



Australian Government
Department of Foreign Affairs and Trade



REVIEW OF AUSTRALIA'S HUMANITARIAN ASSISTANCE TO MYANMAR

Evaluation Plan

March 2019

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INTRODUCTION AND BACKGROUND

INTRODUCTION

Australia has provided over \$22 million in humanitarian assistance to Myanmar between July 2014-2017. Over half of this has been allocated to situations of protracted displacement. DFAT has commissioned an evaluation of this investment to understand the appropriateness, effectiveness and efficiency of Australian assistance. The findings are also intended to inform the design of a strategic, multi-year approach to Australian humanitarian funding in Myanmar. Where appropriate, lessons identified through the evaluation will also be used to inform programmes addressing situations of protracted displacement in the Indo-Pacific region.

This evaluation plan sets out the detailed approach to the evaluation, the method, timings and outputs, as well as further defining the scope and the key questions the evaluation will examine. It builds on the original Terms of Reference, and replaces these as the most up to date guiding document for the evaluation.

BACKGROUND AND RATIONALE

The humanitarian situation in Myanmar is characterised by situations of protracted displacement in three distinct contexts: active conflict in northern Myanmar; long-term displacement of Myanmar refugees in Thai camps; and ongoing intercommunal tensions and displacement in Rakhine State, which have intensified following attacks on Police border posts on 9 October 2016.

According to latest UN assessments 525,448 people are in need of humanitarian assistance across Myanmar. 218,000 of those are displaced, of which 78 per cent are women and children.¹

In Rakhine state, inter-communal violence led to the displacement of approximately 145,000 people in 2012. While the government supported the return of about 25,000 people in 2015-16, approximately 120,000 remain in camps and over 416,000 people remain in need of humanitarian assistance. Recent security operations in northern Rakhine have created additional displacement (over 20,000 IDPs and close to 70,000 displaced to Bangladesh). Security operations have also resulted in the prolonged suspension of most pre-existing humanitarian activities in the region. While it has not been possible to conduct a full needs assessment, it is likely that humanitarian needs have increased, due to the suspension of services, severe restriction of movement, the destruction of housing and alleged human rights abuses.

In Kachin and northern Shan States over 119,000 people remain in need of humanitarian assistance, including over 98,000 people displaced because of ongoing conflict. Around 50 per cent of these IDPs are located in areas outside Government control where humanitarian access is limited. The conflict in Kachin has escalated significantly in recent months and many people are now facing secondary displacement.

Australia has been a strong provider of humanitarian assistance to Myanmar over many years. As Myanmar opened up during the reform period, Australia rapidly scaled up humanitarian assistance, at times working

¹ UN OCHA, Humanitarian Needs Overview, 2017

through up to 16 different partners simultaneously. Partners were engaged through direct-source grants, on the basis that the complex and restrictive environment in Myanmar meant there were a limited number of appropriate potential partners in any one location. In part, this proliferation reflected a need to respond to a variety of needs in diverse geographic locations.

Table 1 provides a breakdown of Australia’s humanitarian partners from 2014-2017 (excluding programs on the Thai-Myanmar border that are not included in the scope of this evaluation).

Table 1: Partners in Australia’s humanitarian response in Myanmar from 2014 -present.

Partner	Amount Millions (AUD)
UN High Commissioner for Refugees	4.40
International Committee of the Red Cross	3.40
UN Office for the Coordination of Humanitarian Affairs	2.50
UNFPA	2.50
Norwegian Refugee Council	2.00
World Food Programme	2.00
Save the Children	1.90
Danish Refugee Council	1.50
Oxfam	1.00
CARE Australia	0.50
International Planned Parenthood Federation	0.18
Other (including Burma Program; Attorney General’s Department; Local NGOs)	0.20
Total	22.08

PURPOSE AND SCOPE

EVALUATION PURPOSE

This evaluation will assess:

- the appropriateness and relevance of Australia's support;
- the effectiveness and efficiency of Australia's support;
- whether the support reinforced local and national leadership and capacity; and
- the extent to which Australia identifies and uses opportunities to influence partners in country and at the global level with the international humanitarian system.

