EVALUATION

unicef
for every child



Evaluation report March 2026

Evaluation of UNICEF's Accountability to Affected Populations

Evaluation of UNICEF's Accountability to Affected Populations
Evaluation report

© United Nations Children's Fund, New York, 2026

United Nations Children's Fund
Three United Nations Plaza
New York, New York 10017
March 2026

The purpose of publishing evaluation reports produced by the UNICEF Evaluation Office is to fulfil a corporate commitment to transparency through the publication of all completed evaluations. The reports are designed to stimulate a free exchange of ideas among those interested in the topic and to assure those supporting the work of UNICEF that it rigorously examines its strategies, results, and overall effectiveness.

The contents of the report do not necessarily reflect the policies or views of UNICEF. The text has not been edited to official publication standards and UNICEF accepts no responsibility for error. The designations in this publication do not imply an opinion on the legal status of any country or territory, or of its authorities, or the delimitation of frontiers.

The copyright for this report is held by the United Nations Children's Fund. Permission is required to reprint/reproduce/photocopy or in any other way to cite or quote from this report in written form. UNICEF has a formal permission policy that requires a written request to be submitted. For non-commercial uses, the permission will normally be granted free of charge. Please write to the Evaluation Office at the address below to initiate a permission request.

Suggested citation: United Nations Children's Fund, *Evaluation of UNICEF's Accountability to Affected Populations*, UNICEF, New York, March 2026.

See this report at: https://www.unicef.org/evaluation/reports#/

Cover photo: © UNICEF/UNI825068/Mohamed Yasin

For further information, please contact:

Evaluation Office
United Nations Children's Fund
Three United Nations Plaza
New York, New York 10017
evalhelp@unicef.org

The evaluation was carried out by Itad. The team comprised the Team Leader, Moira Reddick; Deputy Team Leader, Emily Rogers; Senior Evaluator, Valeria Raggi; and Evaluator and Project Manager, Nora Schmidt; Quality Assurance, David Fleming.

The evaluation was commissioned by UNICEF.

This is a global evaluation, drawing on ten regional and country case studies (MENARO, EAPRO, LACRO, Venezuela, Somalia, Afghanistan, Ukraine, Lebanon, CAR, Comoros). It covers the period from 2020 to 2025.

Preface

We are living through a moment that tests the foundations of humanitarian action. Crises are multiplying in scale and complexity, funding is contracting, and the trust of affected populations — too often taken for granted — is being strained. In this environment, Accountability to Affected Populations (AAP) is not a programme quality add-on. It is the condition under which UNICEF's work retains its legitimacy, its effectiveness, and ultimately its right to claim it is acting in the interest of children. This evaluation was commissioned precisely because that claim must be regularly tested — not asserted. It provides a rigorous and timely assessment of how far UNICEF has come in genuinely institutionalising AAP across humanitarian and development contexts, and how far it still needs to go. The findings are honest, and the conclusions demand attention.

There is real progress to acknowledge. Across regions and country offices, UNICEF has invested in AAP systems and tools, elevated community engagement as a programme priority, and built a stronger shared vocabulary around accountability. These are not trivial achievements, and the staff and partners who drove them deserve recognition.

But the evaluation is unsparing about what remains unfinished. AAP is still too dependent on individual champions rather than embedded in the organizational systems, leadership expectations, and resource allocations that would make it irreversible. Community participation, widely endorsed on paper, is inconsistently practised across the programme cycle and rarely used in ways that demonstrably shift decisions. Feedback is collected; it is less reliably acted upon. The gap between stated commitment and lived experience — the experience of the children and communities UNICEF serves — remains too wide.

This matters more now than it ever has. In a context of declining resources and mounting need, organizations that cannot demonstrate genuine responsiveness to the people they serve will — and should — face harder questions from donors, partners, and communities alike. The Humanitarian Reset Agenda is not simply an internal reform process; it is a response to the growing recognition that business as usual is no longer defensible. AAP sits at the heart of that reset, not at its margins.

The evaluation makes clear that advancing AAP requires more than better tools and clearer guidance. It requires a deeper reckoning with how power, accountability, and decision-making are actually exercised — at the Country Office level, at the Regional level, and at Headquarters. It requires leaders who model the standard they expect, and systems that hold them accountable when that standard is not met. And it requires a deliberate integration of AAP with gender equality, disability inclusion, safeguarding, and social and behaviour change — not as parallel tracks but as a coherent, mutually reinforcing commitment to programming that reflects the full reality of children's lives.

The findings presented here are not comfortable reading in every respect. They should not be. Evaluations that only confirm what we already believe we are doing well have limited value. This one is worth reading carefully, debating seriously, and acting on with urgency.

Lastly, I am grateful to the many colleagues and partners — at country, regional, and global levels — who engaged with this process with candour and commitment. Their honesty is reflected in the quality of the evidence. My hope is that this evaluation is received in the spirit in which it was conducted: not as a judgement, but as an obligation — to the children whose voices it amplifies, and to the standards UNICEF has committed to uphold.

Robert McCouch
Director of Evaluation
UNICEF

Contents

List of acronyms viii

Executive summary x

① Introduction 1

AAP in the global context 1

AAP within UNICEF 2

Evaluation purpose 5

Evaluation objectives 8

Evaluation scope 8

② Methodology 10

Evaluation approach 10

Theory of Change and Evaluation Questions 12

Methods and data collection tools 18

Sampling 20

Data analysis and quality assurance 23

Ethical considerations and evaluation principles 24

Evaluation limitations and mitigations 25

③ Findings (by question) 26

UNICEF's strategies and efforts in influencing practice in AAP (effectiveness, appropriateness and relevance) 26

AAP beyond humanitarian action (connectedness/coherence and relevance) 54

People-centred approaches (coordination) 62

Leadership (efficiency) 68

④ Lessons Learned 75

⑤ Conclusions 79

⑥ Recommendations 83

List of figures

Figure 1. The seven pillars of UNICEF's AAP framework 3

Figure 2. Evaluation users and uses....7

Figure 3. Evaluation approach 11

Figure 4. Six steps of Contribution Analysis 12

Figure 5. Theory of Change for the institutionalization of AAP across UNICEF (simplified version). 13

Figure 6. Number of people interviewed per case study.... 18

Figure 7. Number of people interviewed in KIIs and FGDs by HQ, regional, country and community level.... 18

Figure 8. KIIs disaggregated by gender.... 18

Figure 9. Community consultation in Venezuela disaggregated by gender 18

Figure 10. Map of case studies.... 21

Figure 11. Data analysis workflow 23

Figure 12. Main strengths of positioning country AAP leads within different teams. (Drawing on Findings 1.1, 1.12, 2.4, 3.2, and 4.1) 28

Figure 13. Common country strategies adopted by AAP leads to further AAP across UNICEF country offices (drawing from Findings 1.3 and 1.4).... 33

Figure 14. UNICEF CPP Cycles. At what stages does UNICEF consistently engage communities and groups in situations of vulnerability to inform prioritization, design and programme decisions? 42

List of tables

Table 1. Users and expected uses of the evaluation 6

Table 2. AAP Pillars (selected) and the CCCs.....9

Table 3. Summary of EM against DAC criteria ...17

Table 4. Details of case studies by type and country office 22

Table 5. Mapping of preliminary conclusions against overall conclusions. 81

List of boxes

Box A. How does AAP contribute to the SDGs, CEDAW, and UNICEF's new Strategic Plan (2026-2030)?....3

Box B. Recent internal changes 5

Box C. Internal enabling factors – more details 14

Box D. Immediate and strategic outcomes – more details 15

Box E. Innovative methods – strengthening evidence through direct engagement in Venezuela 19

Box F. Lebanon's mapping exercise to understand AAP practice across sections and partners 35

Box G. UNICEF Venezuela's leadership in the interagency AAP coordination.... 37

Box H. Unpacking who UNICEF is engaging with, learning from community consultations in Venezuela. 47

Box I. UNICEF Afghanistan's large-scale CFM.....48

Box J. Developing child-friendly feedback options in Ukraine and Venezuela 49

Box K. A community-centred approach for AAP from Afghanistan 55

Box L. Examples of engaging government entities in capacity-building activities and systems strengthening for AAP. 56

Box M. Final remarks on the ToC for the institutionalization of AAP across UNICEF, developed for this evaluation.... 81



© UNICEF/UNI902392/Herold Joseph

List of acronyms

AAP	Accountability to Affected Populations
AWP	Annual Work Plan
CAR	Central African Republic
CBA	Cash-Based Assistance
CCCs	Core Commitments for Children
CEFC	Community Engagement and Feedback Centre
CFM	Complaint and Feedback Mechanism / Management[1]
CHS	Core Humanitarian Standard
CPD	Country Programme Document
CPP	Country Programme Planning
CRC	Convention on the Rights of the Child
CSI	Core Standard Indicators
DAC	Development Assistance Committee
DAPM	Data, Analytics, Planning and Monitoring
DHR	Department of Human Resources
DI	Disability Inclusion
EAP	East Asia and Pacific
ECA	Europe and Central Asia
EM	Evaluation Matrix
EMOPs	UNICEF Office of Emergency Operations
EO	Evaluation Office
EQ	Evaluation Question
ET	Evaluation Team
FCDO	UK Foreign Commonwealth and Development Office
FGD	Focus Group Discussion
GRM	Grievance Redress Mechanism
HAC	Humanitarian Action for Children
HCD	Human-Centred Design
HCT	Humanitarian Country Team
HNO	Humanitarian Needs Overview
HQ	Headquarters
HRBA	Human Rights-Based Approach
IASC	Interagency Standing Committee
ICTD	Information and Communication Technology Division
IFI	International Finance Institutions
JC	Judgement Criteria
KI	Key Informant
KII	Key Informant Interview
KPI	Key Performance Indicator
LAC	Latin America and Caribbean
LTA	Long-Term Agreement
M&E	Monitoring and Evaluation
MENA	Middle East and North Africa
MIS	Management Information System
MLO	Minority-Led Organisations
NDMA	National Disaster Management Agency
PC	Preliminary conclusion
PCA	Programme Cooperation Agreement
PFP	Private Fundraising and Partnerships
PG	Programme Group
PMD	Planning, Monitoring and Design
PME	Planning, Monitoring and Evaluation
PMT	Project Management Team
PPD	Public Partnerships Division

PSEA	Protection from Sexual Exploitation and Abuse
QA	Quality Assurance
RCCE	Risk Communication and Community Engagement
RMPS	Risk Management Programming and Safeguarding
SBC	Social and behaviour change
SD	Supply Division
SDG	Sustainable Development Goal
SEA	Sexual Exploitation and Abuse
TA	Temporary Assignment
ToC	Theory of Change
ToR	Terms of Reference
ToT	Training of Trainers
TPM	Third Party Monitoring
UNEG	United Nations Evaluation Group
WASH	Water, Sanitation and Hygiene


© UNICEF/UNI980672/Osama Al Qader

Executive summary

Why this evaluation matters now

Accountability to affected populations (AAP) lies at the heart of UNICEF's mandate to uphold the rights, dignity and agency of children and communities. Since endorsing the Grand Bargain[2], in 2016, UNICEF has committed to placing affected people at the centre of humanitarian decision-making through meaningful participation, access to information, and responsive feedback systems.

This commitment, which also triggered the development of an AAP Strategy for the whole Organization (2022–2025), has become more urgent in recent years. Humanitarian needs are rising, funding is contracting, and expectations for efficiency, equity and legitimacy are increasing. In this context, the ability of UNICEF to understand, respond to and be accountable to affected populations is not only a matter of programme quality—it is fundamental to maintaining trust, credibility and results for children.

Recognizing this, UNICEF committed—under the 2022–2025 Programme of Global Evaluation (GPE)[3]. —to assess progress in institutionalizing AAP across the organization. This evaluation provides that assessment at a critical moment of organizational change and financial constraint.

Purpose, Objectives and Intended users

As is the case for all evaluations in UNICEF, this evaluation serves two purposes:

- **Accountability:** to assess how far UNICEF has translated its AAP commitments into practice;
- **Learning:** to identify what is working, where gaps persist, and how AAP can be strengthened going forward.

The evaluation addresses five objectives: assessing the institutionalization of AAP, examining implementation across programmes, exploring its contribution to results, identifying good practices and lessons, and providing actionable recommendations. The primary audience includes UNICEF senior leadership and staff at global, regional and country levels, as well as the Executive Board.

Evaluation Approach

The evaluation draws on qualitative and quantitative evidence from across UNICEF's global, regional and country operations (2020–2025), including ten case studies[4] spanning diverse humanitarian and

development contexts, extensive stakeholder consultations, and analysis of programmatic and monitoring data.

Overall message

UNICEF has made important progress in advancing AAP, particularly in raising awareness, establishing feedback mechanisms, and strengthening community engagement. However, AAP has not yet been fully institutionalized. It remains:

- Uneven in practice;
- Dependent on individual leadership;
- Weakly embedded in systems and incentives; and
- Insufficiently linked to decision-making and results.

As a result, the intended shift in power – towards communities meaningfully influencing decisions that affect their lives – has not been realized at scale.

What has worked

The evaluation finds clear areas of progress across the organization:

1. Growing visibility and practice of AAP

AAP is no longer peripheral in many country offices. UNICEF has invested in:

- Guidance and tools (e.g. AAP Handbook, indicators),
- Community engagement mechanisms, particularly complaint and feedback mechanisms (CFMs),
- Training and focal point networks

These have helped build a shared understanding of AAP and generate momentum across contexts.

2. Demonstrated value of community engagement

Where communities are actively engaged:

- Programmes are more relevant and responsive;
- Implementation challenges are identified earlier;
- Trust in UNICEF is strengthened.

In multiple contexts, community feedback has led to operational improvements and more appropriate service delivery.

3. Emerging integration into systems and programmes

In some country offices, AAP has begun to be embedded in:

- Programme design and monitoring;
- Partner agreements;
- Humanitarian response processes;
- These examples show that institutionalization is possible when leadership, capacity and incentives align.

What remains unfinished

Despite these advances, the evaluation identifies systemic gaps that limit impact:

1. AAP is not yet institutionalized

AAP is still largely:

- Treated as a technical function rather than a core way of working;
- Driven by individual champions rather than organizational systems;
- Inconsistently prioritized across offices.

There are no formal accountability mechanisms (e.g. KPIs or performance expectations) for leadership, which undermines sustained progress.

2. Community voice is not systematically used in decision-making

While feedback is increasingly collected, it is:

- Not consistently analyzed;
- Not systematically fed into programme decisions;
- Rarely used as a measure of success.

As a result, there is a persistent gap between listening to communities and acting on what they say.

3. Internal systems do not incentivize people-centred programming

Existing processes often:

- Prioritize outputs and compliance over responsiveness;
- Treat feedback mechanisms as reporting tools rather than decision-making inputs;
- Lack the capacity to assess the quality of AAP practice, including by partners.

These structural factors limit the organization's ability to shift towards genuinely community-driven programming.

4. AAP remains closely tied to humanitarian contexts

Although conceptually relevant across UNICEF's mandate:

- AAP is still primarily embedded in humanitarian programming;
- Its application in development contexts remains unclear and inconsistent;
- Ownership outside emergency functions is weak.

5. Fragmentation across people-centred approaches

AAP, gender, disability inclusion, PSEA and other related commitments:

- Operate through parallel systems and teams;
- Lack shared frameworks and objectives;
- Result in duplication and missed opportunities for synergy.

6. Resourcing and capacity are fragile

Progress depends heavily on:

- Dedicated staff and funding;
- Favorable donor conditions.
- Recent budget cuts and organizational restructuring risk reversing gains, particularly where AAP roles are reduced or absorbed into broader functions.

Lessons learned

The evaluation highlights several lessons for strengthening AAP:

- Institutionalizing AAP requires organization-wide systems and culture change, not isolated initiatives;
- Leadership engagement is a critical driver of sustained progress;
- Progress driven primarily by external factors is difficult to maintain over time;
- Community voice must be treated as a core element of programme quality and decision-making;
- Greater integration across people-centred approaches improves coherence and impact.

What this means

Taken together, the findings point to a central conclusion:

UNICEF has made AAP visible—but not yet structural. AAP has improved programming practice in many settings, but it does not yet function as a consistent driver of how decisions are made, how performance is measured, or how power is shared with communities. Without addressing underlying organizational incentives, accountability and systems, progress will remain fragmented and vulnerable.

What needs to change

The evaluation team developed four overarching evaluation recommendations addressed to UNICEF staff at the global, regional and country levels. The recommendations were discussed with UNICEF staff and revised during a series of sense-making sessions organized throughout the second half of 2025. While decisions on corporate restructuring were finalized and announced only a few weeks before the publication of this report, there has been an effort to keep the allocation of responsibility for the recommendations as up to date as possible, to be further refined as needed during the preparation of the Management Response. The evaluation recommendations highlight four strategic priorities for moving forward:

1. Establish clear leadership and accountability for AAP

AAP must be:

- Owned at the most senior levels;
- Embedded in performance management systems;
- Treated as a core organizational priority—not a technical add-on.

2. Make community voice central to programme quality

UNICEF should:

- Ensure community perspectives inform decisions at all stages of the programme cycle;
- Strengthen the analysis and use of feedback;
- Move beyond feedback collection to demonstrable responsiveness.

3. Adopt a unified people-centred approach

AAP should be integrated with:

- Gender equality;
- Disability inclusion;
- Safeguarding and other related commitments through a coherent framework that reflects how communities experience UNICEF's work in practice.

4. Reposition AAP across humanitarian and development contexts

AAP should be clearly defined and operationalized as:

- A core programming principle across the humanitarian–development nexus;
- A measure of quality and effectiveness, not only compliance.

A critical opportunity

This evaluation comes at a time of significant organizational change within UNICEF and across the humanitarian system. These shifts create both risks and opportunities.

Strengthening AAP is not simply about fulfilling commitments—it is essential to:

- Improving programme effectiveness;
- Ensuring equity and inclusion;
- Maintaining trust with the communities UNICEF serves.

The extent to which UNICEF can embed AAP as a core organizational capability will shape its ability to deliver results for children in an increasingly constrained and demanding environment.

Overall message

UNICEF has made important progress in advancing AAP, particularly in raising awareness, establishing feedback mechanisms, and strengthening community engagement.

However, AAP has not yet been fully institutionalized. It remains:

- Uneven in practice;
- Dependent on individual leadership;
- Weakly embedded in systems and incentives; and
- Insufficiently linked to decision-making and results.

As a result, the intended shift in power – towards communities meaningfully influencing decisions that affect their lives – has not been realized at scale.



© UNICEF/UNI956984/Royena Rasnat

1 Introduction

In February 2025, Itad was contracted by UNICEF's Evaluation Office (EO) to conduct an evaluation of UNICEF's accountability to affected populations (AAP). This report presents the findings, conclusions and recommendations of the evaluation. Section 1 presents the introduction, including the context, evaluation purpose, objective, scope, Theory of Change (ToC) and evaluation questions (EQs). Section 2 covers the methodology, including the overall approach and ethical considerations. Section 3 presents the findings, Section 4 the key lessons and conclusions, and Section 5 the recommendations.

AAP in the global context

Evidence that the numbers of people in need of humanitarian assistance have consistently increased over the last quarter century is well documented. The humanitarian system has responded by increasing the scale of delivery, as well as working to drive timely responses that meet agreed institutional and sectoral standards. In 2024, the Global Humanitarian Overview targeted 180.5 million people, requesting US$46.2 billion[5], of which US$35.8 billion was reported to have been received[6]. However, funding gaps for the humanitarian system remain consistent over time, with the (then) unprecedented 45% shortfall of 2015 being one of the main drivers for the 2016 Grand Bargain process[7]. The primary aim of the 2016/2021 Grand Bargain element of the 'Participation Revolution' was for signatories, such as UNICEF, to hold themselves accountable to the commitments they were making to place affected people at the centre of humanitarian decision-making in all contexts. This relied upon signatories, including UNICEF and many UNICEF partner organizations, ensuring that they took responsibility for establishing and maintaining proactive dialogue with affected populations through processes that were adapted to the local contexts. In 2017, the Interagency Standing Committee (IASC) guidance already noted that such dialogue would only be effective if "senior decision-makers" in organizations were acting based on information received[8]. Independent research conducted in 2022 concluded that, while Grand Bargain signatories had invested in the development of "capacities, tools, and mechanisms" to support AAP, there was no evidence that the influence of affected people over the design and delivery of assistance had "shifted".[9] While it may have been unrealistic to expect an overnight 'revolution', given the scale of organizational change and devolution of power required, progress has been minimal. There is

little evidence that leadership across the sector has prioritised the systemic changes needed to reorientate humanitarian and development actors and place affected people and communities at the centre of decision-making.

During the period under consideration by the evaluation (2020–2025), the humanitarian and development sector has been subject to ever-increasing demands, as well as to multiple other pressures. This resulted in an awareness of the need for structural system change, which, as acknowledged in the 2024 UN General Assembly Pact for the Future General Assembly Resolution A/RES/79/1[10], was still to take place. In 2014, only 29% of funding required for inter-agency appeals was for protracted crises, but in 2024 this had reached 91.[11]%. A 2025 report reviewing the OCHA-led (United Nations Office for the Coordination of Humanitarian Affairs) *Flagship Initiative,* which examines the challenges and successes that the system has had in delivering on commitments to affected people, claims that "humanitarian aid does the same thing over and over in protracted crises, with no exit strategy and largely against the wishes of the people it is supposed to serve"[12]. Against this background, and in a context where the response to people in need in the Humanitarian Needs Overview (HNO) was the lowest ever, at 60%, in 2024, the responsibility to ensure that UNICEF has prepared itself to understand the priorities of affected people and to respond appropriately is more critical than ever.

The seismic nature of the global financing crisis of 2025 has shown that there will be no return to previous models of delivery. The Humanitarian Reset, initiated by IASC in early 2025 and led by the Emergency Relief Coordinator, seeks transformational reform in how humanitarian aid is delivered, including what is delivered, how decisions are made, and whose voices are heard.[13] Critically, the Humanitarian Reset examines how accountability and power are distributed, looking towards a renewed system that puts people facing crises first. It is rooted in the communities we serve and is "much more accountable to the people we serve".[14] The Humanitarian Reset is seen as a moment of opportunity to reorientate humanitarian action to be people-driven and accountable. However, as of mid-2025, the Humanitarian Reset remains more of an aspiration than a defined agenda, and, while for some in the humanitarian sector the Reset represents a meaningful system reform, for others it is seen more as a vehicle for cost cutting or marginal adjustments.[15] Furthermore, the evolving Humanitarian Reset has a very narrow interpretation of AAP – which has been reduced to joint inter-agency community feedback mechanisms aimed at improving accountability. This approach falls short of placing community preferences at the forefront of humanitarian action.[16] The focus and tone of the Humanitarian Reset will have ongoing implications for the traction and focus of AAP and people-centred programming within UNICEF.

AAP within UNICEF

For UNICEF, AAP is about using power and resources ethically and responsibly and is central to UNICEF's rights-based approach. It is about putting the needs and interests of the people and communities that the organization serves at the centre of decision-making and ensuring the most appropriate and relevant outcomes, while preserving their rights and dignity. In practice, this means that people, including children and adolescents, have a say in decisions that affect their lives; receive the information they need to make informed decisions; have access to safe and responsive mechanisms to provide feedback or to complain; and have equitable access to assistance in proportion to their needs, priorities and preferences.[17] More specifically, UNICEF's seven pillars of AAP (as shown in Figure 1) provide an organizational framework drawing on IASC Commitments on Accountability to Affected People[18] and the Core Humanitarian Standard (CHS) on Quality and Accountability. These definitions of AAP have strong connections to the Convention on the Rights of the Child (CRC), in particular Articles 12, 14 and 17, which set out children's rights for participation, access to information and opinions for providing feedback, and in human rights-based approaches (HRBA). AAP aligns directly with Sustainable Development Goal 16 (SDG) and SDG 5 and contributes to the effectiveness of other sectoral SDGs. Further AAP contributes to realizing the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and is key to UNICEF's new Strategic Plan (2026-2030) (see Box A).

BOX A

How does AAP contribute to the SDGs, CEDAW, and UNICEF's new Strategic Plan (2026-2030)?

AAP and the SDGs

UNICEF's AAP commitments contribute towards SDG 16 on Peace, Justice and Strong Institutions, which aims to "build effective, accountable and inclusive institutions at all levels." Furthermore, SDG target 16.6 focuses on effective, accountable and transparent institutions; 16.7 aims to "Ensure responsive, inclusive, participatory and representative decision-making at all levels"; and 16.10 on "public access to information.

Furthermore, the aims of AAP are aligned with SDG 5 on gender equality, specifically, target 5.5 for ensuring women's full and effective participation and equal opportunities for leadership and 5.2 on eliminating violence and exploitation, including SEA.

AAP is an approach to programming and service delivery key for meeting outcome goals. As such AAP strengthens the effectiveness of work across all sectoral SDGs by ensuring services and programmes are aligned with the priorities of rights-holders. For example, including SDG 1 (No Poverty), SDG 2 (Zero Hunger) SDG3 (Good Health and Well-Being), SDG 4 (Quality Education), and SDG 6 (Clean Water and Sanitation).

AAP and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)

UNICEF's AAP framework contributes towards realizing CEDAW by:

- Emphasizing women's right to participate and influence decisions at all levels (community, national, international) and embedding women's voices into shaping programme design and monitoring.
- Prioritizing engagement with the most marginalized — particularly women and girls — reinforcing CEDAW's non-discrimination and equality principles.
- Ensuring women and girls have means to hold duty-bearers (UNICEF and partners) accountable and claim their rights as enshrined in CEDAW.

AAP and UNICEF's new Strategic Plan 2026-2030

UNICEF's new Strategic Plan highlights accountability to affected populations (AAP) as central to upholding the rights of those it serves and ensuring that UNICEF's work, and that of its partners, remains ethical, effective, and responsive. In line with UNICEF's AAP pillars, the Plan positions meaningful engagement with children, families, and communities as key, both as core to UNICEF actions and empowering them as rights holders, leaders, and agents of change.

UNICEF's AAP commitments break down how UNICEF can ensure children and communities are central to decision-making and programming — directly contributing to the Plan's commitments to child-focused services, equity, and evidence-based action.

AAP is integral to achieving the Strategic Plan's Impact Results. It is explicit in the strategy "Engage families and communities, including on social norms," and underpins others such as "Generate and harness evidence," "Strengthen basic social service systems," and "Advocate and expand partnerships for children's rights." The Strategic Plan's Accelerator on "Community and front-line systems" provides opportunities for action centred around children through greater proximity to communities, while the strategy on "Coordinating humanitarian, development, and peace action" provides scope for UNICEF to advance accountability externally with other actors.

