g., World Food Programme Executive Director David Beasley, quoted in UN News, 'Rapid Scale up Crucial to Meet Humanitarian Needs in Ethiopia's Tigray: Joint UN-Government Mission', 7 February 2021, <https://news.un.org/en/story/2021/02/1084092>. UNHCR, 'Remarks by the UN High Commissioner for Refugees Filippo Grandi at the Press Conference in Addis Ababa', 1 February 2021, <https://www.unhcr.org/news/news-releases/remarks-un-high-commissioner-refugees-filippo-grandi-press-conference-addis>.

fact, already proactively done at the end of 2020—months before the declaration of the System-Wide Scale-Up. Eight benchmarks showed some progress, while the actions in relation to 13 other benchmarks were indicated as falling behind. Three benchmarks had seen no action taken as of late May 2021. In short, the benchmarks were hardly followed and helpful in creating a sense of accountability and did not provide an incentive for moving the Scale-Up forward. The opportunity to use them as a management tool was missed.

113. A month after the IASC Principals' decision, it was unsurprising, and perhaps even understandable, that so little progress had been made towards the benchmarks. However, the lack of contextualization of the benchmarks themselves indicated that their achievement was not only hampered by time. Indeed, benchmarks that are not in line with the reality on the ground to begin with are very unlikely to be achieved. For example, one of the benchmarks on which no action had been taken by the end of May was: "Community feedback incorporated into response strategy via deployment of AAP [accountability to affected people] coordinator + 15 community engagement specialists." A benchmark such as this one would have been entirely appropriate in a situation in which freedom of movement on the ground was not an issue but simply did not fit in a full-blown armed conflict. The benchmark should have been adjusted to the context, for example, as follows: "Deployment of an accountability to affected people coordinator who will identify alternative ways to engage with affected communities while recognizing the limitations in communications due to the communications blackout imposed by the Government of Ethiopia."
114. Another example of an out-of-place benchmark was: "Federal and Regional Authorities ensure a permissive environment for humanitarian response to reach all urban and rural zones including under Amhara control." While authorities, whether they are de facto or formal authorities, have to ensure conditions that facilitate the safe delivery of humanitarian services, formulating the benchmark in this way suggested that the authorities were part of the Scale-Up actions. Some of the benchmarks appear to be used as a planning tool, such as a log frame, that might incorporate such a statement as an assumption. The benchmark could have worked better along the lines of: "Coordinated access negotiations by X (relevant number) of access negotiators deployed at every administrative level (local, subregional and national)." Due to the insufficiently contextualized benchmarks, did not only the Scale-Up itself fall behind, but also the efforts to properly monitor it. Further, this evaluation has found that not all elements outlined in the Scale-Up protocols were implemented, for example the "Statement of Key Strategic Priorities" was not produced at the country level. As noted elsewhere in this report, the HCT was unable to agree on collective strategies for framing the response.
115. **Unclear geographical coverage and timing of the Scale-Up.** A relatively high number of key informants in Ethiopia—particularly at regional and field level—were, in fact, not aware of the System-Wide Scale-Up declaration but only of their own agency or organization's efforts to increase capacity in view of the escalating conflict. Fifteen of the key informant interviewees in Afar, Amhara and Tigray (i.e., 13 per cent) specifically said they were not aware of the System-Wide Scale-Up. Of those who were aware of the System-Wide Scale-Up, informants in Afar and Amhara especially were unsure whether it also covered their regions, given that the focus was on Tigray. In general, the non-UN part of the system, such as NGOs and others, especially those that do not sit on the HCT, were either not fully sure as to how they were part of the Scale-Up or did not see themselves as part of it. This position was also seen in this response.
116. There was no discernible pattern with regard to the type of respondents who were unaware of the System-Wide Scale-Up; they included representatives of the UN, NGOs and international NGOs of varying seniority. The confusion around the geographical coverage could also be explained by the

fact that in May 2022, the decision was made to extend the Scale-Up to the other areas in Ethiopia impacted by drought and complex protection and access issues. However, regions such as Oromia and Benishangul Gumuz saw pressing needs long before that moment. The HCT had discussed the geographical expansion as of early 2022, as several members and partners held the view that humanitarian response in Ethiopia remained in need of a boost.

117. **The lack of a significant Scale-Up is also due to a lack of accountability.** The lack of contextualized benchmarks and follow-up was a particular concern from the side of donor government representatives. While there were significant differences in the degree to which UN agencies stepped up their work following the IASC Scale-Up decision, differentiating between agencies doing well and less well is not the purpose of an Inter-Agency Humanitarian Evaluation (IAHE). It is clear that a number of agencies invoked the lack of access as a reason for remaining behind when compared to others who were more effective in scaling up despite access restrictions. In fact, the justification of the lack of access was still given at a time when an internal report noted that the lack of Scale-Up could “no longer be attributed exclusively to lack of access.”⁹⁸ This is also and particularly true for November to December 2022. In January 2023, OCHA’s SitRep pointed to increased humanitarian presence in Tigray, but it also indicated the remaining severe humanitarian needs. This evaluation did not find an immediate increase in the number of assessments and surveys following the cessation of hostilities. Further to understanding the scale and types of needs, retrospectively looking at what communities endured during the armed conflict and collecting evidence would also have been a step to take.
118. This is not to say that references to external obstacles in the way of scaling up, such as the denial or late approval of visas, are not valid justifications—they are. It is, however, internal obstacles that agencies can address, and it is noteworthy that some agencies were more reluctant than others to attribute their lack of scale-up to such internal weaknesses. Agencies who were open about such internal weaknesses noted internal misalignment, especially between headquarters and their country director. One such example shared concerns about the July 2021 Emergency Directors Group’s mission, which was, in fact, not a joint formal mission. The Government of Ethiopia did not agree to this mission to take stock of the Scale-Up, but key informants also said that some of the UN agency country directors did not feel comfortable with their emergency directors coming to the country either.⁹⁹ Insufficient transport capacity and lack of fuel were also mentioned as reasons why the emergency directors were less than welcome.
119. The absence of dialogue in the HCT around the factors internal to the system (i.e., other than access, security, or funding) that held up a more effective and faster Scale-Up is related to the lack of accountability. This is what the abovementioned benchmarks can do: require agency representatives, as HCT members, to explain their efforts to meet the benchmarks. Peer pressure is critical in this regard, as are frankness and meaningful dialogue.
120. The HCT submitted a revised and updated version of the Scale-Up benchmarks to the Emergency Directors Group in June 2022. The document had a format different from the one from 2021, and many of the benchmarks were worded differently. The new format and wording seemed to put less emphasis on assessing progress, and HCT minutes did not reveal any in-depth dialogue on the implementation of the benchmarks either. In fact, the meeting records showed that HCT discussions

⁹⁸ The internal UN report for February 2021, on file with the evaluation team.

⁹⁹ Emergency Directors Group’s missions, either as a group or as a smaller delegation of the Emergency Directors Group, are a regular feature in the context of a system-wide Scale-Up. Sometimes, these missions look at the necessity of the Scale-Up activation; at other times, they assess progress and provide support to Scale-Up efforts following an activation.

on revised or updated benchmarks for the multiple Scale-Up phases were lengthy and/or inconclusive. A certain ‘benchmark fatigue’ appears in 2022 with continuing Scale-Up extensions and with little interest from HCT members to mount a collective effort to assess progress in meeting the benchmarks. At the time of the data collection mission in early June 2023, the HCT was still working on benchmarks in relation to the Scale-Up extension for the whole of Ethiopia agreed on in November 2022. Much was left to OCHA and the donors participating in the HCT to keep the benchmarks discussion alive.

121. Differences among agencies in their ability to scale up are worth further examination. One example within the health sector is telling. Key informants from other organizations active in the health sector noticed the quick scale-up of Médecins Sans Frontières in Tigray, sharing how impressed they were with it and the agency’s ability to move around in the region. One key informant from the UN explained that he saw how Médecins Sans Frontières recruited staff on the spot by announcing job vacancies on posters in the streets of Shire. “This was entirely different from how we operated,” he added. Until then, his agency’s practice involved human resources processes with vacancies centralized and posted online by the country office in Addis Ababa. In a situation where there is a communication blackout and no functioning Internet, one needs to adjust to this reality quickly. In general, non-UN agencies such as Action Contre la Faim, the International Committee of the Red Cross, Médecins Sans Frontières, Norwegian Refugee Council and a few others have more flexibility than the UN in adjusting on the spot, which is also related to their emergency orientations and/or decentralized leadership. As for UN agencies, some agencies have fast-track procedures for contracting new partners and staff as part of their internal protocols for Scale-Up, while others do not have this option. It is clear that such emergency measures may influence the speed and likelihood of a successful Scale-Up.
122. In addition, the Scale-Up as a mechanism has limitations in terms of the extent to which it addresses internal and contextual challenges. Internally, the system’s emergency capacity in armed conflict and its inflexibility in changing course rapidly were identified as issues in the past.¹⁰⁰ Contextual challenges, for example, in terms of autonomous data collection, existed long before this crisis.¹⁰¹ It follows that the value of a Scale-Up activation lies in boosting operational capacities for a specific period of time and promoting a humanitarian mindset, but it would be misleading to think a Scale-Up activation could have addressed the deeper issues seen in Ethiopia.

¹⁰⁰ See Monia de Castellarnau, Velina Stoianova, ‘Bridging the Emergency Gap, Reflections and Call for Action After a Two-Year Exploration of Emergency Response in Acute Conflicts’, MSF, April 2018.

¹⁰¹ See, e.g., Farah Hegazi et al., ‘The World Food Programme’s Contribution to Improving the Prospects for Peace in Ethiopia’, 2022; FAO, ‘Ethiopia—Building Resilience to Climate Change-Related and Other Disasters in Ethiopia—Challenges, Lessons, and the Way Forward’, 2022, <https://doi.org/10.4060/cc1210en>; ACAPS, ‘Ethiopia—The Pre-Crisis Situation in Tigray—Secondary Data Review’; See also Montemurro and Wendt, ‘The Path of Least Resistance’; Julia Steets et al., ‘Inter-Agency Humanitarian Evaluation of the Drought Response in Ethiopia 2015—2018’, IAHE Steering Group, November 2019, <https://www.unfpa.org/inter-agency-humanitarian-evaluation-drought-response-ethiopia-2015-2018#>.

3.2 Humanitarian Access-Up

To what extent did the collective response support HC-led efforts to obtain free, timely, safe and unimpeded humanitarian access?

Evaluation criteria: Relevance, Effectiveness, Coherence, Quality

Summary findings

Following a principled approach

- The UN system did not redefine its terms of engagement as the Government of Ethiopia became a party to an armed conflict.
- The OCHA-led attempts to develop a collective access strategy did not bear fruit. There were no red lines.

High-level diplomacy for access

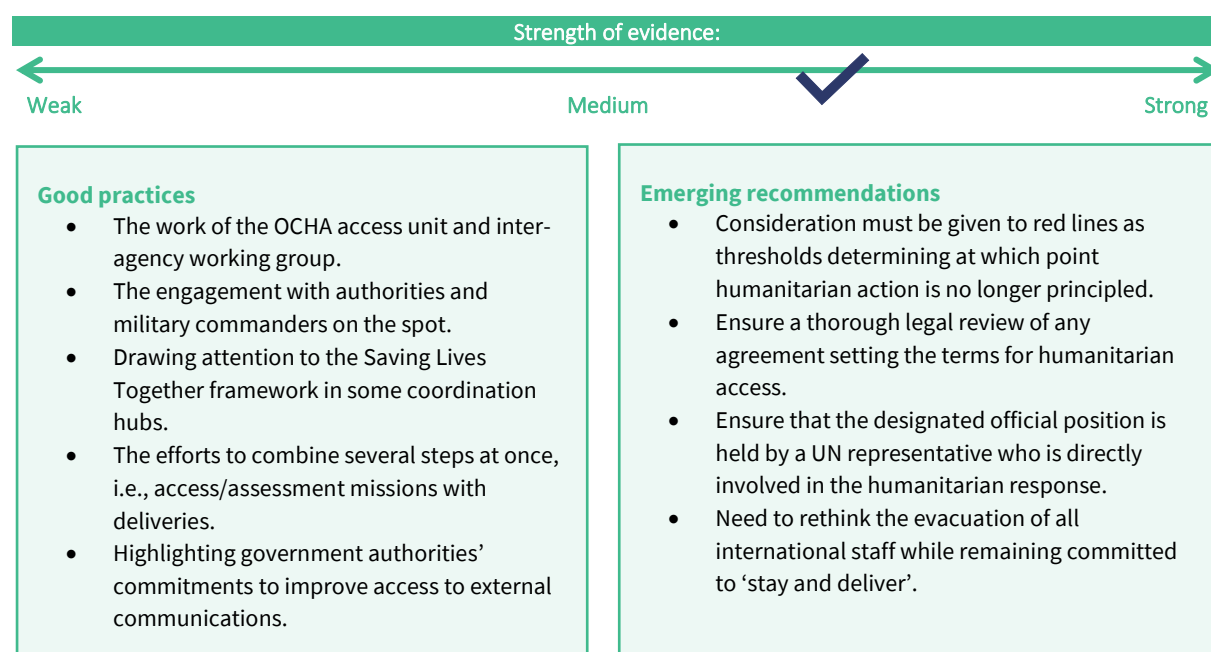
- There was significant high-level diplomatic engagement involving the most senior leaders from member states and UN agencies. Many of these efforts focused on humanitarian access.
- The higher-level diplomatic engagement pushing for humanitarian access lacked an appropriate connection to operational-level activities.

Working level efforts for access

- The agreement for humanitarian access signed in late November 2020 between the Government of Ethiopia and the HC/RC on behalf of the UN in Ethiopia was ineffective, if not counterproductive.
- A number of non-UN organizations worked outside this formal clearance arrangement, and some parts of the UN made efforts to follow a similar approach in terms of on-the-spot negotiations through direct, in-person contacts.

Duty of care, red lines and security management

- The system did not implement appropriate duty of care.
- The system did not have a strategic discussion around the degree to which agencies accept being instrumentalized and/or when they can no longer perform their duties in accordance with their mandates.
- The security management system was not appropriate for a humanitarian response in a situation of armed conflict.



123. The lack of humanitarian access¹⁰² was among the top defining characteristics of this crisis. This was particularly the issue in Tigray, where the parties to the conflict denied the levels of access needed for the agencies to reach affected communities. In addition, affected people were cut off from public or essential services, such as the banking system, mobile phone networks and fuel provision. Generally, in the time frame covered by the evaluation, humanitarian access was less of an issue in Afar and Amhara compared to Tigray, although a lack of roads in certain areas also hampered access there to some degree. In these regions, access to the border areas with Tigray was constrained due to insecurity caused by combat. Since the cessation of hostilities agreement, access has started to improve, although certain areas remained hard to reach, including the Western Zone in Tigray, the area around Erob in north-eastern Tigray and some *woredas* (districts) in border areas. At the time of data collection, areas in Amhara also became more insecure and difficult to reach.
124. In examining the efforts that humanitarian agencies undertook to negotiate access, the evaluation team considered that access obstacles were caused by factors such as the conduct of military operations as well as related to attempts by parties to the conflict to instrumentalize aid and deny people's access to humanitarian assistance.¹⁰³ With regard to insecurity, it should be kept in mind that there are differences in the security regimes among the humanitarian community. The UN Department for Safety and Security is responsible for overall security decisions covering UN agencies, each of which also has its own security advisers, whereas the ICRC and NGOs have their own systems for decision-making on staff security matters.
125. Under international humanitarian law, parties to an armed conflict are obliged to facilitate access, should the population in the areas under their control need essential services and goods indispensable for their survival. It follows that humanitarian organizations have a role to play in reminding parties to the conflict of their obligations under international humanitarian law. If and when evidence emerges that access denials are arbitrary and the population is suffering unnecessary hardship, humanitarian organizations will have to (re)consider their strategies and actions in opening up access. A key question for this evaluation was the extent and the ways in which organizations undertook (joint) efforts to negotiate unfettered access to affected communities. The following sections examine the collective efforts made to ensure humanitarian space, including through a principled approach (3.2.1), high-level diplomacy (3.2.2) and working-level efforts and other approaches (3.2.3). The last subsection looks at duty of care, red lines and security management (3.2.4).

“Concretely, the operational constraint, the perception on UN, and the lack of security and infrastructure on the ground is what makes access difficult.”

(Key Informant 1–UN)

3.2.1 Following a principled approach

126. Humanitarian access is closely related to a principled humanitarian approach. The four core principles (humanity, impartiality, neutrality and independence) are the key components of such an approach.¹⁰⁴ In fact, they form a foundational normative framework, as without them, humanitarian

¹⁰² This chapter covers access from the standpoint of humanitarian agencies. The ability of war-affected people to access the services and materials they need for their survival is framed as freedom of movement.

¹⁰³ These causes are also mentioned in an internal UN document on file with ET.

¹⁰⁴ As laid down in UNGA resolution 46/182. See also OCHA on the message: Humanitarian Principles, June 2012. In 2017, at the global level, the IASC Reference Group on Principled Humanitarian Action made it a priority: “[h]umanitarian access is facilitated by improved awareness, application and integration of humanitarian principles at field level,” <https://interagencystandingcommittee.org/iasc-reference-group-on-principled-humanitarian-action>.

action cannot be qualified as such.¹⁰⁵ However, no common or homogeneous understanding in what a principled approach entails can be found in IASC or other humanitarian policy documents. In this case, in the HCT advocacy, there were largely two diverging standpoints as to what a principled approach meant and how it could serve humanitarian access. The first group favoured silent diplomacy and working in close partnership with the Government of Ethiopia as they asserted that this was the only way to operate successfully in Ethiopia. The World Food Programme country director, who was in Ethiopia until early 2022, explained, for example, that he was expected to maintain deep relations with the Government of Ethiopia to ensure that his superiors continued to enjoy good relationship with senior levels of Government.¹⁰⁶

127. This view is further reflected in evidence from key informants and internal UN documents. One such document suggests establishing “a steering committee” made of UN and representatives from the Government of Ethiopia Ministries “with a view to protect the humanitarian principles.”¹⁰⁷ In other words, the view is held that ensuring respect for humanitarian principles can be done in close cooperation with one of the parties to an armed conflict. This would seem to contradict at least two of the principles, i.e., neutrality and independence, which are instrumental in achieving respect for the other two principles (humanity and impartiality).¹⁰⁸
128. The UN continued to see the Government of Ethiopia as its closest and main partner during the period of the armed conflict. Terminology such as “under the leadership of,” in “strong partnership with” or “on behalf of” remained common in the UN’s external communications on its work in northern Ethiopia. Even more significantly, the evaluation team could not find any other conflict-affected country where UN agencies use a formulation as this “Government of Ethiopia and Humanitarian Partners Joint Report on Response Status to Northern Ethiopia” in publications.¹⁰⁹ Whether intentional or not, highlighting the joint character not only signified that the UN and Government were in agreement on the data presented in the report but essentially also suggested that the actions of the Government of Ethiopia and those of the UN and humanitarian partners were part of one and the same operation. The fundamental problem this partnership approach raises is the fact that **the UN-led system did not redefine its terms of engagement when the Government of Ethiopia became a party to an armed conflict** in early November 2020.
129. Towards the end of November 2020, **the HC/RC signed an agreement covering humanitarian access with the Government of Ethiopia.**¹¹⁰ The idea for this access agreement originated from within OCHA as an attempt to develop a predictable arrangement with the Government to facilitate access, according to key informants familiar with the agreement. The agreement includes the creation of “a coordination mechanism” “led by the Federal Government” “to ensure that UN and humanitarian

¹⁰⁵ Personal communication with the author of draft UNEG Guidance on evaluating humanitarian principles, October 2023.

¹⁰⁶ Steven Were Omamo, *At the Center of the World in Ethiopia*, Richardson-Omamo Books, 2022, 25–26.

¹⁰⁷ The internal UN document dated June 2021, on file with the evaluation team.

¹⁰⁸ For an explanation, see Ed Schenkenberg van Mierop, ‘Coming Clean on Neutrality and Independence: The Need to Assess The Application of Humanitarian Principles’ *International Review of the Red Cross* 97 (897/898), (2016): 295–318, https://international-review.icrc.org/sites/default/files/irc_97_1-2-12.pdf.