The evaluation will provide forward looking recommendations for the program focusing on how Australian humanitarian support in Myanmar could be improved (as well as the scope for further consolidation), and the practicalities of moving towards multi-year funding and planning.

EVALUATION SCOPE

Time frame:

The focus of the evaluation is Australia's humanitarian investments in Myanmar from July 2014 to present.

Programmatic focus:

This evaluation will consider Australian humanitarian support to situations of protracted displacement in Myanmar. The evaluation will focus in particular on the humanitarian support provided in Rakhine, Kachin and Shan states. Field visits to Rakhine and Kachin will be undertaken as part of the evaluation.

The evaluation will not include support to displaced populations on the Thai-Myanmar border or response to rapid onset disasters (such as the flooding after Cyclone Komen).

The evaluation will consider the linkages between the humanitarian program and the development and diplomacy efforts of the Australian government.

Partner focus:

The evaluation will consider the appropriateness of the partners as a whole and the effectiveness and efficiency of the package. The team will also focus in more detail on key partners, that will be purposively selected based on discussion with Myanmar program staff and with consideration to partners that Australia has significantly invested in (receiving more than one funding instalment and/or receiving more than 2 million AUD in the evaluation period). The team may additionally consider partners that focus on programmatic areas of key strategic interest.

Thematic focus:

This evaluation will focus on three thematic priorities articulated in the Humanitarian Strategy: gender equality and women's empowerment; disability inclusiveness; and protection². These considerations will be mainstreamed in the evaluation as well as being addressed in specific key evaluation questions.

EVALUATION USE

The principal users for this evaluation will be the Department of Foreign Affairs and Trade, and in particular senior policy makers in the Humanitarian division and the South-East Asia Mainland Division. The nature of the evaluation as a public document means that it will also be of interest to a wider audience, including Australian Government partners in the multi-lateral and non-government sectors as well as those who support and contribute to the humanitarian operations of these organisations.

² Including DFAT's Child Protection Policy

APPROACH

AREAS OF ENQUIRY

The four areas of enquiry proposed by the evaluation team are as follows:

1. Appropriateness and Relevance
2. Effectiveness and Efficiency
3. National and local leadership
4. Advocacy and Influence

The detailed breakdown of the questions that will inform these areas of enquiry, and the methods that will be used to answer them is set out in the evaluation matrix in Annex One.

METHODS

The evaluation will use a mixed methods approach, combining stakeholder interviews, document and literature review and focus groups discussion. Field visits to Rakhine and Kachin are intended to ensure that the evaluation puts the experience of the affected population at the centre of the process. Findings, conclusions and recommendations will be evidence based and triangulated. Research will be largely qualitative, using quantitative secondary data where it is available and relevant, in particular when looking at results achieved and at disaggregated data by sex, age, ability and group reached.

Table 1: Summary of data collection methods

Summary table of data collection methods	
Document review (including secondary data and literature)	There is a sizeable amount of data available from implementing partner reporting and other evaluations. There is also a quantity of academic and grey literature available on the Myanmar crisis. Material will be prioritised according to relevance of content (against areas of enquiry), source and credibility and analysed. Expenditure will also be analysed to show allocations by partner and focus area, where feasible.
Key informant interviews	Key informant interviews will be conducted with government and implementing partners in Myanmar and DFAT staff in Canberra and Myanmar. The evaluation will use semi-structured interviews, derived from the evaluation key questions/matrix. Where face to face meetings are not possible telephone interviews will be conducted.
Focus group discussions	Focus group discussions with affected populations will be held if possible in Rakhine and Kachin states in Myanmar. These will provide an important perspective on the appropriateness of assistance provided, potentially capture unanticipated impacts and provide insight into the extent to which humanitarian agencies have been accountable to affected populations. Should focus groups prove unviable a series of individual interviews will be conducted with a small

number of IDPs and members of host communities focusing on the issues outlined in the focus group discussion guide at Annex two.