Figure 1. The seven pillars of UNICEF's AAP framework



Source: UNICEF's AAP handbook – 2020)

The history of AAP within UNICEF is relatively recent. The organization made a commitment to scaling up AAP in 2017 with the approval of the 2018–2021 AAP business case and roadmap. The more recent 2022–2025 AAP Strategy builds on previous progress and seeks to "take AAP to the next level".[19] This strategy sets out a series of priorities that have been agreed to meet the organization's commitment to AAP, specifically the following:

- Application of AAP beyond humanitarian responses, as a programming principle applicable in any UNICEF programme, humanitarian or development alike.
- Leadership engagement and accountability, notably UNICEF country office representatives and deputy-representatives, to ensure accountability to all communities, in all UNICEF-supported programmes.
- Integration into UNICEF's planning and monitoring systems and processes, starting from CPDs.
- Building a people-centred approach, with more coherence between AAP and other organizational priorities: gender, disability inclusion, localization, PSEA, social and behaviour change, and risk communication and community engagement that all have in common a 'people-centred approach'.
- Going beyond UNICEF, including articulating what is expected from in-country partners (local, national or international) and ensuring a more coordinated approach with other organizations.

Internally, efforts to further AAP have been primarily driven by a four/five-member Global AAP Section based within the UNICEF Office of Emergency Operations (EMOPs). It is working with regional AAP leads who have sought to support country offices and advance the internal conditions needed to systematically reflect the principles of AAP across UNICEF's work. In recent years, under the steering of the Global AAP Section, UNICEF has worked towards the following:

- **Define and increase awareness around AAP**. Defining and unpacking the organization's commitment to AAP through the AAP Handbook (launched in 2020) and the inclusion of a clear commitment with benchmarks for AAP in its Core Commitments for Children (CCCs), which steer its humanitarian action. Ongoing efforts have sought to build awareness and understanding of AAP through the Agora on-line training on AAP, the AAP Community of Practice, and regular newsletter communications on AAP (all since 2021), complemented by in-person training responding to demand. Recent collaborations with the University of Geneva's Centre of Humanitarian Studies have led to a 12-week course on AAP and people-centred programming for professionals working in the humanitarian sector, first run in 2024.
- **Embed AAP in organizational processes.** The inclusion of AAP into CCCs was instrumental in introducing AAP as a concept within UNICEF, in particular as part of Emergencies. More recently, efforts have focused on integrating AAP within organizational processes that span emergency and development contexts. For Emergencies, AAP was integrated into the emergency procedures for L2 and L3 emergencies and three standard AAP indicators are commonly used in Humanitarian Action for Children (HAC) responses. In collaboration with data, analytics, planning and monitoring (DAPM), steps have been taken to integrate AAP into the recently revised CPD guidance, and programme implementation handbook. From 2021, a set of AAP indicators were included in UNICEF's global Core Standard Indicators (CSI), which all country offices are expected to report against. In 2023, AAP was added to the scope of UNICEF's internal audits, conducted by UNICEF's Office of Internal Audit and Investigations. Since then, 15 individual country internal audits have been completed, including AAP, plus a global-level audit focused specifically on AAP.
- **Respond to common challenges**. Ambitious in-house initiatives have sought to address the common challenges in AAP faced by country offices with innovative approaches and projects spearheaded by and in collaboration with other global teams. The *Voices of Change* project (2022–2023) led by the Office of Innovation (OoI), sought to leverage synergies between AAP and PSEA and improve practice around reporting channels and voice throughout the programme cycle for safer, more efficient programming. The ongoing *Kits that Fit* initiative launched in 2023 as a collaboration among UNICEF's Supply Division (SD), the Office of Innovation, the AAP Section and EMOPs. It seeks to provide solutions for the collection of timely and accessible feedback data on key emergency items. The development of *UNICARE*, a digital platform designed to enhance how the organization manages and responds to feedback, complaints and concerns from communities, was initiated in 2023 as a collaboration between EMOPS; the Information and Communication Technology Division (ICTD), DAPM, Safeguarding, and the ESS team. At the time of the evaluation, UNICARE country pilots were nearing completion.

BOX B

Recent internal changes

The evaluation took place at a time of significant upheaval for the wider humanitarian system, as well as individual agencies such as UNICEF. UNICEF's internal context shifted significantly during this evaluation, with several developments that will influence UNICEF's capacities to meet the organization's AAP commitments. Many of these changes, but not all, were a direct result of the 2025 funding cuts by the United States of America's (US) government and other Member States. Three significant shifts since the start of this evaluation include the following:

- **Significant reductions in AAP capacities across the organization**. UNICEF's Global AAP Section has reportedly reduced staff numbers by 50%. At regional and country levels, headcount reductions are affecting dedicated AAP roles and teams, in particular social and behaviour change (SBC) and PSEA, which have historically played important roles in advancing AAP at country level.[20] Regional offices are consolidating, and dedicated AAP capacity will remain in two newly combined offices – the East Asia and Pacific Regional Office (EAPRO)/Regional Office for South Asia (ROSA) and the Middle East and North Africa Regional Office (MENARO)/ Europe and Central Asia Regional Office (ECARO). Furthermore, UNICEF is undergoing significant structural reforms, including the creation of Centres of Excellence and a redefined role for regional offices. The implications for ways of working are still being worked through and will take time to settle.
- **New regulatory frameworks.** Several new frameworks from the new Risk Management and Safeguarding Unit within DAPM have implications for UNICEF's current AAP framework (the seven pillars), compliance requirements, and oversight for complaint and feedback management as one pillar of AAP. The new Policy on Safeguarding (effective since March 2024) broadens UNICEF's safeguarding scope beyond PSEA. The new Policy on Environmental and Social Standards in Programming (effective from June 2025) addresses environmental and social risk management areas and enhances programme stakeholder engagement, linking AAP to the principles of "do more good" as well as "do no harm". Finally, the forthcoming Complaints and Feedback Management procedure will make it mandatory for all country offices to establish a CFM. A phased global rollout of the new procedures is planned, starting with 50 prioritised country offices.
- **Shifts in global AAP responsibilities:** As part of the reorganization and linked to the new regulatory frameworks, responsibilities for AAP are being redistributed. The AAP Section in EMOPS will retain AAP normative and interagency functions. Programmatic support for AAP to regional and country offices will move to SBC within the new Global Programme Division. No additional resources are being allocated towards this, but, instead, AAP is being embedded into SBC job descriptions, including the four SBC advisers attached to the new Centres of Excellence. DAPM – as part of the new Risk Management Programming and Safeguarding (RMPS) team – will oversee country office compliance with the ESS and Safeguarding regulatory framework documents (inclusive of PSEA) and CFM procedure. UNICARE will transition to DAPM.[21][22]

The evaluation was commissioned and initiated prior to recent funding cuts and related reforms were conceived. Given the scale and rapid pace of change, their full implications remain unclear and will likely only become evident over the coming years. Recognizing that these reforms have been unfolding in parallel to the evaluation, and that the evaluation team have not been part of this process, the evaluation was conducted based on information available at the time as data collection and analysis largely took place while many of these changes were still under discussion. While the evaluation did not assess their impact directly, it remained mindful of this evolving context when drawing conclusions and formulating recommendations.

Evaluation purpose

The evaluation served two mutually reinforcing purposes: accountability and learning.

- **Accountability**: the evaluation assessed the work that has been done in recent years integrating AAP into UNICEF's programming at every level to strengthen accountability to populations served, as well as to partners and donors.
- **Learning**: the evaluation sought to understand, document and explain UNICEF's approach to AAP against its strategic vision. It highlighted successes and challenges and offers practical and actionable recommendations for improvement.

The evaluation is needed at this particular moment in time as it coincides with the final year of implementation of UNICEF's AAP Strategy 2022-2025, providing a critical opportunity to assess progress against the strategy's four-year roadmap targets. It is also particularly relevant in light of ongoing shifts across the humanitarian sector. As such, the evaluation provides a critical basis for determining whether UNICEF's current AAP systems are fit for purpose and where adjustments are needed.

This evaluation focused on the relationship and accountabilities between UNICEF (as a duty-bearer) and rights-holders (principally children and adolescents), including where UNICEF works in partnership with other duty-bearers, such as governments and civil society actors, in the provision of services and programmes. As such, the main stakeholders for the evaluation were the following (see Table 1 for more details):

- **Rights-holders:** these are the individuals and communities who UNICEF serves through its programmes – primarily, children, adolescents and other groups in situations of vulnerability who are entitled to claim their rights and participate meaningfully in decisions that affect their lives.
- **Primary duty-bearers:** In this evaluation UNICEF and UNICEF partners (both government and non-governmental organizations (NGOs)), were the primary duty-bearers of focus. Within UNICEF, both global and field-level UNICEF teams are responsible for leading and implementing AAP across the organization. These include the UNICEF Executive Board; EMOPS; the Programme Group (PG); DAPM; Private Fundraising and Partnerships (PFPs); the Public Partnerships Division (PPD); the Department of Human Resources (DHR); the SD; and UNICEF Regional and Country Offices, including senior leadership teams, programme teams, emergency sections, technical teams, and management teams.
- **Secondary duty-bearers:** For this evaluation, these included external actors who complement UNICEF's efforts in delivering AAP, such as other UN agencies, NGOs, donors and interested Member States.

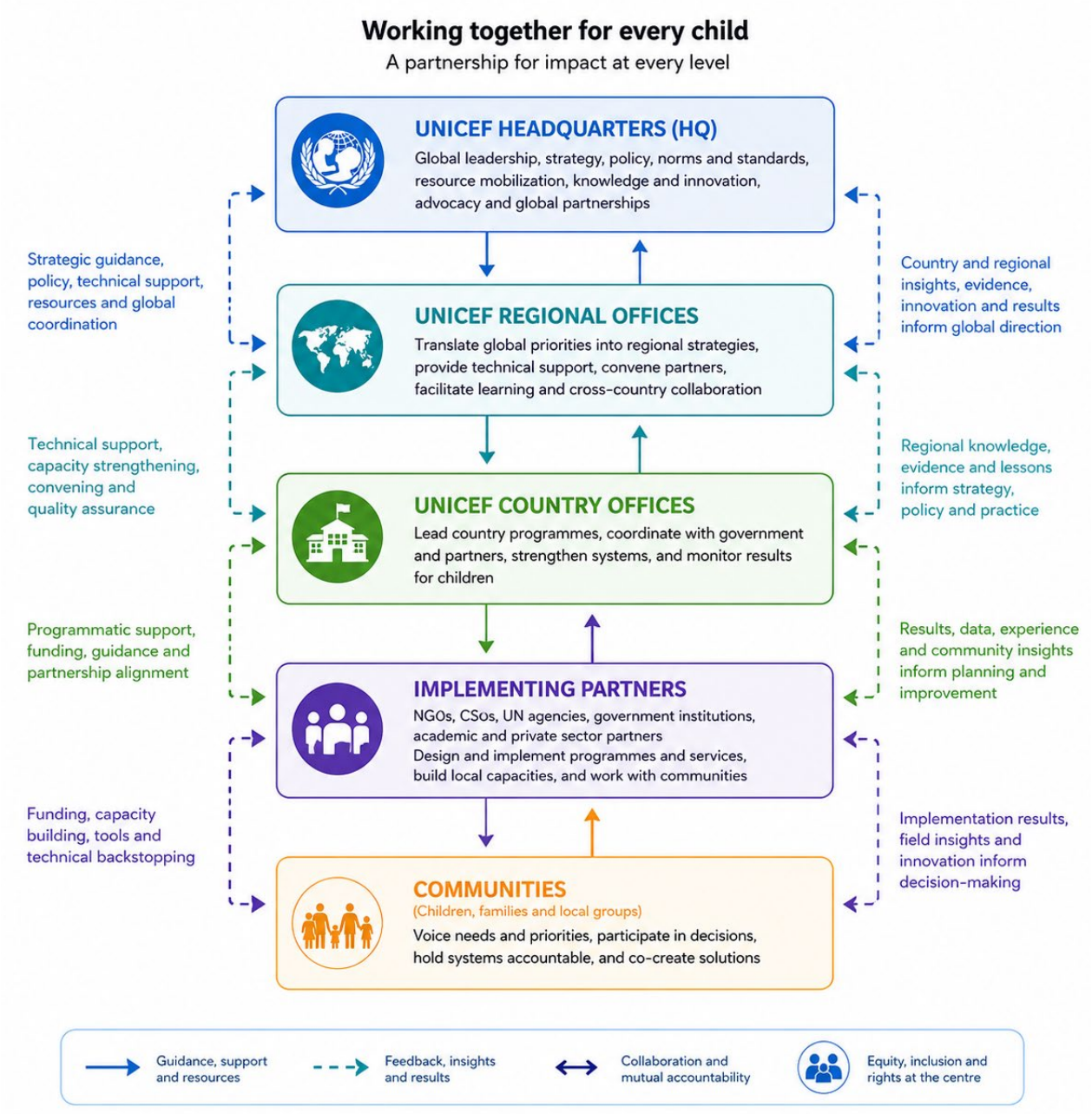
Table 1. Users and expected uses of the evaluation

Evaluation users	Expected uses of the evaluation (how the findings and recommendations will be used)
UNICEF Executive Board	▶ Review evidence on status of AAP work, learn about strengths, gaps and areas of improvement to inform future policy and prioritise investment.
▶ **EMOPS** ▶ **UNICEF PG (now GPD)** ▶ **DAPM (now OSE)** ▶ **PFP** ▶ **PPD** ▶ **DHR (now DPC) and SD**	▶ Inform context-/sector-/crisis-specific (as relevant) AAP programming, advocacy and operational decisions to ensure that the voices of the most vulnerable are heard and their needs are met. ▶ Guidance on Feedback Management aimed to strengthen country office capacity to collect and act on feedback and complaints provided by affected populations.
Other UNICEF Offices/ Divisions, as appropriate	▶ Inform human resources decisions concerning the organization's staffing and budgeting in AAP to realistically meet the vision and commitment for accountability to people. ▶ Mainstream good practices and lessons learnt in future AAP programming and technical assistance. ▶ Strengthen AAP policies, procedures, practices and systems (including technical support to Regional Offices and Country Offices). ▶ Inform how regular programming can better integrate AAP and how to further operationalize linkages between humanitarian and development programming.
UNICEF Country Offices, Regional Offices[23](including, but not limited to, senior leadership teams; programme teams; emergency section teams; emergency technical teams; emergency management teams; and country management teams)	▶ Inform context-/sector-/crisis-specific (as relevant) AAP programming, advocacy and operational decisions to ensure that the needs of the most vulnerable are met. ▶ Mainstream good practices and lessons learnt in future AAP programming and technical assistance. ▶ Inform how regular programming can better integrate AAP and how to further operationalize linkages between humanitarian and development programming.

Clusters	▶ Inform how cluster coordination and leadership can better operationalize AAP in humanitarian responses.
Affected Populations	▶ Make their voices heard during the evaluation process and, by so doing, refine their ability to contribute to planning, implementation and decision-making processes within the scope of programmes on the ground, which are intended to promote and protect their rights.
Other UN agencies, NGOs, donors and interested Member States	▶ Build on the findings/good practices identified in the evaluation, with a view to increasing the effectiveness and efficiency of current and future responses.

Below is a succinct visual representation of the evaluation's key stakeholders and their respective mutual links.

Figure 2. Evaluation users and uses



Evaluation objectives

The evaluation addressed the following five objectives:

- It assessed how effectively UNICEF's investments, including the Global AAP Strategy and different regional approaches, have influenced internal enabling factors, such as policies, guidance, leadership and capacities, thereby, supporting the widespread adoption of AAP practices across country offices.
- It examined how comprehensively UNICEF's strategic commitments to AAP have been implemented in country office programmes across various regions.
- It evaluated the impact of AAP initiatives on programme outcomes and affected populations.
- It identified and documented good practices and learning from the implementation of AAP.
- It provided actionable recommendations to enhance the integration and effectiveness of AAP in future programmes.

Objectives one and two have been slightly adjusted from those set out in the original evaluation Terms of Reference (ToR), following consultations during the Inception phase. These adjustments broaden the initial focus on policies and guidance to include leadership and capacities, recognizing their critical role as internal enabling factors that shape UNICEF's approach to AAP.

Evaluation scope

Thematic scope

The thematic scope of the evaluation was informed by UNICEF's seven AAP pillars, as outlined in the 2020 UNICEF AAP Handbook. Consultations conducted during the inception phase focused on which of these pillars had been given more emphasis under the banner of AAP and would be feasible to evaluate. Decisions on thematic coverage also considered other recent and ongoing complementary processes, which were already looking at individual pillars, including UNICEF's 2024 PSEA Audit, the 2025 Localization Evaluation, and the 2025 OCHA AAP Evaluation. These efforts provided important context, ensuring that the evaluation avoided duplication and focused its scope where it could offer unique insights and added value.

As such, the evaluation placed greater emphasis on the three AAP pillars included as the commitment to AAP within UNICEFs CCCs in Humanitarian Action (See Table 2) and assessed the approaches and processes by which the organization has institutionalized these commitments.



Table 2. AAP Pillars (selected) and the CCCs

Selected AAP pillars (from UNICEF's AAP Handbook 2020)	Commitment to AAP within UNICEF's CCCs in Humanitarian Action
#1 Participation: Access to safe, appropriate and equitable opportunities to take part both in decision-making and in the processes and activities led by organizations right across the programme cycle.	▶ Commitment: "Ensure that affected children and families participate in the decisions that affect their lives, are properly informed and consulted, and have their views acted upon." ▶ More specifically, (four benchmarks): "All Country Offices, with the support of regional offices/ Headquarters (HQ), establish processes to ensure that affected and at-risk populations, including children and women: ▶ Participate in humanitarian planning processes and in decisions that affect their lives. ▶ Are informed about their rights and entitlements, expected standards of conduct by UNICEF personnel, available services, and how to access them through their preferred language and methods of communication, as per the Sphere standards[24] . ▶ Have their feedback systematically collected and used to inform programme design and course correction. ▶ Have access to safe and confidential complaint mechanisms".
#2 Information and communication: Equal access to safe, appropriate life-saving information, and information on rights and how to exercise them, and appropriate two-way communication channels between aid providers and communities, taking into consideration the specific context and preferences of different groups of people.	
#3 Feedback and complaints: Secure and appropriate means for affected populations to provide feedback and to complain about their experiences and perspectives on UNICEF's programmes and responses, including on sensitive issues. These mechanisms ensure that information is regularly collected, analysed, integrated into decision-making and acted on, and that the results are communicated back to people in a meaningful dialogue.	

Geographical scope

This is a global evaluation, with a whole-of-organization perspective, encompassing all three levels of UNICEF: HQ, regional offices, and country offices. Ten UNICEF offices were purposively selected for in-person and desk-based country and regional case studies. These were selected based on the availability of evidence and to reflect a range of regional, programmatic, and operational contexts. Details on the selection criteria and methodology are included in Section 2.4.

In addition to the selected country and regional case studies, the report also includes examples from other countries. These references emerged through regional consultations, global key informant interviews (KIIs), a literature review and a document analysis. In several instances, staff with experience across multiple countries shared comparative insights based on their previous postings, which further enriched the evidence base. While these countries were not part of the formal case study selection, their inclusion helped broaden the perspective of the evaluation, and their contributions are mentioned throughout the report as appropriate.

Chronological scope

The evaluation covered the period from the publication of the Revised Core Commitments for Children (2020), from which the Global AAP Strategy (2022–2025) stems. A special emphasis was given to the period since 2022, after the publication of the AAP Strategy 2022–2025.



© UNICEF/UN0720060/Bashar Al-Khedar

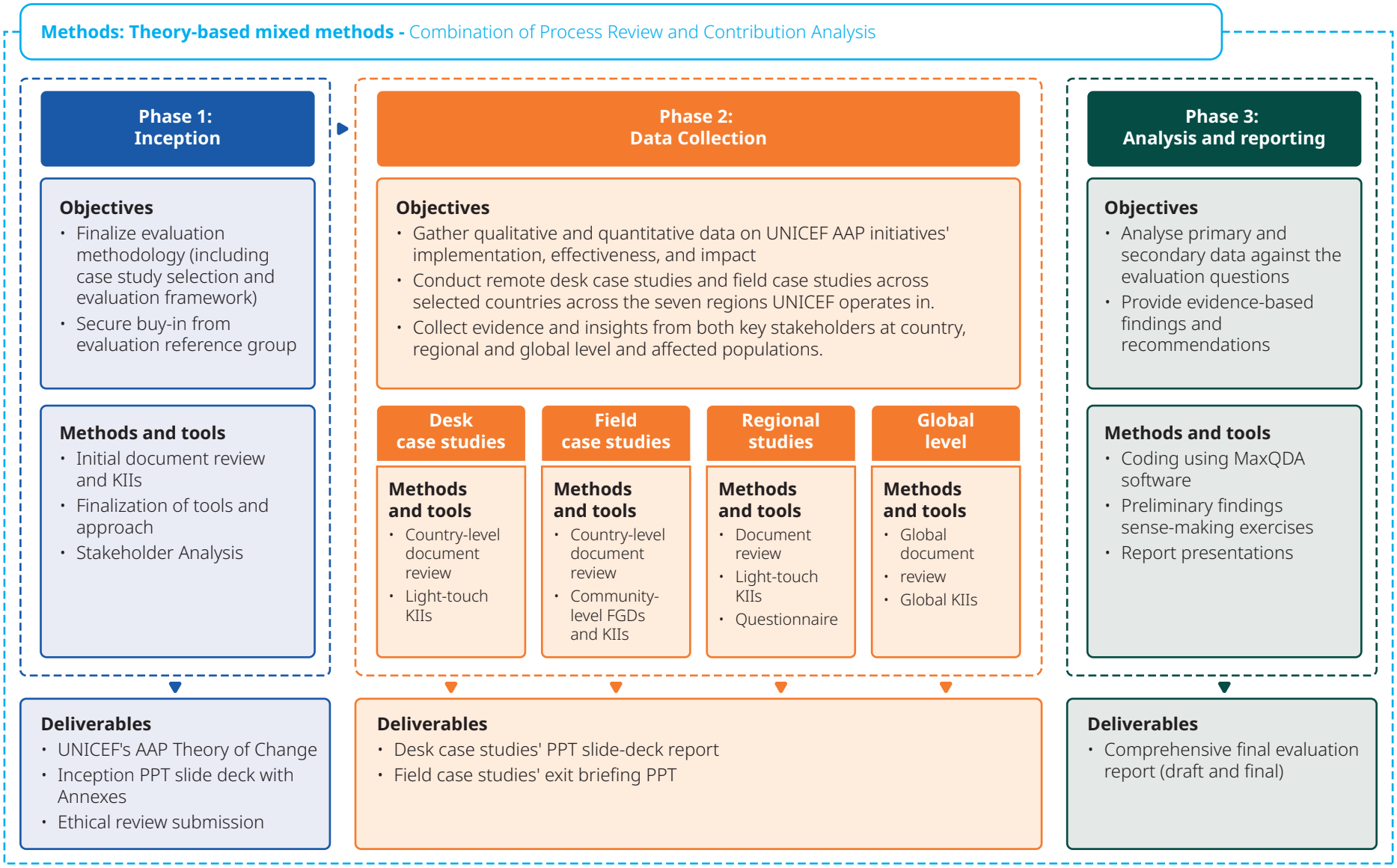
2 Methodology

Evaluation approach

The evaluation team developed a Theory of Change (ToC) at the start of the assignment that helped visualize the different stages (and associated results) of the AAP institutionalization process in UNICEF. (see Section 1.6.1 and Annex 3). An Evaluation Matrix (EM) (see Section 1.6.4 and Annex 2) was also developed to deepen the analysis and test the ToC.

By using the ToC as the guiding analytical framework (**theory-based evaluation approach**), the team employed a variety of quantitative and qualitative data collection methods (**mixed methods**) to address the different evaluation questions. Figure 2 summarizes the overall evaluation approach.

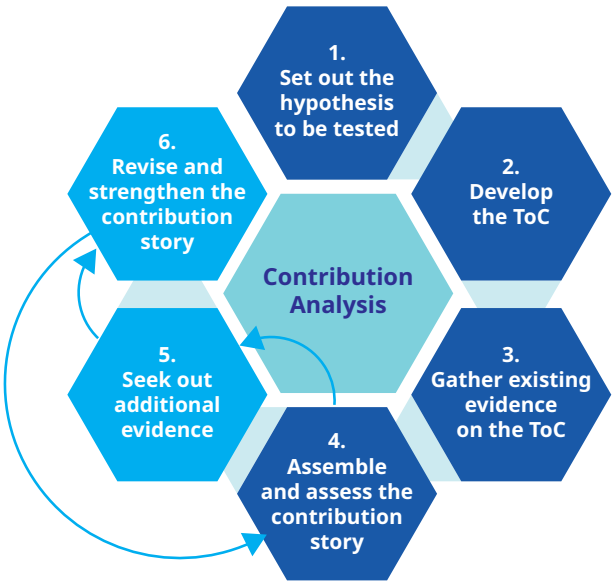
Figure 3. Evaluation approach



A **process review approach** was applied to examine how UNICEF country offices operationalized AAP commitments. This included assessing how community feedback was gathered and used to inform decision-making, and how complaints were reviewed and responded to. The process review enabled the evaluation to assess the appropriateness and effectiveness of AAP-related processes, particularly those concerning the flow and use of information from affected people.

Contribution analysis was then used to assess the extent to which global and regional investments in AAP contributed to strengthening internal enabling factors and to catalysing action at the country level. The evaluation traced contributions both backward, from observed changes to potential drivers, and forwards, from global and regional efforts to country-level outcomes. This included data collection across global, regional and country levels through KIIs; document reviews; and monitoring data. The ET followed the six steps of contribution analysis. Steps one and two, developing the ToC, were completed during Inception. Step three involved data collection through case studies, KIIs and document reviews. Steps four to six were iterative, allowing for the triangulation of findings and refinement through the entire evaluation.

Figure 4. Six steps of Contribution Analysis



A **participatory approach** was embedded throughout the evaluation. This included engaging a broad range of stakeholders; UNICEF staff; partners; and, to the extent possible, affected communities through KIIs, focus group discussions (FGDs) and participatory analysis. Stakeholders were also involved in reviewing and shaping the preliminary findings through country-level debriefs, community feedback loops and global sense-making sessions. Community rights-holders participated directly in the evaluation through structured consultations in Venezuela (81 participants, including women leaders, indigenous community members, and persons with disabilities). Participatory validation was conducted at the end of each FGD. In other case study contexts, access to community-level engagement was not possible; community perspectives were therefore captured indirectly through UNICEF staff interviews and document review.