¹⁰⁹ The Government of Ethiopia et al., ‘Government of Ethiopia and Humanitarian Partners’ Joint Report on Response Status to Northern Ethiopia’, 12 May 2023, <https://twitter.com/UNEthiopia/status/1657994665625280512>. The evaluation team particularly looked at humanitarian documentation from countries where the UN has significant development operations, including Cameroon, Mozambique and Nigeria.

¹¹⁰ Agreement for an enhanced coordination mechanism for humanitarian access in Ethiopia’s Tigray region between the Government of the Federal Democratic Republic of Ethiopia and the United Nations, Ethiopia, 28 November 2020. On file with the evaluation team.

partners can, under the overall authority of the GoE [Government of Ethiopia] [...] have unimpeded, sustained and secure access [...] in GoE-administered areas in Tigray and bordering areas of Afar and Amhara regions.”¹¹¹

130. The wording of this agreement does not refer to international humanitarian law, the most widely accepted body of international law relevant to armed conflict. Instead, the agreement refers to the Government’s military actions in Tigray as “a law-enforcement operation,” a qualification used by the Government of Ethiopia to downplay the existence of an armed conflict, thereby evading the applicability of international humanitarian law.¹¹² The absence of international humanitarian law references in the access agreement stands in sharp contrast to other UN messages and positions. For example, reacting to reports of mass killings involving scores of victims in the town of Mai-Kadra (Tigray), the UN High Commissioner for Human Rights warned that war crimes might have been committed on 13 November 2020.¹¹³ A first public statement from the Emergency Relief Coordinator on the unfolding armed conflict in northern Ethiopia on 17 November 2020 also made an explicit reference to international humanitarian law.¹¹⁴ Likewise, an internal UN document on humanitarian access contained references to customary law rules deriving from international humanitarian law.¹¹⁵ Explicit references to international humanitarian law in the agreement would have been more than appropriate, given the strict conditions for warring parties under which they can refuse humanitarian access. The systematic denial of access for food convoys, for example, may amount to starvation—a war crime.¹¹⁶ One way for humanitarian agencies to mark the change of circumstances and to reframe their relationship accordingly is to share a note verbale. This is, for example, the practice of the ICRC, which shares a formal note with all parties to the conflict stating the applicable legal framework as standard procedure when an armed conflict breaks out.
131. Another omission in the access agreement is the lack of a reference to the humanitarian principle of independence. While the agreement contains explicit references to the principles of humanity, impartiality and neutrality, the fourth principle of independence is not mentioned, except for a brief reference in the specific context of the “independent verification of beneficiary lists.”¹¹⁷ Yet, as a key informant put it, “[T]he humanitarian system in Ethiopia is still navigating the principle of humanitarian independence in the identification and targeting of beneficiaries.” Independence has a somewhat particular meaning for UN as an intergovernmental organization, but since 2004, relevant UN General Assembly resolutions on “Strengthening of the coordination of emergency

¹¹¹ The Government of Ethiopia and the United Nations Ethiopia, ‘Agreement for an Enhanced Coordination Mechanism for Humanitarian Access in Ethiopia’s Tigray Region Between the Government of the Federal Democratic Republic of Ethiopia and the United Nations Ethiopia’, 28 November 2020. See also Ben Parker, ‘Relief for Tigray Stalled as Ethiopian Government Curbs Access’, 11 February 2021, <https://www.thenewhumanitarian.org/analysis/2021/2/11/Humanitarian-access-stalled-in-Ethiopia-Tigray>.

¹¹² As a reminder, international humanitarian law puts all parties to an armed conflict, including the central and internationally recognized government, on the same footing.

¹¹³ See, e.g., UN News, ‘Reported Ethiopia Massacre: UN Rights Chief Warns of Spiralling Situation, War Crimes’, 13 November 2020.

¹¹⁴ See footnote 129.

¹¹⁵ ‘Humanitarian Access Strategy—Ethiopia’s Tigray Region’, 18 November 2020 (internal document on file with the evaluation team).

¹¹⁶ The systematic denial of access and destruction of objects indispensable for survival in this conflict have been qualified as war crimes and crimes against humanity. See UN Human Rights Council, ‘Report of the International Commission of Human Rights Experts on Ethiopia (ICHREE), A/HCR/51/146’, 19 September 2022.

¹¹⁷ Provision 14 in the agreement; see also footnote 110 for further reference to this agreement.

humanitarian assistance” have referred to it.¹¹⁸ Those who negotiated the agreement on behalf of UN could easily have referred to those General Assembly resolutions. How such a legally flawed access agreement could be signed by the UN humanitarian leadership at the country level remains an open question to which the evaluation did not find an answer. Safeguards such as legal review at the global level, either by OCHA or the Office of Legal Affairs (or both), appear not to have functioned.

132. Further to the access agreement with the Government, there was another document on access in November 2020. ‘The Ethiopia Humanitarian Country Team Guiding Principles for Humanitarian Operations in Tigray, and border areas of Afar and Amhara regions’ contains a set of principles “to adopt a people-centred, protection-focused, evidence-based approach to identification of needs in a transparent, accountable, and coherent manner and regardless of which authority controls a given territory where civilians in need are located.”¹¹⁹ It refers to independence as one of the four principles and notes that “the protection of rights under international humanitarian law, International Human Rights Law and International Refugee Law does not contravene the principle of neutrality.” This language is to remind authorities that their obligations under international law are humanitarian responsibilities. The critical issue, however, with this HCT document is that it did not set the terms for the access agreement with the Government of Ethiopia. Worse, even though the HCT endorsed the guiding principles document on 26 November 2020, it was kept out of the loop on the access agreement with the Government of Ethiopia. In other words, the HCT-endorsed guiding principles did not set direction, nor was there any accountability for ignoring them in a crucial agreement with one of the parties to the conflict. In commenting on a draft of this report, a key informant noted that “access was at one point dropped from the HCT agenda, as it was considered an operational issue outside of the scope of the HCT.”
133. Those in favour of maintaining close relations with the Government of Ethiopia found that what they saw as robust humanitarian advocacy had only hardened the Government’s stance and that the public messages calling for access and respect for international humanitarian law had only antagonized the Government of Ethiopia. It was clear that the Government of Ethiopia did not appreciate the vocal criticisms directed against it. Médecins Sans Frontières and Norwegian Refugee Council were suspended in late July 2021, as they did not refrain from speaking out.¹²⁰ The Government of Ethiopia stated that they “have been disseminating misinformation on social media and other platforms outside of the mandate and purpose for which the organizations were permitted to operate.”¹²¹ Norwegian Refugee Council later commented that it felt extremely little solidarity from the UN’s side in terms of collective protest and anger vis-à-vis its suspension by the Government of Ethiopia.¹²² The international NGOs were not the only actors whose advocacy actions were seen as unwelcome. At the end of September 2021, as noted earlier, the Government of Ethiopia declared seven senior UN staff persona non grata (see also Text box 2). Several of the seven officials were associated with advocacy for ensuring the principled character of the response.

¹¹⁸ UNGA Res. 58/114 (2004). See also Schenkenberg van Mierop, ‘Coming Clean on Neutrality and Independence’, 308–309.

¹¹⁹ Endorsed by the HCT in November 2020.

¹²⁰ Based on interviews with key informants.

¹²¹ The Ethiopian News Agency, ‘Three NGOs Suspended for Operating Outside of Mandate, Permission in Ethiopia’, n.d., https://www.ena.et/web/eng/w/en_27174#:~:text=Addis%20Ababa%2C%20August%204%2F2021,Ethiopian%20Current%20Issues%20Fact%20Check.

¹²² The Humanitarian Fault Lines Podcast, ‘Interview with Jan Egeland, 23 January 2023’, Fordham University, 2023.

134. Largely, these seven officials represented the view held by those who called for a more robust stance to remind the Government of Ethiopia of its obligations under international humanitarian law. Key informants from agencies that favoured this approach stressed how humanitarian principles were guiding them in their operations and advocacy—an assertion that was not heard from key informants representing the first view.¹²³ They also noted that the agreements or compromises with the Government of Ethiopia, such as the access agreement concluded in November 2020, did not sufficiently refer to or safeguard humanitarian principles and that advocacy should be stepped up to remind the Government of Ethiopia (and other parties to the conflict) that arbitrarily refusing humanitarian access while the civilian population is in dire need of assistance is a violation of international law. As noted by the International Commission of Human Rights Experts on Ethiopia (ICHREE), despite the serious needs among the civilian population, “the Federal Government and its allies have consistently denied or obstructed humanitarian access to Tigray.”¹²⁴
135. **The OCHA-led attempts to develop a collective access strategy did not bear fruit. There were no red lines.** The evaluation team did not find clear evidence of a discussion in the Humanitarian Country Team on what it meant to apply a collective, principled humanitarian approach and to work within an international humanitarian law framework. Key informants explained that there had been no discussion in the HCT on what is referred to as red lines. Red lines can be formulated as part of joint operating principles. As an internal tool for the humanitarian community, their value lies in creating consistency and coherence among agencies’ policies and practices.¹²⁵ Red lines are a mechanism to establish when agency behaviours and decisions may go against adhering to humanitarian principles.¹²⁶ The consideration at which point a compromise is no longer principled and risks becoming counterproductive is part of following a principled approach.¹²⁷ Respondents said that as soon as the armed conflict started in November 2020, it was clear that there would be no such red lines. To avoid a situation characterized by complacency in terms of ‘this is the way we have to work in this country,’ it is crucial that HCTs consider, discuss and monitor red lines as part of mutual accountability.
136. The only principled issue on which there was consensus at the country level and global level was the use of armed escorts. In line with standing IASC policy, it was singled out as a last resort measure for achieving access, even though one draft position paper recognized it as part of previous and current practice elsewhere in Ethiopia.¹²⁸ On all other issues related to a principled approach, the HCT did not produce any meaningful strategy or position, due to the divergent views on how humanitarian principles should be understood and applied, how respect for the principles should be obtained and what distance should be maintained from all parties to the conflict, including the Government of Ethiopia.

¹²³ It should be kept in mind that in evaluating a principled approach, the evaluation team assesses the degree to which agencies refer to principles and are able to demonstrate how the principles guided them in their work.

¹²⁴ UN Human Rights Council, ‘Report of the International Commission of Human Rights Experts on Ethiopia (ICHREE), A/HCR/51/146’, 11.

¹²⁵ See, e.g., Abby Stoddard and Adele Harmer, ‘Humanitarian Access in Armed Conflict: A Need for New Principles? Final Report’, 2018.

¹²⁶ See Marzia Montemurro and Karin Wendt, ‘Principled Humanitarian Programming in Yemen—A Prisoner’s Dilemma?’, 2021, 34.

¹²⁷ Involving affected communities as part of accountability to affected people in complex principled decision-making has been given very little attention so far but would be an obvious step to take.

¹²⁸ OCHA, ‘Ethiopia Humanitarian Country Team Position Paper—Humanitarian Access and Armed Escorts in Tigray—Final Draft’, December 2020.

137. As for the different views on what kind of advocacy approach should be followed, the dilemma between speaking out and keeping silent to keep relations smooth is one that is familiar to every humanitarian organization working in constrained environments. Those HCT members who favoured more robust advocacy were also pushing for a principled approach. Some of them were among the group of seven senior UN officials who were expelled by the Government of Ethiopia at the end of September 2021. Those who favoured silent diplomacy were not seen expressing their views on what it takes to implement a principled approach. There was no space, atmosphere and trust within the HCT to discuss collectively what it means to follow a principled approach and which advocacy strategy might yield the best results, especially as it is generally known that different organizations will weigh their considerations differently in relation to their different mandates.

3.2.2 High-level diplomacy to open access

138. For much of the period of the two-year armed conflict, there was significant high-level diplomatic engagement involving the most senior leaders from member states and UN agencies, including OCHA, UNHCR and World Food Programme. Many of these efforts focused on humanitarian access. The Emergency Relief Coordinator's first public statement on access came less than two weeks into the armed conflict when he noted: "I call for full access to reach people in need wherever they are; safe passage for civilians seeking assistance; and the security of aid workers. Humanitarian workers must be able to deliver assistance without fear of attack."¹²⁹ Referring to the need for the Government of Ethiopia to guarantee unfettered humanitarian access, the UN Secretary-General first raised his concerns publicly on 7 December 2020.¹³⁰ The High Commissioner for Refugees and WFP Executive Director visited the country in late January and early February 2021 respectively with the latter making a second visit later that month too. In their press contacts, both humanitarian leaders pointed to the need for improved access.¹³¹

139. Key informants noted that after each visit of an IASC Principal, there was a (small and short-lived) improvement in access, including the granting of a number of visas or an increase in the number of trucks reaching Tigray. For example, following the February 2021 visits of the two IASC Principals, there was a declaration from the Prime Minister that there would be "unfettered access." Earlier, the Minister of Peace, who accompanied the WFP Executive Director on his first visit to Tigray, had said that aid worker travel and visa requests would be expedited.¹³²

140. Other key informants added that such progress would gradually disappear in the following weeks and that the messages from some of the principals were too positive. Some of them explicitly referred to the WFP Executive Director. One example is a tweet in relation to his visit in early 2021: "Important breakthroughs in #Ethiopia today! @WFP and the Government of Ethiopia have agreed on concrete steps to expand access for humanitarians across #Tigray, and WFP will scale up its

¹²⁹ UN, 'Note to Correspondents: Statement by Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Mark Lowcock, on Ethiopia', 17 November 2020, <https://www.un.org/sg/en/content/sg/note-correspondents/2020-11-17/note-correspondents-statement-under-secretary-general-for-humanitarian-affairs-and-emergency-relief-coordinator-mark-lowcock-ethiopia>.

¹³⁰ UN, 'Very Concerned by Situation in Ethiopia's Tigray Province, Secretary-General Calls for Quickly Restoring Rule of Law, Public Services Delivery, SG/SM/20478', 7 December 2020, <https://press.un.org/en/2020/sgsm20478.doc.htm>.

¹³¹ See footnote 90. See also WFP, 'Statement on Humanitarian Assistance and Food and Nutrition Security in Ethiopia's Tigray Region', 6 February 2021, <https://www.wfp.org/news/statement-humanitarian-assistance-and-food-and-nutrition-security-ethiopia-tigray-region>.

¹³² WFP, 'Joint UN-Government Tigray Mission Highlights Humanitarian Needs and Path Forward', 6 February 2021, <https://www.wfp.org/news/joint-un-government-tigray-mission-highlights-humanitarian-needs-and-path-forward>.

operations.”¹³³ Whether these tweets were based on clear agreements or on aspirations is unknown, but in reality, access did not materialize to the level needed.

141. Key informants also shared accounts of the US Government’s diplomatic efforts, weighing in as one of the most influential donor governments.¹³⁴ They felt that engagement from the most senior levels of government had helped to negotiate the corridors into Tigray, especially through Afar, for the transport of food (and other items) at several moments in 2021 and in the first semester of 2022.¹³⁵ It thus appears that humanitarian diplomacy from member states/donors is indispensable in opening up access, but this diplomacy also raises certain questions. A number of key informants expressed that they were missing **a connection between the senior-level political leaders involved in high-level diplomacy and the working level**. However, the interdependence between the two levels is obvious. If deals are struck at the political level that compromise on certain humanitarian principles, the efforts of the working level to call for full respect for the same principles will be fruitless. Likewise, there is a need for accountability in relation to arrangements or deals that, in fact, are compromises sacrificing certain humanitarian norms or principles. In creating a degree of transparency, it is important to note that the HC and/or the Regional HC at a later stage could have played a key role in bridging the political and working levels. Creating such an interface between the two levels could also have contributed to creating a more coherent approach. Lastly, **in an effort to establish a correlation between humanitarian diplomacy and access patterns, the evaluation team found little evidence one way or another**. Unsurprisingly, windows for access related more to the evolution of the armed conflict on the battlefield and the geopolitical context than any negotiations that were held.

3.2.3 Working-level efforts to open up access

142. Extensive work has been undertaken at the working level to clarify and analyse trends and to record incidents when and where access was obstructed. Even before the armed conflict, OCHA had a special unit in place working on humanitarian access in Ethiopia. During the two-year armed conflict and thereafter, this unit did extensive and invaluable work in collecting data on access for UN and non-UN humanitarian agencies, looking at the nature of access obstacles, sharing access ‘snapshots’ and providing maps highlighting accessibility of areas or routes and corridors. Many of the documents produced were, in fact, advocacy tools demonstrating how far the Government of Ethiopia was from delivering on its responsibilities and commitments to facilitate access. The unit also initiated the creation of an inter-agency working group on access in Mekelle in the first quarter of 2021. This group discussed trends in access opportunities on the ground.
143. Key informants largely found the access agreement with the Government of Ethiopia ineffective, if not counterproductive, in practice, however well-intended it was. Internal UN documents from late January 2021 noted warning signals that the Government of Ethiopia was de facto using the agreement as a bureaucratic tool to control access. While the agreement referred to a “joint GoE [Government of Ethiopia]-UN platform/committee [that] will receive, consider and agree on all vital operational approvals and clearances,” internal UN documents noted that in practice, it was the Ministry of Peace that decided whether and when it would provide clearances for each and every movement of staff and supplies. OCHA records proved that the access agreement did not have the desired effect. In the first quarter of 2021, more than 50 visa applications for humanitarian staff were pending approval. In addition, most of the visas provided were only valid for 30 days, and the

¹³³ See ‘UN, Ethiopia Strike a Deal over Aid Workers’ Access to Tigray’, *Al Jazeera*, 7 February 2021.

¹³⁴ See, e.g., the White House, ‘Background Press Call by a Senior Administration Official on Ethiopia’, 10 January 2022.

¹³⁵ Local communities in Afar also resisted these convoys as they felt they were receiving less aid than the Tigrayans.

criteria for granting those visas were extremely unclear. A number of cargo clearances had also been provided, but others had arbitrarily been denied. Key informants were clear in their statements that the delays in the Government of Ethiopia's approvals did not happen by chance. A particular problem emerged as of September 2021, when international UN and NGO staff taking up positions in Tigray could only travel there if they had an Ethiopian residents' permit, which most of them did not have.

144. Access obstacles related to insecurity due to combat require agencies to weigh risks for their staff in relation to considerations such as the levels and severity of the needs and the urgency involved. The visa denials are of a different character and fall within the domain of bureaucratic and administrative impediments.¹³⁶ While the records of unsuccessful access negotiations were securely kept and analysed, a collective, HCT-wide strategy to address the various other access challenges did not emerge.
145. Optimism on improvements with regard to access came in early March 2021 when a new email notification system entered into force. Under this system, the Government authorities would be informed of the deployment of international staff. Also, the WFP-led logistics cluster, together with the Ethiopian Disaster Risk Management Commission (National Disaster Risk Management Commission at the time), succeeded in improving the procedures for aid cargos to Tigray with a 48-hour notification arrangement. Outwardly, the notification system appeared to make a difference to travel authorizations to Tigray. In March 2021, UN was able to deploy more than 100 international staff in the region. This increase is relative, however, as in the same period (March–April 2021), internal UN documents also noted an increase in the denials of access without mentioning specific numbers. As agencies started to ramp up their presence, they attempted to send more staff to Tigray. In addition, serious limitations remained as to access to rural areas in Tigray due to intense combat.
146. **A number of non-UN organizations worked outside this formal clearance arrangement.** They had their own direct engagement with Government entities at all levels, from the highest officials in ministries all the way down to the armed forces at the checkpoints. Key informants from these organizations noted that it took them an extraordinary amount of time to maintain the contacts they had in certain ministries and with various authorities, but they also felt that it provided them with better access, at least in the first several months. By March 2021, Médecins Sans Frontières had more international staff on the ground in Tigray than all UN agencies combined.¹³⁷ As one key informant explained, “[I]nitially our regular contacts with Ministry ‘X’ was still sufficient to get access, until the political side started to control everything.”

¹³⁶ At the time of the Tigray crisis, work was done at the global level in the IASC to develop guidance for addressing bureaucratic and administrative impediments. See IASC, ‘Guidance Understanding and Addressing Bureaucratic and Administrative Impediments to Humanitarian Action: Framework for a System-Wide Approach’, 10 January 2022. One of the main recommendations of this guidance is to develop collective strategies, which has not been achieved in this response.

¹³⁷ Internal UN report, 3 March 2021. On file with the evaluation team.