Document review

The document review will entail analysis of DFAT policy and strategy documents, humanitarian policy and guidance documents, UN and implementing partner strategy documents, implementing partner reports and proposals and other specialist papers (e.g. special reports on disability, gender based violence etc.). The team will prioritise the review of material given the limited time available. Prioritisation will be undertaken according to the following principles;

- › **Materiality** – documents from all key partners will be analysed with an emphasis on the largest partners (by dollar value). The document review will focus on assistance provided in Rakhine and Kachin states. Reports will only be reviewed that are relevant to the reporting period of this evaluation (i.e. not prior to FY14-15).
- › **Relevance** – documents, or sections therein, which clearly relate to the key evaluation questions outlined in Annex One will receive priority attention.
- › **Credibility and objectivity** – within the selection of documents identified for review the team will ensure that a range of sources and perspectives are captured and where possible information is triangulated.

Document review will be captured in an annotated bibliography. This will include a 2-3 line description of the source and document purpose and important extracts coded against the relevant evaluation question. The annotated bibliography will assist in tailoring key informant interviews.

Key informant interviews

Semi-structured interviews will be undertaken with DFAT staff and Australia's key partners. Interview guides (see Annex Two) will be used to loosely guide discussions. Interviews will be prioritised in a similar manner to that outlined above. The approach of using the same or similar questions with each of these partners will allow the evaluation team to reliably identify consistent themes or perspectives in the responses of different partners.

The KII questions have been coded against the key evaluation questions; this will facilitate subsequent analysis of responses and linkages back to the document review. Each interview will be attended by at least two evaluation team members. One of whom will take the role of lead interviewer and the other to take notes.

Prior to the commencement of any interview the team will outline the purpose of the evaluation, how the information will be used, and steps that will be taken to maintain confidentiality of responses (such as non-attribution of quotations). It will be explained that the team abides by the Australasian Evaluation Society (AES) code of ethics. Informants will be made aware that the review's final report will be published on the DFAT website. Most individual informants, especially those in field sites, will not get an opportunity to comment on the draft report before it is published. However, partner organisations may be given an opportunity to review the draft and respond to any findings specifically relating to them before finalisation.

Focus group discussions

Focus group discussions will be used to canvass the views of affected populations with respect to the appropriateness of the assistance provided; and the extent to which they have been involved in and able to influence implementing partner programs. Prior to the commencement of any interview the team will outline the purpose of the evaluation, how the information will be used, and steps that will be taken to maintain confidentiality of responses (such as non-attribution of quotations).

The team will endeavour to conduct separate focus group meetings with men and women, particularly for exploration of the effectiveness of partners in protection, sexual and reproductive health service provision, and response to gender based violence. Each meeting will be of 1.5 hours in duration and will be guided by selective use of the questions in Annex 2. Each meeting should consist of 8 or so representatives from the affected populations. For safety reasons, partners will be asked to select the men and women to consult with, but partners will not be present for the actual discussion. Discussions will be timed to avoid interruption to livelihood or care activities, and with locations that enable the participation of men, women and people living with disability.

The team will require two translators to assist in running each focus group discussion, ideally at least one of whom has experience in moderating focus group discussions whilst the other will be required to provide simultaneous translation for the evaluation team. It is important that translators are seen as credible and objective by affected populations. A suitable private venue which allows affected populations to speak openly is required. The team will be cognisant at all times of ethical issues and will ensure that focus group participants remain anonymous. A translated summary of the evaluation findings will be provided to affected communities that are involved in the evaluation.

Triangulation, rigour of evidence and quality assurance

All evidence will be triangulated where possible to ensure a degree of rigour. This means in practice that emerging themes from interviews will be tested in subsequent interviews and focus group discussions. So far as it is possible major findings from document review will have multiple sources, as well as being tested in interviews.

The evaluation team leader will be responsible for writing an aide memoire with the input and support of team members to provide initial findings and seek additional verification if required. Where evidence for a particular finding is relatively weak this will be clearly articulated in the aide memoire. Following feedback on the aide memoire and provision of additional information the draft evaluation report will be written.