Theory of Change and Evaluation Questions

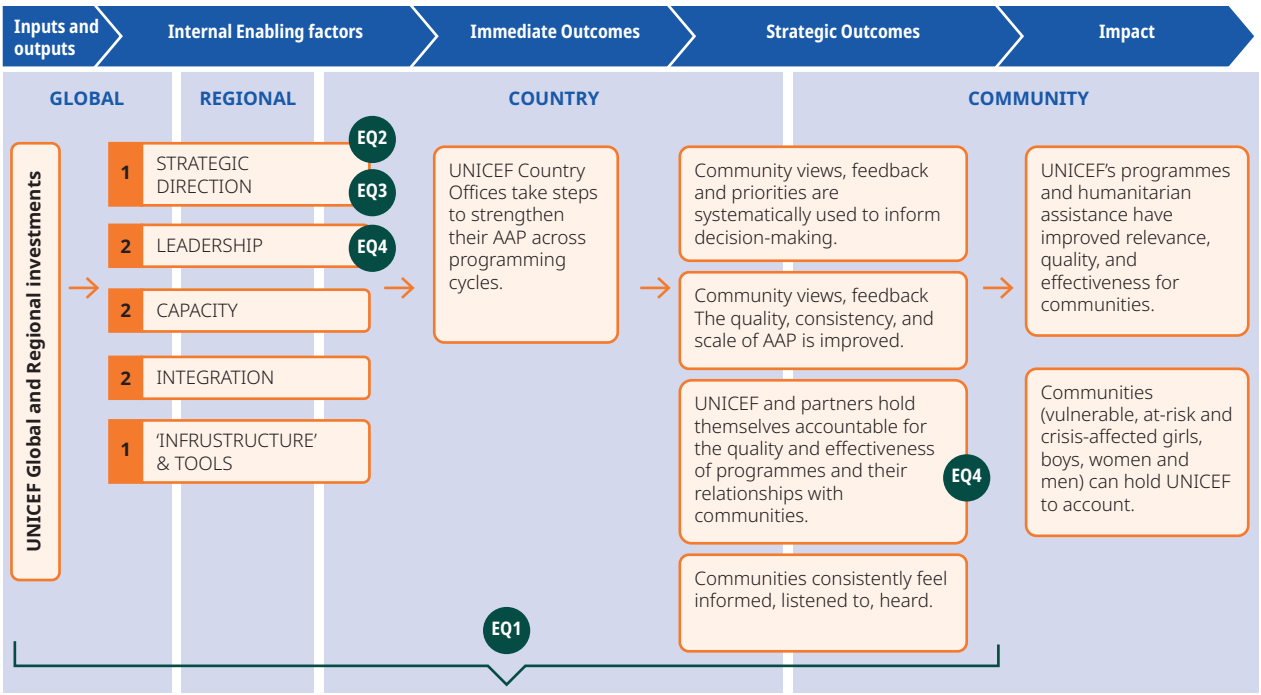
Theory of Change

The ToC for UNICEF's institutionalization of AAP sets out the pathways by which UNICEF investments at the global and regional levels may contribute to progress and changes at a country level, as well as how UNICEF works with communities across its programming. This was developed by the ET during the inception phase, drawing on UNICEF's AAP Strategy (2022–2025); UNICEF's AAP Handbook (2020); the global AAP Audit (2023); materials on key areas of work led by UNICEF's AAP Global Team; and insights from consultations during inception. The ToC was then used to refine and frame the EQs and develop data collection tools, ensuring key aspects of the ToC were covered by the evaluation. A summary diagram of the ToC is presented below, in Figure 4, with the four EQs (introduced in Section 1.6.3) highlighted in green in different parts of the ToC.

The ToC for the institutionalization of AAP across UNICEF (see Figure 4) proposes the following:

- **IF** the needed internal enabling factors are in place at global, regional and country levels (see Box C for details on the internal enabling factors), **THEN** country offices will take steps to strengthen their AAP (immediate outcomes).
- **AND**, at the strategic outcome level, this will lead to community views, feedback and priorities being systematically used to inform decision-making, improved quality, consistency, and the scale of AAP, and it will lead to UNICEF and partners holding themselves to account for the quality and effectiveness of programmes and their relationships with communities. **FURTHER**, communities will consistently feel informed, listened to and heard (see Box D for more details on intermediate and strategic outcomes).
- **ULTIMATELY**, at impact level, this will contribute to the relevance, quality, and effectiveness for the communities engaged in UNICEF's programmes and humanitarian assistance, and will enable communities (vulnerable, at-risk, and crisis-affected girls, boys, women and men) to hold UNICEF to account.
- **THEREFORE**, to further institutionalize AAP and strengthen practice at the country level, UNICEF's investments at global and regional levels (inputs and outputs) need to bolster the internal enabling factors, across different levels of the organization.

Figure 5. Theory of Change for the institutionalization of AAP across UNICEF (simplified version). [25]



The seven AAP Pillars (as shown in Figure 1) are reflected throughout the ToC, from the internal enablers to impact. In the ToC, "communities" specifically refers to the girls, boys, men, women, and marginalized groups that UNICEF works with, either directly or indirectly. This also includes marginalized communities and people affected by and at risk of emergencies.

The pathways for change are underpinned by several assumptions, which go beyond the five individual internal enabling factors already included in the ToC. Internally, successful AAP is underpinned by the assumptions that UNICEF's processes and systems allow for and enable community-led participatory approaches and provide the flexibility needed for programme adjustments. At a partnership level, there is the assumption that UNICEF, with programme partners, can find solutions to the multiple layers and requirements for AAP. From a community perspective, there is the assumption that communities are willing and able to participate and share their views, priorities and perspectives. More details on the assumptions are included in Annex 3. Boxes C and D, below, provide more details on key stages of the ToC, as shown in Figure 4 and explained in the text above.

BOX C

Internal enabling factors – more details

A prerequisite for strong, consistent practice in AAP across UNICEF operations is having internal enabling factors in place within UNICEF across its global, regional, and country levels. Importantly the ToC recognizes that the relationship between the global, regional and country levels in furthering UNICEF's AAP is not linear. For instance, while global leadership for AAP might inform regional and country levels, individual COs may have strong leadership for AAP in place, independent of global or regional influences, which is contributing to localised AAP practices. The ToC sets out the following five internal enabling factors:

1. **Strategic direction:** This provides clarity on what AAP means for UNICEF's work. It includes articulating the required synergies and coherence between AAP and UNICEF's other cross-cutting, people-centred approaches, and in the application of AAP in UNICEF's work going beyond humanitarian responses.
2. **Leadership:** UNICEF leaders at all levels (HQ, regional office and country office) actively promote and value AAP across all operations. They ensure that the necessary resources, structures and internal coordination are in place for a coherent approach to AAP across UNICEF.
3. **Capacity:** UNICEF has identified and clearly communicated the necessary and specific human resources required to strengthen AAP, and staff and partners possess the articulated knowledge, skills and attitudes needed to integrate strong AAP practices into all support programmes and activities. Continuous capacity-building is ensured, and staff at HQ, regional office and country office levels are equipped to uphold AAP.
4. **Integration:** UNICEF's relevant policies and procedures guiding country, programme, and humanitarian planning, monitoring and evaluation (including work with partners) mandate, encourage and facilitate AAP. Additionally, programmes and individuals are rewarded for prioritizing people-centred and AAP approaches, fostering a culture of accountability and inclusivity.
5. **'Infrastructure' and tools:** The necessary infrastructure and tools are available for country offices to address common challenges and gaps and for facilitating effective AAP across all operations. This includes, for example, leveraging digital tools and developing platforms to enable AAP.

BOX D

Immediate and strategic outcomes – more details

The immediate outcomes state that if there are sufficiently conducive internal enabling factors, then country offices will be motivated and enabled to take steps towards strengthening their AAP, including adopting approaches for AAP enabling the following:

- Communities are routinely informed about UNICEF and UNICEF-supported programmes.
- The views, perspectives, priorities, feedback and complaints from communities are actively sought out and prioritised throughout the UNICEF programme cycle. This also connects to localization, ensuring that community voices are central to programme design and implementation.
- The risks associated with UNICEF-supported activities, particularly those affecting groups in situations of vulnerability, are routinely identified, mitigated and addressed, with a strong focus on sexual exploitation and abuse (SEA).

Furthermore, at a strategic-outcome level, conducive internal enabling factors will also mean country office efforts to strengthen AAP and the approaches adopted for AAP are effective, enabling the following:

From the perspective of UNICEF and its partners

- Data on communities' views, feedback and priorities are systematically used to inform decision-making, ensuring that programmes are tailored to the actual needs and preferences of the communities they aim to serve.
- The quality, consistency and scale of AAP is also significantly improved (quality, in this context, means that approaches are inclusive and accessible, allowing UNICEF to hear the voices of more marginalized groups, such as women, children and people with disabilities). Efforts, such as approaches for hearing feedback and complaints, are safe for people to report sensitive issues, including but not limited to reports of SEA. Efforts are also coordinated to minimize duplication and foster coherent, country-office-wide approaches, ensuring that resources are used efficiently and effectively.
- Additionally, UNICEF and its partners hold themselves accountable for the quality and effectiveness of their programmes and their relationships with communities.

From the perspective of communities

- Communities consistently feel informed, listened to and heard through the following:
  - Equitable opportunities to access, participate in and contribute to UNICEF supported programmes and services.
  - Receiving the information they need to make informed decisions.
  - Being able to provide feedback and complaints about the quality and effectiveness of programmes through accessible, safe and appropriate means.
- This inclusive approach ensures that all voices, especially those of marginalized groups, are considered in the decision-making process and that communities feel empowered to influence the programmes that affect their lives, fostering a sense of ownership and trust in UNICEF's efforts.

Process of refining the evaluation questions

The EQs, as set out in the ToR, were refined during the inception phase, guided by the ToR, consultations with key stakeholders, and a targeted literature review. While the original ToR included 30 EQs, the ET worked to prioritise and structure these into a coherent framework of overarching EQs and sub-questions. This allowed for a more focused and manageable approach, aligned with the available time and resources. A detailed mapping of each original question against the final EM is provided in Annex 2, along with explanations for any changes made.

Notably, this process intensified the focus internally, on AAP within UNICEF, rather than on UNICEF's engagement at the interagency level. This deliberate decision was based on the ToC elaboration, which showed separate pathways for the internal institutionalization of AAP within UNICEF vs. external interagency contributions to sector-wide collective AAP. As such, a meaningful assessment of the interagency dimension would have required a separate set of detailed EQs and sub-questions, and consultations with a broad range of external stakeholders. As such, the interagency aspect was retained in a light-touch manner under EQ1, with country, regional and global practices highlighted where relevant, though not fully evaluated.

Other questions were excluded for reasons such as overlapping with other ongoing evaluations (e.g., emergency preparedness and localization); being outside the scope of AAP (e.g., resilience-building); or requiring discrete, standalone studies (e.g., alignment with CHS, development of new AAP metrics and policy fitness assessments). In some cases, questions were reoriented to focus more directly on AAP-related mechanisms, for example, instead of assessing broad programme responsiveness, the evaluation explored how communities felt informed, listened to and able to hold duty bearers accountable. These refinements ensured that the evaluation remained focused, actionable and aligned with UNICEF's strategic priorities and operational realities, while still capturing a wide range of perspectives and practices (see Annex 2 for more details).

Main evaluation questions and what they are seeking to answer

The EQs are structured to follow the logic of the ToC. This approach allowed us to test the interrelationship between the country, regional and global levels, while also recognizing that progress is not necessarily linear (from global–regional–country). The four main EQs were as follows:

EQ 1. How effective and appropriate have UNICEF's strategies and efforts been in influencing its practice in AAP?

This EQ explored UNICEF's strategies and efforts to promote AAP across global, regional and country levels. It examined the extent to which these efforts have collectively contributed to strengthening AAP within the organization. This included a summation of initiatives undertaken at country offices and regional offices to advance AAP, as well as evidence of country offices recognizing its importance and taking steps to enhance their AAP practices. The evaluation also considered how community feedback and data have been used to inform programming and drive course corrections. Finally, it assessed the influence of global and regional strategies on shaping UNICEF's overall approach to AAP and the extent to which these have led to tangible changes in practice.

EQ 2 and EQ 3. To what extent is AAP understood to be relevant/applicable to UNICEF's work beyond humanitarian action? To what extent is there coordination and integration at regional office and country office levels between UNICEF efforts for mainstreaming AAP and other people-centred approaches?

Questions 2 and 3 explored how country offices are applying AAP in the face of recognized challenges: AAP beyond emergency response work and coherence between AAP and other people-centred approaches. At an organizational level, it was too soon to evaluate this - instead, the evaluation sought to look at staff understanding and views, and examples of practice from country offices and regional offices. For both questions, the evaluation sought to understand the enablers and barriers faced and strategies for overcoming these for greater integration of AAP in UNICEF development programming and greater synergy (rather than competition) among different people-centred approaches.

EQ 4. To what extent are UNICEF's global, regional and country leadership motivated to take on AAP as a key programming approach?

The evaluation looked for evidence of how AAP is/is not a priority for leadership and management, and how it is actively championed, and why. It also identified the main incentives and barriers faced by leaders in applying AAP as a key programming approach.

Summary Evaluation Matrix (EM)

The EQs were further elaborated by the ET in an EM, which detailed the EQs, judgment criteria, sources of evidence, and the alignment of each question with the Development Assistance Committee (DAC) criteria (as provided by the ToR). The full EM is available in Annex 2. The summary below distils the key elements of the matrix into a more concise and accessible format.

Table 3. Summary of EM against DAC criteria

Evaluation question	Judgment criteria (JC)	DAC criteria
1. How effective and appropriate have UNICEF's strategies and efforts been in influencing its practice in AAP?	JC1a. Summation of efforts/strategies made at global, regional and country level to advance AAP. JC1b. Evidence/examples of country offices recognizing the importance of AAP and taking action to strengthen AAP. JC1c. Assessment of the extent to which community data/voices have been used to inform programmes and course corrections. JC1d. Extent to which global and regional strategies/efforts have contributed to changes in UNICEF's AAP. JC1e. Assessment of the sustainability of progress and changes.	Effectiveness, appropriateness and relevance (of UNICEF's global and regional strategies and efforts)
2. To what extent is AAP understood to be relevant/applicable to UNICEF's work beyond humanitarian action?	JC2a. Extent to which UNICEF regional offices/ country offices perceive AAP as relevant and applicable to UNICEF's development programming, and why. JC2b. Understanding of the enablers and barriers faced by regional office/country offices, and strategies for overcoming these to achieve greater integration of AAP in UNICEF development programming.	Connectedness/ coherence (within UNICEF) and relevance
3. To what extent is there coordination and integration at regional office and country office levels between UNICEF's efforts for mainstreaming AAP and other people-centred approaches?	JC3a. Examples of how regional office/country office AAP efforts are coordinated and interact with other people-centred approaches. JC3b. Understanding of the enablers/barriers faced by regional office/country offices, and strategies for overcoming these to foster greater synergy (rather than competition) among different people-centred approaches and for promoting an inclusive culture.	Coordination (within UNICEF) feeding into efficiency/ effectiveness
4. To what extent is UNICEF's global, regional and country leadership motivated to take on AAP as a key programming approach?	JC4a. Evidence of how AAP is/is not a priority for leadership and management and is actively championed, and why. JC4b. Examples of how UNICEF weighs community voice vs. other metrics in holding management teams accountable for programme results. JC4c. Identification of the main incentives and barriers faced by leaders in applying AAP as a key programming approach.	Efficiency (internal)

***** Key reference standards used for each EQ include CSI benchmark achievement rate, CCC compliance indicators, and AAP Strategy 2022–2025 targets.

Methods and data collection tools

The evaluation employed a **mixed-methods approach**, combining quantitative and qualitative data collection methods and sources. While qualitative methods were central to understanding processes and perspectives, quantitative data, such as country office indicators and feedback matrices, were used selectively to identify patterns and support findings.

A total of **274 stakeholders** were involved in the evaluation through KIIs and FGDs. Figures 5 and 6 provide a breakdown of the types of stakeholders interviewed and their respective locations. KIIs were conducted in Arabic, English, French, Ukrainian and Spanish.

Figure 6. Number of people interviewed per case study

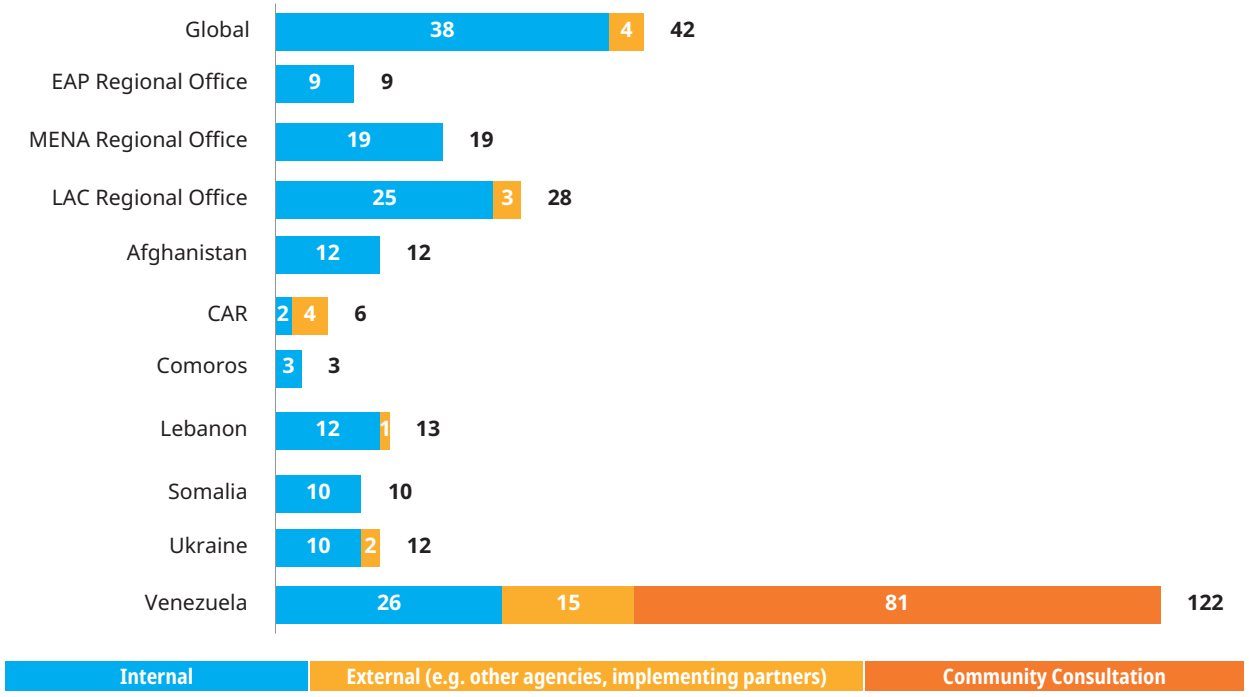


Figure 7. Number of people interviewed in KIIs and FGDs by HQ, regional, country and community level

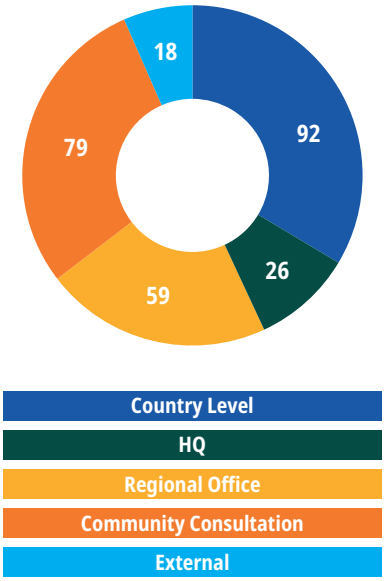


Figure 8. KIIs disaggregated by gender

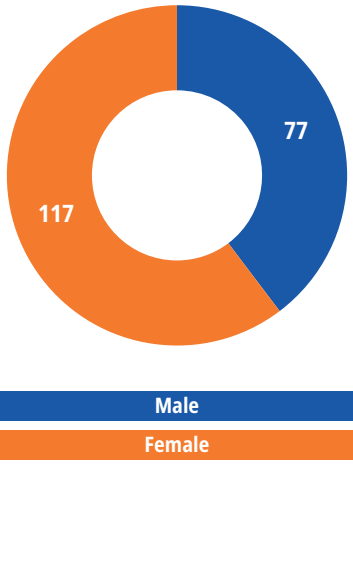
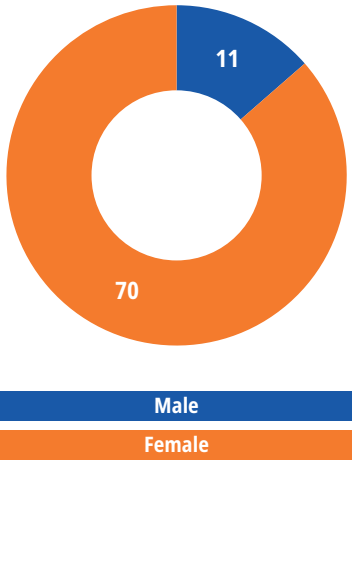


Figure 9. Community consultation in Venezuela disaggregated by gender



Country case study approach (in-person and desk-based): A key component of the evaluation was the country case study design. The evaluation focused on AAP practice at country level as the basis for assessing the organization-wide factors critical to the institutionalization of AAP. Data collection included one in-person case study, four country desk case studies, and two light-touch desk studies, which, together, formed a key component of the evaluation's evidence base (see more details in Section 2.3 Sampling). These case studies served as a crucial data source for the evaluation, forming the foundation for unpacking the broader organizational factors influencing the institutionalization (or lack thereof) of AAP. Additionally, the ET worked with country staff to understand whether and how global and regional investments contributed to stronger AAP practice at the country level.

Key data sources for the case studies included the following:

- **KIIs:** For all of the case studies, the team conducted interviews at the country level with a variety of key stakeholders, including key UNICEF staff and selected partners.
- **Country document review:** This involved reviewing and analysing country strategies, plans, results and reports. A comprehensive list of requested documentation and data was shared in advance and discussed with the respective country offices.
- **FGDs with affected communities, including participatory tools:** For the in-person case study in Venezuela, the team conducted FGDs and consultations with communities, engaging in dialogue and gathering feedback, see Box E, below, for more details.

BOX E

Innovative methods – strengthening evidence through direct engagement in Venezuela

In-country data collection in Venezuela played a pivotal role in enriching the overall findings and strengthening the evaluation's evidence base. As the only case study where direct engagement with communities was possible, it offered a unique and innovative opportunity to explore how UNICEF's accountability mechanisms were perceived and experienced on the ground. In the current climate of shrinking resources, keeping communities at the centre of evaluation efforts is essential, especially for institutional, organization-wide evaluations.

The evaluation team consulted 81 community members, including 70 women and 11 men, across a mix of urban and rural locations selected with support from the implementing partner. The high number of women participants reflects the inclusion of community leaders, teachers, trainers, and other individuals actively involved in project implementation, roles that were predominantly held by women. The team also conducted two focus group discussions with indigenous communities, ensuring diverse perspectives were captured. Interviews were held in easily accessible community centres to accommodate people with disabilities. The Venezuela experience offered important entry points for understanding what works and what could be improved in terms of access to information, opportunities to share views, influencing programme design, raising concerns, and interacting meaningfully with service providers (see Section 3.1.3 on community voices).

While the findings from Venezuela were not universally applicable across other contexts, they provided valuable insights into how communities felt informed, aware of programmes and empowered to hold UNICEF accountable. A tailored community engagement methodology was developed specifically for this consultation, designed to reflect the local context and ensure the voices of marginalized groups, including indigenous communities, were heard. This approach included iterative participatory analysis (see Section 2.4 and Annex 6.3. for more details), allowing community members to actively contribute to data triangulation and validate findings from UNICEF staff interviews. Beyond community engagement, the opportunity to conduct in-person meetings with UNICEF staff in-country proved equally beneficial. Being fully immersed in the local context enabled the ET to gain deeper insights into operational realities, build trust with stakeholders, and gather nuanced perspectives that would have been difficult to capture remotely. This direct engagement added invaluable depth to the dataset and helped ensure that the evaluation was grounded in lived experiences.

Regional case studies: The team conducted three regional case studies (Eastern Asia and the Pacific; Latin America and the Caribbeans; and Middle East and North Africa). These aimed to explore successes, achievements and strategies for institutionalizing AAP at the regional level, as well as the contributions and results stemming from UNICEF's global investments and strategies for AAP. Regional case studies also included limited interviews with a minimum of one country verification per region to explore further country office and regional office practices. Moreover, AAP country office focal points completed a survey that collected information across all EQs.

Global KIIs: KIIs were conducted with global and regional stakeholders, both internal and external to UNICEF. These KIIs focused on UNICEF's contribution to AAP and UNICEF's global efforts for mainstreaming AAP.

Global document and monitoring data review: the ET reviewed global evidence and analysed the available global data to capture learning from existing evaluations, assessed how AAP was represented across UNICEF's strategic and policy landscape, and identified existing sources of evidence reflecting AAP results from global monitoring systems. The review also examined how AAP investments were documented. Despite limited time for this task, the team included global and regional guidance and practice documents, as well as data from CSI reporting and audit reports.


© UNICEF/UNI964788/Fouad Choufany

Sampling

The ToR specified that the primary focus of data collection should be at the country level and should consider the breadth of country office structures and programming across diverse operational contexts. Recognizing that much of UNICEF's AAP efforts have historically concentrated on humanitarian settings, there was also emphasis given within the ToR on focusing on countries with current or past humanitarian response work. The design specified 10 case studies: six remote country (desk) studies and four country visit studies, spread across all of UNICEF's seven regions to provide a whole-of-organization perspective. The final decisions on case studies were taken by the EO. During inception, an analytical process was conducted to determine what combination of countries might constitute this whole-of-organization perspective. This process was based on a document review, including previous evaluation reports, and on KIIs with key stakeholders[26]. Based on the initial criteria in the ToR and the analysis undertaken during inception, recommendations for case study contexts were made in the Inception Report submitted at the end of January 2025. It was expected that the case studies would be conducted in March and April 2025.

The primary criteria informing the purposive selection of case studies included those countries that met the following criteria:

- Identified as having good AAP practice to evaluate change resulting from this, the extent to which the practice is cross-office and what enabling factors exist.
- Identified as having a range of AAP practices, which may include but extend beyond CFMs.
- Staff leading AAP are situated in different sections in the country office (e.g., SBC or Planning, Monitoring, Evaluation and Research) to explore the implications for cross-country-office work.
- Access to communities was possible for the ET to conduct independent community engagement. This element of the criterion was heavily weighted – seen as essential in all country-visit contexts and as desirable in all remote case studies.
- Were representative of the geolocations, contexts, and approaches where UNICEF is active.

