Summary report of the evaluation of the Regional Prepositioning Initiative Phase II (2016-2020)

Philippines: Cris and her daughter go through the contents of the Dignity Kit in front of their destroyed house in Northern Samar province in January 2020. ©UNFPA/Kim Ian Tiu
Where the Regional Prepositioning Initiative Works

- **11** Priority countries
- **2** Regional warehouses
- **4** Other supported countries

**US$1.6 million** worth of supplies

**63** emergencies
UNFPA's Regional Prepositioning Initiative has been a game-changer in supporting humanitarian preparedness across the Asia-Pacific region. Between 2016-2020 in Phase II of the initiative, more than 140,000 direct beneficiaries affected by 63 emergencies in 15 countries received over $1.6 million dollars worth of life-saving sexual and reproductive health and gender-based violence supplies (updated figures as of November 2020).

The Regional Prepositioning Initiative aims to ensure that the lifesaving needs of women and girls in humanitarian crises across the Asia Pacific region are met by governments, UN agencies, national actors and key stakeholders through:

- **Prepositioning supplies in disaster prone countries and regional hubs to respond to sexual and reproductive health and gender-based violence needs**
- **Building capacity to meet the health and protection needs of women and girls during emergencies**
- **Advocating for the needs of women, girls and marginalised groups such as people living with disabilities, to be prioritised in humanitarian response through consultations and strategic**
Overview of the evaluation

An external evaluation of the Regional Prepositioning Initiative Phase II (2016-2020) was conducted in 2019-2020. The evaluation had three objectives:

• To provide an independent, external and objective assessment of the programme

• To provide recommendations that could help guide future humanitarian preparedness and response investments in UNFPA APRO from DFAT

• To inform UNFPA’s humanitarian work in the Asia Pacific region and globally.

Conducting an evaluation of the Regional Prepositioning Initiative was a requirement in the agreement between UNFPA and DFAT, and was also recommended in the Thematic Paper on Supply Chain Management for Humanitarian Commodities within the Evaluation of the UNFPA capacity in humanitarian action.
The evaluation adopted a mixed-methods design combining both qualitative and quantitative approaches. The evaluator undertook country visits to Fiji and the Philippines where she held focus group discussions and conducted key informant interviews. Key informants from other countries were interviewed by phone, and an online survey was completed by key stakeholders from different countries. The evaluation was guided by an Evaluation Reference Group which included UNFPA, DFAT, government and CSO partners.
Main findings

The evaluation of the Regional Prepositioning Initiative found that the project has achieved all of the preparedness results it set out to achieve, and in some areas, exceeded these expectations. This summary report focuses on the following three main findings from the evaluation:

1. The Regional Prepositioning Initiative enabled UNFPA to respond quicker and more cost-effectively to humanitarian crises across the Asia-Pacific region.

2. The Regional Prepositioning Initiative improved the quality of UNFPA’s humanitarian response and is responsive to beneficiaries needs.

3. The Regional Prepositioning Initiative positively influenced Governments to prioritise sexual and reproductive health and gender-based violence services in emergencies, and strengthened partnerships with other humanitarian actors.

Bangladesh: Cox’s Bazar is the world’s largest refugee camp. Services for Rohingya women and girls are stretched thin in a health system that is already coping with the needs of nearly a million displaced people from Myanmar. UNFPA works with partners to create safe spaces for women and girls. These are often adjacent to health clinics so nurses and midwives can be involved to help everyone access critical services. ©UNFPA/Learson
What supplies are prepositioned through the Regional Prepositioning Initiative?