CONSTRAINTS AND LIMITATIONS

Time and resources

This evaluation is a rapid review exercise which will be completed with approximately 80 days of personnel input within a concentrated period of approximately 12 weeks. Start to finish the evaluation should be completed within three months. Given time limitations a deliberate sampling strategy which focuses upon Australia's major areas of expenditure has been adopted. It is not proposed, nor would it be feasible, to review all available documentation or engage equally with all stakeholders.

Sampling

The evaluation will maintain a tight focus on the evaluation questions and methods of enquiry outlined in this plan. In view of the tight timeframe, a purposive or opportunistic sampling strategy will be used. This has been decided with careful consideration as to the likely value of information gathered against the time and opportunity cost associated with each interview and document. It is likely that once this plan has been approved the team will have little room for flexibility including the investigation of new and emergent issues or the scheduling of additional interviews and consultations.

Limitations on partner planning and reporting

Ongoing internal conflict in Myanmar limits the ability of this evaluation and those of Australia's partners to fully assess assistance given within the country. Furthermore, as with other evaluations of humanitarian operations (e.g. the Syria evaluation) it is anticipated that partner monitoring and evaluation data may be limited. The rapid and unpredictable evolution of the Myanmar response into a protracted relief and rehabilitation operation will almost certainly have imposed limitations on partner planning, data gathering and analysis.

Attribution and apportionment

The nature of emergency humanitarian response and difficulties around access within Myanmar suggest that it may be difficult to attribute improvements or changes to assistance provided by Australia and its partners. This is especially true with respect to changes or improvements as a result of advocacy and influence with government of Myanmar and with the international humanitarian system.

Furthermore, DFAT has contributed funds to humanitarian organisations alongside a number of other donors. Apportionment of results and program success to DFAT funding is likely to be challenging. Nevertheless, the evaluation will endeavour to draw direct linkages where it is possible to do so.

EVALUATION TEAM AND MANAGEMENT

EVALUATION TEAM ROLES AND RESPONSIBILITIES

The evaluation will be undertaken by a team of three including: an independent evaluator from Humanitarian Advisory Group, Kate Sutton (Team Leader), a representative from DFAT Humanitarian Response Operations Section, Joanna O'Shea, DFAT's South East Asia gender and social development specialist, Mia Urbano. DFAT's Myanmar post will provide support to the in-country component of the evaluation. The combined team brings humanitarian, gender, protection and monitoring and evaluation expertise to this assignment alongside a sound understanding of the current context and corporate knowledge of DFAT's response to date.

Table 2 : Breakdown of team member responsibilities

Task	Kate Sutton	Joanna O'Shea	Mia Urbano	Post
<i>Preliminary phase</i>				
comment upon and confirm TOR	lead	support	review	review
initial teleconference and DFAT Canberra staff interviews	lead	lead	support	-
travel/field work planning	support	support	support	lead
<i>Evaluation plan</i>				
draft evaluation plan including:	lead	support	support	review
matrix of evaluation questions	lead	review	support	review
description of method	lead	review	support	review
data gathering tools (interview and focus group guides)	lead	review	support	review
detailed field work schedule	support	review	review	lead
<i>Field work</i>				
Liaison with partners and affected populations as per field work schedule	support		-	lead
Organise logistics for travel, accommodation and security briefings	support		-	lead
Engagement of translator for focus group discussions with affected populations	support		-	lead
Lead interviewer and note taker	alternate	alternate	alternate	support
<i>Aide Memoire</i>				
Draft document	lead	support	support	review
<i>Draft evaluation report</i>				
Prepare document outline	lead		support	review
Draft sections of the report	all	all	all	all
Consolidate sections into draft	lead	review	support	review
<i>Final evaluation report</i>				
Consolidate stakeholder comments	lead	review	support	review

Coordinate input, resolve differences, conduct final edit & submit to client

lead

review

support

review

Table Legend:

lead Responsible for framing overall approach to task, where relevant in consultation with the Team Leader. This includes prioritising tasks and facilitating input from other team members in a timely manner.

support Providing input on deliverables being led by another team member. This is likely to include investigating particular issues or discrete sub-components of a larger task.

review Designates minimal involvement in a particular task with input generally limited to providing comment on completed products/tasks.