Other significant considerations and criteria that supported the case selection were as follows:

- Contexts that were indicative of a typology of countries organized by emergencies (including subcategory of L1/L2/L3 responses); where the nexus approach is applied; and focused on upstream activity, albeit responsive to periodic disasters.
- Contexts with an active appeal.
- Contexts with potential to provide learning opportunities (related to both positive practice and to barriers, with additional weighting where good practice can be evaluated).

Contexts were generally not prioritised for inclusion if they met any of the following criteria, to avoid duplication of effort and evidence, and to minimize the burden on teams:

- Were already covered by the 2024 AAP Audit.
- Had been included as a case study in a recent, relevant UNICEF evaluation (e.g., localization or emergency preparedness), or were the subject of a recent L3, L2 or other evaluation that covered AAP.
- Were selected as a case study in the 2025 OCHA global AAP evaluation.

Additionally, consideration was given to whether the country office was available to host a case study in spring 2025; whether security and ethical approval was possible for a visit; and whether appropriate, skilled, in-country consultants could be available at short notice. These latter factors became more significant as UNICEF country offices became absorbed from February 2025 onwards in adapting to the changing global financing crisis.

As a result of the complexity and change that the country offices were faced with in spring and summer 2025, implementing the original approved sample, designed to meet all criteria, became increasingly challenging. Careful consideration by the EO and the ET, in consultation with the regional offices, led to a continuous process of reformulating the sampling approach. This led to an agreement to focus on three regions (EAP, LAC and MENA); to shift the AAP emphasis from country-office to regional-office level; to reduce country visits and community engagement to one context (Venezuela); and to customize the agreed remote desk approach to context. The latter enabled more detailed data collection across all EQs in some contexts (Afghanistan, Somalia, Ukraine, Lebanon), and a more focused approach for others, where not all EQs were considered to the same depth, (namely Central African Republic (CAR) and Comoros, please see Table 4 for more details). The quality and consistency of the approach was maintained through a structured list of KII questions addressing the EQs, and a uniformity of positions within UNICEF were selected for interviews across the country offices and regional offices.

All country office studies were prefaced by a review of the documents provided by the country offices. All participating regional offices and country offices were invited to a debrief, where individualized findings were presented and discussed. In total, 10 case studies were conducted. Please note that case studies were not intended as standalone evaluations; therefore, findings, conclusions, and recommendations in the final report are presented at an aggregated level to support cross-learning across HQ, regional, and country contexts.

Figure 10. Map of case studies

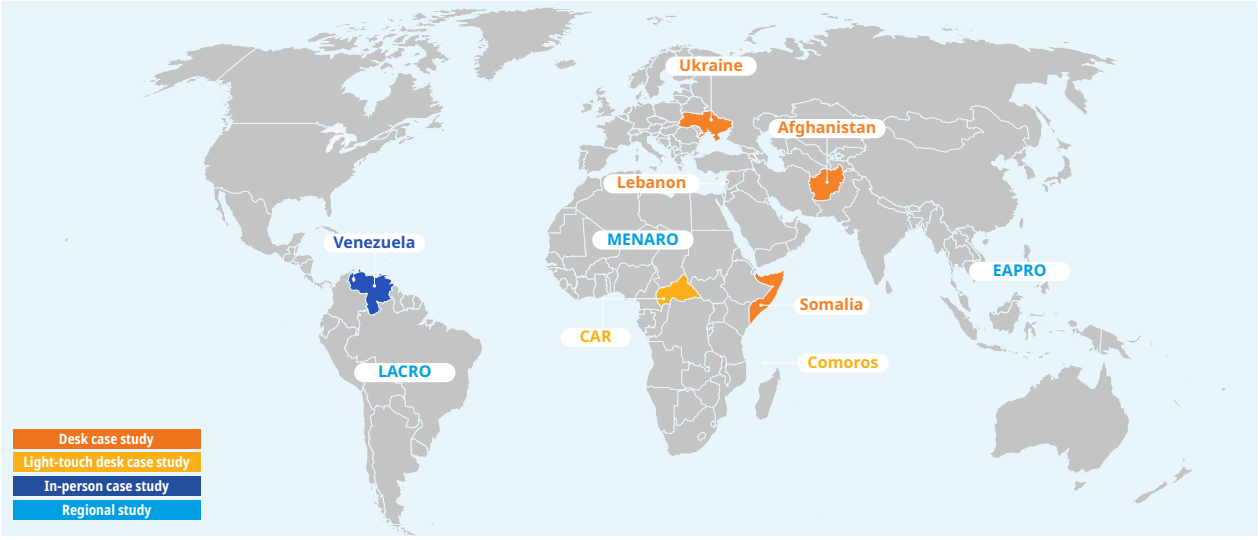


Table 4. Details of case studies by type and country office

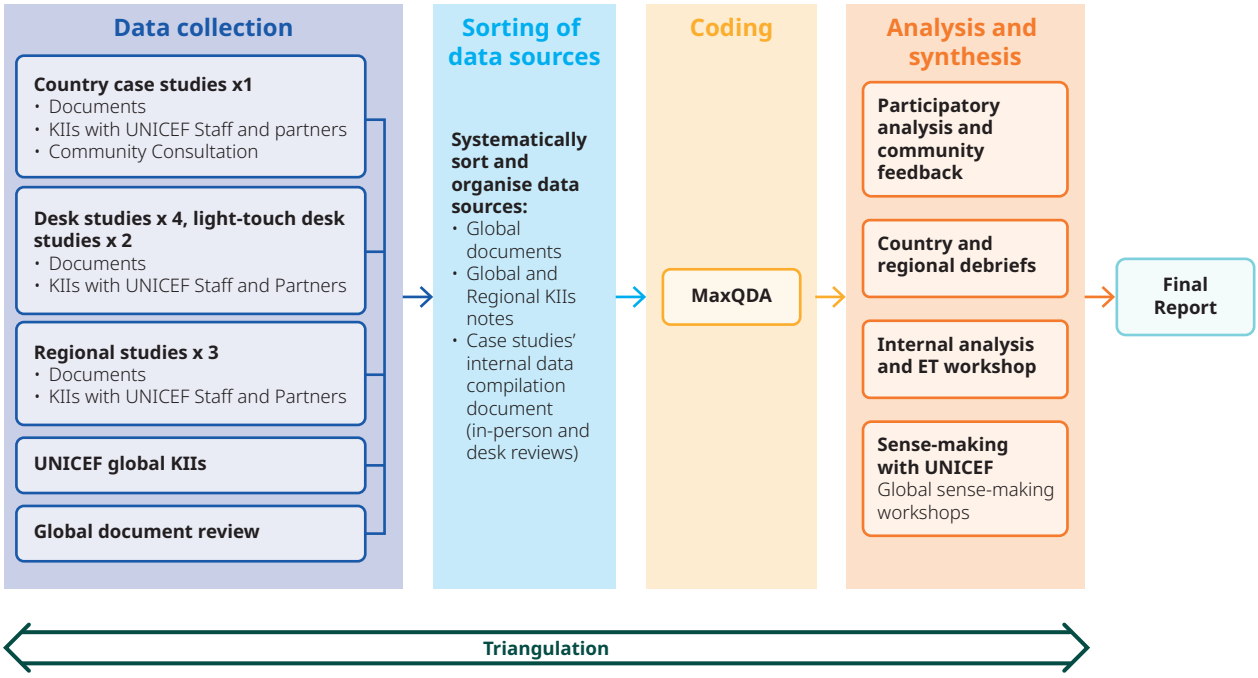
Case Study Type	Office	Additional Information/Focus
Regional Office	EAP Regional Office	KIIs were conducted across the regional office. AAP country office focal points completed a survey that collected information across all EQs. A FGD was held with AAP country office focal points across the region. One validation KII was conducted with the Myanmar country office. The survey and the FGD provided additional information on many examples of AAP practice across the region.
Regional Office	LAC Regional Office	KIIs were conducted across the regional office. AAP country office focal points completed a survey that collected information across all EQs. A FGD was held with AAP country office focal points across the region. A validation KII was also conducted with the Dominican Republic country office. This case study also benefited from the country visit being conducted in Venezuela.
Regional Office	MENA Regional Office	KIIs were conducted across the regional office. AAP country office focal points completed a survey that collected information across all EQs. FGDs were held with AAP country office focal points across the region. KIIs and FDGs led to articulations of good practice in a diversity of contexts, such as Yemen and Syria. This case study also benefited from a detailed desk case study being conducted in Lebanon.
In-person Country Case Study	Venezuela	In addition to KIIs and FGDs, community engagement was conducted by the ET, working with a national consultant in three locations.
Desk Studies	Afghanistan Lebanon Somalia Ukraine	These desk studies consisted of a robust set of remote KIIs, allowing coverage of EQs 1,3 and 4.
Light-touch Desk Studies	CAR Comoros	The circumstances of these country offices led to a modified approach being agreed upon. In the case of CAR, this led to a focus upon UNICEF's strategy of focusing upon interagency AAP. In the case of Comoros, the size of the country office and the scale of the programming led to a light-touch approach across the EQs and fewer KIIs being conducted.

As mentioned in Section 1.5.2, in addition to the selected country case studies, the evaluation also referenced examples from other countries that emerged through the regional consultations, global KIIs, literature review and staff reflections. These examples enriched the analysis by offering additional perspectives and comparative insights and are mentioned throughout the report.

Data analysis and quality assurance

The ET applied a structured and systematic approach to analyse and synthesize qualitative and quantitative data. The process focused primarily on the substantial volume of qualitative data gathered through the country case studies, global and regional KIIs, and document reviews. Data from all sources were compiled into internal country-level synthesis documents, which included raw data and preliminary evaluative insights. These documents were not shared externally. Figure 10 presents the key steps in our data analysis process.

Figure 11. Data analysis workflow



Coding. All qualitative data were coded using MaxQDA, a qualitative analysis software, to identify patterns and themes. The coding framework was aligned with the EM and allowed for the capture of emerging themes. Coding was led by the junior researcher on the ET, with quality assurance (QA) checks conducted throughout.

Analysis and synthesis. The ET undertook the following activities to support analysis and synthesis:

- **Participatory analysis and community feedback**. This was conducted only for the Venezuelan case study, the sole in-person case study involving community engagement. The team summarized discussions with participants at the end of each FGD and validated preliminary insights with the community (see Annex 6.3).
- **Country and regional debriefs.** At the end of each case study, the ET held debrief sessions with UNICEF country offices and partners to present emerging findings and validate interpretations.
- **Internal workshop and analysis**. Once coding was complete, the ET conducted a series of internal analysis workshops to identify common themes, enablers and outcomes across the dataset.
- **Sense-making sessions:** Two global sense-making workshops were held with UNICEF internal stakeholders to discuss emerging findings across key themes, including AAP integration, leadership, people-centred approaches and the humanitarian-development nexus.

Triangulation. To address divergences between the data collected, the ET employed triangulation of sources throughout the evaluation process. This approach helped identify and resolve discrepancies, ensuring that findings accurately reflected the diversity of data sources and perspectives. Triangulation was conducted using multiple tools and methods, including MaxQDA coding, internal analysis workshops, sense-making sessions with UNICEF and partners, and (where possible) participatory analysis with communities. For example, the ET compared and measured the findings from KIIs conducted at different levels of seniority across UNICEF, followed up on insights from document reviews, and cross-checked quantitative data with qualitative findings.

Quality Assurance: Itad's QA approach served as the first level of quality control throughout all phases of the evaluation. This process was led by David Fleming, Itad Partner, who worked closely with the Itad ET and the EO to ensure that expectations around the evaluation's quality were clearly defined from the outset. The QA process was embedded across all stages of the evaluation cycle, from inception through to final reporting. It included the establishment of clear quality standards, regular internal review points, and structured feedback loops. Dedicated time was allocated for the early review of all deliverables to ensure that outputs met the agreed quality benchmarks and were aligned with the evaluation's objectives and methodological rigour.

Gender-responsive approach. The evaluation applied a gender-responsive approach across data collection and analysis. Sampling within the Venezuela case study intentionally reached women in leadership and community-based implementation roles, resulting in strong representation of women's voices in FGDs and interviews. FGDs and consultation activities were designed to enable safe and inclusive participation, including women-only discussion spaces where appropriate and the use of accessible venues to accommodate different needs. During analysis, the evaluation team examined gendered differences in access to information, opportunities to influence programme design, and experiences of accountability mechanisms. These considerations informed both the interpretation of findings and the development of recommendations.

Ethical considerations and evaluation principles

The evaluation followed an ethical approach and principles, as laid out in the Inception Report and in line with the United Nations Evaluation Group (UNEG); ethical guidelines; and the code of conduct for evaluation. The data collection in this evaluation was subject to Itad's ethical procedures and received UNICEF Ethical Review Board approval.[27]

First, the evaluation was conducted by Itad, an independent evaluation and research firm with no prior involvement in the implementation of UNICEF's AAP programme. Team members declared no conflicts of interest at the outset of the assignment. The independence of the evaluation was maintained through separation of the evaluation team from UNICEF's AAP Section, with all quality assurance conducted by the firm's quality assurance manager and UNICEF EO according to UNEG standards.

Next, the evaluation ensured participants' voluntary participation, right to withdraw, anonymity, confidentiality and informed consent by providing full explanations to all participants on the purpose of data collection at the outset of KIIs or meetings, by seeking their consent verbally and by anonymizing all data sources. The methodological tools and interview materials were reviewed in advance to ensure that questions were appropriate, non-intrusive and did not risk causing distress or harm. Safeguarding risk assessments were completed prior to data collection where relevant and reviewed on a case-by-case basis. Appropriate reporting and data management systems were used to guarantee confidentiality and the secure storage of data. All team members involved in data collection signed non-disclosure and confidentiality agreements.

Furthermore, cultural norms were respected during community-level data collection and interviews were conducted in a diversity of languages to ensure inclusivity and accurate representation. No minors (under 18) were interviewed as part of the evaluation; children's views were considered through local partner KIIs, documentation review, and KIIs with communities. As no direct engagement with children took place, UNICEF's Ethical Research Involving Children (ERIC) procedures were not required, although the evaluation was informed by their underlying principle. Safeguarding training was provided to all ET members who were contracted to conduct engagement with people with and for whom UNICEF works

before undertaking the work. All team members committed to the UNICEF and Itad code of conduct.

Lastly, the evaluation was grounded in the principles of respect for dignity and diversity, the right to self-determination and fair representation. Efforts were made to minimise power imbalances during discussions, and care was taken to avoid any potential harm or discomfort. The evaluation acknowledges limitations relating to the reliance on adult representatives to convey children's views, as well as possible social desirability bias in community interviews. These were mitigated, where possible, through sensitive facilitation, triangulation of sources and anonymised reporting.

Evaluation limitations and mitigations

- While the evaluation was designed to be both robust and adaptive, several contextual challenges emerged during implementation. These were proactively addressed through methodological adjustments to ensure the integrity and utility of the evaluation findings. These challenges were as follows: **Reduced number of country visits, leading to the inclusion of regional office case studies for a whole-of-organization evaluation.** The reverberations from the February 2025 funding announcements impacted the ability of country offices to host a visit by the ET. This led to a reduction of in-person country visits, which would have allowed for more intensive data collection from UNICEF and external stakeholders. However, as a result, regional office case studies were included in the design, which bolstered evidence across all levels of UNICEF – country, regional and global – enabling a more robust whole-of-organizational assessment of UNICEF's efforts to institutionalize AAP.
- **The reduced number of country visits limited opportunities for direct data collection from communities and wider engagement with partners and peer organizations.** Efforts to engage national consultants and country offices to facilitate reflections on UNICEF's practice with community representatives also proved impractical for ensuring comparable robust data collection within the timeframes. The impacts of this were mitigated through the focus on process during internal staff KIIs. This included understanding both the approaches and processes by which community voices are heard by UNICEF (including measures taken to ensure approaches are inclusive of different groups in situations of vulnerability), and the processes by which community views and perspectives reach key decision-makers within UNICEF and are acted on, plus evidence of this happening. The ET also drew on existing country and global evaluations and reviews that had engaged communities in assessing the effectiveness of UNICEFs programmes (and AAP as part of this) and evaluated AAP practice of the humanitarian sector more broadly, based on the views of key stakeholders.
- **The evaluation's intentional focus on humanitarian contexts.** Although not a limitation in methodological terms, the evaluation's intentional focus on humanitarian contexts was stated by some as potentially limiting the applicability of the findings to other contexts. While it was important for the evaluation to consider all operational contexts, this focus was a deliberate decision. It reflected the design of the ToR and recognized that much of UNICEF's AAP resources, efforts and strategic attention have historically concentrated on humanitarian settings and, as such, this focus was to ensure the evaluation generated the most relevant and actionable insights. Although some insights may be less transferable to development settings, the evaluation spoke to the systems, internal incentives and leadership for AAP, which spans UNICEF's work beyond humanitarian action. EQ2 also specifically assessed the relevance and applicability of AAP to UNICEF's work beyond humanitarian action.
- **This evaluation took place at a time when UNICEF and the humanitarian and development sector are experiencing a significant financing crisis. This has sparked widespread internal changes for UNICEF, including restructuring and reductions in staff across all levels (including in AAP positions), the exact details of which were evolving as the evaluation reached its final stages.** The evaluation team, while not part of internal discussions or privy to the details of these changes, was cognisant of the direction of changes in writing the findings and formulating the recommendations. The sense-making sessions provided an opportunity to review findings and recommendations with staff considering the latest changes and UNICEF's management response will allow for further contextualisation of the recommendations given internal shifts.



© UNICEF/UN190241/Heroid Joseph

3 Findings (by question)

This section presents the evaluation's findings, organized thematically in line with the EQs and summary EM in Section 1.6. The findings are grouped by four themes, each corresponding to one of the four EQs and related UNEG criteria, as follows:

1. **Effectiveness and appropriateness of UNICEF's strategies and efforts to influence AAP practice**, addressing the OECD criteria of effectiveness, appropriateness and relevance.
2. **AAP beyond humanitarian action**, reflecting on the relevance of AAP across all of UNICEF's work and the internal coherence required to realize this in practice.
3. **People-centred approaches**, examining how coordination within UNICEF contributes to the efficiency and effectiveness of people-centred programming.
4. **Leadership**, speaking to the DAC criterion of efficiency.

The findings reflect analysis across regions and programme environments. While the evaluation recognises substantial contextual variation, it also identifies a number of themes that recur across settings and influence AAP implementation in similar ways. Where relevant, findings distinguish between context-specific manifestations and broader organizational issues, in order to support both local learning and institution-wide decision-making.

UNICEF's strategies and efforts in influencing practice in AAP (effectiveness, appropriateness and relevance)

EQ1: How effective and appropriate have UNICEF's efforts and strategies been in influencing its practice in AAP?

The first EQ, which explored the effectiveness and appropriateness of UNICEF's strategies and efforts to advance AAP, was the broadest covered the evaluation. To address it, the evaluation team explored the full pathway of change as set out in the ToC (presented in Section 2.2), from inputs and enabling factors to both immediate and strategic outcomes. In order to respond to the question, the evaluation team examined how UNICEF's investments, efforts and contributions to AAP have progressed through the ToC's change pathways.

To enable deeper analysis, this section is further divided into three sub-thematic areas:

- AAP positioning and resourcing within country and regional offices.
- Efforts and strategies to mainstream AAP at country and regional levels.
- The role of community voices throughout the programming cycle.

The assessment of the contribution of global efforts to furthering AAP across UNICEF as an organization draws on findings from all EQs, and is, thus, covered in the conclusions, pulling together critical threads from across the evaluation findings.

For ease of reference, each question and sub-question is followed by a succinct summary (blue shaded box) of the key findings, presented in a blue-shaded box.

AAP positioning and resourcing within country and regional offices

SUMMARY OF KEY FINDINGS ON AAP POSITIONING AND RESOURCING

Across regions and operating contexts, the evaluation finds that the absence of consistently defined leadership and accountability arrangements for AAP shapes how it is prioritised, resourced and embedded within UNICEF's work.

Dedicated AAP capacity has been critical to progress, with well-resourced roles in country offices and regional offices enabling meaningful integration. However, funding cuts have weakened staffing and regional support, weakening institutional momentum. While some offices have embedded AAP into donor proposals, progress often relies on individual initiative rather than systemic backing. The lack of dedicated funding lines and clear expectations for programme-level allocations continue to challenge sustainability. This reflects ongoing uncertainty among senior AAP specialists about what adopting AAP as a programmatic principle truly means in practice for country offices.

Across UNICEF country offices, AAP leads are placed under varied teams – such as SBC Planning, Monitoring and Evaluation (PME); emergency; or cross-cutting functions like PSEA – each offering distinct strengths and limitations. SBC placements support community engagement but may lack analytical capacity; PME placements integrate well with planning but risk narrowing AAP's scope; Emergency placements reinforce humanitarian relevance but may limit broader application. The absence of clear organizational guidance has led to trial-and-error approaches, with staff calling for clearer role definitions and strategic positioning.

Finding 1.1: The positioning of AAP Leads across UNICEF offices varies widely, often in junior roles with inconsistent time allocation. While flexible placement has enabled adaptation and innovation, evidence shows that it also constrained AAP's influence depending on team mandates and access to leadership for provision of information and advocacy.

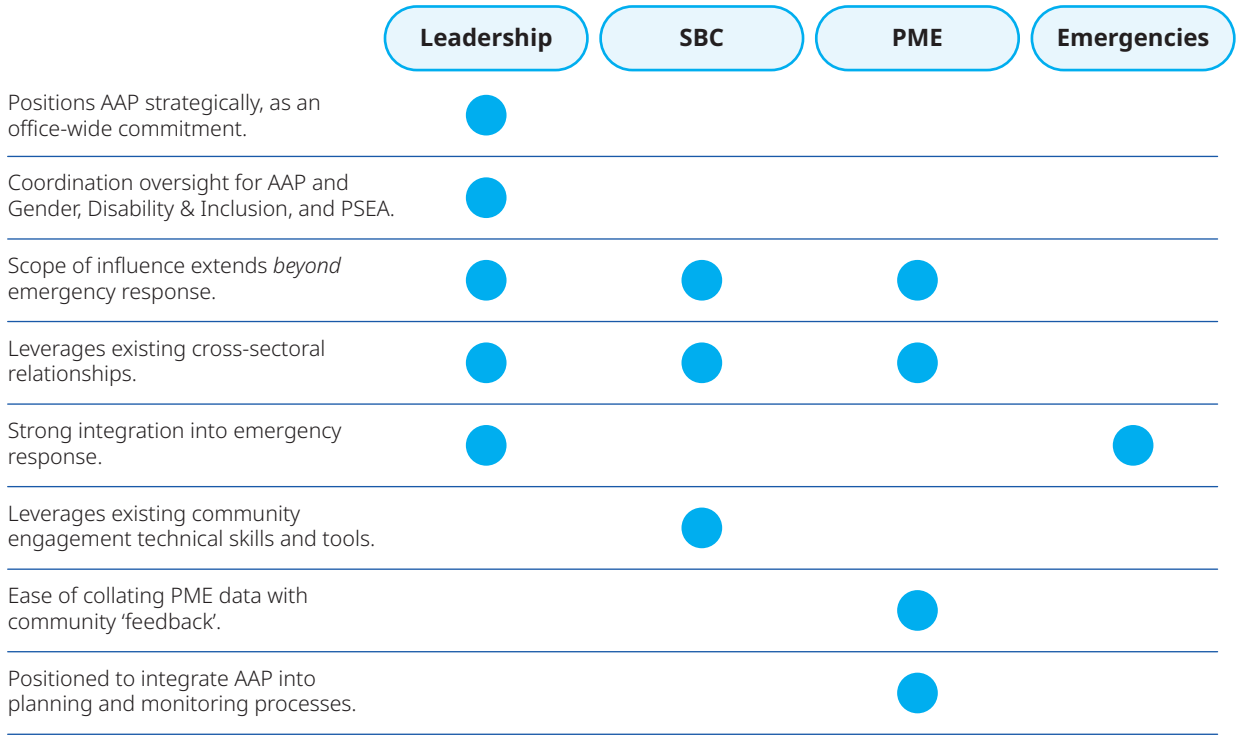
1. **AAP technical leads[28] are positioned differently across UNICEF country and regional offices, most often within SBC, PME or emergency teams. Each placement offers unique advantages, but also typically presents certain constraints.** Figure 11, below, provides a visual summary**.** Globally, more than half (54%) of AAP focal points' (including both country AAP leads and others identified as focal points) are positioned within SBC; 15% in PME; and 9% in Emergencies.[29] SBC's work is viewed as closely aligned with several AAP pillars, especially communication, community engagement and participation. SBC staff often bring technical expertise in such areas and teams are already actively engaging with communities, frontline workers and community structures, making it a great fit to bolster AAP. Tools and approaches used by SBC, such as U-Report, social listening and human-centred design, can be effectively leveraged for broader programme AAP. Moreover, AAP can benefit from SBC's existing capacity levels and existing cross-sectoral relationships. In Afghanistan, Ukraine and Somalia, the KIIs and document reviews showed that AAP complements and builds on SBC's strengths, rather than duplicating efforts. KIIs from the country offices further highlighted that SBC could be a strategic placement for AAP, given its cross-sectoral reach across the nexus.

2. In some countries, AAP has been placed under PME, creating a strong link with the planning and monitoring cycle. In country offices such as Venezuela, the Dominican Republic and Lebanon, this placement has facilitated the integration of AAP into planning and monitoring processes. For example, in the Dominican Republic, housing AAP under PME has been seen as an effective entry point for embedding AAP across M&E frameworks and encouraging greater sectoral accountability. Similarly, in Lebanon and Venezuela, the PME placement was considered strategic, enabling participatory monitoring and the inclusion of AAP in programme frameworks. However, as AAP practice matured in these contexts, the PME placement was increasingly viewed as too narrow, limiting AAP to M&E functions and constraining its potential to influence broader sectoral work beyond M&E and alignment with other

people-centred approaches (see Section 3.3 People-centred approaches). Furthermore, UNICEF's current AAP monitoring system — comprising three CSI indicators, HAC indicators, and CFM data — lacks a complete vertical logic linking activity-level inputs to outcome-level changes in community experience. Horizontal coverage is inconsistent, with self-reporting by country offices limiting reliability. The system is not currently too fit for the purpose of informing strategic decision-making on programme quality.