While every emergency is different, UNFPA works with partners to implement global standards that meet the immediate needs of women and girls in humanitarian crises. The Minimum Initial Service Package for Reproductive Health in Crises (MISP) and UNFPA’s Minimum Standards for Gender-Based Violence in Emergencies form the core of our humanitarian response. Through the Regional Prepositioning Initiative the supplies needed to implement the MISP and GBV inE Minimum Standards are prepositioned. These include:

• The Interagency Emergency Reproductive Health Kits
• Dignity Kits
• Tents and other mobile units that can be established as temporary health facilities or women friendly spaces

Without adequate clothing, menstrual supplies and hygiene items, women and girls may be unable to access basic services, including humanitarian aid. That’s why UNFPA distributes its trademark Dignity Kits during disasters, to reduce vulnerability and connect women and girls to information, support and services. Dignity Kits contain underwear, basic clothing, sanitary napkins, toothbrushes, toothpaste, soap and laundry powder, as well as information on the services that are available and how to access them. ©UNFPA/Rose
What supplies are prepositioned through the Regional Prepositioning Initiative?
The evaluation found that the Regional Prepositioning Initiative is relevant and responds to a need in the Asia-Pacific context, ensuring a quicker and cost-effective response to natural disasters and crises. Prior to the beginning of the Regional Prepositioning Initiative, one of the main challenges hindering UNFPA’s timely response to populations’ needs was long procurement lead-times and the absence of supplies already in-country.

Overall, the Regional Prepositioning Initiative has been effective in reducing the response time in humanitarian crises in the region. However, the speed of the response is also affected by the level of institutional support. Through the Regional Prepositioning Initiative, response time in Indonesia was three to seven days; in Fiji, 24 to 48 hours; in Tonga, 48 to 72 hours; in the Philippines, one to two weeks. Prior to the Regional Prepositioning Initiative, it often took 4-6 weeks to have supplies on the ground.

UNFPA has exerted all possible efforts to ensure that delays in response are systematically addressed. One of the limitations of the Regional Prepositioning Initiative in phase I was the availability of funding to ensure distribution to the last mile. While the initiative funds preparedness and not response, it is important to consider other programmatic costs that affect the quality of emergency response such as transportation, logistics, staffing and programmatic interventions that utilise the supplies.

The Regional Prepositioning Initiative has enabled a reduction of the response costs when compared to previous responses. One of the major cost savings of prepositioning is in supplies being freighted by sea rather than air, whereas during an acute emergency response, air freight is the only option to ensure a timely response. Across two years of the programme, UNFPA saved US $164,000 by transporting supplies by sea rather than by air, based on quotes received at the time of procurement. While the Regional Prepositioning Initiative covers all warehousing and insurance costs associated with prepositioning supplies, this cost is approximately $50,000 annually across all warehouses, meaning that prepositioning is cost effective.

Emergencies disrupt markets, and costs of procuring basic items such as those found in UNFPA’s dignity kits can quickly increase. The Regional Prepositioning Initiative has also reduced response costs by drawing on Long-Term Agreements with suppliers of dignity kits. UNFPA was able to save US$93,040 across a two year period by drawing on UNFPA’s global agreement with a supplier for the procurement of dignity kits for the Fiji and Brisbane warehouses, compared to the price of kits that were previously procured for the Pacific context.

The evaluation also found that overall, while sufficient resources were provided for procurement of supplies, more resources are needed for operational costs as well as for capacity building.

“When we are able to immediately come to the table with supplies, we are seen as a credible humanitarian actor.”

- UNFPA staff member from the Pacific
The Regional Prepositioning Initiative has enabled a reduction of the costs and improved the quality of the response compared to previous responses without prepositioned supplies. According to a case study from Indonesia, with national prepositioning the response time is “three times less and cheaper”. The project reports show value for money through a reduction of freight costs and economies of scale in procurement that draws upon UNFPA’s global agreements with Dignity Kit providers.
Improved quality and responsiveness

The Regional Prepositioning Initiative is an investment in humanitarian preparedness, which not only improves the speed, but also the quality of the response. The initiative has systematically adapted to address the needs of and ensure adequate attention to the most vulnerable populations. UNFPA has ensured that the prepositioned supplies are appropriate and relevant for the cultural context, and has worked with marginalised communities such as people living with disabilities, transgender women and older persons to customise dignity kits to meet their specific needs during disasters.