ANNEX ONE: EVALUATION MATRIX

The following matrix outlines the data source, collection method and the relevant tool for each key evaluation question.

Key evaluation questions	Data source	Collection method	Tool
1. <u>Was Australia's humanitarian assistance to situations of protracted displacement in Myanmar appropriate and relevant?</u>			
a) To what extent were the partners and activities selected appropriate (i.e. did we select the right partners in the right locations on the right issues?)	DFAT	Key Informant Interviews (KII), Document Review (DR)	Interview guide - DFAT (IG-DFAT) Anotated bibliography (AB)
b) To what extent did Australia's humanitarian priorities and assistance appropriately complement/ align with Australia's development priorities/activities in the Myanmar country program?	DFAT, Partners	KII, DR	IG-DFAT, Interview guide - Partners (IG - Partners)
c) To what extent did the assistance complement/ align with Australia's Humanitarian Strategy and other key Australian government policies/priorities such as gender equality, women peace and security and disability inclusion?	DFAT	KII, DR	Interview guide - DFAT (IG-DFAT) Anotated bibliography (AB)
d) How relevant and appropriate is the assistance provided by implementing partners from the perspective of affected communities?	Affected communities	FGD	FGD Guide
e) To what extent was Australia's assistance coordinated and complementary? Are there ways in which Australia could share information and coordinate better with other donors and international actors?	DFAT, Partners	KII, DR	IG-DFAT, Interview guide - Partners (IG - Partners)
f) Were there any unintended consequences and impacts (positive or negative) as a result of Australian assistance?	DFAT, Partners, Affected communities	KII, DR, FGD	IG-DFAT, IG-Partners, FGDG
2. <u>Was Australia's humanitarian assistance to situations of protracted displacement effective and efficient?</u>			
a) Were the intended outputs and outcomes for Australia's assistance clearly defined?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
b) What were the most significant results achieved by Australia's humanitarian programming in Myanmar during the relevant period? Did these meet expectations and were they adequately captured in partner reporting?	DFAT, Partners, Affected communities	KII, DR, FGD	IG-DFAT, IG-Partners, FGDG

c) What did Australia's assistance achieve in terms of protecting the safety, dignity and rights of affected people, promoting gender equality and addressing barriers to inclusion, including for people with disabilities, ethnic minorities and indigenous populations?	DFAT, Partners, Affected communities	KII, DR, FGD	IG-DFAT, IG-Partners, FG DG
d) How effectively did Australia influence and inform partner programming with respect to meeting protection, gender and disability inclusion commitments?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
e) To what extent did Australian-funded activities promote longer-term resilience of affected communities and support broader recovery and stabilisation efforts?	DFAT, Partners, Affected communities	KII, DR, FGD	IG-DFAT, IG-Partners, FG DG
f) What were the barriers and enablers to effective and efficient program design and management?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
3. Did Australia's humanitarian assistance reinforce national and local leadership?			
a) To what extent did Australia's humanitarian assistance align with the needs and/or requests of the Myanmar government?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
b) To what extent did Australia's support strengthen local partners, including civil society (e.g. local women's organisation, disabled people's organisations etc.)? Is there scope to increase support to local leadership, including by women, and support to local partners? What preparatory work might be needed to do this?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
c) To what extent were implementing partners sufficiently accountable to, and engaged with, affected communities? Is there evidence of programs having been influenced by effective communication, participation and feedback?	Partners, Affected communities	KII, DR, FGD	AB, IG-Partners, FG DG
4. Additional questions (Advocacy and Influence)			
a) To what extent did Australia identify and use opportunities to influence high-level humanitarian engagement and global humanitarian reform efforts by leveraging lessons and partner experience in Myanmar? And vice versa, to what extent did Australia identify and use opportunities to influence the humanitarian response system in Myanmar based on high-level humanitarian engagement?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
b) Given the role of Myanmar's Government and military as an active participant in civil conflict and alleged human rights abuses how did Australia engage with national leadership to influence change and promote stabilisation? Are there ways it could be improved?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
c) What is the comparative advantage of Australia's humanitarian assistance in Myanmar?	DFAT, Partners	KII, DR	AB, IG-DFAT, IG-Partners
d) What steps were taken to ensure visibility and branding of Australian government assistance and what more could have been done?	DFAT, Partners	DR, KII	AB, IG-DFAT, IG-Partners