In other cases, AAP has been placed under Emergencies, which has been praised for enabling strong integration into humanitarian responses. However, this placement has also been criticized for reinforcing the perception that AAP is limited to emergency contexts, making it more difficult to embed AAP across the office and within development programming. This reflects broader organizational challenges in expanding AAP beyond humanitarian settings (see Section 3.2). For instance, key informants (KIs) in Somalia noted that when the AAP lead sat under the Chief of Emergencies, they had limited reach beyond emergency programmes. Under SBC, the AAP lead was able to position AAP as a core component of regular programming, making it more visible across the office. At the regional level, in the ECA regional office, the EAP regional office and the MENA regional office, AAP is currently under Emergencies and funded through emergency budgets, reflecting a pragmatic positioning to ensure continuity. In these regions, there is a fear that AAP would be lost if not 'owned' by Emergencies. In the ECA region, there is a strong connection between AAP and the region's approach to upstream emergency preparedness. For example, in central Asian countries, AAP is woven into preparedness systems strengthening efforts with government National Disaster Management Agencies (NDMAs). Other country and regional offices have placed AAP within teams focused on people-centred approaches. For example, in the LAC regional office, the AAP lead sits under Safeguarding and PSEA, a placement flagged as good practice for mainstreaming AAP across cross-cutting teams.

Figure 12. Main strengths of positioning country AAP leads within different teams. (Drawing on Findings 1.1, 1.12, 2.4, 3.2, and 4.1)



3. **Commonly, across case studies AAP positioning was often seen to have evolved through trial and error, with roles shifting between teams in several cases and limited guidance on optimal placement.** As is the case of Somalia, the AAP lead was initially placed under Emergencies, then moved to SBC. In the LAC regional office, the role moved from SBC to PSEA. In Venezuela, AAP has consistently been under PME, but there are ongoing discussions about repositioning it to better align with cross-cutting themes and increase influence with leadership. While country and regional offices appreciate the

flexibility to determine the best placement based on their structure, resources and context, staff have also flagged a lack of clarity and direction on AAP positioning. This includes the implications of different arrangements (e.g., SBC, PME and Emergencies), the alignment of AAP with technical skill sets across teams, and the need for clearer role definitions that can be reflected in job descriptions.

> "We do not need a one-size-fits-all, as countries vary, but we need to have an organizational position on where to position AAP in Country Offices" (UNICEF country office Chief of SBC).

Cross-team collaboration has emerged as a critical enabler of effective AAP implementation. KIIs consistently underscored that no single team holds the full range of competencies required for an AAP Lead, such as leadership, community engagement and participation, data analysis and information management, IC4D, and system strengthening expertise. Instead, successful AAP delivery depends on the ability of teams to work across silos, drawing on complementary skill sets and mandates[30]. For example, KIIs with country offices underscored that AAP goes beyond SBC (in both scope of work and integration). While there is strategic logic in linking AAP with SBC, given its proximity to communities, there is also recognition that AAP is inherently cross-cutting and goes beyond SBC. Further, individual teams may not have the access and influence needed to mainstream AAP across all programmes in the country office. SBC is dependent on Sections for funding and access to programmes at country level and KIIs noted that at times SBC involvement can be limited to delivering on specific activities such as back-to-school or vaccine campaigns. While these may be designed with communities and, as seen in Ukraine, can provide entry points for broader discussions, SBC's influence to support Sections with engaging communities to inform programme design more broadly, as well as monitoring programmes, can be limited. This is particularly relevant when the objective is not to reflect strong AAP in SBC activities only but mainstream AAP in Section-led programmes more broadly, with greater understanding of communities reflected in programmes and participation beyond traditional community engagement modalities. KIIs have also highlighted that anchoring AAP too closely to SBC risks limiting its scope, especially where SBC's relationships are not sufficiently broad or strong.

4. **Beyond the placement of AAP within specific teams, the level of seniority of AAP leads and the organizational structure in country offices play a critical role in advancing the agenda.** The UNICEF Workforce Assessment (2025) revealed that 35% of AAP Country Leads report to Deputy Representatives, while 9% report directly to Representatives. Additionally, at the time of the assessment, more than half (65%) AAP country Leads are national staff, mainly at NO2, NO3 and NOC levels, while 31% are international, with half holding P3 contracts; among all AAP Country Leads, more than half (55%) were on fixed term contract, one fifth (19%) on a permanent contract and 15% on temporary assignment[31]. The document reviews and KIIs support this, highlighting that many AAP leads are junior staff, which limits their ability to influence Deputy Representatives and Chiefs of Sections or access to decision-making forums. This lack of access makes it difficult to strategically position AAP across the office, limiting their ability to place AAP on the agenda or advocate for its integration at a strategic level. According to the document review, in several country offices, where roles are positioned under Chiefs of Sections, the Chiefs themselves, by virtue of participating in management meetings, were better placed to champion AAP. This aligns with the findings of the AAP Workforce Assessment (2025), which identified the AAP lead's reporting line or presence at decision-making forums as a key factor in whether AAP is discussed. Notably, 74% of country offices where AAP is regularly discussed in management meetings meet the CSI benchmarks[32]. This is not unique to AAP leads. SBC has also found a stark difference in its ability to influence country office decision-making and gain traction with Chiefs of Sections in countries where the Chief of SBC is at the same level as other Chiefs of Sections as opposed to more junior. Similarly, UNICEF's gender evaluation found that, in certain instances, the gender specialist was neither reporting to senior management nor included in senior management team meetings, which had a direct bearing on the extent to which gender was integrated into the office and programmes[33].

> "It's very easy to bury AAP under rocks and sands [within the country office structure], without people noticing that it is buried!" – Country office AAP lead.

5. UNICEF Lebanon and Somalia provided positive examples of individual Deputy Representatives taking steps to elevate AAP leads to more senior levels. In Somalia the Deputy Representative has ensured regular coordination with the AAP lead so they could then raise key issues with Chiefs of Sections. In Lebanon, the AAP lead reports directly to the Deputy Representative. KIs noted that this has enabled direct engagement with Section Chiefs and greater visibility of AAP.

6. Given the current funding constraints, the future of AAP capacity in many countries remains uncertain. KIIs raised concerns about delegating AAP responsibilities to junior roles (e.g., UN volunteers); relying on task-based arrangements (e.g., using long-term agreements at regional levels for specific country office tasks or deploying a pool of experts intermittently); or assigning AAP as an additional responsibility to staff already covering multiple countries. These approaches were seen as potentially weakening the institutionalization and strategic influence of AAP. Furthermore, SBC staffing levels are also shrinking, which may remove a common home for AAP within country offices.


© UNICEF/UNI554631/Lisa Hill

Finding 1.2: Where country offices have dedicated AAP capacity, this has catalysed significant progress. Similarly, where country offices have resources for AAP from donors, emergency funding or from integrating AAP into donor proposals, this has allowed for more significant investments. However, progress has been reliant on individual initiative rather than institutional capacity. The absence of dedicated funding or expectations for sections to allocate a proportion of programme funds toward AAP also challenges progress in some locations.

7. **Dedicated AAP roles remain rare across country offices, with most relying on formal 'double-hatting' arrangements or more informal nominated focal points.** The AAP Workforce Assessment (2025) highlighted significant variations in the level of commitment among AAP leads across countries. The majority of staff surveyed in the assessment reported spending less than 30% of their time on AAP, while only 21% indicated that they dedicate more than 80% of their time to it[34]. Country offices, such as Somalia, Venezuela, Afghanistan and CAR, have, at various points, had full-time, dedicated AAP roles, which significantly advanced and catalysed AAP integration. For example, Somalia maintained a dedicated AAP temporary assignment for two years. KIIs in Somalia noted that, since the departure of the AAP lead, there has been reduced clarity on technical support and leadership for AAP. The portfolio is now partially held by more junior SBC staff and an AAP and Risk Communication and Community Engagement (RCCE) consultant as a cost-saving measure. Similarly, in Venezuela, a well-resourced AAP team of five staff between 2020 and 2023 made substantial progress in embedding AAP across the office and field locations. However, due to funding cuts in 2023, the team was reduced to a single staff member, which hindered AAP progress. This aligns with findings from the Workforce Assessment (2025)[35], which showed that when full-time AAP staff are in place at regional and country levels and are empowered by committed Deputy Representatives, performance improves significantly, with consistent achievement of CSI benchmarks. However, KIIs raised concerns about the sustainability of this progress, particularly if the role becomes 'double-hatted' due to ongoing financial constraints. In CAR, a dedicated AAP specialist was in place. This role was supported by earmarked funding and, until mid-2024, UNICEF's own funds. During this time, UNICEF was able to contribute significantly to interagency AAP efforts. The office is currently in negotiations with the UK Foreign Commonwealth and Development Office (FCDO) to secure further funding

to ensure a sustainable transition. A similar pattern was observed in Yemen, where initial investments in AAP, supported by a dedicated AAP lead and donor funding, allowed for the development of a large-scale CFM. This experience is now being leveraged at a global level to inform thinking around CFM design and implementation.

8. **Country offices have made efforts to integrate AAP into donor proposals to secure funding.** While donor expectations often prompted the inclusion of AAP in proposals and programme documents, the absence of dedicated AAP funding or expectations for sections to allocate a proportion of programme funds toward AAP has challenged progress in some locations and resulted in uneven application. For example, Afghanistan and Somalia successfully mobilized resources by embedding AAP within programme narratives. However, resourcing challenges were widely reported across other regional and country offices, limiting their ability to carry out independent and dedicated AAP activities. Unlike other cross-cutting people-centred commitments (such as PSEA and gender)[36] or in L2 and L3 emergencies, AAP often lacks dedicated budget lines or mandatory funding allocations. To address this, several country offices, including Afghanistan, Somalia, Venezuela and Lebanon, have collaborated with resource mobilization colleagues to develop a clear narrative on their AAP approach, which they have then used to package AAP within programme proposals. In these cases, this strategy proved effective in securing funds for context-specific AAP investments. However, KIs noted that success often depended on the personal commitment of AAP leads who actively championed the approach. Despite these efforts, many interviewees expressed concern that ongoing budget cuts may force difficult trade-offs, risking the sustainability of existing efforts for AAP and future progress, such as CFMs, community participatory monitoring and other systems for community engagement.

> "Unless AAP remains a global priority, I'm not sure it will be sustained… We work in a very fast-paced environment with so many competing priorities. Sometimes, we forget the people we are doing this for" (UNICEF Country Office AAP Lead staff).

9. **Regional capacity was generally viewed positively by country office AAP staff. However, recent reductions in resourcing have led to diminished support and coordination from regional offices**. UNICEF's dedicated regional AAP capacity peaked in 2023–2024, where there were five AAP Regional Advisers and specialists based in the ECA, EAP, LAC, MENA and South Asia regions. In early 2025, this had been reduced to three specialists with AAP in their titles (in EAP, LAC and MENA), and SBC specialists acting as AAP focal points in other regions. According to the AAP Workforce Assessment (2025), while the AAP strategy recommends that all regional offices appoint an AAP Lead, only the MENA regional office has a full time AAP position (currently a temporary assignment), and the EAP regional office has a consultant in place. In the assessment, these two regions clearly demonstrated the strongest AAP performance, both in terms of their overall average scores and of the percentage of countries meeting the CSI benchmark[37]. KIIs with country offices highlighted that regional offices have played a substantial role in providing technical assistance and capacity development. Yet, the decline in AAP expertise, particularly following peak investment in 2023–2024, has created a noticeable gap in support. In ECA, the regional AAP specialist's technical support compensated for the absence of AAP experts and expertise in many of the region's country offices and coordinated cross-country initiatives such as the development of child-friendly CFMs. The Ukraine country office benefited significantly from the presence of this regional lead who provided support in integrating AAP into the Country Programme Planning (CPP) and CPD, conducted staff and partner orientations, engaged with sectors, and sparked the development of child-friendly CFMs. However, this regional position was discontinued at the end of 2024 due to funding cuts, leaving a critical gap in technical guidance for countries, cross-country exchanges on AAP practice and challenges, and oversite for cross-country initiatives. Similarly, the Afghanistan country office reported a decline in regional engagement following the end of the regional AAP adviser's tenure (Feb 2023–Feb 2024). During that period, the adviser led initiatives such as a regional mapping exercise and encouraged all country offices to develop AAP roadmaps, efforts that were instrumental in shaping the Afghanistan country office's own approach. Since the adviser's departure, the country office has felt the absence of regional momentum and technical backing, particularly in comparison to regions where regional-office-level AAP capacity remains active.

PRELIMINARY CONCLUSIONS (PCS) ON AAP POSITIONING AND RESOURCING FOR FINDINGS 1.1 AND 1.2

Preliminary conclusion 1: While the flexible placement of AAP leads has enabled adaptation to diverse country contexts, it has also resulted in varied levels of strategic influence and visibility. The cross-cutting nature of AAP means that its integration often depends on the ability of teams to collaborate across mandates and technical areas. Offices that have experimented with different placements (such as under SBC, PME, Emergencies or cross-cutting teams) have cited both opportunities and constraints, highlighting the importance of context-specific arrangements. However, the lack of consistent guidance and clarity around role definitions has led to uncertainty, with staff expressing a need for more structured support to navigate placement decisions and ensure alignment with AAP's broader objectives.

Preliminary conclusion 2: Resourcing emerged as a key determinant of AAP progress. Offices with dedicated roles and sustained funding have been able to advance integration more effectively, while those relying on temporary arrangements or informal focal points face challenges in maintaining momentum. The reduction in regional support and the absence of dedicated budget lines have created gaps in technical assistance and strategic continuity. Although some offices have successfully embedded AAP into donor proposals, progress often hinges on individual initiative rather than institutional mechanisms. These patterns point to the need for continued reflection on how AAP can be sustainably resourced and supported across different contexts, particularly in light of ongoing budget constraints and competing priorities.

Efforts and strategies to mainstream AAP at country and regional levels

SUMMARY OF KEY FINDINGS ON EFFORTS AND STRATEGIES TO MAINSTREAM AAP

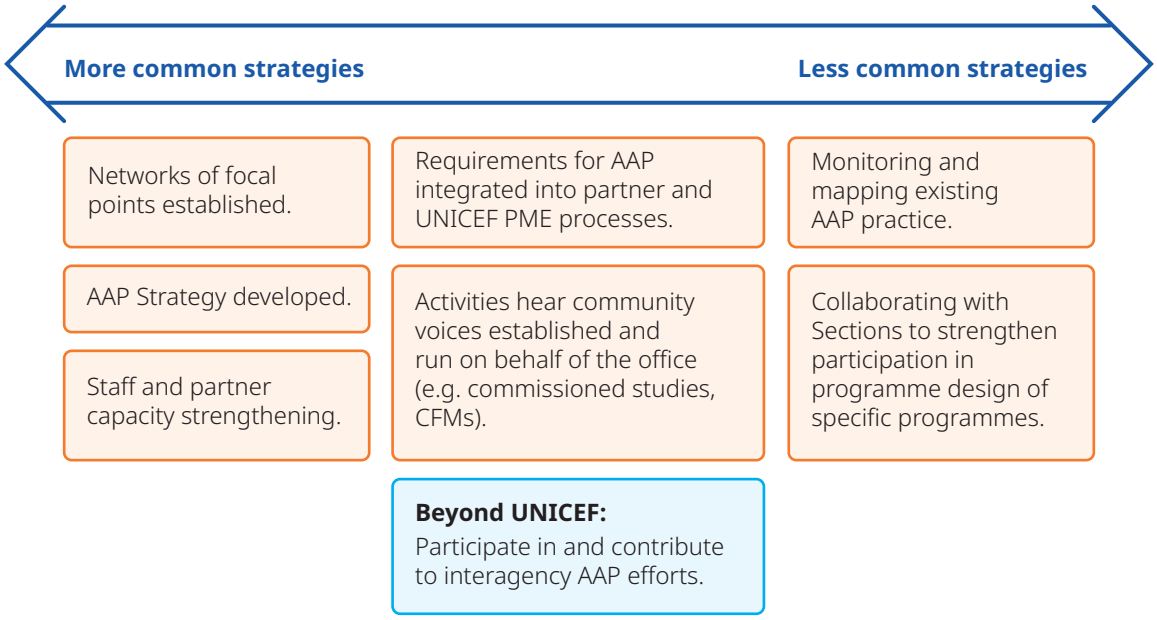
UNICEF country and regional offices have employed a range of approaches to mainstream AAP, including focal point networks, capacity development and strategy drafting. These efforts have contributed to raising awareness, fostering coordination and building initial momentum. However, their ability to embed AAP consistently across offices has varied. Focal point networks and working groups have expanded engagement but often face challenges in continuity and influence. Capacity-building initiatives have strengthened understanding and peer learning, especially when tailored to context and inclusive of partners. Yet, without sustained leadership and integration into programme cycles, these efforts have had limited reach. Similarly, while strategies and workplans have helped secure leadership buy-in and guide implementation, their structure and alignment with programme processes varies.

At the country-office level, AAP internal strategies reflect a diverse mix of internal system-focused efforts, direct community engagement, and targeted programme integration. This diversity has enabled innovation and responsiveness to context, though it also presents challenges for coherence and sustainability. Integration of AAP into programme tools and partner processes, particularly through indicators, has helped to raise the profile of AAP and prompted valuable dialogue. However, the utility of indicator data remains limited, as it often lacks depth and does not consistently reflect community perspectives or inform decision-making. Externally, country offices have engaged at an interagency level – contributing to interagency AAP working groups and supporting action for more collective AAP, commonly around collective CFMs. UNICEF's engagement at this level has been dependent on country office capacity.

Finding 1.3: At both country office and regional office levels, efforts to mainstream AAP have frequently included focal point networks, capacity development and strategy drafting. These efforts have helped raise awareness and foster coordination, but their contribution to mainstreaming AAP has varied. Commonly, these efforts are not pitched at the country or regional strategic level. Thus, without sustained leadership support and adoption by section leaders, these strategies alone are insufficient to embed AAP meaningfully or consistently across offices and teams.

10. **Country office practice for AAP is increasingly visible, with data showing progress across UNICEF's organizational footprint.** Data against UNICEF's Common Standard Indicators (CSI) for AAP show that the number of countries meeting the indicator requirements has almost tripled from the 2021–2024 period, when 62% of country offices (80 out of 129) met the CSI AAP indicator requirements. This trend reflects broad-based momentum, with nearly all regions, except for SAR, showing continued progress and exceeding the annual targets[38 39]. Resources like AAP in Action (2024)[40], the series of AAP Technical Briefs, and the regular newsletter by the Global AAP Section, have shared and surfaced diverse examples of country-level action and have helped raise awareness of practice happening across UNICEF in different contexts.

Figure 13. Common country strategies adopted by AAP leads to further AAP across UNICEF country offices (drawing from Findings 1.3 and 1.4)



11. **Establishing AAP focal point networks has been a widely adopted entry point for mainstreaming, helping to build initial momentum, though their influence is shaped by who participates and how consistently they are supported.** Many country offices and regional offices have established internal AAP focal point networks and working groups. For example, the LAC regional office, EAP regional office, and MENA regional office formed networks to connect country office focal points and harness country-office-level momentum for garnering greater regional buy-in. For example, in the ESA regional office, regular meetings between country office focal points facilitated cross-country learning and progress tracking. At the country level, working groups typically bring together focal points from various sections and field offices, fostering collaboration across different teams and sectors. This expands the pool of staff engaged in strengthening AAP and creates a dedicated forum for discussing AAP-specific issues. For example, the focus of working group meetings in Afghanistan on feedback collection and use has provided a practical focus. However, based on the experience of other countries, KIIs highlighted that these working groups have struggled to meet regularly due to workload and competing priorities,

which has, at times, limited their continuity and reach. They also flagged that most focal points are junior and lack influence across sections (see Section 3.1.2 AAP Positioning for more details).

12. **Capacity development efforts in AAP have helped build understanding and fostered peer learning, though their long-term impact depends on complementary support. Capacity development has also been a key strategy for mainstreaming AAP at both country-office and regional-office levels.** These efforts aimed to raise awareness among staff and create space for peer learning and problem-solving. In Venezuela, extensive training was provided between 2020 and 2023, focusing on how to operationalize AAP within each sector. Capacity-building efforts also extended to implementing partners, with regular reflection sessions to address practical challenges. In Somalia, multiple 2/3-day AAP training sessions and Training of Trainers (ToT) sessions were conducted for UNICEF leaders, middle management across field offices, frontline workers, CSO partners, and government staff from the Ministry of Health. KIs noted that these tailored sessions helped further AAP within the broader office agenda. Including external partners also improved the reporting and documentation of community participation and feedback. However, KIs flagged that training alone, without complementary strategies or leadership support, was insufficient to sustain AAP integration.

13. **Drafting AAP strategies and workplans has been instrumental in securing initial leadership buy-in and guiding implementation, though their structure and uptake vary**. Regional offices such as the LAC regional office and the EAP regional office have developed strategies aligned with the global AAP roadmap and pillars. Senior leaders cited these roadmaps as evidence of commitment, though KIs noted that competing priorities often prevent AAP from being consistently prioritised, even if there is a strategy (see Section 3.4 on Leadership). At the country-office level, strategies and workplans have been more context-specific and are seen as key for securing wider country office buy-in at leadership levels; guiding implementation; and, in the case of Somalia, providing detailed quarterly targets and indicators to track progress. Venezuela developed an AAP strategy in 2020, prior to the launch of the global strategy, positioning itself as a reference point for regional and global learning. It served as a mandate for AAP staff and sector colleagues to align initiatives and be held accountable. Similarly, UNICEF Afghanistan's AAP Road Map detailed activities under each AAP pillar and identified the technical skills required from various teams (e.g., PME for data management and ICTD for CFM software design). This was informed by the country office AAP working group, partners, and the regional office. However, country-level AAP strategies are commonly structured around all or some of the pillars of AAP, and do not sufficiently connect the pillars to key processes (e.g., programme cycle) that need to be influenced to mainstream AAP. This obscures connections with other people-centred themes and understanding of AAP (see Sections 3.2 and 3.3 for more details).

14. **Regional efforts to monitor and map AAP practice have helped raise its visibility and foster learning, representing early but promising steps toward more systematic tracking.** Regional offices have taken steps to understand and, in some cases, track the status of AAP across country offices within their region by developing regional mappings and dashboards and drawing on existing evaluation data. For example, LAC regional office created a dashboard aligned with the global AAP roadmap to monitor indicators across the region, going beyond the mandatory CSIs to increase visibility of AAP practice and encourage leadership to report on progress and take ownership of actions to strengthen AAP. Similarly, the SA regional office conducted a mapping exercise to identify the community engagement tools used across country offices in the region (e.g., U-Report and radio). Both initiatives were seen as innovative for UNICEF, and KIs noted that they helped raise the profile of AAP across the region. However, KIs also noted that these were initial efforts, and that broader uptake and dedicated resources would be needed to advance them further. EAP regional office also conducted a comprehensive analysis of 34 evaluations conducted between 2020–2022 in the EAP region, to assess the extent to which AAP was reflected in their methodologies, findings, recommendations and lessons learnt. In contrast, the ET found fewer examples of country offices mapping or tracking practice for AAP across sections. Exceptions included Lebanon (see Box F) and Libya, where the document review showed that both country offices had undertaken exercises in 2022 to understand current practice in AAP across programmes as the basis for identifying country office priorities going forward.

BOX F

Lebanon's mapping exercise to understand AAP practice across sections and partners[41]

In 2022, the Lebanon country office conducted a mapping exercise to understand existing approaches and mechanisms in information-sharing, participation, CFMs and capacity levels. Two self-assessment tools were used to map practice across each section and partners. The results were augmented with consultation with UNICEF and partners and a desk review of key relevant documents.

The exercise revealed parallel CFMs, gaps in partnership agreements, insufficient capacity for feedback analysis, and limited direct UNICEF-community engagement. It highlighted that establishing mechanisms alone is insufficient without dedicated resources, clear procedures, and institutionalized structures. These findings informed Lebanon's push for a unified hotline system, strengthened information management, and targeted AAP training.

Finding 1.4: Country office strategies adopted by AAP leads for furthering AAP have varied in approach, spanning efforts to integrate AAP into planning and monitoring and directing community engagement on behalf of programmes. Each approach presents distinct strengths and limitations in terms of investment, uptake and sustainability. However, their effectiveness is contingent on the uptake and action of sections, often beyond the influence of AAP leads.

15. **Country offices have operationalized AAP through a range of entry points, often simultaneously, reflecting both strategic intent and opportunistic adaptation.** As such, efforts for AAP do not necessarily originate from one source within country offices. In Yemen and Afghanistan, dedicated Programme Management Units were set up to manage large funding from international financial institutions. They were responsible for large-scale grievance and redressal mechanisms (GRMs). In parallel, SBC teams also put in place mechanisms to hear and respond to community feedback. Furthermore, in Afghanistan, the Chief of Planning, Monitoring and Design commissioned a series of in-depth, sector-specific community voice studies designed to understand community views on UNICEF-supported programmes.

16. **Embedding AAP into internal systems has shown the potential to shift ownership beyond individuals.** One common approach, as seen in Syria, Venezuela, Lebanon and Somalia, has been internal 'upstream' efforts, aimed at embedding AAP into key UNICEF processes such as integrating AAP and AAP indicators into partner programme documents, incorporating it into field monitoring and encouraging UNICEF staff and partners to take ownership of AAP within their respective sectors and field offices. This approach has shown potential for institutionalization, shifting AAP from being a "one-person responsibility" to a shared practice. Embedding AAP within systems has helped prompt partners and UNICEF staff into more regular community engagement, which is viewed as an important step for sustainability. It has also promoted more localised and context-sensitive implementation. In Venezuela, Lebanon and Somalia, AAP has been integrated into programme tools, including the use of AAP indicators in PDs and integration into field monitoring (see Finding 1.5 for more detail), which has been supported through training sessions and ToTs on AAP for middle management and partner staff.

17. **Another strategy has focused on implementing activities and initiatives to hear and respond to community voices, which has enabled tangible engagement but has shown mixed results in uptake and sustainability across levels and sectors.** Some country offices, as seen in Afghanistan, Lebanon and Ukraine, have given focus to implementing activities and initiatives designed to better hear and respond to community views on behalf of sections and the country office, more broadly. This includes setting up CFMs (see Section 3.1.3 on hearing community voices in the programming cycle). In Afghanistan, for example, the SBC team has made significant investments in building community-based platforms to engage with and listen to communities, both Community Engagement and Feedback Centres (CEFCs) and community networks of religious leaders, youth and grandmothers as a means to access young people and women. These platforms serve as a "service of AAP" for other sectors, offering concrete examples of how community voices, particularly women's, are being heard and have informed action. The effectiveness of this model is dependent on the sectoral uptake of these platforms in programmes and responsiveness to feedback. While demand has

been strong at the field level, uptake at the national level has been more limited, with the exception of the Emergency Team, which has requested mobile CEFCs for response efforts.