147. One specific characteristic in the approach of agencies working outside UN-coordinated arrangements is their high risk-taking. According to them, being out and about on the roads of Tigray and meeting the people at checkpoints was the most practical way of achieving access, even more so because of the communications blackout in place since 4 November 2020.

“Access in the first weeks and months of the war was not more difficult than in other places. You had to knock on doors and meet with the relevant people, but then it was fine.”

(Key Informant 58– INGO)

148. Some parts of the UN, in particular OCHA’s civil-military coordination unit, made efforts to follow a similar approach in terms of on-the-spot negotiations.¹³⁸ Once the unit was created, months into the crisis,¹³⁹ staff went out to meet with force commanders in person, a necessary step to develop in-person contacts in negotiating access. Still, as noted by key informants, the biggest challenges were with the Eritrean Defense Forces. They did not want to have any direct contact with UN or humanitarian agencies, and key informants cited a range of incidents and harassment with the involvement of these troops. An additional problem was that these troops came at the invitation of the Federal Government, which had implications for negotiating access. In other words, it was unclear whether access negotiated with the Government of Ethiopia would also extend to these forces or whether direct contacts should be made with the military command in Asmara, Eritrea. When asked about this, these key informants explained that they knew of very few attempts by their organizations to reach out to Asmara.

149. In finding alternative access options, a few key informants explained that ideas for cross-border humanitarian deliveries into Tigray had been considered in the first year of the conflict. With access from within the country so restricted, humanitarians have the duty to look for alternatives. However, practically, the encirclement of Tigray made it virtually an impossible option. Politically, it is controversial, as shown by conflicts such as in Syria.¹⁴⁰ Given the dominant view that UN can only operate anywhere in Ethiopia if it has the approval from the Government of Ethiopia, the position of those who felt that the consent of the authorities controlling Tigray would have been sufficient, would not have prevailed had the option been further considered.¹⁴¹

3.2.4 Duty of care and security management

150. **The system did not implement appropriate duty of care.** Due to the outbreak of the Covid-19 pandemic, the HCT and agencies devoted attention to protective clothing and other measures to prevent contamination, as well as the prevention of sexual exploitation and abuse. The September operational peer review found that a number of aspects of the duty of care were insufficiently implemented. It found that more priority was given to, for example, health care of staff, medical evacuations of staff, staff counselling and security arrangements, including the need for improved communications equipment. Some of these measures, such as support for staff in terms of their mental health, were only taken in 2022. Also in 2022, OCHA created a duty of care working group.

151. However, the operational peer review underestimated the need for strengthened arrangements around staff security. In 2021, there was a sharp increase in the number of fatal incidents involving humanitarian staff in Ethiopia. Records show a huge deterioration of the security of humanitarian

¹³⁸ Covid-19 regulations created limitations for such contacts.

¹³⁹ The civil-military coordination function was initially performed by the OCHA access unit.

¹⁴⁰ See, e.g., Karin Landgren et al., ‘The Demise of the Syria Cross-Border Aid Mechanism’, Lawfare, August 2021, <https://www.lawfaremedia.org/article/the-demise-of-the-syria-cross-border-aid-mechanism>.

¹⁴¹ As Emanuela-Chiara Gillard writes, “[T]he decision of whether to carry out relief operations without the consent of the affected state tends to be a policy decision informed by the law.” See Emanuela-Chiara Gillard, ‘The Law Regulating Cross-Border Relief Operations’, *International Review of the Red Cross* 95 (2013): 351–382.

staff not only inside Tigray but also, and especially, in the capital Addis Ababa and the two other northern regions, Afar and Amhara. The killing of three members of staff of Médecins Sans Frontières by Ethiopian National Defense Forces troops in late June¹⁴² was among the most violent incidents of the two-year armed conflict in which 36 aid workers were killed in the line of duty.¹⁴³ Soon after the outbreak of hostilities in Tigray, clear signs emerged that the parties to the conflict did not feel bound by the rules of international humanitarian law that stipulate their obligation to respect and protect humanitarian staff in the performance of their duties.

152. The first incident, which the Government of Ethiopia alleged was a violation of the access agreement by UN, happened in early December 2020.¹⁴⁴ Key informants confirmed (press) reports of a UN mission carrying out a security assessment in north-west Tigray, which was shot at by Ethiopian forces. This happened as the UN mission had “passed through two checkpoints without stopping while driving hastily to an unauthorized area.”¹⁴⁵ The particular claim of entering “an unauthorized area” came as the mission had decided to look at the situation of an Eritrean refugee camp that had not been visited since the start of the armed conflict. Key informants reported that in addition to being shot at, the UN staff who were part of the mission were also detained for several hours.
153. These violations of international humanitarian law and the UN Convention on the privileges and immunities of staff were not answered by a strong condemnation from the UN. Instead, in the aftermath of the incident, the Government of Ethiopia and several Ethiopian media put out reports that they had received an apology from UN for travelling to the particular area without the Government’s authorization, thereby emphasizing their control of access clearances.¹⁴⁶ Key informants asserted that the UN’s lack of response to Ethiopian forces firing at the vehicles and detaining UN staff opened the door for various access compromises on the part of the UN. They felt that it set a precedent.
154. As of late June 2021, with the change of circumstances in Tigray (when interim federal authorities left their positions and the Tigray People’s Liberation Front took control over many of the areas in the region), the Government’s rhetoric and position towards UN and non-UN humanitarian staff rapidly deteriorated. This period was particularly marked by the blockade, a classic war tactic to weaken the enemy.

¹⁴² Simon Marks and Declan Welsh, ‘Finish Them Off: Aid Workers, Found on Battlefield, Executed by Soldiers’, *The New York Times*, 17 March 2022, <https://www.nytimes.com/2022/03/17/world/africa/ethiopia-tigray-aid-workers-killed.html>.

¹⁴³ Aid Workers’ Security Data Base, see footnote 35.

¹⁴⁴ See Embassy of Ethiopia in Washington, DC, ‘Government Welcomes UN Apology for Check-Point Security Incident, 12 December 2020’, n.d., <https://ethiopianembassy.org/govt-welcomes-un-apology-for-check-point-security-incident-december-12-2020/>.

¹⁴⁵ ‘Ethiopian Forces Fire at UN Team as Aid Groups Seek Tigray Access’, *Al Jazeera*, 8 December 2020.

¹⁴⁶ Embassy of Ethiopia in Washington, DC, ‘Government Welcomes UN Apology for Check-Point Security Incident, 12 December 2020’.

155. UN internal records and reports showed a wide range of many other security incidents in 2021, affecting not only UN but also humanitarian staff of partner organizations. One report noted that “in addition to physical violence, security incidents have included threats, intimidation, harassment, detention, arrest, and the confiscation of aid items and equipment.”¹⁴⁷ Key informants corroborated such reports, telling of strip-searches at airports during the time of the blockade or of confiscation of, among other things, mobile phones, USB sticks and laptops, as well as medication for personal use. Office searches by security officials, arbitrary arrests, detention of staff and/or their family members and even torture cases have been reported. In one case, a member of the evaluation team received first-hand evidence of a two-week ordeal involving torture that a humanitarian staff underwent.¹⁴⁸

“They ask you to log into the system and show information on the computer. Which in my view was huge violation of UN convention immunities and privileges. Not enough done here on this, there is no guidance for staff on how to behave when detained like that. Which would have been basic duty of care.”

(Afar Key Informant 12–UN)

156. The reports also indicated that staff of Tigrayan ethnic origin, or suspected thereof, and their families were particularly targeted. The number of cases seemingly peaked in late 2021, when the Tigray People’s Liberation Front made military advances and federal authorities declared a state of emergency for the whole of the country in early November. At that time, arbitrary arrests and detention of UN and other staff also took place in the capital, Addis Ababa. The evaluation team was not able to find one single source that maintained a comprehensive overview of all incidents. In comparing sources, including OCHA reports, UN Department of Safety and Security reports and the (independent) aid workers security database, a number of incidents were reported by all three, but many only in one or two of the documents, and a number, such as the one incident mentioned above, not at all. One UN office was found to have the largest database of incidents against staff, but they also noted the vast number that was exceeding their capacity to do further verification or follow-up.

157. The scale and severity of the incidents, as found in the reports¹⁴⁹ and noted by key informants, are reason to believe that there was a pattern of systematic intimidation and aggression by the Government of Ethiopia against UN and other humanitarian workers. Given the severity and scale of the incidents, it is more than likely that senior UN leadership outside the country was aware of what was going on—or, at least, should have been aware. In comments on a draft of this report, it was noted that the UN Secretary-General and Emergency Relief Coordinator briefed the UN Security Council numerous times. Indeed, according to the independent Security Council Report, there were 15 UN Security Council meetings in the two-year armed conflict period that covered Ethiopia.¹⁵⁰ Most of these meetings were behind closed doors where Ethiopia was covered as an item under any other business. As a consequence, while the security of humanitarian staff may have been raised, it was not elevated to the level of importance it deserved (largely due to the successful manoeuvring of Ethiopia), nor is it clear what action on the matter was taken in the follow-up of these meetings.

158. It is unclear whether and to what degree the UN leadership insisted on the rules of the 1946 Convention on the privileges and immunities of the United Nations. Whatever their rank, gender or nationality, UN staff who are permanently employed are entitled to functional privileges and

¹⁴⁷ Report on file with the evaluation team.

¹⁴⁸ The details of this case have been shared with an appropriate body with a human rights investigation mandate.

¹⁴⁹ Many of these are internal UN reports on file with the evaluation team, in addition to the public ICHREE report.

¹⁵⁰ See <https://www.securitycouncilreport.org/ethiopia>.

immunities,¹⁵¹ which means that they cannot be prosecuted for anything said or done as part of their work duties. Usually, the privileges and immunities that cover the national UN staff are further elaborated and incorporated into agreements with the host State. With regard to the latter issue, the evaluation team was told that there are certain gaps in the agreement UN has with Ethiopia, especially during a state of emergency.

159. In addition, international humanitarian law also provides clear rules protecting humanitarian staff for the performance of their duties. As noted above, the access agreement was not framed within international humanitarian law. Some UN statements referred to this body of law, but overall, UN paid very little attention to the relevance of international humanitarian law rules in this conflict.

160. **The system did not draw a line.** Had the HCT worked within a framework of international humanitarian law and humanitarian principles, it would have realized there should be a **limit in terms of the degree to which agencies accept being instrumentalized and/or when they can no longer perform their duties in accordance with their mandates**. Key informants familiar with the global level IASC Principals and Emergency Directors Group meetings noted as well that they did not see these forums discussing the scale of harassment, as a threshold issue, while also acknowledging that they were not familiar with the severity and scale of the incidents against humanitarian staff in Ethiopia. Importantly, the UN Secretary-General has the authority to bring to the attention of the Security Council a matter which, in his opinion, warrants the attention of the Council. In 2006, for example, the Secretary-General wrote to the President of the Council in the context of the killing of four military observers (part of the Observer Group Lebanon of the UN Truce Supervision Organization) to ask the Council for its attention on the matter.¹⁵² It goes beyond this evaluation to further examine this issue, except for raising the question whether the Secretary-General considered drawing a line by involving the Security Council.

“We are hostages in Ethiopia as the UN... This will go into history as a humiliation of the UN; we have been made completely incompetent.”

(Afar Key Informant 12–UN)

¹⁵¹ Convention on the Privileges and Immunities of the United Nations, New York, 13 February 1946, Article V, section 18 (a). It should be kept in mind that relatively few staff are permanently employed by the UN.

¹⁵² UN Security Council, ‘Letter Dated 29 July 2006 from the Secretary-General Addressed to the President of the Security Council, S/2006/595’, 29 July 2006.

161. The security management system was not appropriate for a humanitarian response in a situation of armed conflict.

The final responsibility for the UN system's security rests with the designated official, a role that usually falls to the HC/RC. But in Ethiopia, the HC/RC was not the most senior UN official. That person was the Head of the UN Economic Commission for Africa. Several key informants noted their criticism of this arrangement as it creates a situation in which the ultimate security decisions may be taken in corners that are far too remote from operational realities. A further critique key informants noted is that the UN Department of Safety and Security-managed security system is a mechanical, tick-box way of addressing security, which is among the most dynamic issues all, with little space for common analysis of trends or scenarios. This is also seen at the HCT where the UN Department of Safety and Security provides security briefings. The function of this security briefing appeared to be close to meaningless as many of the events or issues noted are well-known to the people around the table, while no further discussion or reflection on the implications for humanitarian operations takes place.¹⁵³

“[UNDSS] did not support humanitarian operations, but, at least, they were not a hindrance in this case either.”

(Key Informant 2–UN)

“In normal circumstances, UNDSS would go first and see if it is secure and then feed to NGOs. Now it was NGOs, then UNICEF a week later, and then UNDSS. The whole set up is wrong.”

(Key Informant 5–Donor)

162. Sixty-two per cent of key informants who spoke about UN Department of Safety and Security were negative with regard to how it has played its role in Ethiopia and its support for humanitarian response. Half of these 62 per cent were UN respondents. It should be noted that the remaining 38 per cent were more positive, or at least neutral, in their judgement, and all of them were UN respondents. Key informant interviewees from the international NGO side also admitted that they had significant weaknesses in terms of their security management. The humanitarian international NGO forum only sought assistance from global experts on NGO security and staff well-being at the time of the evaluation. In addition, another positive element is that in some instances, the reference was made to the Saving Lives Together framework.¹⁵⁴ This framework seeks to ensure close collaboration on staff security between UN agencies and NGOs. In Shire, the framework was highlighted by OCHA within the Inter-Cluster Coordination Group as early as March 2021, but in Addis Ababa, the evaluation team did not see any evidence that it was strategically used or discussed within the HCT. NGO key informants also told of senior UN leaders telling them that the risks they were taking were entirely irresponsible. They also shared the view that the UN leadership in Addis Ababa had been too muted or slow in reacting to the killings of humanitarian NGO staff during the two years; part of the animosity between the UN and NGOs on security matters and advocacy appears to stem from these sentiments.

“Not only [our NGO] was weak, but the whole community was weak on safety and security. UNDSS has been very weak There was little attention given to the coordination between UN agencies and INGOs and to communication on security matters.”

(Key Informant 43–INGO)

“We should have worked together, and we kept saying, but where is UNDSS, where is security information, who is helping us.”

(Key Informant 38–INGO)

¹⁵³ The evaluation team had first-hand experience of one such session.

¹⁵⁴ IASC, ‘Saving Lives Together, A Framework for Improving Security Arrangements Among International Non-Governmental Organisations/International Organisations and the United Nations’, 2015.

3.3 Coordination and Working Collectively

To what extent did the response see collective leadership and coordination (incl. between local, regional and national levels, between clusters and between agencies)?

Evaluation criteria: Coherence

Summary findings

Coherence of the collective response

- The schism in the HCT was also due to a lack of UN coherence and unclear prioritization between development and humanitarian action.
- The coordination between the global, regional and country levels was weak.
- While the coordination efforts led by the DHCs were major steps towards ensuring a collective response, overall progress was mixed.

The functioning of the HCT and collective leadership

- The HCT was dysfunctional and did not serve as a forum for policy dialogue and strategic decisions.
- HCT efforts to develop common advocacy messages were fruitless.
- The HCT did not serve as a platform for mutual accountability guided by collective leadership.

Strength of evidence:



Good practices

- Creation of coordination hubs on the ground, including the AHT, early in the response.
- Advocacy with the Government of Ethiopia to create a CCCM cluster.
- Efforts to provide leadership and develop common messages and policies.
- Availability of UN communications equipment and support given to NGOs, including those who were not implementing partners.

Emerging recommendations

- Need for early action to address a divided HCT.
- Need for timely action to ensure collective leadership in HCT, meaningful dialogue, and mutual accountability when evidence emerges of an HCT that is dysfunctional.
- Too many (sub)clusters at the subnational level.
- Coherence in the UN means using the weight of the whole of the UN in convincing authorities to ensure that their policies and practices meet international human rights and humanitarian norms.

163. This report is premised on the assumption that there is a link between the quality of inter-agency coordination and operational effectiveness. When coordination works, operations will benefit (and the other way around). The two previous sections have already pointed out the significant consequences of the inadequate collective action, which resulted in a lack of common positions on policies and strategies, such as appropriate Scale-Up benchmarks or an access strategy underpinned by humanitarian principles. The following section looks in detail at inter-agency coordination and working collectively, including the coherence of the collective response (3.3.1) and the functioning of the HCT and collective leadership (3.3.2).

3.3.1 Coherence of the collective response

164. The coordination between the global, regional and country levels was weak.

One major hindrance to working together in a collective fashion was the disconnect between the global, regional and country levels. As noted above, the global IASC mechanism of the Emergency Directors Group looked actively at the northern Ethiopia response, but many of their efforts were not effective. Their visits were not seen as providing support by several members of the HCT. In addition, the operational peer review mission came at a critical moment, but many of the follow-up actions fell by the wayside. Lastly, many of the global IASC or Emergency Directors Group consultations in 2022 no longer focused on the northern regions but covered the whole of Ethiopia, thereby marginalizing the need for (mutual) accountability for the Scale-Up in the northern regions.

“We created an island in Tigray that was almost completely separate from Addis Ababa.”

(Key Informant 54–UN)

165. The operational peer review mission report called for clarification “of the linkages between all levels of the humanitarian coordination architecture to improve decision-making and create more transparent and systematic information sharing.” This recommendation was certainly aimed at better understanding the communications and reporting lines between Addis Ababa on the one hand and Afar, Amhara and Tigray, respectively, on the other. The disconnect between the various coordination levels observed by the operational peer review was not resolved at the time of the data collection for this evaluation.
166. A minority of key informants held the view that coordination between the national and (sub)regional levels worked well in terms of fulfilling their expectations. Many more, however, noted the gap between the (sub)regional mechanisms and the national level. Several cluster coordinators in Tigray noted how they regularly passed information and data up the chain to be taken up in terms of advocacy at the national level but that they received extremely little feedback on what was being done with their messages. Due to major problems in the functioning of the HCT, some developed direct lines of communication with their regional offices in Nairobi or headquarters. The result was tensions and confusion in terms of roles and responsibilities.

167. Regarding operational coordination of the day-to-day humanitarian response, plans were made to open six coordination hubs in Tigray as of the first weeks of the response. **The deployment of a Deputy Humanitarian Coordinator had a positive impact on inter-agency coordination, especially at the subnational level, where structures were put in place and agencies invested in engaging with them.** The first two Deputy Humanitarian Coordinators were deployed in December 2020 and April 2021, respectively. They were driving forces behind the dedicated coordination mechanisms, especially in Tigray. The decision to establish a new mechanism called the Area Humanitarian Team in Mekelle was also made. In terms of partnerships, due to the constrained environment, UN and NGOs came together to make the best of a difficult situation. A number of NGOs, including those who were non-implementing partners of UN agencies, received logistics support and, for example, could make use of the UN agencies' Internet connection.

“People came in on surge and we managed to have most of the clusters supported by dedicated coordinators, especially in Mekelle, and some in Shire. We also set up hubs in Axum, Adigrat, and so on, and that really helped.”

(Key Informant 44–UN)

168. Informants explained that as the narrative and funding focused on Tigray, coordination structures in Afar and Amhara did not benefit from this focus. Others stated that the system came together better in Tigray due to the very challenging environment, which brought actors there closer. While a majority of respondents did say that there was a strong sense of mutual solidarity between aid actors in Tigray, they also mentioned sources of tensions. The lack of fuel was a particular obstacle, with agencies spending a lot of time debating who would receive the limited amounts available and for what purpose.

“The challenge was balancing the coordination efforts between the regions as the crisis escalated.”

(Key Informant 31–UN)

169. In spite of the Deputy Humanitarian Coordinator position and Area Humanitarian Team, there were a number of shortcomings in the coordination architecture. First, and as noted above, some clusters were faster than others in deploying dedicated capacity. WASH, for example, managed to become operational with dedicated staff (most of whom were Ethiopian nationals) sooner than others, whereas the leadership of the GBV area of responsibility was particularly slow to act. UNICEF had to replace the UNFPA as interim Cluster Lead Agency as the latter lacked capacity.¹⁵⁵ As noted earlier, the leadership of the GBV response, which formally is known as an area of responsibility (AOR) under the protection cluster (also referred to as a sub-cluster) has been the source of confusion. Some of this confusion may have stemmed from partitioning leadership according to presence and capacity in certain locations, but much of it is illustrative of the failure of the gender-based violence cluster's response. According to UNICEF, it fulfilled the AOR lead role at the subnational level at least temporarily and stepped in to fill gaps given UNFPA's inadequate capacity.¹⁵⁶ The fact that UNFPA, UNHCR and UNICEF contend that they were all in the lead of at least parts of the GBV response is an illustration of failed leadership and accountability arrangements.¹⁵⁷ Meanwhile, on the ground,

“You didn't have many UN agencies in Shire that would go it alone.”