ANNEX TWO: INTERVIEW AND FOCUS GROUP DISCUSSION GUIDES

Focus Group Discussion Guide - Affected Populations

Assistance received

1. What humanitarian assistance have you and your family been provided with in the last couple of years? (KEQ1d).

Appropriateness and Relevance

2. How useful was/is this assistance in helping you and your family meet your needs? Can you provide any examples of help you have received which has been particularly useful? Are there any examples of unhelpful assistance being offered? (KEQ1d; KEQ1a; KEQ1f; KEQ2b; KEQ2b)

3. Have there been any problems with the assistance provided? (KEQ1f)

Engagement and participation

4. How do the aid organisations interact with you? Have you or others in your situation been given the opportunity to decide what type of aid is given by whom and how? (KEQ1a; KEQ3c)

5. Are you provided with the opportunity to provide feedback on assistance provided? (KEQ3c)

6. How do you think organisations could engage with you better?

Protection and inclusion

7. Do you think that people can access the services and assistance here safely? Would any particular group face risks or difficulties (women or girls / children / people from certain ethnic groups / PWD)? (KEQ2c)

8. Are you aware of any positive steps being taken by organisations to promote safety whilst accessing humanitarian assistance? Please describe. (KEQ2c)

9. Are you aware of any positive steps being taken to ensure that all members of the population are able to access assistance including people with disabilities or people from different ethnic groups? Please describe (KEQ2c)

10. What could organisations do differently to improve the safety of affected populations and/or promote more inclusion? (KEQ3c; KEQ1d)

Recovery and resilience building

10. Please describe any support that has helped you to plan for the future. What additional assistance would best support you and your families to thrive in the future? (KEQ2e)

Interview Guide: Partners

1. Please briefly describe your partnership with the Australian Government in Myanmar (program that Australia is funding or area of work that you coordinate on).
2. In your opinion, does Australian humanitarian support align with the priority needs you and your partners have identified (sector and location)? (KEQ1a; KEQ3a)
3. Do you think Australia complements and coordinates with other actors well in Myanmar (other donors and international stakeholders)? Can you give specific examples? Are there ways this can be improved? (KEQ1e; KEQ3b)
4. Do you think Australia strengthens national actors in Myanmar (especially civil society and national organisations)? Can you give specific examples? Are there ways this can be improved? (KEQ3b)
5. What do you see as the strengths and weaknesses associated with Australian support for situations of protracted displacement in Myanmar? Can you suggest ways that this support could be improved?

Implementing partners only (if not IP then skip to advocacy and influence)

6. Has the Australian government positively influenced your organisations response to situations of protracted displacement in Myanmar? If so how? (KEQ2d)
7. Has the Australian government discussed thematic priorities in relation to protection, disability inclusion and gender equality? Were any amendments made to project design to take account of these thematic priorities?
8. How does your program promote access and safety for particular such as women girls, people with disability or particular ethnic groups? (KEQ2a; KEQ2d)
9. How do you take steps to ensure that your organisation is accountable to affected populations? (KEQ3c)
10. What were the key barriers or enablers to effective and efficient program design with Australian funding? (KEQ2f)
11. What do you think priorities for a multi-year strategy for DFAT should be?
12. What are the advantages of multi-year funding from the perspective of your organisation? Is there anything you would do differently if you had access to multi-year funding opportunities?
13. What steps have you taken to localise your response and support national actors as much as possible? (KEQ3b)
14. Do you think more could be done to promote the visibility and branding of Australian programs? How do you think Australia and its partners can improve this? (KEQ 4d)

Advocacy and Influence (these are for internal DFAT report only)