UNFPA has also contributed to advocacy regarding sexual and reproductive health, gender-based violence and disability inclusion, influencing policies and guidelines. Working closely with IPPF has brought the LGBTQI network into this space. The Regional Prepositioning Initiative has been an important forum through which disability inclusion and the needs of vulnerable groups have been prioritised in addressing gender-based violence and sexual and reproductive health in humanitarian response.

Capacity building activities implemented through the Regional Prepositioning Initiative also improved the effectiveness and quality of humanitarian response.

The Regional Prepositioning Initiative made it possible for UNFPA to provide training to its own staff as well as staff from partner organisations on the Minimum Initial Service Package (MISP); humanitarian logistics; humanitarian preparedness; and gender-based violence in emergencies (GBViE). Yet the evaluation found that more can be done to strengthen this aspect of the Regional Prepositioning Initiative, and to better measure capacity building outcomes. In particular, more sustainable capacity building efforts, which support mentorship and on-the-job training, are likely to result in longer-term gains than the one-off trainings offered through Phase II of the initiative.

“Having the supplies helps to create an enabling environment. It is tangible and governments can relate to it. It opens doors for preparedness and helps the response. It gives sexual and reproductive health a bigger focus.”
-Implementing partner, IPPF Member Association
The evaluation found that the Regional Prepositioning Initiative directly supports both preparedness and response in countries affected by humanitarian crises. Having supplies immediately available at the onset of a crisis enables an effective and efficient response that meets the sexual and reproductive health and gender-based violence needs of end beneficiaries, and supports governments and other partners responding to the emergency. Capacity building and customisation of supplies can further improve the quality of the response.
The evaluation found that the Regional Prepositioning Initiative has complemented and strengthened national government response mechanisms in relation to sexual and reproductive health and gender-based violence prevention and response within broader disaster management response. Furthermore, it has strengthened partnerships with Ministries of Health and other government partners across the humanitarian-development nexus.

The Regional Prepositioning Initiative provided UNFPA country offices with leverage in discussions with governments and health directorates, who agreed that the initiative is responsive to the needs and priorities in their national response plans. Given that governments in the Asia Pacific region lead and manage disaster response, prepositioning supplies in-country is strategic and complements national response by providing life-saving sexual and reproductive health and gender-based violence supplies even when no request for international assistance is sought by governments.

The Regional Prepositioning Initiative has strengthened UNFPA’s reputation vis-à-vis other humanitarian actors, and has complemented their work. The evaluation found that the initiative has supported collaboration and joint programming between UN agencies. For example, following the 2018 earthquake in Papua New Guinea, UNFPA used prepositioned supplies to establish joint women friendly spaces and child friendly education spaces in partnership with UNICEF. UNFPA also made connections across health and women’s protection networks with UN Women to jointly leverage respective relationships with development partners.

The evaluation also found that the Regional Prepositioning Initiative successfully advocated for prioritisation of sexual and reproductive health and gender-based violence needs in humanitarian response through capacity building activities and strategic dialogues. These have improved understanding among key partners and helped to support the formulation of guidelines and policies at the global, regional, national and sub-national levels. The Regional Prepositioning Initiative has strengthened partnerships with national and local responders, with partners showing high satisfaction regarding the relationship with UNFPA.

“UNFPA is a strategic partner that we look to for constant and systematic collaboration and coordination before and during emergencies.”

-Department of Health staff, Philippines
The Regional Prepositioning Initiative has helped to change the mindset of national governments concerning sexual and reproductive health and gender-based violence services in emergencies. Some national governments, as well as regional, national and local partners, have adopted the MISP as a standard for emergency preparedness and response. It is evident that the Regional Prepositioning Initiative has contributed to governments prioritising the needs of women and girls in humanitarian action as a necessary and lifesaving approach.
“Because of this initiative, we have entry points for policy dialogue with the government. In the Philippines the government is prepositioning these supplies themselves and if there is an emergency they need to establish women friendly spaces and they have put policies in place. This is saving lives and pushing the agenda of UNFPA.”