(Key Informant 31–UN)

“The fuel discussion dominated our meetings: who gets what?”

(Tigray Key Informant 12–UN)

¹⁵⁵ UNHCR also took steps to help fill the gender-based violence leadership and coordination gap, but activities were too fragmented. See UNHCR, 'Evaluation of UNHCR's Response to the L3 Emergency in Ethiopia 2021–2022', UNHCR, 2023, 24.

¹⁵⁶ UNICEF, 'Evaluation of the UNICEF Level 3 Response in Northern Ethiopia', November 2023, 69.

¹⁵⁷ In theory, the HC/RC appoints cluster lead agencies at the country level in case of a crisis. In other words, there can be no confusion as to who the lead agency is.

the gender-based violence response fell far below what was needed given the scale of CRSV, which prompted one well-informed key informant to note that leaving this response to a (sub-)cluster was a fundamental mistake in the first place.

170. Second, early in the response, weekly coordination meetings with the interim regional government were held in Mekelle. The National Disaster Risk Management Commission led these meetings—known as the Emergency Coordination Cell—which involved the various government bureaux zone administrators as well as many agencies. Several key informants recognized the issue of being aligned with the Government in this way in a situation of armed conflict, which does not create the level of autonomy needed for the system to operate in line with humanitarian principles. They also noted that there was no other option than to organize coordination in this way. They also explained that it was a matter of bringing the small numbers of humanitarian workers and scarce resources together to make the best out of an extremely dire situation.
171. Third, the Government has had a significant degree of influence on humanitarian coordination mechanisms. For example, instead of having a food security cluster, Ethiopia still has two separate clusters for food aid and agriculture. Key informants explained that this was related to the long tradition of handling food aid in Ethiopia and the Government’s degree of control over food aid. The two lead agencies of the Camp Coordination and Camp Management (CCCM) cluster, the International Organization for Migration and UNHCR, had to make a significant investment in engaging with the Government on the creation of this cluster. Before the armed conflict, the CCCM concept had not been implemented in IDP situations in Ethiopia; authorities had only accepted site management. The massive internal displacement in Tigray due to the armed conflict, however, required a different way of working, involving a broader approach than site management. Key informants from the CCCM cluster explained that familiarizing relevant authorities with CCCM was a matter of extensive engagement and trust-building. They noted that while the authorities were initially hesitant, they later understood the value of the concept. A few months into the armed conflict, it had been accepted as the preferred way of coordinating the IDP response. The CCCM co-coordinators also stressed that they made it clear to the authorities that creating IDP camps was a last resort measure. Many IDPs in Tigray are found in host communities, school compounds or other settlements, and the CCCM developed the position that assisting them where they are is the preferred option, while more sustainable solutions should be found.
172. One issue, not unique to this response, was the question of whether there was a need to activate all clusters, including those that did not have a role in Ethiopia before the outbreak of the armed conflict. For example, the emergency telecommunications cluster had not been operational in northern Ethiopia before but was formally activated on 28 May 2021 to support the humanitarian response in Tigray in line with a request from the HC/RC. There had been significant discussion at the capital level on whether this cluster should be activated. Given the communications blackout, there was a significant gap in sufficient communications equipment for the humanitarian community to do its job. However, even with the activation of the emergency telecommunications cluster, some major key problems remained, such as the lack of sufficient communications equipment, due to the blockade of Tigray, or, even when such equipment was in place, due to bureaucratic obstacles and differences among agencies in navigating these obstacles.
173. The question on the added value of the activation of the clusters also raises the issue of their future. Activation has proven easier than deactivation. The clusters also bring a significant workload with them, and activating them all and keeping them in place may raise a cost-benefit and sustainability issue. This was an issue, for example, in Mekelle where questions emerged about keeping all mechanisms in place at the time of the data collection. As a key informant put it: “There is strong

local ownership of the clusters, but it has also become a heavy machinery.” Fragmentation and a silo mentality were noticed. As for protection, there was little idea among the AORs in Tigray of what their role was in implementing a broader overall protection strategy.

174. To return to the issue of (sub)regional level coordination, the Area Humanitarian Team can be seen as an initiative that served its purpose. The disconnect with Addis Ababa was understandable as it can be largely attributed to a dysfunctional HCT; however, if an empowered subregional humanitarian coordination structure is to be effective, it will have to find ways of managing relations with a sovereign Government at the nation’s capital level.

3.3.2 *The functioning of the HCT and collective leadership*

175. By its nature, an HCT is a body that requires collective leadership, as it expects all participants to take responsibility for the success of the mechanism.¹⁵⁸ Where success is dependent on the collective, failure is too. In other words, when the HCT fails to be an effective forum,¹⁵⁹ it reflects on all participating agencies.

176. **The HCT was dysfunctional and did not serve as a forum for policy dialogue and strategic decisions.** As noted, the effective functioning of the HCT was, for a large part, impacted by a deep division in positions on how to relate to the Government of Ethiopia. The audio recordings of UN Country Team meetings and the leakage of these recordings at the time of the expulsions of seven senior UN officials illustrate an entire lack of trust and an atmosphere conducive to frank dialogue. Another sign of the dysfunction of the HCT is that many of the OCHA-led efforts to produce common plans and positions on a number of key policy issues, such as the protection of internally displaced persons, a collective access strategy, or strategy for civil-military coordination went in circles for weeks or months with multiple drafts produced and mostly without a clear and/or agreed product as outcome.¹⁶⁰ If there was an agreed document, there was no further follow-up or discussion reviewing its implementation in the HCT. To come to a conclusion or create a meaningful product, the HC/RC could (should) have invoked the IASC Protocol on empowered leadership in a humanitarian system-wide Scale-Up (hereafter Protocol 2), which gives her the authority to take decisions when a consensus is not available and a further delay would have implications for the response. Fundamentally, the HCT did not function as a forum for policy dialogue and strategic decisions. It did not manage to be a forum for developing common positions, and the HC/RC provided insufficient leadership.¹⁶¹

“It is the people who make the difference: how much you believe in the structure and can go out of comfort zone and talk to others and use the [collective] structure. It is easier to work alone, but one agency doing a good job from its perspective makes no difference for the whole.”

(Key Informant 52–UN)

“If important issues such as protection were on the agenda, they were covered in presentations without further discussion. It was a presentation-based meeting.”

(Key Informant 57–Donor)

¹⁵⁸ On collective leadership in humanitarian coordination, see, e.g., Karin Wendt and Ed Schenkenberg, ‘More Than the Sum of the Parts? Collective Leadership vs Individual Agency in Humanitarian Action’, November 2022, <https://here-geneva.org/collective-leadership-vs-individual-agency/>.

¹⁵⁹ IASC, ‘Standard Terms of Reference for Humanitarian Country Teams’, February 2017, <https://interagencystandingcommittee.org/emergency-directors-group/iasc-standard-tor-humanitarian-country-teams-hcts-february-2017>, served as a helpful benchmark for assessing the functioning of the HCT.

¹⁶⁰ Several of the policies the evaluation team saw still had “draft” on them, which creates confusion as to whether this policy was ever agreed upon.

¹⁶¹ See also operational peer review 2021, Finding #5.

177. As noted for several periods in the armed conflict, HCT meetings did not take place more than twice a month. It was only because of the activation of the System-Wide Scale-Up at the end of April that it was “suggested to move back to weekly HCT meetings, although in May 2021, there were only two HCT meetings.”¹⁶² In March 2021, the HCT agreed to (re)instate a small group of five to ten members composed of a representation of the HCT partners to “discuss prioritised topics in alternative weeks as was done in previous emergencies.”¹⁶³ It is unclear, however, whether this group met in the weeks when the HCT was not meeting and/or to what degree it was able to serve as body that was effective in discussing prioritized topics that would then be brought to the larger HCT. No evidence in terms of minutes or further references was seen in HCT documents. Supposedly, it could have been a very important and effective group, possibly chaired by the Deputy Humanitarian Coordinator, with the main task of preparing HCT decisions on strategic issues. Whether such groups preparing strategic HCT decisions exist in other countries goes beyond this evaluation, but this might be an aspect to examine in relation to effective HCT functioning.
178. It should be kept in mind that due to Covid-19 restrictions, many of the HCT meetings in 2021 were not in-person but online. Though online meetings may allow for a broad audience, strict time allocation of speakers, and especially remote participation even from HCT members who might be on duty travel,¹⁶⁴ it appears that the newly formed habit of conducting online HCT meetings was not sufficiently harnessed to capitalize on such benefits.
179. The HCT in Addis Ababa is a large one. While the generic HCT terms of reference note that the size of an HCT should be limited to allow for decision-making, the average attendance of the HCT in Addis Ababa in 2021 was nearly 40 participants.¹⁶⁵ This size was partly due to the fact that the HCT not only involved representatives from UN agencies (including cluster coordinators), the Red Cross and Red Crescent Movement, and national and international NGOs but also from the donor community. In addition, attendance lists showed that a number of the HCT participating agencies attended meetings with more than one representative and that there was a high turnover of these representatives. A tally for the 28 months that this evaluation covers showed that nearly 350 different representatives attended HCT meetings. OCHA alone had four different heads in the two-year period of the armed conflict. While heavy turnover is an issue in many emergency responses, in this case, with certainty, it had a negative impact on continuity and a sense of togetherness; both necessary to function as a team were entirely impossible.
180. In the two years of the armed conflict, HCT minutes show that the Humanitarian Coordinator reminded agencies on 10 occasions of the need for consistency in their HCT participation. In response to the operational peer review, two HCT retreats were convened in an effort to streamline the forum. Key informants who participated in these sessions noted the little effects these sessions had in terms of making the HCT more meaningful. The crucial question that remains is whether the Humanitarian Coordinator could have restored trust in the HCT as a forum for frank dialogue on substantial matters by creating a new atmosphere conducive to such dialogue. One step could have been the reduction of the number of entities and participants attending the HCT meetings. But fostering open conversations essential for coordination requires further steps involving team-

“The bigger coordination picture was absent [from the HCT]; what existed in terms of coordination is not more than information sharing.”

(Tigray Key Informant 12–UN)

¹⁶² EHCT, ‘Minutes—Ethiopia Humanitarian Country Team’, 29 April 2021. The minutes do not reveal who made the suggestion. There had been four meetings in January but only two in the following months.

¹⁶³ EHCT, ‘Minutes—Ethiopia Humanitarian Country Team’, 18 March 2021.

¹⁶⁴ This does not apply to travel to the regions when telecommunication were cut off and Internet access was limited.

¹⁶⁵ In 2022, this number has gone down to an average of 26 participants.

building efforts and collective leadership behaviours, something the HC should have recognized. While in a number of countries, some efforts supported by the UN Development Coordination Office have been made in this respect, the Ethiopia HCT has not been part of such team-building initiatives.¹⁶⁶

- 181. HCT efforts to develop common advocacy messages were fruitless.** Common advocacy is a collective responsibility that requires leadership. The IASC Scale-Up Protocol 2 on empowering leadership provides for the Humanitarian Coordinator to lead on advocacy. In terms of the common messages formulated by the HCT, the evaluation team heard from a limited number of key informants that they valued these messages and took guidance from them for their individual agencies' talking points. Overall, however, the efforts of the HCT to develop common advocacy messages do not appear to have borne fruit. The result of the self-assessment survey carried out by the operational peer review in September 2021 was telling: 67 per cent of the respondents strongly disagreed and 33 per cent disagreed with the statement that "the HCT is implementing an effective advocacy strategy." This 100 per cent negative score may find its origin in different motivations, but it illustrated a full consensus on the HCT's ineffectiveness in relation to common advocacy and joint strategies. Unfortunately, no evidence for 2022 could be found that this situation changed substantially and that trust was restored.

"There was no common orchestrated advocacy. There was a formal structure, but nothing happened; agencies were going it alone."

(Tigray Key Informant 12–UN)

- 182.** In view of this, the operational peer review suggested beginning with "a common narrative" to agree on a baseline in terms of the issues that needed attention, such as the lack of access, which would then be taken up in the system's advocacy. OCHA's SitReps provided this common narrative and, at some point, were the main, if not only, advocacy instrument. They also served to inform updates shared at the global level, including by the Office of the Spokesperson of the Secretary-General. However, key informants expressed their disappointment with the UN's advocacy, which they found was muted. This was certainly true for the period after the September 2021 persona non grata episode and much of 2022. A review of all public statements released by the humanitarian community (through Reliefweb and included in annex 7) indicates a change of approach and narrative after September 2021. From this date, public statements were generally less strongly worded, and a narrative around the droughts affecting the country emerged as a central one. While issues such as the harassment, arbitrary arrest and detention of staff, which peaked in late 2021, required robust messages to avoid a further escalation of the relationship with the Government of Ethiopia and potential expulsions, the UN softened its voice.

"Advocacy notes were prepared for the national level. There is a feeling however that these messages were not sufficiently taken up. There was also little feedback to the clusters in Tigray on what was done with the messages."

(Tigray Key Informant 21–UN)

- 183.** Worth adding is the practice that respondents mentioned of using SitReps and internal, inter-HCT or ICCG exchanges as a platform for their advocacy. A number of cluster coordinators explained that the Cluster Lead Agency engaged in advocacy at several levels through (sub)regional and national clusters; via the Deputy Humanitarian Coordinator, and HCT in Tigray; the Deputy Humanitarian Coordinator and the cluster at the national level; and the HCT. Such advocacy, for example, is concerned with service delivery at the internally displaced persons' sites or making other clusters aware of what (other) services need to be provided. Cluster coordinators also told of extensive efforts to develop advocacy messages for the HCT to raise with the federal authorities. As noted,

¹⁶⁶ These initiatives are also known as leadership labs.

there was an overall lack of clarity with regard to what happened with such advocacy; however, respondents active in cluster coordination felt great frustration at the absence of closed-loop feedback.

184. The HCT did not serve as a platform for mutual accountability guided by collective leadership.

Mutual accountability requires collective leadership and a commitment from all participants to ask each other constructive but critical questions about HCT agreements and commitments. Protocol 2 also provides for the Humanitarian Coordinator to develop a compact with HCT members, including for results and performance, to better support the accountability of all partners. Little evidence was found of such steps being taken.¹⁶⁷ The HCT atmosphere and way of working was such that those HCT members who raised critical questions—many of whom were of a donor or NGO background—felt that they were seen as troublemakers. In pushing UN agencies to take action in certain directions, these HCT participants used the forum of the HCT to raise what others perceived as critical comments and questions. While the participation of NGOs in HCTs is standard practice, HCT seats for donor representatives are more controversial. It is beyond this Inter-Agency Humanitarian Evaluation to express an opinion on the issue, other than noting that for all at the HCT's table, whatever their background or status, their participation brings certain (moral) obligations in terms of contributing to collective plans and strategies and to coordinate their views on policies. Donors are also governments, and they can play significant roles in humanitarian diplomacy. As noted above, some of them did when it came to lobbying for access. Unfortunately, the HCT did not provide a platform to coordinate humanitarian diplomacy efforts. All of this was part of informal and bilateral conversations, thereby reducing transparency and accountability.

185. The 2017 IASC standard terms of reference for HCTs stipulate that the Humanitarian Coordinator “leads and chairs” the HCT. It follows that the Humanitarian Coordinator can be considered to carry primary responsibility for matters such as the frequency of meetings, agenda-setting and delivery of mandatory HCT responsibilities.¹⁶⁸ In addition, the Humanitarian Coordinator is the main facilitator. A sign of good humanitarian (and collective) leadership is the ability to create a moment for self-reflection and ask questions such as “Do we know and (still) agree on what we are here to do?” Or “How do you feel that this platform is functioning?” Trust is the foundation of effective team performance, and the behaviour of leadership is key to building or eroding trust in teams.¹⁶⁹

186. In Ethiopia, the leadership of the HC/RC was in the spotlight: many key informants held strong opinions of the individual who held the post until June 2023. These opinions largely reflect the fault lines in the HCT, between those who saw close engagement and silent diplomacy with the Government of Ethiopia as the way forward and those who believed the response should have had a stronger foundation in humanitarian principles. As noted, the latter group felt that the lack of an assertive approach from the HC/RC at the beginning of the armed conflict opened the door for (further) instrumentalization. Performance appraisals of the Humanitarian Coordinator should have raised questions about their leadership of the HCT, mutual accountability for delivering the Scale-Up and posture towards (robust) advocacy.

¹⁶⁷ The recently updated version of the Handbook for Humanitarian Coordinators includes a checklist for HCs that includes the task of outlining “the HCT’s role and Terms of Reference, and members’ responsibility to contribute to the HCT and to pursue collective outcomes.” See IASC, ‘Leadership in Humanitarian Action’, 2024, 58.

¹⁶⁸ These responsibilities are drawn by inference based on the Humanitarian Coordinator terms of reference and IASC, ‘Leadership in Humanitarian Action: Handbook for Humanitarian Coordinators’, 2024. The official Humanitarian Coordinator terms of reference are outdated as they go back to 2009. They do not even mention the existence of an HCT.

¹⁶⁹ IASC, ‘IASC Deputies Group In-Person Meeting, Background Note’, 6 March 2024, 2.

187. Equally important for the Humanitarian Coordinator was to have certainty that her humanitarian responsibilities came before their role as Resident Coordinator if that was the view of UN at the global level. Managing upward means demanding this clarity from their superiors. For the UN, coherence between peace, development, human rights and humanitarian mandates is not easily achieved, especially when it is unclear if one of these fields prevails or if all three are equally important. What about the UN's human rights role at a time when human rights are violated on an increasingly large scale?¹⁷⁰ Human rights advocacy and humanitarian negotiations with the Government of Ethiopia to bring its conduct in the armed conflict in conformity with international norms are likely to be more successful when the whole of UN is prepared to put their weight behind these efforts. With 28 UN actors having a presence in Addis Ababa, this weight was considerable, but it appears that the HC/RC was unable to bring the UN together and establish coherence in favour of principled action and protection in relation to the armed conflict in the North. Whether such a level of coherence in the UN around human rights and humanitarian norms is even feasible is another question.
188. A number of important steps were taken to strengthen humanitarian leadership at the country level, several of which followed the IASC protocols. For example, the Emergency Relief Coordinator quickly recognized that support for the response in Tigray was required and deployed a Deputy Humanitarian Coordinator position in the first weeks of the armed conflict, i.e., long before the System-Wide Scale-Up was activated.¹⁷¹ Also, key informants from several sides shared accounts of how much they and their capitals-based colleagues pushed for a change of the individual holding the HC/RC post. But key informants also explained that they understood that replacement was not possible. The informants added that the Government of Ethiopia would never have provided a new HC/RC with accreditation.¹⁷² Changing the planned contract duration of an HC/RC is, however, far from an exception in UN practice, and reasons for it can be kept discrete.¹⁷³
189. Instead of replacing the HC/RC, the position of a Regional Humanitarian Coordinator was deployed, formally based outside Ethiopia. The addition of the term 'regional' suggested that the position would be concerned for the Horn of Africa, i.e., beyond Ethiopia and certainly beyond the three northern regions. This position had the further advantages of sounding like a role superior to the HC/RC and could be fulfilled in a flexible manner, engaging with a wide range of stakeholders at various levels. This post supported the response from some 12 months, from November 2021 until November 2022. The evaluation was unable to find the terms of reference.
190. The support of this role has been viewed positively by many key informants. Most notably, it helped overcome some of the existing divide by bringing people together from the grassroots operational level in Tigray to the most senior diplomatic level in Addis Ababa and elsewhere. Other key informants active in the response in 2022 had never heard of the Regional Humanitarian Coordinator position or met them. In terms of advocacy, whether by design or by chance, it appears that the Regional HC left this role to others. A search for their public statements did not produce any notable results.¹⁷⁴

“The appointment of the Regional HC helped a lot in terms of negotiations with all relevant parties.”