18. The implementation of activities that directly interface with communities requires some degree of financial investment but, depending on the design, they can elevate community voices to country office leaders and programmes. However, their success relies on the extent to which sections and programmes act on the feedback provided. Furthermore, where such activities have been initiated and driven by enthusiastic individuals or are dependent on individual donors, this risks their sustainability.

> "It is not just about UNICEF having working system but ensure the link to communities." – UNICEF country office AAP lead

19. **Other countries, including the Dominican Republic and Ukraine, have looked to leverage one-off opportunities within specific programmes to integrate AAP into programme design and demonstrate its value across the office.** For instance, in the Dominican Republic, the team selected three targeted projects that offered strong entry points for community engagement: Support for Children on the Move, improving first-grade learning outcomes (e.g., the CON BASE project), and Humanitarian Response These projects were chosen because they already incorporate robust AAP elements, making them well-positioned to deliver tangible results and generate evidence that can be used to advocate for broader uptake within the country offices. In Ukraine, the AAP/SBC focal point, in collaboration with programme sections, has focused on participation to inform the design of services. For example, Human-Centred Design (HCD) was introduced to understand vaccine hesitancy and leveraged as an entry point to go beyond understanding behaviour drives and to also exploring community views on programmes and services more broadly. HCD has now been used in Ukraine with other programmes, even without a strong behavioural element.

20. **Externally, in places, country offices have contributed to interagency collaboration, commonly to strengthen shared feedback mechanisms. This has enhanced AAP visibility in countries where UNICEF has taken an active or leading role.** Several country offices, including CAR, Somalia and Venezuela, have engaged and made significant contributions at an interagency level, including through strengthening interagency CFM and highlighting that interagency collaboration can enhance visibility and coherence of AAP efforts. In CAR, UNICEF has been seen as the lead agency driving AAP. Between 2019 and 2024, UNICEF CAR had a dedicated AAP coordinator who co-led the interagency AAP working group alongside OCHA. Under their leadership, numerous interagency activities were implemented, including the establishment of a response-wide feedback mechanism, piloting embedded community feedback into sector responses with the Health and Food Security clusters. In Venezuela, UNICEF has played a central role in the establishment of the *Línea de Contacto* and in driving the interagency AAP work (see Box G, below). In Somalia, UNICEF co-led the interagency Community Engagement and Accountability Task Force (while the country office had a dedicated AAP lead), working on the Interoperable Aggregated CFM Model and, for six months from August 2023, funding Talk to Loop as an independent channel by which communities could report cases of aid divergence and other issues14. In other countries, such as Afghanistan, UNICEF is also an active participant in interagency AAP working groups.

At the regional level, some leadership KIIs saw interagency mechanisms and actions on AAP as increasingly crucial considering UNICEF's recent resource constraints. However, this tactic also presents risk. The current synthesis of interagency humanitarian evaluations finds the process for AAP (mainly feedback mechanisms) fall well short of expectations, with interagency processes in multiple countries taking too long, with limited tangible outcomes.[42] At the global level, the AAP section has engaged significantly at the interagency level through the provision of time and resources to IASC taskforces for AAP. UNICEF's contributions, as a key partner working with OCHA to influence policy discussions within IASC, have been recognized[43].

BOX G

UNICEF Venezuela's leadership in the interagency AAP coordination

UNICEF Venezuela's approach to AAP at the interagency level demonstrates how strategic leadership and a commitment to shared learning can foster system-wide accountability and improve the relevance and responsiveness of interagency action. A key milestone for UNICEF Venezuela was the creation of the *Línea de Contacto*, the country's first interagency CFM, modelled after UNICEF's own *Línea de Reporte*. This initiative positioned UNICEF as a central actor in promoting good practices and building capacity across agencies, including through training. The mechanism enabled more comprehensive feedback collection, receiving over 61,680 messages in four years (73% from women), with nearly 50% of the feedback related to UNICEF's implementation.

UNICEF's leadership extended well beyond this mechanism itself. The country office has been leading and co-chairing the interagency AAP group, actively shaping its strategic direction and operational standards. UNICEF provided technical guidance and training to other UN agencies and partners, helping to build a shared understanding of AAP principles and their practical application. This included supporting the development of common tools, harmonizing feedback indicators and mentoring focal points across organizations. KIs consistently described UNICEF as the "de facto lead on AAP in Venezuela", noting its early investment in a dedicated AAP team (as seen in Section 3.) and its proactive role in convening and supporting interagency collaboration. The organization's influence helped elevate AAP from a siloed function to a collective priority, encouraging agencies to integrate community feedback into programme design, monitoring and decision-making.

Finding 1.5: There is evidence that the integration of AAP into key programme processes (for example the inclusion of AAP indicators in HAC, partner programme documents and field monitoring templates), raises the profile of AAP and contributes to internal and partner discourse. However, critically, the commonly used AAP indicators do not elevate views of communities to UNICEF or give an indication of how partners themselves are responding to those views, therefore, the data generated against these has limited use. Furthermore, critical gaps exist in UNICEF's capacity to assess the quality of practice resulting from the increased AAP requirements. While the integration of AAP into partner processes may advance AAP, this is not sufficient on its own.

21. **The integration of accountability into programme results frameworks is a strategy common to many country offices, with 43% (56 country offices) reporting this practice in 2024.The integration of accountability into programme results frameworks is a strategy common to many country offices, with 43% (56 country offices) reporting this practice in 2024.31** Country offices (such as Venezuela, Lebanon and Somalia) have integrated requirements for AAP into programme tools, including partner programme documents and field monitoring templates used by UNICEF staff, with the intention of prompting practice for AAP. In Venezuela, three AAP indicators aligned with those in the HAC were integrated into all programme documents, requiring implementing partners to report against them. In Somalia, more context-specific indicators were integrated into partner programme documents, adapted in response to issues of aid divergence, which emerged in 2023. This gave greater attention to monitoring both the activities and outputs associated with the inclusion of minority groups in services. In both Venezuela and Somalia, staff found the addition of these indicators (e.g., their presence alone) prompted discussions and practice related to AAP with partners. In Somalia, they contributed to upstream advocacy and capacity support with government entities on their roles in addressing issues of exclusion. In Venezuela, they created space to surface and discuss challenges related to AAP implementation with partners. KIs noted that this integration has contributed to institutionalizing AAP within partner monitoring frameworks.

22. **However, the utility of data from AAP indicators in programme documents and of the data used in HAC (beyond corporate and donor reporting) was questioned. Critically, AAP indicators do not elevate the views of communities to UNICEF or give an indication of how partners themselves are responding to community views.** In Somalia, there was limited evidence that data reported against these indicators were used (noting that this is not necessarily unique to AAP indicators), with regional office and country office staff questioning the utility of data generated against current AAP indicators used in programme documents and in HAC, beyond tracking and corporate and donor reporting. The indicators speak to the number of people providing feedback or engaged in community meetings, but do not speak to the results of this engagement. Those involved in the HAC responses also noted that the figures against AAP indicators can be unrealistically high (e.g., exceeding the population of the country), where social media clicks are used to source the number of people provided with information. Furthermore, at the country level, the content/themes of feedback or community views heard by partners do not reach UNICEF and so cannot inform programmes. In Venezuela, while sectors did consider the AAP indicators in their reporting, these were flagged as largely quantitative, and KIs suggested that narrative inputs and reflection meetings with partners provided deeper insights into challenges and community engagement than indicators alone.

23. In Somalia, community discussions held as part of the CPD development process revealed that nutritional feeding sites were located too close together, resulting in duplicated coverage, and that the current opening hours for nutrition services were not convenient for women with certain household responsibilities. Positively, action was taken based on both issues. However, given UNICEF's extensive work in providing nutritional services in Somalia, working with multiple partners across 665 nutrition sites, the fact that this issue had not already been identified points to a significant gap in how community perspectives are systematically captured and channeled to decision-makers. As explained by staff: "Maybe earlier no one had asked communities."

24. **Furthermore, where the inclusion of expectations for AAP in partner documents is intended to prompt partner practice, UNICEF country offices do not have the capacity to review the effectiveness of partner practices, creating the risk that these become more of a tick-box exercise to meet UNICEF requirements.** In EAP regional office, while partner contracts included AAP clauses and expectations, no monitoring of how partners were meeting these clauses took place as UNICEF offices lacked capacity for this. In Somalia, staff questioned the effectiveness of the CFMs put in place by partners. Concerns included the appropriateness of the channels in place (for example, the use of suggestion boxes at nutrition sites visited by women and children); the levels of awareness (in Somalia, 87% of the interviewed community members as part of the third party monitoring (TPM) of Water, Sanitation and Hygiene (WASH) infrastructure were not aware of the available CFMs); and extent to which partners use feedback and complaints received. While partners are encouraged to develop their own CFM, UNICEF has limited capacity to assess the effectiveness of these.

25. **While the integration of AAP into key processes, including partner programme documents, may contribute to furthering AAP, it is not sufficient on its own.** Staff recognize there is a need to now build on data generated through AAP indicators, and to ask questions about what has changed as a result of the numbers of people engaged or providing feedback. This would also build a better case for the results from AAP investments on programmes and for UNICEF. At present, this is a missed opportunity that would help build the investment case for AAP.



© UNICEF/UN601347/Sultan Mahmud Mukut

Finding 1.6: Global guidance has provided a strong foundation for AAP and helped shape country-level action. However, practical support on the application of AAP in different contexts remains limited, and innovative regional and country-led initiatives have not been sufficiently leveraged to inform or strengthen global practice.

26. **The articulation of UNICEF's framework for AAP was valued, especially among country AAP leads.** The 2020 AAP Handbook, CCCs, and the Global AAP Strategy have provided structure for country offices to align their actions with global-level thinking. For some, the launch of UNICEF's AAP Strategy motivated country offices to take action, and there were examples of evolving global thinking informing country office practice. For example, the adoption of people-centred approaches language and the positioning of AAP with SBC guided UNICEF Somalia. There was also an appreciation among AAP leads for the AAP section's proactive approach to sharing materials. Examples of how AAP is being applied in different locations provided valuable insights for AAP practitioners and widened the focus of AAP beyond community feedback. As experienced by one country AAP lead: *"The team in Geneva are great – they share documents, reach out to us, make themselves available as well."* The Agora AAP training launched in 2021 was based on the AAP handbook, although this was not specifically cited by country offices. Participation numbers are modest (1,183 had enrolled on the course, of which 485 people had completed the course as of January 2025), and, for some, the course is too long. Notably, only 20 people from HQ level have completed the course.

27. **There have been multiple efforts led by the AAP section to provide more practical content. However, from a country perspective this gap is still felt**. The AAP Community of Practice (with currently over 250 members) and quarterly newsletter started in 2021. In 2022, the AAP section also commissioned a series of thematic AAP Technical Briefs, documenting practice and learning from selected country offices. In 2024, the AAP section launched a Tools Hub, with tools, materials and examples gathered from across UNICEF countries. However, many country offices expressed a need for much more practical, rather than only strategic, materials on AAP, which provide concrete actions for realizing UNICEF's AAP commitments: *"We need less on what AAP is and more how to do it (where worked well, what, examples of how it should work etc.)."* As an example, the lack of practical training resources from the global or regional level has placed the onus on individual country offices to develop content for use with staff and partners, duplicating efforts. In some cases, regional offices have contributed to filling this gap. The ESA region developed guidance on how to embed AAP throughout the programme cycle4 and the ECA region developed thinking on integrating AAP into CPP processes.


© UNICEF/UN0824337/Alejandra Pocaterra

28. **UNICEF regional and country offices have invested in varied innovative initiatives aimed at enhancing AAP. However, there have been missed opportunities to steer and leverage regional and country localised initiatives for wider organizational benefits.** As examples, initiatives such as LAC regional office's dashboard for tracking AAP and South Asia's regional office's mapping of community engagement tools introduced new approaches for gaining regional oversight and traction. These were considered innovative, but they were largely seen as first attempts. KIs emphasized that sustained progress would have required stronger and more consistent backing from HQ to maintain momentum and institutionalize these efforts over time. Similarly, ECA made significant investments in a year-long process to develop child- friendly feedback mechanisms in four countries, which has struggled to complete the final stages due to a lack of funds and oversight once the regional AAP adviser left. In both cases, a global technical steer on strategies and investments for the use of regional and country resources was lacking, and opportunities were missed in leveraging the experiences of individual country offices and regional offices to inform and strengthen efforts in other parts of the organization and globally. Similarly, investments made globally to develop guidance on AAP were not sufficiently leveraged to drive forward practice.

PRELIMINARY CONCLUSIONS ON EFFORTS TO MAINSTREAM AAP AT COUNTRY-OFFICE AND REGIONAL-OFFICE LEVELS FOR FINDINGS 1.3 TO 1.6

Preliminary conclusion 3: UNICEF has made notable progress in advancing AAP through a variety of strategies and integration efforts. These have helped raise visibility, foster engagement, and prompt practice across country and regional offices. However, the approaches remain uneven in their depth, consistency and influence on decision-making. The diversity of entry points and strategies reflects adaptability and innovation but also highlights fragmentation and gaps in coherence.

Importantly, while AAP has gained traction in many offices, its integration into core programme processes and systems is still emerging. The use of indicators and tools has prompted dialogue and reporting but has not consistently elevated community perspectives or strengthened accountability. Overall, although AAP is no longer peripheral as reported in case study countries, further consolidation is needed to embed it as a sustained element of UNICEF's programming.

Community participation and voice throughout programming cycles

SUMMARY OF KEY FINDINGS ON COMMUNITY PARTICIPATION AND VOICE THROUGHOUT PROGRAMMING CYCLES

While guidance on the integration of AAP into CPP and CPDs has not been fully rolled out to countries as of yet, the evaluation found positive examples from the case study countries of community consultation processes in CPPs, which have generated valuable data both on community priorities and views of existing programmes. However, outside of CPPs, overall, there is less focus and opportunities for engaging communities and hearing community voices to inform programme design compared with after implementation has started. Internal systems, staff mindsets that see UNICEF as the "expert", and financial incentives act to deprioritize and limit space given to community engagement during design and continue to influence the extent to which community views are acted on and used to shape programmes during implementation.

To hear community views during implementation, the practice of setting up CFM is common. UNICEF country offices show success at receiving feedback and complaints through these and there are positive examples of how feedback/complaints have been acted on to troubleshoot issues linked to programme and service delivery and to address bottlenecks, issues of exclusion and unmet needs, and (while less common) adjust programme activities. In contrast, less attention has been given by those leading on AAP to strengthen how communities are engaged in monitoring services and programmes, as a means to understand the experiences and views from more vulnerable groups with a view to making adjustments and course corrections, as needed. Furthermore, there is broad recognition the organization needs to strengthen how feedback heard through CFMs and other means is acted on, including making better use of data collected and giving greater focus to understanding forms of action taken based on the feedback and complaints received. Accountability for acting on data, capacity, and the separation of CFMs from planning and monitoring processes are barriers specific to acting on the views of communities heard via CFMs during implementation.

Community perspectives in shaping programme design and prioritization

Finding 1.7: There are positive examples of community consultation processes as part of CPPs, which have generated valuable data both on community priorities and the views of existing programmes. In some places, this has informed CPDs and been used to make programmatic adjustments, although the extent to which findings have been used to their full potential was not always known by those leading these processes.

29. **At a global level, the AAP section has invested much time working with DAPM (now OSE) on integrating AAP into CPP and CPD guidance in the Programme Implementation Handbook.** Proposed additions were postponed for inclusion in a later revision. Meanwhile, the content developed by the AAP section was turned into a series of standalone tipsheets setting out how AAP can be reflected in CPDs and other processes. These had just been finalized at the time of the evaluation and had not yet been fully rolled out to country offices.

30. **For the countries engaged as part of the evaluation, the CPD development process and mid-term review are key points for engaging communities, including children and young people. This is seen by several country offices as evidence of AAP being taken seriously, recognizing the investment and the "heavy lift" of community consultations in some contexts.** Examples were identified from Lebanon, Somalia, Ukraine and Venezuela of the country office undertaking some form of consultation with communities and/or children and young people in developing their CPDs. For UNICEF Venezuela, this was the country office's first large-scale consultation engaging groups in situations of vulnerability, including children with disabilities and indigenous communities. In Somalia, the need for broader community consultation, beyond the engagement with children that fed into the Situational Analysis, was recognized by the country office. The dedicated community consultations included diverse population groups, such as internally displaced persons, nomadic and minority communities, and both urban and rural residents. In CAR, there was a deliberate focus on including young people's perspectives on the relevance of current programming and on gathering ideas for improvement as part of UNICEF's mid-term review of their CPD. Consultations were held by field offices, and selected youth representatives were then invited to a strategic reflection workshop.

> "In Somalia context, where presence on the ground is so challenging, dreaming of engaging communities more directly at a larger scale to inform the CPD development is a heavy lift for the office" – UNICEF country office staff

31. In most countries, KIs provided examples of how community views have shaped their CPDs, informing their CPD's ToC and strategic interventions. In Venezuela, consultation with children with disabilities informed thinking on accessibility, more inclusive communication and vocational training. In Ukraine, greater emphasis has now been given in the CPD to early childhood development, including childcare support. In Somalia, more focus is being given in UNICEF's new CPD to the prevention of child wasting relapse after children are discharged from nutrition services. However, in Somalia, the exercise and inclusion of community voices was seen as more important for validating existing priorities, ensuring UNICEF plans were not only developed by UNICEF, governments and partners looking at statistics, but also allowing communities to have a voice that added personal experiences to known deprivations. The process revealed areas where current approaches in programme delivery could be strengthened to align with the needs of women (for example adjusting nutrition site opening times). However, those overseeing the consultation were less sure if and how the findings had been used to substantially inform the CPD.

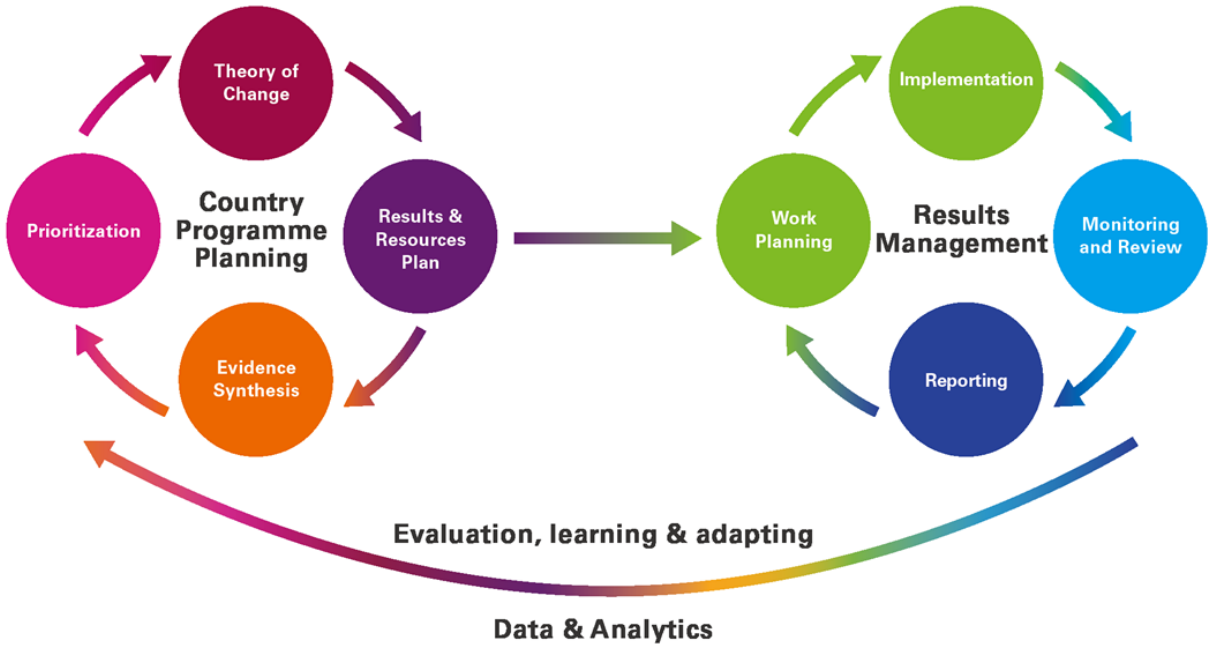
32. **While some CPDs demonstrate strong participatory intent and have led to programme improvements, they are high-level strategic documents (often spanning five years) and many decisions about programmes are made throughout the CPD lifespan.** On the one hand, there are positive examples[44], with these community consultations generating important insights into current programmes, insights that can be acted upon immediately to improve how services are delivered. In addition, there are signs of commitment to participation and people-centred programming in CPDs. For example, Ukraine's new CPD gives focus to participation, with language on "evidence-based, child-centred", "youth-centred and gender sensitive", "emphasis on equality and participation", children exercising "their agency" throughout. This language is also more apparent in UNICEF Ukraine's Annual Work Plans (AWPs), compared to other countries. This sets the intention throughout the lifespan of the CPD for not just what the country office will implement, but also how rights-holders will be central to

implementation, providing a commitment that can be leveraged internally. On the other hand, the extent to which CPDs influence ways of working with communities in practice is less clear. Global and country KIs acknowledged that UNICEF is good at including all the "right words" in documents, including CPDs, but these do not necessarily reflect practice. The extent to which these intentions are lifted off the page and meaningfully intertwined in practice depends, again, on the commitment and expertise of staff over the duration of the CPD. CPDs are high-level, setting out strategic priorities but not the details of programme design. In many countries CPD development happens every five years with a mid-term review in between, during which much can change. Also crucial is the extent to which UNICEF systems encourage and enable community engagement as part of ongoing processes of programme design and implementation.

That notwithstanding, across case studies, evidence on the specific accessibility of AAP mechanisms (CFMs, community consultations) for children with disabilities or other highly marginalised sub-groups remains limited. In Venezuela, accessible venues were used for consultations. In Afghanistan, CFMs relied heavily on phone-based channels, which may create barriers for persons with hearing or communication impairments. Strengthening disability-inclusive data collection in AAP monitoring was flagged as a gap.

CPP processes are covered by Finding 1.7; Results Management stages are covered by Findings 1.8-1.2.[45]

Figure 14. UNICEF CPP Cycles. At what stages does UNICEF consistently engage communities and groups in situations of vulnerability to inform prioritization, design and programme decisions?



Finding 1.8: There is less focus and less opportunities for engaging communities and hearing community voices to inform programme design, compared with after implementation has started. Internal systems, prevailing staff mindsets of UNICEF as the "expert", and financial incentives act to deprioritize and limit space given to community engagement and participation during design.

33. **Beyond CPD development, country offices tend to engage with communities more actively after implementation has begun, with comparatively limited involvement during programme design. As a result, key decisions about programme design and activities are often made without being grounded by direct community input and involvement.** Figure 13 provides a visual of UNICEF's CPP Cycle and key stages at which communities and groups in situations of vulnerability should be consistently engaged to inform prioritization, design and programme decisions. KIs saw AWPs as too high-level to meaningfully engage with communities while these were being developed. Although it was noted that there is opportunity to include activities, or at least references to activities, that set out not just what will be delivered but also how, reflecting community engagement and AAP into the AWP implementation.

> "Annual Work Plans are generally developed with ministries. It's very challenging to get community feedback when developing workplans, but when implementing workplans we encounter communities and can hear from them. This is when we see if what we planned (in closed rooms and fancy hotels!) is appropriate and relevant for communities." – Country Chief of SBC

34. PDs also provide the potential for consulting with communities to design programmes with them based on their views; however, this is not standard practice, and the evaluation found limited evidence that this happens frequently. In one country, KIs reported that communities were "very rarely consulted" in developing PDs, and proposals were often generic. In Venezuela, community FGDs flagged that the community involvement often begins only after the programme has already started rather than during design, which risks misalignment with actual community needs. Other evaluations have echoed this, highlighting a lack of in-depth analysis, which risks overlooking specific community needs[46]. The main exception to the absence of community involvement during activity selection and design cited by country offices was in response to emergencies, when needs assessments are more standard practice.

35. However, the possibility to make changes during implementation – as opposed to during the design stage – is limited to within the existing design of the programme, as set in supply contracts and programme agreements. KIs reported the time needed to adjust these presents a barrier, meaning the scope of meaningful adjustments once implementation has started is limited. Section chiefs and managers also touched on the institutional culture, explaining the challenges of reprogramming including negotiation with donors and their perception that such actions are not always regarded positively in their performance management. This can lead to tensions, especially when community priorities (e.g., nutrition) do not align with the funded programme (e.g., WASH), or when explaining why only certain communities or groups are targeted by the services. Examples provided by the country offices highlighted how gaps in applying a people-centred lens to planning, allowing the refinement of activities, has negatively impacted service users and programme effectiveness. These also highlight the risks to programme effectiveness when such issues are only identified during or after implementation.

> "There were some misunderstandings because we wanted UNICEF to address the whole community, but they were limited to children from zero to four, and that was a little bit difficult to understand because we have children from five years old and upwards who are more underweight, or children from ten years old who are very thin. That age limitation was a challenge for us." – Venezuela FGD, community member.

36. **Internal systems deprioritize community engagement and participation during design, and do not recognize the 'costs' of not shaping programmes based on the views of communities and groups in situations of vulnerability. Internal culture, short-term funding horizons, and earmarked funds also pose barriers to adapting programme design based on the expressed needs of communities.** Time pressures, in particular the pressure to disperse funds to start implementation, were consistently cited as a key reason why communities are not engaged in PD development. UNICEF procedures also do not require UNICEF or partners to engage communities in PD development[47]. Moreover, the costs of not incorporating

community perspectives, especially those of groups in situations of vulnerability, are not recognized within UNICEF systems. As a result, the time needed to engage communities in refining programme design is often viewed as an unjustified cost, rather than a valuable investment. This is compounded by the undervaluing and absence of community voice as a metric of success or performance measure used by leaders, as set out in Finding 4.2.

> "We do value community perspectives, but it is not always easy. Sometimes we fall into the trap of procuring items, delivering and then, when we deliver, we remember we did not listen to the community" – Country office Chief of SBC

> "The system works against us consulting and being community-focused, and we live with this." – Country office PSEA lead

37. **Internal prevailing mindsets and culture of UNICEF as the "expert" also reduce the value given to community views by staff and their openness to collaborate with communities, both during design and implementation**. Staff described a culture of "UNICEF knows best", where staff view themselves as the "expert". As such, KIs reported that UNICEF tends to replicate the same programmes and activities, "copying and pasting from one very different country to another". Other country KIs observed the more standard approach of UNICEF staff is, "I know what people need" and that community voices were "used to retrospectively explain decisions, rather than to shape them". Conversely, in countries where UNICEF was moving into programmatic areas that were new for the country office (such as climate change and MPHSS, and linked to potential funding opportunities), greater efforts were made to engage and co-create with communities, as staff were less of the "expert". In these cases, new programming inadvertently led to stronger AAP, specifically community participation. Shifting staff perceptions and internal cultures toward viewing communities as experts in shaping priorities and programmes will require proactive dialogue and efforts that go beyond the provision of guidance.