- UNFPA staff, Philippines
Recommendations for Phase III of the Regional Prepositioning Initiative

The evaluation found that designing an intervention with multiple connected activities, such as the availability of supplies and the provision of capacity building, enables humanitarian actors to provide both short and long term support to national governments. This allows for effective dialogue to support a wider agenda of change to prioritise women and girls’ access to sexual and reproductive health and gender-based violence services. While building sustainable change requires time, effort and human resource investments, UNFPA’s ability to provide both supplies and technical support serves as an important catalyst for change in policies and regulations.
The evaluation made nine recommendations for the next phase of the initiative:

**Recommendation 1:** Capitalise on the results from the RPI to date by designing a new phase that encompasses both preparedness and response.

**Recommendation 2:** Institutionalise capacity building efforts to increase sustainability and impact, and ensure adequate monitoring of capacity building outcomes.

**Recommendation 3:** Increase coordination and advocacy within regional platforms to further integrate SRHR and GBV services in emergencies.

**Recommendation 4:** Capitalise on the comparative advantage of UNFPA as a credible interlocutor with the government to develop plans in priority countries to begin phasing in of national government prepositioning where possible to ensure long-term sustainability.

**Recommendation 5:** Building on the experiences acquired through the Regional Prepositioning Initiative develop further strategies to promote inclusion and disability.

**Recommendation 6:** Conduct gap analysis of bottlenecks affecting timeliness of response and develop adequate response to identified gaps.

**Recommendation 7:** Improve the operationalisation of the Regional Prepositioning Initiative through continued investment in logistics.

**Recommendation 8:** Develop a measurable results framework and strengthen the Theory of Change to improve efficiency and effectiveness.

**Recommendation 9:** Continue to document and disseminate widely experiences, lessons learned, approaches and changes that have taken place, in order to improve knowledge management and learning, as well as advocate for replication of the RPI in other UNFPA interventions regionally and globally.

The UNFPA Asia Pacific Regional Office welcomes the constructive analysis and recommendations from the evaluation, and is taking these forward into the strategy and design of Phase III of the Regional Prepositioning Initiative.
Phase III of the Regional Prepositioning Initiative (2021-2024)

The recommendations are being used to inform Phase III of the Regional Prepositioning Initiative which will run from January 2021-December 2024. It will focus on:

1. Prepositioning supplies and strengthening supply chain management across the humanitarian-development nexus

2. Strengthening accountability to affected populations through beneficiary feedback mechanisms

Indonesia: UNFPA’s response was three times faster, and cheaper, with prepositioning. Having tents like these in warehouses in Jakarta meant that they could reach people within days and create safe spaces for women and girls. ©UNFPA/Learson
Advocacy and support to Governments to ensure sustainability of the programme

3
Customising supplies for marginalised groups and advocating for inclusion of people living with disabilities, LGBTQI, older persons and other vulnerable groups whose needs are often excluded

4
Fiji: In April 2020, Tropical Cyclone Harold swept through the Solomon Islands, Vanuatu, Fiji and Tonga, causing widespread damage to health infrastructure and forcing families from their homes. TC Harold was the first Category 5 cyclone to hit the Pacific region since Cyclone Gita in 2018. With supplies prepositioned in Brisbane, UNFPA was able to work closely with the Australian Defence Force to transport dignity kits and tents on the first C-17 humanitarian transport flight to land in the Pacific after the disaster. Together with prepositioned interagency reproductive health kits from the Suva warehouse, these supplies were critical in ensuring that women, adolescents and youth had continued access to lifesaving sexual and reproductive health and gender based violence response services, provided by national partners and local responders. ©UNI323682/Stephen
Bangladesh: Tahera lives in Cox's Bazar. It is a refuge for thousands of displaced Rohingya families, but there are many dangers for young women in the camp. Gender-based violence, the constant risk of sexual assault and numerous health issues make the refugee camp a risky place. UNFPA supports the coordinated humanitarian response by creating safe spaces for young people. They are able to connect, share ideas and learn from each other. This connection strengthens a community protection system and creates ways for young people to shape life skills education and youth services. ©UNFPA/Learson