(Tigray Key Informant 4–UN)

¹⁷⁰ The OHCHR Ethiopia Country Programme also raised this issue. See Mark Singleton and Stanley Wobusobozi, 'Evaluation of the OHCHR Ethiopia Country Programme', OHCHR, 8 March 2022.

¹⁷¹ The appointment of a Deputy Humanitarian Coordinator is one of the features of the Scale-Up protocol.

¹⁷² The Regional Coordinator function is accredited by the Government.

¹⁷³ A person getting a promotion can be one of the reasons for shortening the contract.

¹⁷⁴ As noted elsewhere in this report, there was a significant drop in advocacy following the September 2021 expulsions, while given events on the ground (public) advocacy did not become less important.

191. The absence of documents detailing the role and function of the Regional Humanitarian Coordinator created a gap in terms of the transparency, reporting lines and accountabilities of the arrangement. There was one email that was shared with the IASC Principals asking them for candidates. Consultations at the IASC Principals or Emergency Directors Group on the Regional HC position focused on the need for the function to ensure a balance between the three northern regions and other parts of Ethiopia where humanitarian needs had been increasing. In practice, the term 'regional' in the title appears to relate to the regions within Ethiopia rather than in East Africa. The evaluation recognizes the pragmatic nature of the arrangement, but it also finds gaps in transparency and accountability in relation to the Regional HC position and their responsibilities.

3.4 Needs and Data

To what extent did the collective response collect, manage and share data reflecting the situation on the ground?

Evaluation criteria: Relevance, Quality

Summary findings

Data on needs

- Issues with humanitarian data in Ethiopia are far from new.
- The humanitarian community was largely complacent with regard to the dependency on the Government for publishing key humanitarian data, including data on the destruction of health care facilities or displacement.
- Independently collected key humanitarian data is not shared in the public domain.
- With food aid seen as the sector that comes first in Ethiopia, the numbers of people in need of food overshadow other needs.

Data on delivery

- OCHA SitReps became a key publication in monitoring the response's progress.
- The available data on coverage and delivery do not allow for a meaningful analysis on the collective response.
- In practice, the number of trucks making it to Tigray was used as one of the main indicators to determine the response's progress.

Strength of evidence:



Good practices

- The regular public overviews of operational humanitarian capacities.
- The early attention to and global level advocacy on CRSV that refers to key health data.
- The early assessments on functioning health facilities.
- Using SitReps as advocacy tools in situations where there is no agreement on further advocacy messages or statements.

Emerging recommendations

- Agencies should not shy away from publishing their data even if it is not validated by the Government.
- The Surveillance System for Attacks on Health Care should have been operationalized.
- There is a need to address discrepancies between numbers of people in need between the sectors, especially food and protection.

192. In situations of armed conflict, humanitarian data reflecting the number of conflict-affected people or aid activities undertaken may be incomplete and not fully accurate for various reasons. The collective response to northern Ethiopia was no exception in this regard. What was exceptional was the widespread recognition that much of the data in this case was unreliable, largely due to the lack of access and manipulation of lists of beneficiaries. Looking specifically at the extent to which the collective response navigated this situation, the sections below will present findings with regard to the available data on needs (3.4.1) and data on delivery (3.4.2).

3.4.1 Data on humanitarian needs

193. **Issues related to humanitarian data in Ethiopia are far from new.** This evaluation has not found any evidence that concerns about humanitarian data over the past years were addressed. The IAHE of the 2015-2018 drought response found that much of the data at the time was unreliable.¹⁷⁵ It led the evaluation to conclude that “national data and accountability systems [...] had obvious and broadly acknowledged limitations.” It recommended that “the humanitarian community in Ethiopia needs to put in place strong measures to make the response more accountable. This involves continuing to strengthen needs assessments by systematically including consultations with drought-affected people (independently of local officials).” This evaluation found no collective follow-up action by the IASC or Ethiopia HCT to avoid further flaws in future responses.¹⁷⁶ Hence, it cannot be a surprise to anyone that this evaluation found a number of issues with humanitarian data too. Issues that were present in the past, such as interference with data collection, are even more likely to take place in politically sensitive environments, i.e., the type of situation that certainly includes armed conflict in Tigray.

“Humanitarian agencies are required to use the data the Government provides, which in most cases is far from the reality on the ground. There is a big challenge in this disparity for us in the humanitarian response. The challenge with data discrepancy can’t be overstated.”

(Afar Key Informant 4– INGO)

194. **Independently collected key humanitarian data, especially on mortality, is not available or contested.** The prolonged lack of fuel, telecommunication and Internet connectivity in Tigray made needs assessments particularly difficult. In spite of some efforts to keep the numbers of people killed, the locations, and the causes of their deaths, there is a dearth of data covering mortality and food insecurity. The evaluation team found one report prepared by the health cluster team that compiles data following an initial mortality assessment in 40 per cent of the (sub-)districts in six zones in Tigray.¹⁷⁷ Covering the period July–October 2021, the report highlights the *woredas* with the highest numbers of deaths of the areas that were assessed. It finds that nearly one third of deaths are caused by malnutrition, which the report attributes to the blockade of aid. Telling is also that among infants (under age 5), this figure is 47 per cent. Further to malnutrition, the report also attributes mortality to the destruction of medical facilities and the health-care system not functioning due to armed conflict. It notes that “infectious diseases, malnutrition/starvation and non-communicable diseases are the main causes of death, though they are, under normal circumstances, easily preventable with proper medications.” The report was never formally

¹⁷⁵ Steets et al., ‘Inter-Agency Humanitarian Evaluation of the Drought Response in Ethiopia 2015–2018’, 10.

¹⁷⁶ The lack of lessons learned from the data flaw is highly apparent as the IASC OPAG discussed the IAHE 2015–2018 drought response in April 2021, when the System-Wide Scale-Up for the response to the armed conflict in the north was imminent. The issue was left undiscussed.

¹⁷⁷ The six zones are the Southern, Southeastern, Mekelle, Eastern, Central and Northwestern Zones of Tigray.

published, nor shared with the evaluation team. It found its way into the public domain and remains publicly available in the database of the global food security cluster.¹⁷⁸

195. In spite of some efforts, no consolidated overview of joint and/or multisectoral needs assessments was available during the conflict. Recognizing the need to improve needs assessments and analysis, OCHA established an Assessment and Analysis Working Group in early 2023. More problematic even was the absence of independent humanitarian data in the public domain. As noted, the validation by authorities of the collected data raised questions as to the reliability of the data. In the words of a seasoned humanitarian worker, “[N]o region is as difficult to do needs assessments as Tigray.” In general, the officially published humanitarian data were not used to underpin operational decisions.
196. As for health data, early in the war, in 2021, the health cluster undertook a Health Resource and Service Availability Monitoring Systems Assessment (HeRAMS) and issued a report.¹⁷⁹ Such an assessment of essential health resources and services seeks to provide decision makers at country, regional and global levels with standardized and continuous information on the availability of essential health services and resources down to the point of service.¹⁸⁰ Before the war, Tigray was the Ethiopian region with one of the best functioning health systems in the country.
197. In its 2021 public annual report, the Tigray Health Bureau referred to the assessment. It equally referred to Médecins Sans Frontières data, as the medical NGO shared its findings of an assessment of health facilities publicly in March 2021.¹⁸¹ The HeRAMS assessment was also the subject of Inter-Cluster Coordination Group attention in Addis Ababa in late February, where initial findings were shared and the implications for the clusters discussed. In early March, the ICCG put further action on the assessment results on hold as these would be completed in the next two weeks.¹⁸² In the following weeks and months, however, there was no further sign of consultations on the HeRAMS results in the ICCG. Asked for a clarification and a copy of the report, WHO’s country office noted that it could not share the data, not even with this evaluation, as the federal authorities had not validated the final results. In reality, the HeRAMS data was in the public domain initially, but WHO, as the Cluster Lead Agency of the health cluster, withdrew the report from its website following complaints from the Government of Ethiopia.¹⁸³
198. Further to HeRAMS, WHO is responsible for another tool that reports on war-related damage to health facilities. Launched in 2017, the Surveillance System for Attacks on Health Care (SSA) is a global and standardized monitoring system for the collection of primary data about attacks on health care that has been implemented in a number of recent conflicts, but not in Ethiopia. However, the level of destruction of health facilities in Tigray was such that the use of SSA would have been more than appropriate.
199. Overwhelmingly, key informants pointed to the dearth of humanitarian data that could be used for decision-making and priority setting. The major reason for this lack of useful data to underpin humanitarian operations was the factors inhibiting the effective presence and work of all humanitarian organizations in the three regions. Rhetorically, the question was raised of how there

¹⁷⁸ Health Cluster Team, Tigray, Ethiopia, ‘Deafening Silence as Thousands Perish Due to Human-Made Humanitarian Catastrophe.

¹⁷⁹ On file with the evaluation team.

¹⁸⁰ WHO, ‘Health Resources and Services Availability Monitoring System’, n.d., <https://www.who.int/initiatives/herams>.

¹⁸¹ MSF, ‘Press Release: People Left with Few Healthcare Options in Tigray as Facilities Looted, Destroyed’, 15 March 2021, <https://www.msf.org/health-facilities-targeted-tigray-region-ethiopia>.

¹⁸² As reflected in the ICCG meeting minutes.

¹⁸³ As noted by several key informants.

could be reliable data in a context where there are serious access constraints, where there is hardly any cash to pay enumerators or fuel or for agencies' vehicles to move around and where there is a communication blackout.

200. One of the few efforts in place to collect data on the numbers of people displaced was the IOM-led displacement tracking matrix (DTM) to monitor displacement. The matrix is a data tool that provides details on the mobility, vulnerabilities, and needs of displaced populations for the humanitarian community and other stakeholders. To ensure the availability of operational data, IOM frequently shared (unendorsed and endorsed) DTM data and reports within the humanitarian community, especially the clusters. For example, 53 such reports were shared in 2022, including 28 Emergency Event Tracking Tool,¹⁸⁴ which is part of the displacement tracking matrix and designed to keep track of sudden population movements. The Tracking Tool takes into account that displacement and population movements happen in between DTM data collection rounds and functions as a bridge between these rounds. UN agencies used the displacement tracking matrix reports in their SitReps and communications.
201. Another effort to develop better information on the displaced in Tigray was undertaken by UNHCR, together with the Bureau of Labour and Social Affairs and the Tigray Statistic Agency. They launched an initiative referred to as "enrolment." This initiative's objective was to develop a better picture of the IDPs and their needs in preparation for possible returns. In December 2021, UNHCR advocated for the partial release of the enrolment data for humanitarian planning purposes to enrich the data environment.¹⁸⁵ This evaluation has been unable to verify the operational use of this data.¹⁸⁶
202. In fact, the problem of the constraints in the use of humanitarian data for operational purposes was a wider one. As the WHO HeRAMS and other experiences show, even while they considered their data credible, agencies hesitated to put their reports in (or withdrew their reports from) the public domain before authorities have approved these publications. In Ethiopia, humanitarian data can only be made public following the authorities' endorsement. The evaluation is unable to determine whether these validation processes affected the quality and accuracy of the data sets. On principle, however, the extent to which agencies should even comply with this government requirement is an issue for debate. After all, independence is a principle guiding humanitarian action.
203. Furthermore, the endorsement processes by the Federal or regional authorities take a lot of time, while a humanitarian crisis is volatile by its nature. Key informants saw in reports that numbers of displaced people were going up in a certain location but not going down in another location, while they were certain that the latter location was where the people came from. The delays limit the operational relevance. Even though IOM went to great lengths to share unendorsed data with a large group of users for immediate use, there were differences of views among agencies as to which data should be used for planning. Some had doubts about the accuracy of certain data on the numbers of displaced in specific locations. The Emergency Event Tracking Tool, which as noted, helps to bridge the intervals between displacement tracking matrix rounds, requires some further verification as well. Its baseline comes from *woredas*, which the Inter-Cluster Coordination Group notes, "is not accurate."¹⁸⁷ In addition, even though IOM and UNHCR are clear on their different efforts in collecting data on conflict-displaced persons, as noted in several sources, there was still

¹⁸⁴ See UN Migration, Displacement Tracking Matrix, <https://dtm.iom.int/>.

¹⁸⁵ UNHCR, 'Northern Ethiopia Update', December 2021.

¹⁸⁶ UNHCR's evaluation of their response in Northern Ethiopia does not cover the enrolment initiative. 'Evaluation of UNHCR's Response to L3 Emergency in Ethiopia 2021–2022', (2023).

¹⁸⁷ See ICCG Minutes, 27 April 2021.

confusion on these multiple efforts, which is not limited to Ethiopia. For instance, the independent review of the humanitarian response to IDPs called the data landscape a “wild west.”¹⁸⁸

204. Key informants also noted that the data they received from the Government did not provide disaggregated numbers in terms of sex, age or special needs and were therefore insufficient for programme planning needs. Likewise, focus group discussion participants explained that beneficiary lists did not distinguish people with special needs, such as older adults or people with disabilities. Several key informants with knowledge of the subregional contextual differences also highlighted that they saw the same data-related challenges in each of the three regions.

205. Controversy between the Government of Ethiopia and agencies related to data arose around two key humanitarian publications, the Integrated Food Security Phase Classification (IPC) system and the Humanitarian Response Plan. The IPC, which involves a global partnership of 15 organizations at global, regional and country level, uses a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. In Ethiopia, the relationship between the IPC system and the Government of Ethiopia broke down in relation to an IPC update covering Afar, Amhara and Tigray in 2021. While the collected data was found to be credible from a technical perspective, the Government of Ethiopia refused to agree on the release of the update and withdrew from the process. The IPC Global Steering Committee insisted on the publication of the 2021 IPC update, feeling that internationally recognized results that stood the test of technical soundness should prevail. With regard to restarting the IPC in the country, a recent Food and Agriculture Organization-commissioned evaluation noted that “Ethiopia is an extreme example of governance and decision-making challenges and decisions on the way forward will be critical for the IPC as a whole.”¹⁸⁹

“In Ethiopia, food diversion is entrenched in the system.”

(Tigray Key Informant 31–UN)

“In Ethiopia, the targeting and everything is done with Government. You get a list and then you distribute the food.”

(Tigray Key Informant 12–UN)

206. By contrast, the second key humanitarian publication in 2021, the Humanitarian Response Plan covering the whole of Ethiopia, was never published because the Government disagreed with the target number of people who were identified as in need of humanitarian aid. The release of the document was stuck for months, with discussions still ongoing in July 2021, i.e., well into the second half of the year, when there would normally be a midyear implementation review. Meanwhile, internally, a specific response plan for northern Ethiopia had been in the works and informally shared with donors for resource mobilization. It was not until October 2021 that a document titled “The Revision of the Northern Ethiopia Response Plan” was issued in the public domain, ironically without a formal launch of the original version.¹⁹⁰ In 2022, the response to northern Ethiopia was included in a national HRP. Due to differences in indicators and follow-up monitoring processes and the fact that northern Ethiopia was no longer given specific targets, the evaluation team was not able to make a detailed comparison between 2021 and 2022 in terms of inputs and outputs. The year 2023 also saw the development of a national HRP, making it similarly challenging to gather specific figures for northern Ethiopia for the months of 2023 that are within the evaluation scope. In essence, the displacement tracking matrix, Integrated Food Security Phase Classification and Humanitarian Response Plan experiences show the mixed experiences of the humanitarian

¹⁸⁸ Sida et al., ‘Independent Review of the Humanitarian Response to Internal Displacement’, 54.

¹⁸⁹ FAO, ‘Evaluation of the Integrated Food Security Phase Classification (IPC) Global Strategic Programme (GSP) 2019–2022’, October 2022, <https://www.fao.org/3/cc2271en/cc2271en.pdf>.

¹⁹⁰ Ethiopia | ReliefWeb, ‘Revision of the Northern Ethiopia Response Plan—May to December 2021’, October 2021.

community in sharing data with the Ethiopian authorities. Sharing data for endorsement can result in significant delays, which make the data less than useful for underpinning operational decisions.

207. The complex data environment is also seen in the composition of lists of beneficiaries who are eligible to receive food assistance. Key informants noted that they were unable to verify the beneficiary lists.¹⁹¹ The food aid pause decided in early May 2023 (see Text box 3) came not only with allegations on the diversion of food but also questions as to who composed the beneficiary lists. Similar to accounts reflected in press reports,¹⁹² key informants told of their experiences of how they had seen authorities or community leaders put together the beneficiary lists, with little, if any, further verification.
208. Focus group discussion sessions highlighted that affected people in the three regions were aware that they had not been consulted in the composition of the lists. These accounts must be seen in a wider context. Asked about the history of food aid in Ethiopia, one key informant with expert knowledge on the matter noted that various Ethiopian parties had used food aid to “control communities” for decades. The politics of famine relief have been present for long in Ethiopia, and the food aid pause can only be seen in light of efforts to reduce the political manipulation of food aid.
209. Data on food needs that became available during the armed conflict include two emergency food security assessments for Tigray.¹⁹³ As noted, establishing a consolidated picture was highly challenging due to the fragmented nature of the response. There was no data on all other sectors for the Western Zone as the Government of Ethiopia covered this region. Additionally, there was no access to regions that were conflict hotspots, where the most vulnerable people could be expected. It was noted, however, that “food needs were high in general.” Importantly, the evaluation team found another significant survey: a household survey on food insecurity carried out by staff from the regional Health Bureau and researchers from Mekelle University in 52 districts (part of six zones in Tigray) in July and August 2021.¹⁹⁴ One of the researchers noted that the findings of this survey had been shared with the cluster but that they had not responded back.
210. With food aid as the sector that has traditionally dominated humanitarian response in Ethiopia, the numbers of people in need of food overshadow other needs. As seen in Tables 11, 12 and 13, people in need of food made up the largest percentage of people in need generally. This is linked to the fact that there was a general tendency to frame food insecurity as the main, if not only, narrative. Yet, as mentioned before, many key informants expressed that the crisis was, in fact, a protection crisis. The result was a certain competition in terms of framing the crisis as a food or protection crisis. Survey respondents were asked to rank 22 factors in order of the extent to which they found them prioritized in the response. Figure 12 (at the end of this section) gives an overview of the average rankings given, and it illustrates the clear perception of all survey respondents that priority was given to responding to food-related needs. It is noteworthy that approximately half of the

¹⁹¹ One agency noted that they would never cite beneficiary numbers unless they would have been able to verify the data by being present on the ground.

¹⁹² Elissa Miolene and Colum Lynch, ‘Exclusive: Rot Is So Much Deeper—Decades of Ethiopia Aid Manipulation’, Devex, 28 August 2023, <https://www.devex.com/news/exclusive-rot-is-so-much-deeper-decades-of-ethiopia-aid-manipulation-106060>.

¹⁹³ The evaluation team has seen no specific data on food security needs for Afar and Amhara, though the overall numbers provided from October 2021 onward and in the revised HRP for Northern Ethiopia include needs in Afar and Amhara.

¹⁹⁴ Aregawi Weldegebreal Weldegiargis et al., ‘Armed Conflict and Household Food Insecurity: Evidence from War-Torn Tigray, Ethiopia’, 5 May 2023, <https://conflictandhealth.biomedcentral.com/articles/10.1186/s13031-023-00520-1>.

respondents thought this priority was the “right” one, whereas the other half found the priorities of the response should have been different.

211. Most telling in relation to these figures are the differences between food and other key sectors, especially health and protection. With extreme violence and gross human rights abuses, especially against women and girls, it is surprising that the protection sector came to a number of people in need of protection, which is about half of the total population identified in need of food aid.¹⁹⁵ Asked about this discrepancy, key informants from the protection cluster explained that they had determined the number in relation to the number of people whose needs had been assessed in combination with their capacity. One key informant added that the number had been determined in relation to the type of protection activities for which the cluster had received Government approval. Whatever the explanation, with significant parts of the three regions experiencing extreme violence for much of the two years, the number of people in need of protection as put forward by the protection cluster did not even come close to a reflection of the reality on the ground given the level of violence against civilians during the two years of the armed conflict.
212. In examining the data, the evaluation tried to understand trends by comparing data for different years. This analysis is not watertight as some indicators are slightly different in 2022 as compared to 2021, and specific figures for Afar and Amhara for 2021 were not available.¹⁹⁶

Table 11: Overall figures on needs and people reached in Tigray for 2021

2021	PIN	People targeted	People reached	% people reached ¹⁹⁷
Agriculture	2.0M	1.2M	0.984M	82%
CCCM	1.8M	1.2M	0.424M	35%
Education	1.4M	0.720M	0.018M	2,5%
ESNFI	3.2M	2.9M	0.441M	15%
Food	5.2M	5.2M	4.8M ¹⁹⁸	92%
Health	3.8M	2.3M	0.211M	9%
Nutrition	1.6M	1.4M	0.350M	25%
Wash	4.5M	3.2M	1.5M	47%
Protection	2.7M	1.4M	0.176M	13%

[Compiled by the evaluation team using OCHA situation reports for Northern Ethiopia/Tigray.]