15. Are you aware of any areas where Australia has showed particular leadership in responding to situations of protracted displacement in Myanmar? Are you aware of any public or private advocacy in relation to SGBV, WPS, CP or access for people living with disability? (KEQ2c; KEQ4a; KEQ4b)
16. Are you aware of the Australian government's involvement in international dialogue on situations of protracted displacement in Myanmar? If so are there any policy areas that you know Australia has been

seeking to advance in discussions with the international community? Are there any issues that you feel Australia would be particular well placed and effective to advocate for? (KEQ3a; KEQ4a)

17. How does Australia engage with national leadership to influence change and promote stabilisation? Can you give specific examples? Are there ways this engagement could be improved? (KEQ4b)

Interview Guide: DFAT staff

1. How would you describe DFAT's response to situations of protracted displacement in Myanmar?
2. What do you see as the strengths and weaknesses of DFAT's humanitarian assistance to situations of protracted displacement in Myanmar?
3. How were decisions around choice of partner and sector made? Do you think the decisions were appropriate? How would you like to see decisions being made going forward? Which partners do you think DFAT should continue to support and why? (KEQ1a)
4. What guidance or discussion does DFAT have with partners on the extent to which assistance should address gender equality (including SGBV and or WPS), disability inclusion and humanitarian protection (including child protection)? (KEQ2d)
5. Do you think the humanitarian program intentionally complemented the development program in Myanmar? Do you have examples? Are there ways this could be done better? (KEQ1b)
6. Are you aware of the humanitarian program in Myanmar intentionally aligning with key DFAT strategy documents (Humanitarian Strategy / Gender Equality Strategy)? Please give specific examples. (KEQ1c)
7. What are the main challenges to providing humanitarian assistance in Myanmar or for specific locations and population groups?
8. How do you think DFAT's humanitarian assistance in Myanmar could be improved?
9. How does the humanitarian program link to the development program?

Advocacy and Influence (these are for internal DFAT report only)

10. Do you think there are areas where Australia is showing particular leadership in response to Myanmar? (KEQ4a)
11. Are there any issues that you feel Australia would be particular well placed and effective to advocate for? (KEQ 3a; KEQ4a)
12. How does Australia engage with national leadership to influence change and promote stabilisation? Can you give specific examples? Are there ways this engagement could be improved? (KEQ4b)
13. What dialogue did DFAT have with other donors (DAC) and key stakeholders about the nature of Australia's response to the Myanmar crisis? Could coordination and complementarity be improved and if so, how? (KEQ1e)
14. Can you provide any examples of DFAT using our experience from the Myanmar response to inform policy discussions on broader humanitarian issues? (KEQ4a)

ANNEX THREE: FIELD WORK SCHEDULE

UN agencies: WFP, UNHCR, OCHA, UNFPA, UN Resident Coordinator’s Office (Sittwe, Rakhine)
UNICEF

NGOs: Save the Children, DRC, ICRC, Trocaire /(Oxfam , Care, IRC, Centre for Humanitarian Dialogue

Government ministries: Ministry of Social Welfare, Relief and Resettlement, Ministry of Foreign Affairs, Ministry of Finance and Planning

National organisations: Development partners / national peak NGO body (?) / DPOs Myanmar Red Cross Society, Joint Strategy Team (made up of lead national NGOs in Kachin and northern Shan), Centre for Diversity and National Harmony, Myanmar Independent Living Initiative

Donors: UK, US, EU, Canada, Switzerland, Japan (humanitarian and political personnel).

Affected populations: IDP and host population reps in Rakhine and Kachin states; DPOs or community organisations

Date	Activity
1 May – 2 May	Evaluation Team meeting in Yangon, interviews with other donors, UN agencies, DFAT desk and post
3 May	NPT - Interviews with stake holders, and government representatives (day trip)
4 May – 5 May	Field trip to Kachin and meeting with implementing partners (UNFPA, ICRC), IDP camps visit
8 May – 11 May	Field trip to Rakhine and meeting with implementing partners (DRC), IDP camps visit Field visit to Pauk Taw (tentative)
12 May	Wrap up session at Yangon, feedback, preparation for report