> "If staff working for UNICEF do not understand the importance of people-centred programming, then guidance on this is not going to help them!" – Country PSEA lead

38. **Financial incentives and restrictions linked to donor priorities and short-term funding horizons also limit the extent to which community priorities are reflected in programmes.** Staff talked about community priorities being "lost in translation" as programming priorities are set by donor resources and interests. In Lebanon, although displaced families wanted more school support instead of additional WASH support, donor earmarked funding meant services could not shift. Ukraine provided a positive example of UNICEF using community views (collected through post-distribution monitoring, QR codes included in winter kits and hotline calls) to influence strong donor preferences for the provision of in-kind items, despite communities repeatedly expressing their preferences for cash. As a result, from the winter of 2022 to 2024, support shifted from being 100% in-kind to a combination of cash and winter items. However, due to donor preferences, this has taken multiple years and is still not aligned with community preferences for cash to purchase winter items, despite the availability of winter items in local markets being conducive to cash programming.

39. Short-term funding horizons limit the extent to which community priorities – those that relate to longer-term needs – can be considered. Country office leaders talked about the pressure on country offices to spend and about participatory design being incompatible with grant lengths: "*We take these irresolvable issues – that do not work together – and waste energy trying*" (Deputy Representative). Given the current funding landscape, there is concern that more of UNICEF's funding will be in the form of shorter-term grants, with more restrictions.

40. **The evaluation identified a number of opportunities to strengthen community engagement and participation at country level, from decentralized decision-making (so decisions are taken in greater proximity to communities), to leveraging existing community relationships, and to utilizing existing participatory methods at key points in time.** In several country offices, the decentralized decision-making process for some programmes, with PDs and programme design developed at field office-level by programme officers, provided opportunities for more localised design

and adaptations. However, the extent to which PD design reflects good practice in AAP depends on programme officers' understanding of the importance of and know-how for ensuring communities have been engaged. UNICEF Afghanistan has over 200 programme officers across field offices, who develop 95% of the country office's PDs. Conversely, in countries where UNICEF has reduced their presence in certain areas or access to communities is more restrictive, in general, the lack of proximity hinders community engagement.

41. Partnerships with local actors also bring proximity to communities. Where there is a strong field-level presence of local actors, the evaluation found this can lead to a more nuanced understanding of the local context and stronger engagement with the local community to identify their needs and goals[48]. Noting that others have cautioned against the assumption that local organizations automatically represent the views of varied groups in situations of vulnerability and feel enabled to share critical views about programmes with UNICEF. This evaluation was not able assess the extent to which UNICEF ways of working with partners facilitates and enables community views to be reflected in programmatic decisions.

42. Where countries have developed community relationships, there is an opportunity to build on these connections to hear community perspectives during the design and monitoring of programmes. For example, UNICEF Afghanistan investments in CEFCs, UNICEF Lebanon's Youth Advisory Group, and relationships with women-led organizations in other countries could be leveraged to give these community-based structures a greater role in influencing and assessing UNICEF's work. In Somalia, in 2024, UNICEF signed contracts with two minority-led organizations (MLOs) working in different locations to better understand issues of exclusion and marginalization within UNICEF programmes.

43. Utilizing participatory methods that already exist within UNICEF also presents an opportunity to engage groups in situations of vulnerability and go beyond more extractive consultation. For example, HCD was used to prioritise the services and design of resilience centres close to the frontline in Ukraine.

Community views during programme implementation

Finding 1.9: UNICEF country offices use various channels to hear community views during implementation, but the level of attention given to this varies and more routine monitoring methods lack depth. While some positive examples exist, community perspectives on programmes are not systematically included in programme monitoring or reporting. The lack of incentives from internal systems and leadership, and output-focused results frameworks deprioritize the collection and use of community-level data.

44. **Staff indicated varied but inconsistent practice in the extent to which communities are engaged as part of programme monitoring. While field monitoring led by UNICEF prompts some conversations with community members, KIs indicated that this practice is more opportunistic and lacks depth.** During implementation, country offices may employ a range of methods to directly hear the views of communities and service users, including via routine monitoring (field monitoring led by UNICEF staff, with TPM), and/or via specific one-off studies. U-Report was seen as a valuable channel by which views could rapidly be gathered via polls, and there are examples of country offices conducting deeper studies with communities to hear their views on UNICEF programmes. The recent sector-specific community voices studies in Afghanistan are positive examples of this, as is the partnership with MLOs initiated in Somalia to better hear the perspectives of the most severe situations of vulnerability. In Bolivia, community-led assessments of trust, satisfaction and behavioural change were monitored, in addition to output tracking. Based on experience, the participatory monitoring approach was also scaled nationally, with toolkits developed for replication by health centres and municipalities. In addition to UNICEF-led monitoring, community views on programmes may also be heard indirectly through partners; although, as covered in Section 3.1.3, partner reports provided to the ET did not include such details.

45. Field monitoring checklists and templates prompt staff to speak with community members and individuals using services as part of monitoring visits. In practice, conversations are opportunistic, based on who is available at the site during the visit, rather than in-depth discussions, and the approach depends on individual programme offices conducting the monitoring visit. Competing demands from other requirements of field monitoring also reduces the

time and space available for more in-depth community discussions. In Somalia, the standard field monitoring template was expanded, in order to provide more structure to the questions asked and to whom during field monitoring. While this shows positive practice, no evidence was seen by the ET for the quality of data captured through this, nor if and how it was informing actions.

46. **A key challenge is the lack of incentives for Programme Offices and managers for hearing community views about programmes.** UNICEF systems give more focus to numbers as opposed to community voices. *"In UNICEF we do very well on monitoring numbers, but very poorly on monitoring programme quality (which can only hear about from communities)." Country Chief of Planning, Monitoring, and Data.* As with PD development, programme offices are busy and not incentivized to engage communities to understand the quality of programmes from their perspectives. Community views on programmes are not a key measure of success for leaders (see Section 3.4 on Leadership), managers are not asking for this, and UNICEF systems do not demand this, as such internal and external incentives are lacking. Practical examples from countries highlighted what is missed if communities are not systematically part of monitoring. In Afghanistan, where field visits revealed that, while cash assistance was delivered (as reported in output data), communities lacked clarity on its purpose and had not received the micro-finance training in-line with the aims of the cash support, highlighting the importance of monitoring beyond outputs.

47. **The framing of programme results, which focus primarily on the output level, places community experiences and views outside UNICEF's formal systems.** KIIs with UNICEF staff highlighted that there is widespread recognition that programme design often stops at output-level thinking. This output-centric approach shapes reporting expectations and deprioritizes the collection of community-level data that speaks to programme effectiveness. As an example, in LAC regional office, along the migration route, especially between Colombia and Panama, indicators measured the number of hygiene kits distributed, but not how appropriate or useful the content of these were to the end users. Staff observed that heavier items from the more traditional hygiene kits were left unused by people on the move, contributing to environmental pollution and inefficient use of resources. It was only after consulting families and children along the route, that staff realized larger items were impractical to carry and not always relevant to the needs of people in transit. This led to adjustments in kits. Staff in multiple country offices acknowledged that the "so what" of programming, what changes for communities as well as the successes and challenges of programmes from community perspectives only emerge during evaluations, if at all.

48. **As such, where there is positive practice of community engagement and participation in monitoring, these practices are not systematically integrated into UNICEF's reporting architecture**. This limits who sees the results and prevents community views from being a key programme metric used by leaders (see Section 3.4 on Leadership). Furthermore, there is a lack of clarity as to how community views on the quality of programmes are collated across the sources that are available. In Yemen, UNICEF staff noted that the volume and fragmentation of data streams made it difficult for managers to track community feedback and meaningfully use this data, leading to the creation of a risk management unit to support oversight.



© UNICEF/UNI282559/Susan Markisz

BOX H

Unpacking who UNICEF is engaging with, learning from community consultations in Venezuela.

KIIs with UNICEF staff and communities see AAP as not optional in Venezuela, but as a prerequisite. UNICEF and partners cannot enter communities without prior engagement and approval from community leaders. This expectation has shaped programme design in several ways:

Co-design with leaders: UNICEF and implementing partners have responded to community structures, often aligning with formalised groups (e.g., *comunas* and local committees) and local "Proyecto de Vida" plans (communities project drafted by community leaders). This has enabled trust and relevance.

- Programme adjustments: Community leaders have influenced practical decisions during implementation such as the placement of water tanks, design of WASH infrastructure and distribution of health kits.
- Shift in mindset: staff increasingly see themselves as facilitators, learning to listen and adapt to community priorities.

Community consultations in Venezuela highlighted the critical importance of unpacking who has access to information and whose views are being heard, even in contexts where UNICEF and partners have strong relationships with communities based on longer-term engagement.

In Venezuela, the FGDs with community members that were held as part of the evaluation revealed deeper insights into how people perceive their engagement in decision-making and who within the community feels most informed and empowered to hold UNICEF accountable. While many participants stated that information is shared equally and that everyone has access to project updates, community members consistently highlighted that community leaders are the most informed and influential actors in the communication chain. They serve as the primary entry point and conduit between UNICEF and the community. This centralized model, although efficient, places significant responsibility on a single individual to relay information, including to the most vulnerable groups, and risks inadvertently reinforcing community leaders as "gatekeepers". FGDs highlighted that children and adolescents, despite being the direct right holders, are often the last to be informed and have limited influence over project decisions. They typically receive information through parents or teachers and lack dedicated mechanisms to express their views. Similarly, participants pointed out that children with disabilities and older adults living alone face barriers to participation due to limited mobility and access to communication channels, leaving them excluded from assemblies and decision-making processes.

> "In Venezuela, there are cultural aspects that prevent children from being taken into account. In the communities, the first contact is always with the community leader, who holds a lot of influence. I have to explain to him why I want to gather the children, and if he agrees, he is the one who calls the meeting through the children's caregivers." – FGD, community member

Women were noted to have greater influence and participation, often acting as community leaders, mobilizers and promoters. As one leader shared:

> "Children come last. Women go to the community leader and say: 'We want a workshop on a certain topic.' The leader then communicates the women's suggestions to UNICEF. Women have influence." – FGD, community leader.

Furthermore, the FGDs and KIIs also highlighted that indigenous communities face additional challenges due to the lack of information adapted to their languages, which limits their ability to engage meaningfully.

To address these gaps, UNICEF Venezuela is actively working to foster a culture of inclusive feedback and engagement. This includes conducting door-to-door visits, training sessions with community leaders, and open community meetings designed to ensure that all voices (not just those of community leaders) are heard and considered in programme design and implementation.

Finding 1.10: The practice of setting up CFMs is common. UNICEF country offices have shown success at receiving feedback and complaints through these and there are positive examples of how feedback/complaints have been acted on. However, there was broad recognition the organization needs to strengthen how feedback is acted on. This is not a new challenge.

49. **Country offices have commonly invested in developing CFMs in some form, including CFMs overseen by UNICEF, partners' CFMs, and/or support toward stronger interagency collective CFMs.** For example, UNICEF Afghanistan, Lebanon and Ukraine, have established multi-sectoral CFMs and provide an open, consistent channel by which people can contact UNICEF. Each country has established a hotline, and, in Afghanistan, this is complemented by more community-based channels (see Box I). The volume of data received through these, and through the CFMs of other UNICEF country offices, is, in places, enormous6. For example, in 2024, UNICEF Lebanon's call centre logged approximately 180,000 calls and UNICEF Afghanistan documented feedback and complaints from 231,840 individuals (55% female) via different channels. The significance of this was recognized by a senior staff member: *"In terms of getting feedback from communities and the volume of this, UNICEF Afghanistan is the best I have ever seen."*

50. **The potential risk of inviting feedback, but then not responding is recognized by AAP leads in particular:** *"There is a reputational risk of not getting back to people or using their feedback"*. In two countries, communities have expressed anger toward the intermediary body collecting feedback in cases where they see no action taken based on their feedback. The risks and their impact on how communities perceive CFMs in terms of trust, purpose, and usefulness often go unrecognized, particularly when requests for assistance and other feedback are routinely addressed (and closed) based solely on existing programme parameters. Data from several countries shows that a high proportion of submissions received via CFMs are requests for assistance. In Afghanistan, 59% of all feedback received via CEFCs in 2024 were requests for assistance. Similarly, in Somalia, 97% of organizational CFM data aggregated at the interagency level (April–June 2024) were requests for assistance or information7. The implications for how CFMs are experienced and viewed by communities when communities are invited to provide feedback, but responses are set within existing programme limits are not known.

BOX I

UNICEF Afghanistan's large-scale CFM.

In Afghanistan, UNICEF established a Grievance Redress Mechanism (GRM), responding to international financial institutions' donor risk management requirements, associated with two US$400 million programmes. The GRM was designed to identify non-sensitive and sensitive grievances (including those related to fraud and misuse, unacceptable behaviour, data management, and sexual harassment and exploitation) from programme stakeholders and individual rights holders targeted by the programmes, from amongst broader feedback raised. This included both a decentralized component (initiated in 2022) via the CFMs of ~50 implementing partners, and a centralized component (set up in 2023), with a UNICEF-run hotline. In addition, the country office established a series of CEFCs, increasing from 11 in 2022 to 111 in 2025. The CEFCs serve several functions (see Box Q in Section 3.2 AAP beyond Humanitarian Action), one of which is a channel to receive feedback and complaints. Data shows greater proportions of women using partner CFMs (38%) and CEFCs (53–60%), compared to UNICEF's centralized GRM hotline (16%), highlighting the importance of channels that are accessible to more groups in situations of vulnerability. Mobile CEFCs also help bring some of the functions of CEFCs to other areas, as needed, including in response to emergencies.



BOX J

Developing child-friendly feedback options in Ukraine and Venezuela

CFMs are commonly adult-centric. For example, an interagency mapping exercise in Somalia spanning 58 organizations found most organizations have generic feedback mechanisms, and do not have specific feedback mechanisms for the most vulnerable people, including children and people living with disabilities.9 Recognizing this gap, UNICEF Ukraine (as part of a multi-country initiative in the ECA region, also involving Bulgaria, Moldova and Romania) initiated a 16-month process, starting in May 2024, to design child-friendly feedback mechanisms, suitable for children aged 4–17 years old. The process was endorsed by the Ministry of Education and engaged local institutions (preschools and schools) and integrated service points (resilience centre and Spilno spots) to develop and pilot four different age-appropriate approaches. Beyond providing a means for UNICEF to hear feedback from children, it was hoped the partnerships would also facilitate the integration of feedback systems into existing school structures. At the time of the evaluation, the process was ongoing, although delayed due to resourcing constraints (both financial and capacity to steer the process from the regional level).

In Venezuela, UNICEF engaged FUNVAPE in partnership, an organization that places children with disabilities at the centre of programme design. Through participatory assessments and the co-creation of inclusive materials, such as Braille brochures and universally designed feedback tools, children were empowered to shape services that directly affected them. The resulting child-friendly feedback mechanism, *Cuéntame*, enabled safe and accessible reporting, and findings were used to influence broader programming and advocacy.

51. **There were impressive examples of countries investing time and energy in building systems to better manage data received via CFMs, as a necessary first step for managing feedback/complaints data, especially at scale.** For example, in Afghanistan, the Management Information System (MIS) developed by UNICEF for both their GRM and community-based channels, managed by SBC, provided the foundations for referring complaints to the correct person internally, tracking and collating data. In both cases, this is recognized as a major achievement and addresses the previous issues of data inconsistencies posed by the earlier manual system used by SBC10.The GRM MIS is designed to identify different forms of sensitive and non-sensitive grievances among large volumes of more general feedback. Systematically dealing with high volumes of data would not be possible without a strong underpinning MIS.

52. **More recent global developments will drive practice for CFMs further, making it a requirement for countries to have a CFM in place and providing an organizational digital platform, which has the potential to improve their efficiency and effectiveness.** The new *Procedure on Complaints and Feedback Management*, being drafted under DAPM's (currently OSE's) leadership and in alignment with the Policy on Safeguarding and the Policy on Environmental and Social Standards, provides an example of integrating oversight for CFMs as one element of AAP into a separate global team. The procedure will require all country offices to have a CFM in place, delinking the existence of CFMs from individual donor requirements and positively giving focus to country-office-wide CFMs rather than programmatic CFMs. The regulatory element of the procedure will be overseen by DAPM (now OSE). There was much concern from global and regional AAP leads on this shift, in particular how the quality and accessibility of CFMs will be promoted and assured (requiring local contextualization of channels), navigating the risk that they become a tick-box exercise associated with a compliance requirement. Country Deputy Representatives also expressed concerns about using compliance to further AAP principles**.** The global investment in UNICARE, as an organizational digital platform (MIS) that country offices can choose to utilize, addresses the previous issues of duplicated efforts seen to date across country offices, each investing in their own MIS systems. If appropriate for varied country contexts, this should improve the efficiency and effectiveness of CFMs. At the time of the evaluation, UNICARE had achieved the minimum viable product stage, with pilots running in Bosnia and Herzegovina, Türkiye and CAR, and a decision had been made to transition oversight for UNICARE to DAPM (now OSE).

Finding 1.11: UNICEF has acted on community feedback to resolve delivery issues, improve access, and address exclusion or misconduct. However, most responses remain focused on troubleshooting, with fewer examples of feedback driving broader programme design changes. This highlighted a pattern of ad hoc responses, with limited use of community data to systematically inform programme design and decision-making.

53. **Existing documents and KIIs provided examples of UNICEF acting on feedback and complaints received. These included addressing issues pertaining to the quality and effectiveness of programmes, access to services, issues of exclusion, unmet needs and abuses of power.** Many examples relate to troubleshooting issues and bottlenecks linked to programme and service delivery. For example, in Ukraine, the number of calls about cash-based assistance (e.g., the purpose, how to register and why certain people were selected) revealed that the self-registration needed to be reconsidered. Calls about a technical glitch with the laptops provided to schools were addressed and the Education Section asked the vendor to proactively fix the issue in all other schools. In Afghanistan, the GRM dashboard showed that, as a result of the complaints raised, UNICEF was made aware of delays in payments and salaries, delays in the delivery of teaching and learning materials, labour and working conditions, and a lack of staff at project facilities (health and education). Feedback received via the Corporate Emergency Funding for Cash (CEFCs) (also in Afghanistan) allowed UNICEF to engage project stakeholders to address issues regarding water quality in a water supply project; cases where health centre washrooms were closed, deterring women from visiting; where the waiting space for women in a health centre was blocked by supplies; and incidents of UNICEF referrals not being accepted in health facilities.

54. In places, issues identified through CFMs spoke to abuses of power. In Venezuela, complaints addressed a community member prioritizing their friends for assistance. In Afghanistan, grievances from one area revealed that the de facto authorities were confiscating teachers' salaries. UNICEF's Education Section engaged the district governor to return the salaries to 80 teachers. In Somalia, a governmental WASH director was removed from office, as communities had not received services, despite funding being allocated to that area.

55. In other examples of responding to feedback UNICEF, had addressed issues of exclusion linked to programme eligibility criteria and selection requirements, and allowed UNICEF to respond to unmet needs. For example, in Lebanon, calls from Syrian parents struggling to register children for school resulted in high-level advocacy and a Ministry directive to relax document requirements. Similarly, feedback on the National Disability Allowance pilot prompted UNICEF to expand eligibility. In Afghanistan, families unaware of the need to seek medical help for their children with epilepsy were connected to community health workers; and 700 winterization kits were distributed to households in situations of vulnerability in 2024, following feedback about their situation.

56. Furthermore, although in smaller numbers, there were examples related to adjustments in programme activities. In Ukraine, calls via the hotline revealed people with new babies wanted more information on parenting, breastfeeding, etc., when living in difficult situations. In partnership with the Ministry of Social Policy, 200,000 kits of baby items and the book *Your baby and you* were distributed, including information about the UNICEF-supported health hotline, where people could have health consultations with doctors. Examples were also cited of the contents of humanitarian kits, in particular hygiene kits, being adjusted in several countries.



© UNICEF/UNI932518/Osman Khayyam

57. **However, while there was anecdotal evidence of feedback and complaints being acted on, staff across all levels identified this as an area needing improvement, with a critical focus on improving how systematically and consistently feedback/complaints are tracked, responded to and acted on.** Basic data on the proportion of feedback marked as closed within systems (where available) was high in some places. For example, in Afghanistan, UNICEF and partners closed 87% of feedback received in 2024. In total, 90% of the 11,380 grievances and 100% of feedback and requests for information received via the GRM were closed. The evaluation of UNICEF-supported Cash-for-Education programme in Afghanistan also found 88% of parents reported receiving a response after raising concerns[49]. However, systems do not currently record or categorize what action was taken to close the feedback received. In Ukraine, tickets are closed once callers have been thanked and the situation with UNICEF programmes explained. In other places, the feedback received by UNICEF is considered closed at the point of referral to another service provider. In Somalia, one KI held the skeptical view that feedback was automatically closed after reaching the three-month limit.

58. Furthermore, the prevailing view was that this practice needs to move from isolated successes and anecdotal evidence to more consistent practice. That would also provide evidence for internal decision-makers to enable UNICEF to understand the full picture, beyond the simple tracking of numbers received and closed: *"We say we want to raise the voices of communities, but implementation is different"*. For example, staff in Afghanistan recognized the need to examine the full impact of CEFCs on programmes, based on a full picture of the levels and forms of action taken. Similarly, others recognized that more could be done to utilize the large volumes of feedback and complaints data collected through Afghanistan's GRM and CEFCs for programmatic adjustments: *"Even when talk about grievance redressal there is limited analysis of what is coming out of grievance redressal to use for programme adjustments*".

59. **CFMs clearly play an important role in AAP, and there is clear evidence of CFM's unblocking operational issues that contribute to programme efficiency and effectiveness. However, bolstering participatory monitoring to understand how groups in situations of vulnerability have experienced services and programmes may generate more relevant and pertinent reflections as the basis for programmatic adjustments, which go beyond troubleshooting.** There is often an implied assumption that a core aim of CFMs is to inform programme adjustments (based on the feedback and complaints received). However, data gathered by the ET challenges the appropriateness of CFMs compared with other means of hearing community views as the basis to assess and adjust programmes. CFM data from multiple countries showed that only a small proportion of inputs made via CFM channels might potentially inform programme adjustments, whereas the majority are questions, positive feedback, and/or requests for assistance. Staff in several countries also questioned the usability of data from CFMs as the basis for programmatic decision-making and adjustments. Furthermore, and critically, is the extent to which more groups in situations of vulnerability are being heard through channels offered by CFMs (and so whose views are being considered as the basis for programmatic decision-making). CFMs are more commonly adult-centric, and channels used are not necessarily appropriate for hearing from minority and more excluded groups (including women in some contexts and people with disabilities, who may require modifications to channels to ensure they are accessible).

60. KIIs suggest, in places, the term 'feedback' has become a 'catch-all' term, delinked from the purpose of collecting feedback. However, where the aim of hearing the views of communities is to review programme success as the basis for making adjustments where needed, well-designed programme monitoring, engaging different vulnerable groups may be more appropriate than CFMs. At a country level, more focus has been given to CFMs under the banner of AAP, rather than bolstering how the views of vulnerable groups are consistently and systematically heard as part of programme monitoring.

Finding: 1.12: Accountability for acting on data, capacity and the separation of CFMs from planning and monitoring processes are barriers to acting on views of communities during implementation.

61. **Internal culture, short-term funding horizons and earmarked funds continue to influence the extent to which community views are acted on and used to shape programmes during implementation. Furthermore, the structural separations between those overseeing the CFM and programme teams within country office structures and the planning and monitoring processes (and other data sources) are common challenges.** Firstly, in all cases, the onus for reviewing and accountability for acting on feedback and complaints sits with sections and field office staff. MISs and standard operating procedures seek to streamline how feedback received is channelled to focal points within field offices and sections for responses to be provided. However, as reported in one country (and likely to be the case in other countries), the tasks associated with collecting community feedback and analysing and responding to this are not part of staff job descriptions and, thus, an addition to staff workloads. As such, management oversight and ensuring internal accountability for responding and acting on feedback are critical. In Afghanistan, feedback trends were already a standing agenda item in field office bi-weekly management meetings and have recently been elevated to the Project Management Team (PMT) meeting for more management oversight. The Ukraine country office was hoping to include tasks related to acting on feedback in relevant staff performance evaluation reviews, allowing staff to get credit for this work. In Venezuela, a Risk Committee was established for escalating major concerns arising from the inter-agency contact line (*Línea de Contacto*). This served as a good example of structured accountability.

62. Secondly, the structural separation of feedback collection under the banner of AAP, from planning and monitoring processes and data in several country offices means there is a lack of triangulation and consolidation between different sources. Thus, missing the fuller picture and meaning, UNICEF cannot capitalize on the potential of this data for wider information and decision-making.

63. **Capacity in both time and skills to manage, analyse and turn submissions received into usable forms of aggregated data, including identifying the critical issues, was also identified as a challenge.** Both GRM and SBC have recognized the potential value of the qualitative data captured as part of feedback/complaint submission (the narrative), in particular to identify trends in the concerns and issues raised by people about UNICEF services that might inform programmes. Both have started to use artificial intelligence (AI) to identify patterns in the large volumes of qualitative data that have been captured, relevant to each sector. The example report seen by the evaluator provided actionable insights and emerging trends that appeared detailed/specific enough to be usable by programmes. Internal processes, such as the time needed to develop or amend partnership agreements and PDs or make changes to procurement, were cited as barriers to adapting activities based on what people are saying. This reinforces the importance of engaging during planning and design.

64. **The status of a country office's broader systems and practice in using data (PME) will also contribute to the extent to which community voices (including feedback and complaints) are used by the country office to inform programmes.** Where a culture of using data exists, efforts for AAP (including CFMs) can build on this. Conversely, where this is lacking, the effectiveness of AAP efforts, specifically efforts to understand the views of communities and then use these to inform programmes, will be challenged. As examples, a synthesis of past evaluations spanning different sectoral programmes in Afghanistan had mixed findings on programme sections' monitoring and evaluation (M&E) capacities and practice. In one instance the synthesis stated, "fragmented monitoring practices and over-reliance on individual staff members for institutional knowledge undermined accountability and service delivery"7. The evaluation of the Ukraine L3 response found much assessment, planning and monitoring data was not used, in part due to the fact that staff did not know where to access these, how to use them, or their levels of autonomy to do so8.