¹⁹⁵ To confuse matters, a strategy document produced by the protection cluster in Tigray quotes 5.2 million people in need of protection.

¹⁹⁶ The evaluation of UNHCR’s response to the L3 emergency also found it difficult to consolidate data and analyse trends over time because indicators were not consistently used during the time covered.

¹⁹⁷ The numbers and percentages of people reached should be called into question as it is unclear how these numbers were calculated.

¹⁹⁸ Food distribution round 2.

Table 12: Overall figures on needs and people reached per region for 2022

2022	PIN	People targeted	People reached ¹⁹⁹	% people reached
Northern Ethiopia	13.0M	12.6M	12.4M	98%
Tigray	5.3M	5.2M	5.8M	108%
Afar	1.3M	1.1M	1.0M	89%
Amhara	6.4M	6.0M	5.6M	94%

[Compiled by the evaluation team based on the OCHA Northern Ethiopia Response Dashboard: Jan–Dec 2022, 31 December 2022.]

Table 13: Overall figures on needs and people reached per cluster and region for 2022

2022	Tigray			Afar			Amhara		
	Targeted	Reached	%	Targeted	Reached	%	Targeted	Reached	%
Agriculture	1.9M	1.7M	89%	0.582M	0.226M	38%	2.6M	0.284M	11%
CCCM	0.431M	0.645M	150%	0.16M	0.05M	312%	0.081	0.103M	127%
Education	0.449M	0.160M	36%	0.153M	0.124M	81%	0.258M	0.660M	255%
ESNFI	1.1M	0.246M	21%	0.535M	0.066M	12%	0.773M	0.695M	90%
Food	5.3M	1.7M	33%	0.994M	0.579M	58%	5.8M	3.8M	66%
Health	2.0M	1.1M	55%	0.527M	0.522M	99%	1.6M	1.7M	107%
Nutrition	0.859M	0.229M	26%	0.259M	0.377M	145%	0.532M	0.518M	97%
Wash	2.0M	0.611M	30%	0.897M	0.893M	99%	0.400M	2.1M	536%
Protection	1.9M	0.596M	31%	0.199M	0.044M	22%	0.546M	0.246M	45%
Child Prot.	0.393M	0.342M	87%	0.213M	0.041M	19%	0.681M	0.274M	40%
GBV	0.982M	0.736M	75%	0.137M	0.128M	93%	0.613M	0.332M	54%
HLP	0.015M	0.001M	9%	0.001M	-	-	0.004M	0.0002M	5%
Mine Action	-	-	-	-	-	-	-	-	-

[Compiled by the evaluation team based on the OCHA Northern Ethiopia Response Dashboard: Jan–Dec 2022, 31 December 2022]

213. Among others, food aid distribution data shows a relatively high coverage because several rounds of food distribution overlapped due to significant delays in delivery. One round, for example, went on for 11 months, overlapping with other rounds. This meant that people may have received only one ration when they were, in fact, entitled to several. The fact that a number of rounds had not finished by the time the next ones were already under way contributed to a complex picture in terms of who received what. This is discussed more in detail in section 3.5 on coverage and delivery.

214. With access being less of an obstacle since the signing of the cessation of hostilities agreement in November 2022, surveys and assessments could now be undertaken to better understand the situation in certain areas and/or in terms of developing a complete picture. In particular, retrospective surveys covering mortality and establishing the causes of deaths could be undertaken, but, unfortunately, no such attempts were seen at the time data collection was concluded in July 2023.

3.4.2 Data on delivery²⁰⁰

215. OCHA SitReps became a key publication in monitoring the response's progress. Due to the communications blackout, these reports were the main source of data and analysis of the situation in Tigray for a significant period of the response. Key informants confirmed that they saw the SitReps as the main, if not the only, collective tool for advocacy. Putting these SitReps together was a

¹⁹⁹ It is unclear how the numbers in this column were calculated.

²⁰⁰ The delivered output data is inconsistent and does not provide meaningful indications in terms of effectiveness.

significant challenge. Available data was mostly fragmented due to the nature of the response: where agencies went outside the main hubs, they often combined needs assessments, deliveries, and post-distribution monitoring all in one mission. It follows that none of these activities were carried out comprehensively. Furthermore, some of the clusters also hesitated to share their data as they were unsure about their accuracy or the sensitivities it might create, key informants said. Where output data was collected, such as on the number of trucks reaching Tigray, it was used for humanitarian advocacy purposes.

216. One reason for sectors that set their targets lower than the people in need, as was the case here, is to acknowledge that operational capacity and resources are insufficient to reach all people in need. And even if the numbers of people in need and people targeted match, and targets are met, this does not mean that all people in need are reached and/or they received what the quality and quantity of aid that should have received.²⁰¹
217. **The available data on coverage and delivery do not allow for a meaningful analysis.** The OCHA SitReps and dashboards do contain data on people reached and geographical coverage, and they have been used for the overviews provided in Tables 11, 12, 13 and 14.

Table 14: Coverage per zone; 2021–2022

	Tigray	% people reached	Afar	% people reached	Amhara	% people reached
2021	North Western	44%	N/A		N/A	
	Central	23%				
	Eastern	18%				
	South Eastern	71%				
	Southern	29%				
	Mekelle	46%				
	Western	N/A				
2022	North Western	50%	Kilibati (zone 2)	75%	West Gondar	100%
	Central	35%	Fanti (zone 4)	80%	Central Gondar	95%
	Eastern	45%	Awsa (zone 1)	45%	North Gondar	100%
	South Eastern	50%	Hari (zone 1)	65%	Wag Amhara	100%
	Southern	55%	Gabi (zone 3)	55%	North Wello	90%
	Mekelle	100%			South Gondar	98%
	Western	60%			West Gojam	23%
					Awi	100%
					East Gojam	30%
					Oromia	65%
					North Shewa	70%

[Compiled by the evaluation team based on the OCHA Overview of achievements against the Northern Ethiopia Response Plan, 31 December 2021, and OCHA Northern Ethiopia Response Dashboard: January–December 2022, 31 December 2022.]

218. Further to the comments above with regard to the reliability of this data, it is important to note that it should be used with caution. Data on the number of people reached do not allow for a conclusion about the effect of the aid at the household level. Further, any meaningful analysis based on these

²⁰¹ The discussion of number of people in need in relation to target numbers is not new and not unique to Ethiopia. Likewise, the question about estimating the system's capacity in relation to the needs and planning is a complex one. It is part of the current debate with donors on prioritization in light of the widening gap between available funds and growing needs globally.

figures alone is limited by three main elements. First, this general data is usually based on indicators that do not give a fully accurate picture of the situation on the ground. For instance, 92 per cent of people reached in 2021 through food assistance considered people who received food at least once during the year. As such, it does not say a lot about the actual coverage of food assistance, and it is not linked to the several rounds of distribution supposedly planned for six every week. Second, the output data available in the situation reports, dashboards and the overviews of who is doing what and where (3Ws) does not add up.²⁰² In essence, comparing the reports with output data does not provide a conclusive picture as to the communities who are and who are not covered. Finally, as mentioned above, the comparison of data between 2021 and 2022, especially in terms of targets, is made impossible due to the fact that there was no specific Humanitarian Response Plan for northern Ethiopia in 2022. Certain indicators consequently differ between 2021 and 2022. The data available is, therefore, not considered robust enough for meaningful evaluative judgements.

219. Especially from an advocacy point of view, among the most useful and interesting public materials containing humanitarian output data were the regular visual displays of available humanitarian operational capacity that OCHA produced during the second semester of 2021.²⁰³ These overviews showed largely insufficient supplies and services in relation to the needs in the northern Ethiopia response. They kept tabs on three key resources needed to keep the humanitarian response going to and within Tigray in line with the Humanitarian Response Plan's targets: cash (to pay staff salaries), fuel and the number of trucks needed by each of the clusters. Colour coding signalled the degree of availability. Unsurprisingly, red, which shows the unavailability of the resources, dominated week on week for many of the clusters. The overviews were discontinued because of the Government of Ethiopia's protests.²⁰⁴
220. The counting of trucks making it to Tigray, however, continued and de facto became the main indicator to determine the response's progress. Key informants noted that one donor required hourly reporting on the number of trucks making their way into Tigray in 2021. While there is no question, from a logistics point of view, that humanitarian cargo provides a key indicator of operational capacity and access, this level of reporting raises a question in terms of agencies' reliance on donors. Even more importantly, the number of trucks that made it to Tigray does not give an indication of the end destination nor of the quality of the supplies delivered, and ultimately, the effect they had at the household level.

²⁰² The evaluation used data contained in SitReps, cluster dashboards, 3Ws and access maps as overlays in a triangulation effort to establish the accuracy of output and delivery data, but the overlays did not match. One reason that complicates such a triangulation effort is the different time frames of the reports.

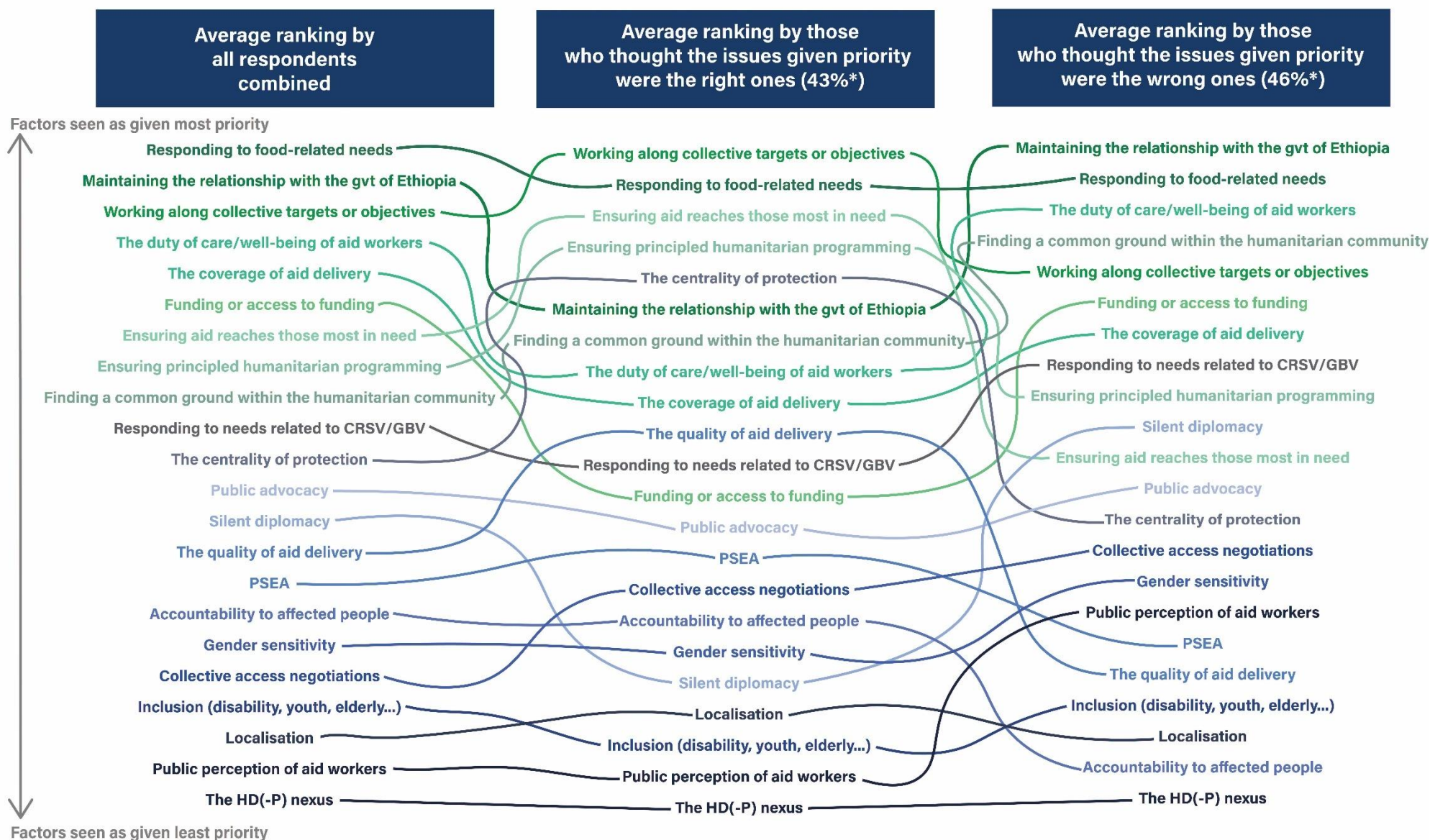
²⁰³ See for example OCHA, 'Ethiopia—Tigray Humanitarian Operational Capacity—As of 25 August 2021', 2021; OCHA, 'Ethiopia—Tigray Humanitarian Operational Capacity—September–December—As of 1 September 2021', 2021; OCHA, 'Ethiopia—Tigray Humanitarian Operational Capacity—As of 7 Jan 2022', 2022; OCHA, 'Ethiopia—Tigray Humanitarian Operational Capacity—As of 15 January 2022', 2022.

²⁰⁴ KII.

Figure 12: Survey respondent average rankings of response priorities

Survey respondent perceptions of the extent to which various issues were prioritised in the response.

Survey respondents were asked to rank a number of issues by order of how much priority they were given in the response, and to state if they thought these priorities were the right ones. The list below shows the average rankings, with the items seen as given most priority towards the top, and the ones given less priority towards the bottom.



* 1% of respondents answered "do not know" to the question of whether the issues given priority were the right ones

3.5 Coverage and Delivery

To what extent did the collective response effectively deliver quality humanitarian assistance and protection?
Evaluation criteria: Effectiveness, Quality

Summary findings

Response vs. needs

- Despite the challenges, UN and non-UN aid agencies remained present in the three regions during the war.
- In general, quality in the delivery of humanitarian services sectors was not a priority, also due to the circumstances, but aspects that ensure quality, such as accountability to affected people, were not sufficiently adjusted to the context.
- There were discrepancies in the attention given to the three regions.
- The aid provided did not take due account of needs, incl. changes over time.

Principles, protection and accountability to affected people

- Policy priorities such as accountability to affected people, prevention of sexual exploitation and abuse, inclusion, and gender or conflict-sensitive aid were mentioned in HCT meetings and plans.
- The response to gender-based violence/CRSV was largely inadequate.
- Few, if any, alternative approaches were developed to address accountability to affected people and related priorities in relation to the prevailing context.
- The protection cluster appears to have been largely overwhelmed by the scale of protection needs.
- Humanitarian principles were not sufficiently taken into consideration at a strategic level, which had an impact on the ground.

Social media and public image

- The collective response did not succeed in highlighting its non-partisan identity and impartial character.

The integration of local capacities

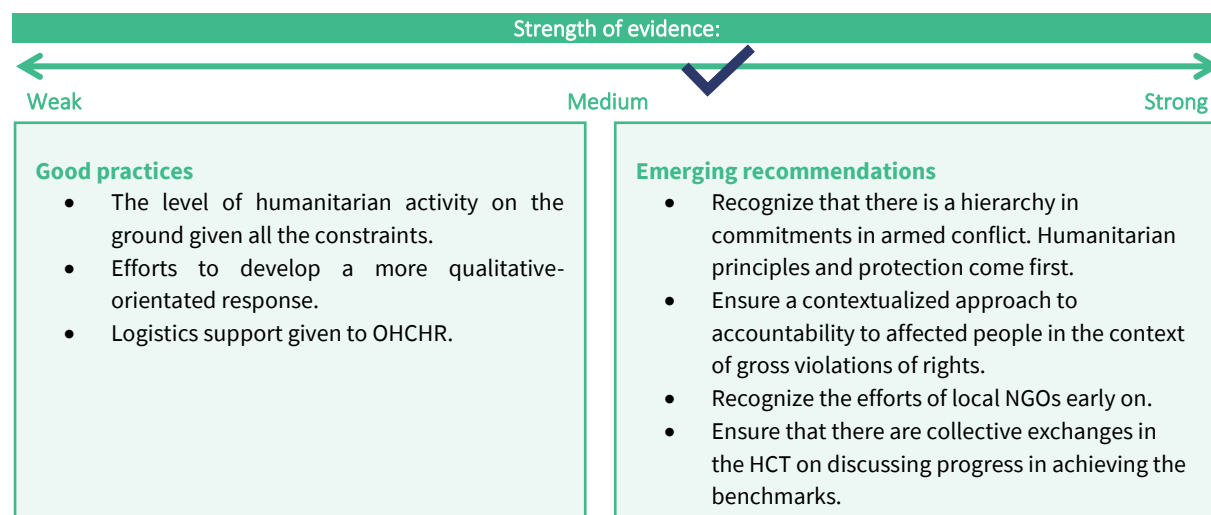
- Several examples of valuable integration of local capacities in the collective response were seen.
- Local NGOs/local staff felt abandoned in the response.

Funding

- Due to the lack of access, implementation fell behind. With regard to financial resources for the response, this delay had the significant effect of resulting in a surplus of funds that were not being used for Tigray.
- In Afar and Amhara, the response fell behind due to lack of attention and funds.

Unintended external effects

- Insufficient aid led to tensions in communities.
- The pause in food distribution is a negative effect of the fact that weaknesses in data remained unaddressed.



221. Due to the extreme conditions under which the response was carried out, it was known from the outset of this evaluation that for much of the two-year armed conflict and the months thereafter, people in need in the three regions did not receive the quantities and quality of humanitarian services they required. Instead of looking at quantitative data, the evaluation decided to examine coverage and delivery in terms of quality. Quality comes with implementing the commitments to humanitarian principles, protection and accountability to affected people and/or gender, although these commitments need to be prioritized due to the context. It is for this reason that the evaluation looked for good practices in terms of alternative approaches and ways of working linked to contextual constraints.
222. With this in mind, the sections below will present findings with regard to the degree to which the collective response met needs (3.5.1); efforts to put humanitarian principles, protection, accountability to affected people and specific vulnerability concerns at the centre of the response (3.5.2); issues around social media and public image (3.5.3); the integration of local capacities at coordination and response levels (3.5.4); funding (3.5.5); and the extent to which the collective response generated significant, positive or negative, intended or unintended effects (3.5.6).

3.5.1 Response vs. needs

223. **Despite the challenges, UN and non-UN aid agencies remained present in the three regions during the armed conflict.** They made strenuous efforts to increase their presence and programmes. Activities such as the response to acute malnutrition, mobile clinics, or the logistics efforts mounted to keep the aid flow going contributed to saving lives. That said, parts of the three regions have largely remained without assistance. Western Tigray, for example, saw very little international presence. Less than a handful of international NGOs, some of which were supported by UNICEF, and the International Committee of the Red Cross have been among the few actors who were able to undertake some activities, such as operating mobile health clinics, in this area.

“The fact that aid agencies never seem to bring enough with them to cover every person in the camp is not because they’re deliberately trying to discriminate between us and leave people out. It’s because they don’t have enough resources.”

(Amhara FGD 2 participant)
(Participant–Amhara FGD 2)

224. Focus group discussions held as part of this evaluation’s data collection looked at what actions affected people took to survive during the armed conflict. Part of the feedback from affected people illustrates that they felt that the little aid that did come in made a difference. There was near-unanimity among focus group participants across the three regions that even though the help was small and came late, it helped them to survive the armed conflict. People in need also understood some of the challenges, frequently recognizing that aid agencies were doing their best.

“We think aid agencies did their best to help us. The main problem is that our needs and our numbers and what they can offer us didn’t match.”

(Participant–Afar FGD 2)

225. This feedback shows that **the response became a lifeline for many people**, but evidence also shows that there are differences between sectors, between organizations in a sector and between regions in terms of the levels of successful efforts. Moreover, as some of the weaknesses in the response sat deep in the overall system, a number of the success stories are inevitably somewhat marginal when seen from the bigger picture perspective.

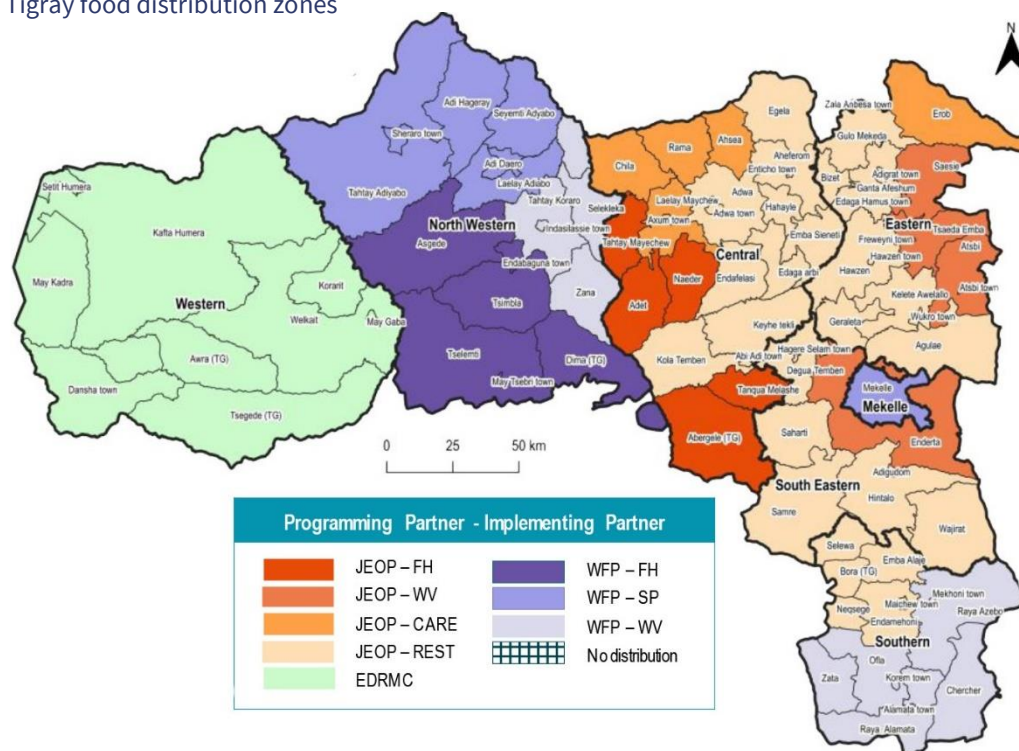
“The help saved our lives, even if it was small and did not come on time. For me without this help, we would not be alive.”

(Participant–Tigray FGD 18)

226. Food distribution in Tigray was split between three actors, each covering different zones (see Figure 13): a US Agency for International Development (USAID) programme called the Joint Emergency Operation Program

(JEOP),²⁰⁵ the federal authorities and the World Food Programme. The JEOP, led by Catholic Relief Services, is the largest food provider in Tigray.²⁰⁶ Their way of working in Ethiopia had mostly been marked as developmental, and a key informant said, “[T]hey were not set up to deliver emergency response.” Their actions in Tigray during the armed conflict largely remained out of the spotlight.²⁰⁷ The Government covered Tigray’s Western Zone, for which there was a complete lack of data. By contrast, reports of the World Food Programme’s work are in the public domain.

Figure 13: Tigray food distribution zones



EDRMC: Ethiopian Disaster Risk Management Commission
JEOP: Joint Emergency Operation
WFP: World Food Programme
FH: Food for the Hungry
REST: Relief Society of Tigray
SP: Samaritan's Purse
WW: World Vision

[Source: Ethiopia Food Cluster, Northern Ethiopia, Tigray response, weekly dashboard, Round 3 of 2022.] The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

227. As noted in the previous chapter, food delivery reports focused exclusively on the numbers of people and quantities of food distributed. By implication, there is a dearth of analysis in terms of documented views or feedback from affected communities on their needs. The latter aspect would have helped in making the response more qualitatively orientated. Several key informants explained that accountability mechanisms to affected people did not function in the response. No alternative mechanisms that fit with the context were set up.

²⁰⁵ The US Government is this programme’s only donor; an NGO consortium implements it.

²⁰⁶ Other NGOs that are part of JEOP are Food for the Hungry Ethiopia, the Relief Society of Tigray, Samaritan’s Purse and World Vision.

²⁰⁷ E.g., the food aid pause is known as a US Government decision. Reports on the JEOP are not easily available and do not differentiate for Northern Ethiopia. The JEOP website is indicated as insecure by browsers, and the evaluation team had to undertake several efforts to find a key informant.

- 228. Some sectors did better than others in raising qualitative issues.** The health cluster team in Tigray, for example, produced a strong analytical report based on data derived from a mortality survey conducted in 2021, which emphasized the need for the health response to be seen from a broader perspective.²⁰⁸ Likewise, throughout much of the response, the education cluster’s leadership developed a promising vision to ensure the cluster would work with other sectors to strengthen the education response while recognizing that education did not receive priority, including from the Cluster Lead Agency. This, for example, would include a strong linkage with mental health and psychosocial support activities for children, which hardly received any attention during the two years of the armed conflict. The implementation of these important plans was still a work in progress at the time of the data collection in June 2023 and could, therefore, not be assessed.
- 229.** In Afar, the emergency shelter/non-food items cluster tried to tailor the response to the needs of the affected people as much as possible. For example, when conducting post-distribution monitoring two weeks after emergency shelter/non-food items distributions, they saw that the provision of plastic sheets for emergency shelter was not the best option in Afar due to the heat. The cluster brought together shelter experts from partners to revise the shelter package and consulted regional authorities on alternative options. Culturally, houses in Afar are dome-shaped and made of woven natural fibre mats. They agreed on providing woven mats and plastic sheets—plastic sheets to keep the rain out and woven mats to keep the hut cool in the heat. Despite slightly higher costs, the adapted package was eventually approved by the advisory group and used.²⁰⁹
- 230. There were discrepancies in the attention given to the three regions as perceived by affected communities.** In the initial phases of the Scale-Up, Tigray was clearly the epicentre of the crisis. Key informants acknowledged that the system was slow to adjust as conflict and displacement later spilled over into the neighbouring states, with the response to Afar and Amhara only increasing as of August 2021. Key informant interviews and focus group discussions in Afar and Amhara—where it was frequently felt that people in need in Tigray were getting the bulk of assistance—confirmed this. Community leaders’ adverse reactions to the many convoys that went from Semera to Tigray are also well-documented in situation reports. These convoys resulted in understandable frustration from communities in Afar, who felt that they were being left behind. Focus group discussion participants in all three regions also brought up differences in aid in camps, outside camps and host communities.
- “We talk with friends back in Tigray and they tell us they get better humanitarian support than we do here.”**
(Participant–Amhara FGD 5)

“Since things cooled down and the war ended, it seems an overwhelming amount of humanitarian support, as compared to what we’re getting [in Afar], is going to [Tigray].”
(Participant–Afar FGD 4)
- “There is blatant discrimination between us and those IDPs who are living in camps when it comes to access to humanitarian assistance. Aid agencies target their responses there; no one knows about us.”**
(Participant–Amhara FGD 5)

“We think the IDPs in the [a specific camp] are in a better position than us since they get support from many other aid agencies when it comes to food assistance.”
(Participant–Amhara FGD 2)

²⁰⁸ Health Cluster Team, Tigray, Ethiopia, ‘Deafening Silence as Thousands Perish Due to Human-Made Humanitarian Catastrophe’.

²⁰⁹ This example was provided by key informant interviewees and referred to by focus group participants in Afar.

231. Focus group discussions overwhelmingly noted that the aid received did not take into account their changing needs. While some focus group discussion participants raised positive examples of aid being adjusted to the evolving circumstances of affected people, the opinion that the aid was not adequately adjusted over time was a more widely held view across the three regions (see Figure 11, which provides an overview of views and perceptions put forward by focus group discussions participants). In Afar, a largely pastoralist region, participants raised concerns that the aid they received did nothing to help them rebuild their lives once they had had to sell all of their goats and sheep. In Tigray, they widely held the concern that they were actually receiving less aid now that there was relative peace.²¹⁰

232. Focus group discussion participants in all three regions were of the view that the aid they received not only arrived very late but also that it was not clear when it would arrive nor why it was late.

233. Many focus group discussion participants in the three regions also explained that although they had been told not to sell the aid they received, they had felt compelled to do so in order to be able to buy more useful items and food. They also noted that needs assessments were not followed up with deliveries in many instances, that they asked for items other than food that never arrived or that they were not even consulted about needs other than food.²¹¹ Agencies noted that they saw an assessment fatigue among affected communities, especially in Afar. Some focus group discussions also raised concerns over quality, explaining that they had received soap or shelter/tarpaulins that did not last long.

“Aid agencies haven’t tailored their response to our changing needs. The type of assistance we receive and the items themselves have remained the same since we got here.”

(Participant–Afar FGD 1)

“Our need now is different from what we needed in the camps. We now need support to restore our properties and livelihoods.”

(Participant–Afar FGD 12)

“We were given [...] cookies that had expired, but we ate them anyways. We figured it was better to enjoy having a full stomach for a bit even if what we’re eating could poison us.”

(Participant–Amhara FGD 4)

“You don’t know the time they will come. Aid agencies delay at distribution. And even after it arrives here it stays in storage for months.”

(Participant–Tigray FGD 18)

“In Adigrat town the aid that was for the IDPs went to the host community. But we deserve more support and assistance than the host community, since the host community are living in their homes and in a better condition.”

(Participant–Tigray FGD 7)

“We don’t have grain mills in this area, so even if they were to bring some grains, what would we do with it?”

(Participant–Afar FGD 6)

“[...] offered us expired oil and when we used it, all my family was exposed to diarrhoea.”

(Participant–Tigray FGD 3)

“There is surplus aid items that are sitting in storage but the committee refuses to give it to us. Whatever it is, we could sell it and buy school supplies or food. They’ve thrown out food once because it had gone bad while in storage. Wouldn’t it have been better if we were able to use or sell it before it went bad?”

(Participant–Amhara FGD 3)

²¹⁰ Due to the disruption of financial services and the banking system and high inflation, cash and vouchers were not provided to affected people.

²¹¹ This view is at odds with interviews with international actors (including sub-cluster leads), who noted that they made efforts to do multisector assessments, especially in Tigray, as lack of access and fuel made it necessary to combine sectors.

234. The feedback from the focus group discussions is telling but not surprising. At the time of the data collection in June 2023, a number of efforts to hold focus group discussions and/or household consultations as part of assessments and surveys were under way. With the limited access during the armed conflict, consultations with affected people had to be done in one go with needs assessments, delivery of materials or services, and monitoring. This left no ability to adapt the response. However, some key informants told of their extra efforts to hold interviews or take testimonies as part of their work during this time. They explained that such efforts were particularly relevant in hospitals or health centres which the survivors of (sexual) violence visited.

3.5.2 *Protection, accountability to affected people and other commitments*

235. Commitments such as protection, accountability to affected people, prevention of sexual exploitation and abuse, inclusion and gender- or conflict-sensitive aid were discussed in HCT meetings and presented in collective plans. In situations of actual violence and intense armed conflict, humanitarian principles and protection are even more relevant and should be prioritized. The fact that this did not happen suggests that the response was organized around working of templates or ticking boxes to ensure all policy commitments were addressed.²¹² Indeed, there is little IASC guidance on the need for the hierarchy of certain policy priorities in relation to the prevailing context; all commitments appear to be treated as equally important.²¹³

“There is a huge gap in terms of ensuring the centrality of AAP, protection and gender in the humanitarian response to the conflict.”

(Afar Key Informant 30–UN)

236. A range of key informants stressed the importance of a protection-focused response. Such a response is dependent on a principled approach, as it will define the terms of engagement with the various parties to the conflict, including the Government of Ethiopia. Following the principle of independence provides for space to raise protection issues with all parties to the conflict, including the Government. Due to the absence of a principled approach, in reality, there was very little space to speak out on rights violations in which the Government and its troops may have been implicated.

“I need to be honest in admitting that issues concerning AAP, gender, vulnerable people, and GBV, were not front and centre in the response.”

(Key Informant 63–UN)

237. Importantly, there is also a sense among some key informants that the protection cluster did manage to deliver on its mandate and was able to develop a meaningful strategy and inform protection programming. The reason for a significant part of the protection work not being implemented was the extremely challenging context, insecurity and lack of adequate funds, according to one key informant. Again, this IAHE is well aware of the context, but protection in such a constrained context should be given priority. Not being able to implement certain activities should only be a reason to try even harder.

238. **The response to gender-based/conflict-related sexual violence was largely inadequate.** The large prevalence of CRSV made it to the top of the list of protection needs. With regard to these needs, many key informants stressed the largely inadequate response. One key informant who held leadership responsibilities called the response “a failure,” while another called it an “untouched” problem as the scale of CRSV dramatically outweighed the efforts to respond. As pointed out above,

²¹² Especially since the 2016 World Humanitarian Summit, the humanitarian community has adopted a long list of policy commitments. Many of these commitments have been around for much longer.

²¹³ The premise that in a context of armed conflict humanitarian principles and protection come first as commitments derives from international humanitarian law. Common Article 3 of the Four 1949 Geneva Conventions, which is a central provision and has also been labelled as a ‘mini convention’, includes both concepts.

the leadership of the gender-based violence response was unclear at best. Furthermore, a particular gap in the response is the provision of medico-legal services. Albeit late and insufficient due to the CRSV scale and lack of functioning health facilities, the response concentrated on the physical and mental health of gender-based violence survivors. However, the lack of attention to the need for justice for gender-based violence survivors has been (and remains) a significant gap too. The OHCHR staff received logistics and other support from their humanitarian colleagues to enable them to record and document gross violations of human rights, including CRSV. OHCHR's capacity in-country is a fraction of what is needed to do proper investigations. But what is more, the humanitarian community seems to have little eye for ensuring that ending impunity for war crimes must be a priority as part of the nexus between humanitarian and development work. As one key informant working on durable solutions put it, "We seem to be in our humanitarian bubble. Where's the discourse on the need for accountability?" This rhetorical question applies to wider violations than CRSV. Accountability for war crimes, such as starvation, given the access refusal, has become extremely remote, especially following the termination of the mandate of the International Commission of Human Rights Experts on Ethiopia in September 2023.

239. Asked about the GBV response at the time of the data collection, a number of key informants explained that there were what is referred to as one-stop centres, where survivors received medical care and psychosocial support at the same time. While some seemed to find this a good solution, others were less positive about these centres as they pointed to the physical layout of several of these centres, thereby highlighting a risk of possible stigmatization of survivors seeking care in these facilities.

"We're not aware of any mechanism that's in place, if we have any complaints or comments on the humanitarian response. But even if there was a feedback mechanism, who would dare complain?"

(Participant–Afar FGD 1)

240. There was also a recognition among informants that agencies approaching their GBV work in a highly fragmented manner did not improve the situation. Since the outbreak of the conflict, and for most of 2021, "each went in to do bits and pieces of work," as one respondent put it. In 2022, UNFPA, UNICEF, UNHCR and WHO agreed on a joint framework for the north. At the time of the data collection, the platform was still running with an expanded membership of 12 agencies. One responded by stating that it was "one of the good examples of the collective response, which had reached a low point earlier as a result of the PNG [persona non grata]-episode." Its purpose was explained to be twofold. First, in light of gaps in both data and delivery, the platform was intended for agencies to come together, see what resources were there and for what, and harmonize. Second, as the Government individually targeted agencies, the platform's idea was to show that it was an important piece of work for all agencies, not just one. The platform, in addition to the work of the GBV AOR and the work of dedicated GBV coordinators (one national, one Tigray, one in Afar, one in Amhara), improved the fragmentation to some extent. While the platform is undoubtedly a good example of a relevant and necessary collective endeavour, it was not timely enough, as it was set up only in 2022.

"The humanitarian agencies had no mechanisms for receiving complaints. We made many complaints to the administration wing of the Government...but we got no answer."

(Participant–Tigray FGD 13)

"The AAP mechanisms have not been. There was just a focus on [complaints] boxes. When there were five partners in an IDP camp, there would be five boxes."

(Key Informant 26–UN)

241. As for the prevention of sexual exploitation and abuse, collective response plans, HCT meetings, and documents granted it considerable attention; global-level and donor pressures to treat it as a priority have their effect. Of the 37 meetings the HCT held in 2021, 22 discussed the issue of

prevention of sexual exploitation and abuse.²¹⁴ The attention on protecting women, girls, boys and men against the (potential) misconduct of aid workers risks creating an inward-looking perspective that may impact on keeping focus on a needs-based response, bearing in mind the wider issue of large-scale CRSV in this crisis. It is also a result of the multiple policy requirements an HCT must fulfil and an indicator of the lack of recognition and/or prioritization of urgent humanitarian needs in accordance with the context.

242. Few, if any, alternative approaches were developed to address accountability to affected people and related priorities in relation to the prevailing context. The communications blackout, lack of access, and gross violations of human rights created a context in which the commitment to accountability to affected people takes special meaning. For example, documenting survivors' accounts of targeted violence against civilians would appear as more relevant than understanding if the little aid that can be provided is relevant to their needs, especially when it is known that this aid is largely insufficient. The evaluation saw some efforts of agencies to ensure that testimonies of, for example, survivors of GBV would not go lost, but there is no evidence of a collective strategy or action in this direction. In addition, at the time of data collection, the evaluation team saw accountability to affected people mostly implemented through complaint boxes only, for example, in the camps for IDPs. Focus group discussions whose participants were aware of accountability to affected people mechanisms also referred to complaints boxes, but more often than not, participants did not know of their possibility to complain or provide feedback at all.

243. **The protection cluster appears to have been largely overwhelmed by the scale of protection needs.**

Key informants noted that the strategy produced by the protection cluster at the national level was so general that it was meaningless. For several key informants, the protection cluster relatedly appeared powerless in a context where staff tended to lack humanitarian emergency experience in general and protection experience in particular. Others noted, however, that protection had been successful to some extent, for example, because UNHCR managed to set up a range of protection desks decentralizing the identification of protection risks.²¹⁵ It was also noted that protection has been successful in mainstreaming attention to protection risks in the work of other clusters. It is important to note that these perceptions held by key informants are not contradictory. It appears further that the priorities in terms of protection issues were not aligned with the needs. In the regions, too little attention was given to overarching protection objectives. Humanitarians cannot stop violence against civilians and other human rights abuses, but they can play a role in ensuring that valuable information about such violations is recorded. Likewise, they should play a role in reminding the authorities of their obligations under international law, even if this requires robust advocacy.²¹⁶ Instead, the protection areas of responsibility (or sub-clusters) focused on their specific thematic issues only. In the case of one area of responsibility, they were even unaware of a common strategy. Not all key informants, however, were negative as to the work of the protection

“This has been a protection crisis, but they were unable to do anything meaningful when it came to protection.”

(Key Informant 48–INGO)

“There is little capacity of the national protection cluster to influence individual UN agencies. Many profiles [of staff] in Ethiopia lack expertise and competence in terms of protection and humanitarian action. The national cluster lead wasn’t really sharing information or pushing the HCT leadership.”

(Afar Key Informant 14–UN)

²¹⁴ By contrast, only 13 HCT meetings discussed the gender-based violence response.

²¹⁵ UNHCR, ‘Evaluation of UNHCR’s Response to L3 Emergency in Ethiopia 2021–2022’, 2023, iii

²¹⁶ While seven UN staff were expelled in September 2021, the first moment, which did not include a formal persona non grata declaration, happened in March 2021, when a senior UNHCR representative responsible for protection felt forced to leave Ethiopia.

clusters either nationally or in the regions. Some noted that there was a protection mindset but that because of the challenges the context created, it was a near-impossible undertaking, with too little capacity available to address the needs.

244. As for the gender-sensitive character of the response, available data was insufficiently disaggregated, especially data from government authorities; as a result, part of the services may not have been sufficiently gender-sensitive. The degree to which aid can be gender-sensitive in such an extreme situation is another matter that requires reflection in light of the need for contextualization and priority setting.

3.5.3 *Social media and public image*

245. **The collective response did not succeed in highlighting its non-partisan identity and impartial character.** Social media activities negatively impacted perceptions of UN as an impartial actor. The Ethiopian diaspora, irrespective of ethnic origin, is particularly active but extremely divided on platforms such as X (formerly Twitter). The hatred expressed on social media was toxic. Every tweet or public message from humanitarian organizations to highlight their work in response to the armed conflict was greeted with applause or hate depending on in whose favour it was perceived to be. To make matters worse, the extent of disinformation was high, and there was deliberate manipulation. Certain events or images were entirely taken out of context, with frequent suggestions that agencies were in the hands of one of the parties, especially the Tigray People's Liberation Front. To correct the disinformation and reverse the negative perception vis-à-vis the UN, a UN communication group engaged with local media by providing training on UN principles of engagement and promoting the Sustainable Development Goals. Efforts were also made to push for more balanced reporting on the response across the three regions. Addressing the bigger coverage on Tigray, OCHA, for example, explained that Afar and Amhara had relatively less communication capacity devoted to them.
246. However, key informants differed in their views on whether there were collective efforts to address the negative images of the humanitarian response. Those who knew of the efforts explained that the Inter-Cluster Coordination Group had worked on a collective strategy, but whether such a strategy was agreed on and implemented is unknown to the evaluation team. Yet, given the extreme character of the messages circulating on social media against the humanitarian efforts, developing a joint social media communications strategy to counter this negative image of humanitarian aid, other than the broader communications about the Sustainable Development Goals, should have taken a higher priority.
247. The vulnerability of local staff also emerged in another context. With the armed conflict framed as an issue between Tigrayans and Ethiopians of other ethnic origins, tensions emerged within the workforces of many international agencies. Stories that were mentioned included posts on social media platforms such as Facebook or X, in which certain staff expressed their personal views on the armed conflict in the north. These embarrassing issues for humanitarian organizations are part of the reality.

3.5.4 *Integration of local capacities*

248. **Several examples of valuable integration of local capacities in the collective response were seen.** For example, people with disabilities' special needs received significant attention in Tigray thanks to the advocacy of local NGOs. This specific protection issue gained prominence as of early 2023. In fact, the attention they paid to the absence of disaggregated numbers indicating special needs, not to mention the lack of action in addressing these needs, created an entry point for them to receive a prominent seat at cluster meetings at the subregional level in Mekelle. At the time of the data collection for this evaluation, this prominence had not yet been translated into further financial

support for their work. Key informants said of this issue that financial support had been discussed, without further action.

249. Another example could be seen in Afar, where numerous respondents highlighted the contribution of one local organization. Sixty-five per cent of the terrain in Afar is ancient lava-based and stretches of the landscape lack roads. This local NGO, which was set up 30 years ago with the particular mission of working where the Government did not, has managed to cope with the circumstances as it provides assistance in Afar, including vaccinations, through an extensive network of 900 outreach workers, teachers and nurses. Thanks to a tradition of travelling on camelback, the donors recognize the organization as partners for its large coverage. Interestingly, this NGO was deemed ineligible for funding from the Ethiopian Humanitarian Fund (EHF).
250. This also explains why a number of key informants pointed to the EHF as a successful example with regard to localization and area-based coordination. In the words of one informant, “[I]t is still not perfect, but huge improvement”; standardized allocations mean that many local and national NGOs benefit from it. At the same time, the representatives of local/national organizations that the evaluation team spoke to largely raised frustration in terms of their funding situation, highlighting that international NGOs have much easier access. Some of the local NGOs in Tigray noted that they heard nothing back on their request to the EHF for funding, while others noted the extremely heavy due diligence process and the many months they had to wait for their organizations to be assessed.
251. Generally, the Ethiopian country-based pooled fund—the Ethiopia Humanitarian Fund—was one of the main sources of funding for national partners during the period covered by the evaluation. Whereas in 2020, EHF allocations to national partners represented about 13.6 per cent of the total allocations (of which 47.1 per cent was direct funding and 52.9 per cent was funding through international NGOs or UN agencies), the years 2021, 2022 and 2023 saw a general increase in the funding available to national partners.²¹⁷ While those figures encompass funding for the entire country (and are not specific to northern Ethiopia), it is likely that the overall increase in the EHF during this period (including funding available to national partners) is correlated, in part, to the deployment of humanitarian assistance linked to the conflict in northern Ethiopia. Notably, the main beneficiary of EHF allocations during this period remained INGOs: 63.9 per cent in 2021 (including 11.1 per cent transferred to national partners), 71 per cent in 2022 (including 21 per cent transferred to national partners) and 68.5 per cent in 2023 (including 26.8 per cent transferred to national partners).²¹⁸
252. **Local NGOs/local staff felt abandoned in the response.** Many key informants representing local NGOs expressed that they were frustrated with the little recognition they had received for their work during the two-year conflict. They explained how they had managed to mobilize local communities and how these communities and local businesses had contributed (financial) resources from their pockets when the banks were closed. In terms of delivery materials and services, they also explained how they managed to reach remote communities in highly insecure places. Several of these communities also took care of displaced people in addition to their own needs.

²¹⁷ UNCBFP, ‘Country Based Pooled Funds Data Hub’, 16 January 2024, <https://cbpf.data.unocha.org/>. In 2021, about 20.2 per cent (\$19,943 million) of Ethiopian CBPF allocations reached national partners (60 per cent through direct funding and 40 per cent through international NGOs or UN agencies). In 2022, about 38.5 per cent (\$24,587 million) of Ethiopian CBPF allocations reached national partners (48.7 per cent through direct funding and 51.3 per cent through international NGOs or UN agencies). In 2023, about 46.5 per cent (\$27,292 million) of Ethiopian CBPF allocations reached national partners (54.1 per cent through direct funding, and 45.9 per cent through international NGOs or UN agencies).

²¹⁸ UNCBFP, ‘Country Based Pooled Funds Data Hub’.

253. Related to insecurity, access and the massive protection needs, representatives of local organizations, but also local staff of international NGOs and UN agencies, emphasized that they had felt left alone when (most) international staff was evacuated from Tigray in early November 2020. Several of them noted that evacuations happening at such critical moments led parties to the conflict to feel that they had their hands free as international eyes and ears were absent. The perceived added value of international agencies (including international NGOs) in terms of protection disappeared. Local organizations also noted that with most international NGOs run exclusively by national staff, it was difficult to see the difference between their organizations and the INGOs, besides the latter's clear advantage in terms of access to financial resources.

3.5.5 Funding

254. Due to the lack of access, implementation fell behind. With regard to financial resources for the response, this delay had the significant effect of resulting in a surplus of funds that were not being used for Tigray. "As we were incredibly constrained (in terms of access), we were sitting on quite substantial amounts of funding we couldn't use," one key informant said.

"As collective humanitarian community we were slow to balance the response between the regions."

(Key Informant 43–INGO)

255. As a result, a further issue emerged: could those funds be used for the crises in **Afar and Amhara? It is clear that the response fell behind in those regions due to a lack of attention and funds.** Afar, in particular, saw different types of needs in relation to the specific pastoralist context, which demanded more investment in development work. Notably, there was little agricultural response in Afar also, as the Agriculture Cluster did not have dedicated coordination capacity there, and very few Agriculture partners were implementing activities. While people needed a lot of livelihood support, Afar was less covered by the media than the conflict in Tigray.

"You could have thought the crisis was only in Tigray, also because the narrative in global capitals and donors' take on it. It was always Tigray, Tigray, and it was difficult to hear how the crisis affected Afar and Amhara. It was not the same level of effort."

(Key Informant 21–INGO)

256. In addressing this issue, many key informants noted that the focus had been too much on Tigray, though they also agreed that this region had been most affected. While the emphasis was initially on Tigray, key informants emphasized that this had been changing gradually, albeit slowly. Noting the issue of unused funds for Tigray, one key informant added that they had had to decide whether to use those funds in Afar and Amhara instead. Some donors allowed their partners to do this; others were more reluctant. One explanation for not allowing the use of Tigray funds for activities in the other two regions was that certain donors did not want to be seen as giving in to the blockade.

3.5.6 Unintended external effects

257. **Unintended external effect: insufficient aid led to tensions in communities.** Focus group discussions did not produce evidence of any positive unintended effect. Asked whether the aid they had been provided had had any negative unintended effects, focus group discussion participants—particularly, though not exclusively, women—gave examples of diseases and skin conditions related to expired food and soap received. That aside, most emphasized that the main problem with the aid was that it was largely not there, not that it had a negative impact in and of itself. In Amhara and Tigray, however, focus group discussion participants—both men and women—explained that the

limited resources available with regard to their type and level of needs, combined with a lack of clarity as to who was seen as more vulnerable and received aid and who did not, led to grievances and fighting among affected people.

258. The pause in food distribution can be seen as an indirect negative effect of the way in which the collective response has been carried out. Participants of all ages and in all three regions raised the pause in the food distribution in place at the time of data collection as a major concern.²¹⁹ In Tigray, participants were well aware of the food diversion issue and did not express any high levels of surprise. Their understanding was that aid agencies had handed over the aid to authorities, who then used the aid as they pleased. Focus group discussion participants also explained that they knew of certain quantities of food held in storage, but that they did not know where and when these quantities had been distributed. Not all participants in Afar and Amhara knew directly of the food diversion scandal—though many had heard rumours—but they had noticed and were questioning the disruption of food aid. The pause in food distribution was felt, across the board, as a punishment for a situation that the people receiving food aid had not caused. Several participants explained that the food had been stolen by someone else and that they were now starving as a consequence. Many also voiced frustration at the aid agencies themselves for letting it happen, arguing that had aid actors better controlled the distribution of aid, there would have been no theft and, hence, no food aid suspension. In short, the food aid suspension itself—and the suffering felt by those not receiving any food—was a negative effect of aid delivered in a way that was not accountable and that did not ensure it reached the right recipients.

259. In assessing the effectiveness of any humanitarian intervention, the ultimate verdict will be based on the criterion of the number of lives saved. There is no question that the collective response to the humanitarian crisis in northern Ethiopia helped to save lives, but this evaluation assumes that more could have been achieved had the system functioned as it was meant to. The Scale-Up, access negotiations and coordination activities ran into several fundamental problems. The response to conflict-related sexual violence fell particularly behind. It follows that the response could never reach the targets and objectives set forth in the Humanitarian Response Plans.

“We blame the aid agencies for not ensuring that humanitarian assistance has reached the intended beneficiaries. Why don’t aid agencies verify the beneficiary list? Why do they allow the woreda officials to fudge the numbers?”

(Participant–Amhara FGD 9)

“Aid agencies remain silent when the aid is lost or sold.”

(Participant–Tigray FGD 18)

“They are unable to ensure accountability on those who participate on the aid diversion. Our only hope was the international community and international humanitarian organizations. We lost hope on them as they declare to cut the food aid assistance due to the aid diversion.”

(Participant–Tigray FGD 11)

“We haven’t received food aid for a while now. The last round of distributions was about 5–6 months ago. We don’t know why it stopped.”

(Participant–Afar FGD 2)

²¹⁹ The focus group discussions were held in June and July 2023.

3.6 Conclusions and Recommendations

3.6.1 Conclusions

260. The brutal two-year-long and non-international armed conflict in northern Ethiopia saw extreme levels of violence against civilians and grave and systematic violations of international law amounting to crimes against humanity and war crimes.²²⁰ The context was such that it left extremely little room for the UN and humanitarian partners to deliver an effective humanitarian response in the three northern regions. It is more than commendable, therefore, that humanitarian organizations **stayed and delivered services to communities in dire need under challenging circumstances**. Especially (but not only) in the first months of the conflict, it was mainly national staff and local NGOs, many of whom were experiencing the serious trauma of the armed conflict first-hand, that kept a lifeline in place where they could.
261. The quality and appropriateness of the limited aid that reached communities, particularly concerning GBV responses, did not align well with the actual scale and nature of conflict-related sexual violence (CRSV) experienced in the three regions. The data environment in Ethiopia is complicated by serious shortcomings found in collecting and processing humanitarian data. This existed prior to this conflict, including the way in which food aid and beneficiary data have been handled. **Public data on humanitarian needs lack the necessary degree of independence**. The dominance of food aid in Ethiopia has overshadowed other sectors, particularly protection. Ironically, the changes in the distribution of food aid following the allegations of the diversion of food in May 2023 can have a positive influence on the way in which all humanitarian data is handled in Ethiopia and how the principle of independence is operationalized. This change can also further strengthen a humanitarian mindset in the country.
262. While humanitarian organizations strove to deliver assistance and protection within their capacity, the collective response was subject to several crucially important systemic flaws. Two flaws stand out. First, while agencies' interventions contributed to humanitarian outcomes, **a collective response underpinned by joint strategy and planning was missing**. Put in simple terms, agencies were doing their own thing. Second, **the response was not underpinned by the humanitarian principles** and the UN failed to reframe the relationship with the Federal Government in line with international humanitarian law, at the outset of the conflict. These omissions were caused by strong disagreements about the relationship with the Federal Government among country-based senior UN humanitarian leaders.
263. The consequence of the deep division was **a dysfunctional Humanitarian Country Team** and a lack of accountability. Agencies who fell behind in their scaling-up efforts or Cluster Lead Agency responsibilities were neither held responsible nor replaced. Furthermore, HCT members did not hold each other accountable, and there was **a gap in oversight** from the global level. The extent to which performance appraisals of the Humanitarian Coordinator raised questions such as to the functioning of the HCT, including efforts to establish mutual accountability, is unknown to the evaluation. Efforts of non-UN representatives at the HCT, including NGO and donor representatives, to make the HCT a meaningful leadership forum were insufficient. The Area Humanitarian Team in Mekelle (Tigray) provided a valuable alternative coordination arrangement but was, ultimately, dependent on the leadership of the HCT at the national level.

²²⁰ ICHREE, 'Report of the International Commission of Human Rights Experts on Ethiopia (A/HRC/54/55)', Human Rights Council, 14 September 2023.

264. Leadership of the humanitarian response to northern Ethiopia was impacted by the **absence of consistency and coherence in the UN's wide-ranging agenda** in the country. Many of the 28 UN funds and programmes and specialized agencies present in Ethiopia have little or no mandate in humanitarian response. However, the absence of a mandate is not a reason for not being concerned with a large-scale humanitarian crisis and gross violations of rights. On the contrary, the UN Charter establishes as one of the purposes "to achieve international co-operation in solving international problems of a [...] humanitarian character, and in promoting and encouraging respect for human rights and for fundamental freedoms for all."
265. The response made **few, if any, collective statements** against the blockade imposed against Tigray, the harassment, arbitrary arrests and detentions or torture of UN and non-UN humanitarian staff or the practice of starvation as a weapon of war. The centrality of protection, a key humanitarian commitment, does not only mean keeping people in need safe when providing assistance but also speaking out loud and clearly, in private or public, on gross abuses of human rights and grave breaches of humanitarian law. Protection was not prioritized in the development of strategies and in implementing operations. Instead, the HCT followed an approach that was out of sync with the reality on the ground.
266. Given the weaknesses in scaling up, working collectively, and negotiating access, it was inevitable that the delivery of the response was far from optimal. In essence, the framework and conditions to deliver effective humanitarian services during an armed conflict were missing. The serious mistakes made in responding to the needs of the people of Afar, Amhara and Tigray amount to a system failure. The system should have been in a better position to meet the many challenges imposed by the context.

3.6.2 Recommendations

267. The recommendations stem from the findings and conclusions of this evaluation. The recommendations were developed by the evaluation team in consultation with the in-country reference group, the Humanitarian Coordinator and IASC Operational and Advocacy Group (OPAG) and Emergency Directors Group (EDG). The entity responsible for leading the implementation of each recommendation is indicated, but it should be noted that recommendations categorized as "Ethiopia-specific" are also relevant to the system.

Recommendations	Responsible entity
System-wide recommendations ²²¹	
1. Provide guidance to HCT/UNCTs for developing a coherent UN system-wide country strategy. This is essential to fostering clear and effective dialogue with all parties to a conflict and ensuring a common approach leveraging the collective weight and authority of the system. Key to this approach is the alignment of pre-existing UN programs with core humanitarian principles and protection <u>standards</u> regardless of mandates. The strategy should include clear thresholds (red lines) for a principled response.	ERC, IASC Principals, EDG
2. Ensure real-time monitoring of HC/HCT performance in rapidly evolving and/or complex contexts such as non-international armed conflicts. This is essential for the timely identification and resolution of any emergent leadership or coordination deficits. Furthermore, consider the appointment of a dedicated Humanitarian Coordinator early in the response when the Resident Coordinator may not be optimally positioned to lead the humanitarian response. The 2009 HC Terms of Reference should be updated to include leadership responsibilities in chairing the HCT and establishing mutual accountability.	ERC, IASC Principals, EDG
3. Ensure a connection between political-level negotiations on issues related to humanitarian access and the response at the operational level. Ensure that agreements made at senior political levels are transparent, consistent with humanitarian norms and known at the operational level.	ERC and IASC Principals, HC/RC and HCT
Ethiopia-specific recommendations	
4. Enhance the effectiveness of the Humanitarian Country Team. Consider implementing structural changes, such as reducing the HCT's size or forming a more strategic core group. This can increase focus and decision-making efficiency. Consider reviewing the format and procedures of the HCT meetings to ensure focus on concrete outcomes and the implementation of agreements to promote accountability.	HC/RC, HCT members
5. Ensure responses to crises prioritize the centrality of protection, including support to affected communities facing serious rights violations, such as CRSV. Consider establishing and using cross-cluster analysis to ensure a coherent, balanced response and to identify gaps and discrepancies in data reported by each cluster.	HC/RC, HCT, ICCG
6. Enhance the approaches to gathering, processing and disseminating humanitarian data to improve the accuracy and relevance of the information used in humanitarian programming. These approaches should focus on adopting independent methods by humanitarian agencies to collect and analyse disaggregated data, ensuring that the insights gained are accurate and tailored to the specific needs and circumstances of the communities affected by crises.	HC/RC, HCT, ICCG
7. Develop a comprehensive advocacy strategy for principled humanitarian action that goes beyond the binary choice between public messaging and discreet diplomacy. It should promote the centrality of protection and target all parties to the conflict to increase awareness of respect for humanitarian norms and principles.	HC/RC, HCT, ICCG

²²¹ For detailed recommendations on System Wide Scale-Up Activations, please refer to the areas for consideration in the IASC paper 'From Protocol to Reality: Lessons for Scaling up Humanitarian Responses,' 2024.

Recommendations	Responsible entity
8. Enhance preparedness and the implementation of a principled response during the armed conflict in Ethiopia through the following steps:	IASC, HC/RC, HCT
<ul style="list-style-type: none"> Routinely engage in independent, systematic conflict analysis and connect political/conflict scenarios with preparedness and planning. 	HC/RC, HCT
<ul style="list-style-type: none"> (Re)assigning cluster leadership responsibilities to ensure accountability for cluster leadership and delivering on commitments.²²² And elevating sub-clusters or areas of responsibilities if they require a large-scale response corresponding to the prevailing context. 	HC/RC, HCT, CLAs
<ul style="list-style-type: none"> Activate the Surveillance System for Attacks on Health Care as a standard feature and use the data analysis to underpin advocacy and operations. 	
<ul style="list-style-type: none"> Ensure that any collective agreement signed with parties to the conflict undergoes a legal review to appropriately account for relevant norms of international human rights and international humanitarian law. 	HCT/WHO
<ul style="list-style-type: none"> Ensure that as part of the duty of care, staff security arrangements and coordination correspond to the scale, urgency and level of incidents and consider the specific vulnerabilities of local staff in armed conflict. The position of designated official should be held by a UN representative who is directly involved in or overseeing the humanitarian response. Ensure appropriate oversight of these security arrangements at the global level. 	HC/RC, OCHA
	HC/RC, ERC, UNSMS

²²² This recommendation matches recommendation #4a of the independent review of the humanitarian response to internal displacement, which recommends that “the national or subnational level enabling best-placed operational organizations to lead clusters, or alternative coordination models, rather than global leads automatically and without regard to capacity.” Lewis Sida et al., ‘Independent Review of the Humanitarian Response to Internal Displacement’, 2024.

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