PRELIMINARY CONCLUSIONS ON FINDINGS 1.7- 1.12

Preliminary conclusion 4: Evidence from this evaluation reinforces the importance of community participation for programme relevance, effectiveness, and trustworthiness. Examples from country offices show where communities have been engaged and heard by UNICEF this has contributed to better and more appropriate programme design, the timely troubleshooting of programmatic bottlenecks and issues, and the identification of incorrect programme design assumptions and choices.

However, despite growing recognition of the importance of community perspectives, UNICEF has not yet institutionalized community participation and voice as a consistent and influential element shaping decisions across the programme cycle. While there are strong examples of participatory intent, particularly during CPD development and through CFMs, these are often disconnected from the day-to-day practice and core decision-making processes. Community engagement and participation are still largely treated as a one-off exercise or a mechanism for validation, rather than foundational for shaping programme design, monitoring and adaptation with communities. The organization's internal systems, incentives and culture continue to prioritise output delivery over responsiveness to community priorities and experiences, limiting the extent to which communities are engaged in shaping programme design and in early implementation phases. UNICEF's new Environmental and Social Safeguards framework makes CFMs and programme stakeholder engagement mandatory, giving importance to the role of communities and their views in shaping programmes at an institutional level. How this is consistently reflected in practice at country-level, given the system disincentives identified by this evaluation, is yet to be seen.

While the evaluation found positive examples of feedback and input from communities being used by UNICEF, the level of action is ad hoc and focused on troubleshooting rather than more substantive programme design changes or course corrections. The overemphasis on CFMs as opposed to participatory monitoring with communities and groups in situations of vulnerability to understand their experiences of programmes has limited the extent to which community participation and voice have been central to informing and assessing programme quality and accountability. Without this, the organization risks missing critical insights from those it aims to serve, undermining the relevance, effectiveness and trustworthiness of its programmes.

Taken together, the evidence for EQ1 suggests that clearer and more visible leadership accountability is a critical enabling condition for more consistent and effective AAP practice across the organization.

AAP beyond humanitarian action (connectedness/coherence and relevance)

EQ 2: To what extent is AAP understood to be relevant/applicable to UNICEF's work beyond humanitarian action?

The second EQ focuses primarily on Strategic Direction. This is one of the key internal enabling factors set out in the ToC (presented in Section 2.2), which needs to be in place at global, regional and country levels as a perquisite for strong, consistent practice across UNICEF operations – in this case, the application of AAP beyond humanitarian action.

SUMMARY OF KEY FINDINGS ON AAP BEYOND HUMANITARIAN ACTION

Across regions, the evaluation finds that while UNICEF has invested significantly in mechanisms intended to strengthen community voice, the extent to which community feedback consistently informs programme decisions varies widely across contexts.

The ET found positive examples of where some UNICEF country offices have applied AAP beyond emergencies, driven by the contextual factors and individual champions more than organizational triggers. However, unclear terminology and questions about what makes AAP distinct from other organizational commitments have contributed to a branding issue that is limiting its broader adoption, particularly beyond humanitarian contexts. Staff perceptions of AAP's value across different sectors and forms of programming remain key influencers in the uptake and application of AAP.

The expectations for AAP are clearer for UNICEF's humanitarian work than development, where governmental and upstream work adds complexity and concepts of AAP and social accountability intersect. Within UNICEF, there is no agreed definition for social accountability or clarity on who are the custodians of thinking on social accountability. Furthermore, internal entry points for AAP are stronger in emergencies due to structural incentives. The strong association between AAP and humanitarian action, reinforced by the global positioning of AAP within EMOPS, presents a barrier to the broader adoption of AAP across development programmes by country offices – and, therefore, for whole-of-country-office approaches.

Finding 2.1: Some UNICEF country offices have applied AAP beyond emergencies, but this has been context-driven and champion-led, rather than driven by organization-wide systems supporting its operationalization across all UNICEF's work.

65. **At a global level within UNICEF, AAP was conceived as a programmatic principle, applicable across all of UNICEF's work, humanitarian and development alike.** This intention was set out in *UNICEF's AAP handbook (2020)*[50] and further identified as a priority for the organization in UNICEF's AAP Strategy 2022–2025[51]. Although the AAP strategy was intended to be followed by an AAP policy, plans for this have been put on hold. Some KIs at the global and regional level felt a policy may have driven the sustained application of AAP principles in protracted and upstream contexts. The absence of a policy is seen as a gap.

66. **Across multiple regions, many but not all UNICEF staff, including regional and country office leadership, viewed AAP as broadly relevant beyond humanitarian responses. For some, this included preparedness, recovery and development programming.** The evaluation found examples of country office AAP efforts that did not distinguish between humanitarian vs. development programmes in terms of their AAP efforts. The evaluation also found positive examples of where government entities had been engaged on the topic of AAP, as well as AAP-aligned practice in development programmes. All regional offices consulted were able to offer recent examples of such government engagement in interviews. For example, in Afghanistan, AAP leads have focused on establishing community platforms with the potential to connect AAP localization and community systems strengthening, delinking AAP from purely emergency response activities. (See Box I for more details). In Central Asian countries, UNICEF preparedness systems strengthening support to NDMAs includes key elements of AAP, specifically, support for needs assessments based on community priorities and community feedback on response activities (see Box L for further examples).

67. **In development programmes, AAP-aligned practice exists, although it is not necessarily labelled as such. In some regions, efforts have been made to capture this practice, and KIs at a global level considered that a more systematic approach to this may be a missed opportunity. However, some questioned how systematically this practice is reflected across the programme**

cycle. Different interpretations of UNICEF's responsibility and own accountability when working with governments will likely influence the forms this takes. Examples of AAP-aligned practice beyond humanitarian actions are varied and have been identified in multiple regions and sectors. These provided examples of where UNICEF and government accountability for people-centred services overlapped in the implementation of joint programmes and in efforts that strengthen the systems of national and more localised structures. For example, in Bolivia, UNICEF supported an HCD process to co-develop a national vaccination campaign with the Ministry of Health. This initiative was based on in-depth community engagement to understand the barriers to vaccination uptake and to co-create solutions that were responsive to community needs. In Chile and Guatemala, UNICEF led consultations with groups and young people to gather their perspectives on education reform. These consultations led to a government decision to include youth representatives in all the interministerial meetings and the initiation of a national government-run programme on mental health for youth. Similarly, UNICEF has been working to strengthen data-informed decision-making with governments, for example, in Ukraine, where it supported the Ministry of Social Policy in undertaking a national survey on the Perception and Awareness of Social Policy in Ukraine. UNICEF's support for government Offices for National Statistics in strengthening data generation and disaggregation by groups in situations of vulnerability, provided examples of national- level systems being enhanced for more people-centred decisions. Similarly, efforts to strengthen school management committees (as a platform for parents to monitor school performance and hold schools accountable for improvements) provided a localised example of systems strengthening aligned to AAP principles.[52]

68. The relationship between influencing and advocating for governments to adopt and invest – or to permit UNICEF to adopt and invest – in a more structured approach to AAP is connected to the commitment and engagement of UNICEF leadership at country and regional levels. In many KIIs at regional office and global levels, it was explained that, in upstream and development contexts with strong governments, perceived sensitivities may make it challenging for UNICEF to secure such agreements on system strengthening or to use data secured by AAP efforts to influence change to government policy or practices. In such contexts, high-level advocacy may be required. KIs consistently expressed uncertainty as to whether UNICEF leadership was systematically prioritizing AAP in engagement with governments.

BOX K

A community-centred approach for AAP from Afghanistan

In Afghanistan, UNICEF has delinked AAP from purely emergency response activities through investing in 111 CEFCs across the country. These platforms are intended to support all of UNICEF's work in these communities, with information-sharing, participation and a place where people can raise feedback and complaints. They represent a longer-term investment, with the potential for a more sustainable community-owned approach to accountability. The role of the CEFCs extends beyond UNICEF's own accountability, contributing to community systems strengthening. Those involved believe CEFCs have the potential to contribute towards strengthening community understanding and capacities as rights-holders, and their relationship with duty-bearers.

BOX L

Examples of engaging government entities in capacity-building activities and systems strengthening for AAP.

UNICEF has supported government partners in different countries to adopt AAP-aligned practices, including in challenging contexts, often using alternative language to build buy-in. For many years, the ECA region has integrated AAP into preparedness systems strengthening with the NDMAs in Central Asian countries, focusing on how government entities can engage with communities to understand needs after a crisis and hear feedback on response activities. In Lebanon, UNICEF has actively involved national authorities in its AAP efforts, including capacity development, the Ministry of Public Health's hotline, supporting the Beirut Municipality to develop their own PSEA policy, and collaborating with the Ministry of Social Affairs to strengthen their grievance and redressal mechanism as part of UNICEF's support towards the government of Lebanon realizing a national disability allowance. In Afghanistan, de facto authorities have been engaged at local levels on understanding the concepts of accountability to communities. This has included training on AAP; working with local authorities to address feedback; and building practice for mutual accountability through forums inviting relevant departments from each province, community representatives, partners and UNICEF, presenting achievements and asking questions.

> "We don't use the term 'accountability' [with government partners] but couch it as feedback from communities: this is what communities you are serving are saying, this is what they want you to know."
> – Country office Chief of SBC

69. **The rationale for and benefits of applying AAP beyond emergencies are varied and context-specific, ranging from strengthening community agency, to stronger trust, to more inclusive recovery planning. Preparedness with government entities emerged as a key entry point for AAP integration.** In several regions, preparedness has provided a practical and politically feasible space for embedding AAP principles into systems and programming. This includes upstream work with government entities, the use of pre-existing delivery systems, and the establishment of community platforms that serve both emergency and development functions. For example, in the State of Palestine and other Central Asian countries, developing capacity and systems for AAP outside of emergencies contributes to emergency preparedness. In the State of Palestine, the existing cash-based transfer systems made it easier to scale-up AAP when needed. In the ECA region, upstream emergency preparedness work with government entities is seen as the logical place for integrating AAP. In EAP region, the rationale for focusing on emergency preparedness is more linked to internal traction. For regional emergency staff (where AAP is positioned) emergency preparedness represents the main point of access and opportunity for engaging with country staff and leadership. For the KIs, in different parts of UNICEF introducing AAP as a new concept during an emergency, in a fast-paced environment was viewed as unrealistic and potentially leading to more tick-box approaches. This was echoed in EAP, where the staff experience is that effective AAP at the outset of an emergency response relies upon community trust already existing.

70. Beyond preparedness, country offices have varied rationales and benefits for taking a wider view of AAP beyond humanitarian action. In Afghanistan, community efforts for AAP aim to strengthen communities' agency for advocating with other service providers for their rights (see Box K). In other countries, more sustained community engagement has allowed community views to be better reflected in UNICEF programme plans and has built trust. In Venezuela, as an example, UNICEF was able to expand into new geographical areas as a result of community recommendations borne out of their experience of working with the organization. In Ukraine, support for government entities and youth councils at Hromada during the response phase of the crisis provided the foundations for stronger voice and people-centred programming in recovery and longer-term work.

Finding 2.2: Unclear terminology and questions about what makes AAP distinct have contributed to a branding issue that may be limiting its broader adoption, particularly beyond humanitarian contexts. Staff perceptions of AAP's value across sectors and types of work influence its uptake and application.

71. The evaluation found that AAP is more likely to be embraced across all areas of UNICEF's work when staff connect it to the organization's rights-based mandate and the CRC. Where staff made a clear connection between AAP and UNICEF's mandate and the CRC, and recognized its added value, they also viewed AAP as applicable across all areas of UNICEF's work. For example, staff in Afghanistan, Lebanon, Ukraine and Venezuela connected AAP to rights-based programming and UNICEF's core mission.

> "UNICEF, globally, is working for vulnerable children and communities, so we have to be answerable to them, regardless of the chain of partners we work with in programmes. It's a no-brainer. 'Beneficiaries' are rights claimers and have a right to say when things not going to plan." – Country Deputy Representative

72. **However, many staff question AAP's distinctiveness and staff in key positions lack a solid understanding of AAP and the value-add this brings to programming.** Despite AAP's growing visibility, staff in several countries such as Afghanistan, Comoros and Somalia described AAP as a repackaging of existing concepts, without UNICEF necessarily doing much differently. This was perceived negatively, and, for some, was seen as part of a broader trend within UNICEF of fragmenting concepts into separate initiatives, each with its own guidance and teams. KIIs with leaders across all levels highlighted that the case and rationale for AAP have not been sufficiently articulated and the narrative around its importance remains weak. As one Deputy Representative put it, AAP was seen as "flavour of the day", while another senior leader described it as a "religion", explaining that, from their perspective, more was required to ensure programme staff were convinced on how principle could become institutionalized practice. The results of UNICEF's investment in AAP are not known, with current data focused on qualitative outputs and processes rather than results. Furthermore, the added value of looking at programmes through an AAP lens is not always apparent to sections and leaders. For example, in Ukraine, certain sections questioned the value of in-depth community engagement methods, beyond traditional survey methods. In several cases, senior staff expressed scepticism about the usefulness of community participation, particularly when it did not align with UNICEF's expectations or required brokering conflicting community views, or when UNICEF already had set designs for standard activities: "*When doing a water piping system what is AAP? Not every single intervention requires AAP because of the nature of delivery*" (UNICEF country Deputy Representative).

73. The 2024 Audit reported that, at the global level, a proposal "aimed at clarifying distinct roles and objectives of AAP and SBC (formerly Communication for Development) functions as well as recognizing some of their commonalities was drafted". This draft emphasizing the need for both community engagement and behaviour change in both development and humanitarian contexts, had not been finalized and did not clarify the role of SBC in supporting the AAP agenda in the development context. Global-level KIIs for this evaluation confirmed that the proposal, although worked on cooperatively, had not yet been finalized and was reported to have been overtaken by the need for institutional restructuring following the 2025 global financing crisis.

74. As mentioned in Section 3.4 on Leadership, the evaluation found that many leaders at country and global levels had a weak or narrow understanding of AAP and associated AAP primarily with CFMs, which limited their view of its broader relevance across programmes and development settings. Current AAP frameworks also do not sufficiently make the link between AAP and good programming, building resilience and empowerment, and staff at all levels struggle to understand how AAP connects to different stages of the programme cycle. In part, the conceptualization of AAP around the seven pillars, without sufficiently communicating how these connect to UNICEF processes, contributes to this lack of clarity and poses a challenge for how consistently leaders will give emphasis to reflecting AAP across the programme cycle.

> "It is not very clear where [different pillars in the AAP framework] should all sit across the office. This affects management clarity."- (UNICEF Regional SBC Adviser)

75. **The acronym 'AAP' and terminology – particularly the terms 'accountability' and 'affected populations' – are seen as problematic across all levels of UNICEF.** Staff frequently described challenges with the language used around AAP, noting that it often feels rooted in humanitarian contexts and does not resonate with development work. As one staff member put it, the terminology risks "losing people along the way". KIs have highlighted that the acronym itself does not clearly convey how AAP connects to good programming or rights-based approaches, and its meaning does not always translate well across languages. For instance, in Spanish the term 'accountability' is more commonly associated with financial reporting than with participatory or feedback-driven processes. Several staff described AAP as "another fancy acronym added to the list", and called for the use of more accessible, commonly understood language.

76. In response to these challenges, some regional offices and country offices have experimented with alternative terminology to better reflect the intent and relevance of AAP in development settings. In the LAC region, including the Dominican Republic and Venezuela, Country Offices tested alternatives to the AAP acronym such as 'social responsibility' to speak more to development work, but reverted to AAP to align with wider UNICEF terminology. In Somalia, 'people-centred AAP' is used in recent AAP AWPs, while in the ECA region there was a shift from AAP to 'people-centred accountability'. This term is also seen in the recently released Global AAP Tipsheets, developed by the AAP Section[53], although it is not yet clear if this is an official change in terminology.

77. **While UNICEF has long prioritised child-centred programming and elevating children's voices, participation remains inconsistent across programmes, and AAP brings valued refocusing.** Country and regional staff noted structural challenges, and a lack of senior leadership oversight is limiting the extent to which participation is consistently reflected throughout programme cycles. Responsibility for participation sits in "many different corners of UNICEF", leading to more fragmented efforts to facilitate child participation across country offices. Some staff also perceived that existing development programmes already reflect AAP principles, leading to a view that stronger focus on AAP is unnecessary. However senior regional and country staff recognize AAP as bringing a more structured focus to listening to communities throughout the programme cycle, which provides a valuable lens for programmes. This is particularly important for programmes led by technical staff – such as doctors, teachers and engineers – who may not naturally prioritise people-centred programming.

Finding 2.3: Expectations for AAP are clearer for UNICEF's humanitarian work than development, where governmental and upstream work adds complexity. The relevance of AAP depends more on understanding what it entails across different intervention types and operational modalities rather than in specific contexts.

78. **UNICEF's current AAP frameworks, including the CCCs, speak more to emergency interventions but lack clarity on what is expected and UNICEF's responsibilities to communities in development interventions (particularly when working with government entities).** As such, UNICEF's current conceptualization of AAP does not fit with many country contexts and there is a lack of clarity on expectations for AAP and what success looks like in different intervention types and implementation modalities. Importantly, current frameworks do not speak to accountability when working with government entities – both UNICEF's own accountability to communities and the accountability of government entities as duty-bearers – and so do not provide clarity on when UNICEF has direct accountabilities to communities verse may contribute to broader systems strengthening (but is not directly responsible or accountable) for different forms of government partnerships. As found by UNICEF's Global AAP Audit: *"by applying the same CSIs [for AAP] in the development context, where a government represents its people, the organization appears to have the same implementation expectations as in humanitarian contexts, even though the circumstances and consultations are not the same when there is an effective government structure"*[54]. This gap was felt particularly in country offices where UNICEF works closely with governments, including in systems strengthening upstream programming, such as those in the EAP and the ECA regions. For example, in the Poland Refugee Response Office, the integration of AAP was delayed due to a lack of guidance on how to use government systems for AAP initiatives[55]. Work led by the AAP section sought to unpack and provide greater guidance on UNICEF's commitment to AAP when working with governments (responding to country requests for more support). However, as recommended by UNICEF's Global AAP Audit, there is still need for a decision and clear direction from the Deputy Executive Director on the extent to which UNICEF's AAP framework should be adopted and implemented in a development context from senior leaders[56].

79. **For staff, the lines of accountability and expectations are clearer for certain forms of interventions and working modalities more common in emergency response work but have not been clarified for other forms of interventions or modalities.** Evidence from KIIs with country, regional and global staff showed UNICEF's expectations for AAP are more obvious to staff in the delivery of cash, items or services to individuals or households (either directly or working with NGO partners). These are "low-hanging fruit" for AAP. In comparison, in other types of interventions and when working with government entities, as is more common (but not limited) to development programming, staff and senior organizational leaders have differing interpretations of UNICEF's responsibilities and accountabilities, and staff struggle to understand how to apply AAP. As such, the application of AAP is even more dependent on individual interpretations, rather than organization-wide expectations.

> "To my mind, that decision has been taken already that AAP is relevant to all of our programming everywhere, but no structural change was made. To this day, it is difficult for me to articulate to a country office what I expect to see and what tools they should use to do that." – Staff member from DAPM (now OSE)

80. **Action to strengthen AAP or people-centred accountability as part of UNICEF's work with government entities brings new complexities that UNICEF has not needed to unpack for humanitarian contexts[57].** For example, working upstream through national authorities on issues of AAP adds further dynamics and a need for different planning compared with NGO partners, and UNICEF may face greater resistance. Sustainability is considered more central in development contexts, where the focus is more on embedding AAP into national systems as part of UNICEF's systems strengthening support, and ensuring local ownership. This requires a slightly different approach with greater focus on organizational development sustainability (both in the design of UNICEF's support and in monitoring): *"It has to be sustainable… you need to think about how government can take it forward, it's less short-term"* (Deputy Representative). Examples from country offices suggested that the sustainability of UNICEF's systems strengthening support on aspects of AAP is fragile, and upstream programming requires different approaches for monitoring the delivery of AAP. To support country offices, there is a need for greater practical support and evidence generation on how governments can be engaged on people-centred accountability and AAP to unpack some of these complexities.

81. Working with government entities introduces overlaps between strengthening government's own accountability to citizens (and asylum seekers and refugees in cases of displacement) and actions to ensure UNICEF's own accountability to people and communities for how funds are used and results from the use of these. Notably, UNICEF's frameworks for AAP intersect with its priorities for local governance and align with broader definitions of social accountability, highlighting both the synergies and areas of conceptual overlap that require careful navigation. Within UNICEF, there is no agreed upon definition for social accountability; there is no clear organizational position, policy or framework; and it is not clear who are the custodians of thinking on social accountability[58]. However, as highlighted by one KI, this feels like a return to the unresolved relationship between AAP and SBC (as unofficial holders of social accountability).

82. **Working with governments demands greater ownership and steer from sections and may need different skills to those commonly found in AAP focal points.** For example, country AAP leads from the EAP region highlighted the importance of identifying entry points in individual government entities and line ministries, and of maximizing existing relationships with UNICEF staff, thereby requiring leadership from Section Chiefs to identify opportunities for integrating people-centred accountability. The Chief of SBC in Somalia noted that the capacity/skills for AAP as part of upstream work extends beyond those found within SBC, requires different partners, and speaks to pillars of AAP that overlap less with SBC's scope of work. They saw a need for UNICEF to invest in building the right capacity if UNICEF aims to apply AAP beyond more obvious forms of emergency response, including for upstream work. Whereas the internal mainstreaming of AAP needs to sit with senior staff (see Section 3.1.2 on AAP positioning), engaging governments on strengthening people-centred accountability requires national expertise (with in-depth country knowledge of government systems and contacts with government officials). Different positioning and strategies may be needed for internal vs. externally facing support.[59]

Finding 2.4: Entry points for AAP are stronger in emergencies due to internal and external structural incentives. The strong association between AAP and humanitarian action (reinforced by the global positioning of AAP within EMOPS to date) presents a barrier to broader adoption by country offices.

83. **The early integration of AAP into UNICEF's CCCs, HAC indicators and emergency procedures has proven successful in driving practice within emergencies, making AAP a requirement in humanitarian contexts, which extends the responsibility beyond individual teams.** As such, the internal accountability for AAP is stronger and more structured in humanitarian response work. Countries experience greater levels of support and emphasis on AAP from regions and HQ following an emergency, coupled with higher levels of funding that provide a greater demand for AAP, as well as the funds needed to realize certain actions. For example, in Somalia, an AAP temporary assignment post was created following the activation of the L3 drought response and the country office experienced high levels of support from the region and HQ. In Comoros, the 2024 cholera response triggered greater regional support and emphasis for AAP (in particular during response planning and reporting), coupled with increased funding. In Ukraine, the 2022 escalation of conflict was the point when AAP was introduced to the country office, and, again, high levels of funding allowed for investment in AAP within Ukraine and refugee response countries. At a regional level, the ESA, MENA and EAP regions also confirmed that greater emphasis is given to AAP within emergency contexts. Critically, in 2024, countries with a standalone HAC (30 country offices) showed outstanding performance, with 93% (28 out of 30) meeting the AAP CSI benchmarks, compared to a global average of 62%.2

84. Accountability that AAP is being delivered is weaker in development programming, and authority and responsibility for guiding AAP implementation in development contexts is unclear[60] (see Section 3.4 for more on leadership incentives). As noted by a Deputy Regional Director, *"The accountabilities are not that strong in development programming…. It's not mandatory and not resourced"*. Others spoke of difficulties getting traction in parts of the organization outside of emergencies. Several sources also pointed to practice in AAP (at least practice labelled as AAP) being less pronounced in development programmes compared with emergencies. For example, the positive examples of AAP from MENA and EAP regions shared with the ET in interviews were all emergency related, despite the EAP region being primarily centred on upstream work. Several countries in the EAP region include AAP as standard in emergency PDs, but not in development PDs. This echoes UNICEF's Global AAP Audit findings, where, in multiple countries that had both localised emergency responses and development programmes (such as Ethiopia, Madagascar, Nigeria, Niger and Uganda), the application of AAP was mainly in emergency responses and not in development programmes[61]. Furthermore, although noting issues with CSI data, a lower proportion of country offices in development contexts met the organizational benchmarks on AAP implementation in 2023, when compared to those with emergency responses (37% compared with 79%)[62].

85. Experience has shown that emphasis on AAP in protracted emergencies can lead to wider application into regular programming (for example, KIs reported this had happened in Chad, Kenya, Türkiye and Ukraine). That case for investment in AAP in typical protracted crisis contexts has not been captured and presented to decision-makers. In comparison, where country offices go through quick onset emergencies, experience has found the interest in AAP has been shorter lived. Shorter responses do not provide sufficient time for AAP to become inbuilt in country office processes and ways of working, and if UNICEF relies on donors to include short-term start-up funding for such approaches, plans for sustainability need to be included from the outset.



86. **The evaluation found that the association of AAP with UNICEF's humanitarian work is widely viewed as unhelpful in promoting broader adoption by country offices. The positioning of AAP within EMOPS at a global level to date was viewed as problematic by staff at global, regional and country levels[63], sending a strong message that AAP is only relevant for UNICEF's emergency work.** The association between AAP and emergencies discourages more development-focused country offices and programme teams from engaging and investing in strengthening AAP and means it is less of a priority for the organization. It requires regional and country AAP leads to make the case for the additional value and results deriving from AAP in UNICEF's work beyond emergencies, rather than it being presented as a given that AAP is a core component for development. For AAP to be adopted across UNICEF more broadly, it needs to be delinked from humanitarian action, supported by internal positioning that reinforces this.

> "As long as AAP stays in EMOPS, AAP will be seen as just emergencies and so missed in regular programmes." – Country Deputy Representative

> "If AAP is not linked to every section/team in the organization, it will never be translated into actions and results in the longer run." – Country AAP lead.

87. It was noted that the positioning of AAP at regional and country levels can provide opportunities for those providing technical expertise on AAP to engage across all programmes, regardless of whether they are emergency, protracted crisis, or development programming contexts (see Section 3.1.2 on AAP positioning). Several respondents referenced that the positioning of AAP with SBC has helped to move away from being solely emergency-focused, although, noting that the role of SBC in supporting the AAP agenda in the development context has not been explicitly defined[64]. However, even for countries that had diluted the association of AAP with humanitarian/emergencies, the global positioning of AAP still provided a centre of gravity toward emergencies.

88. At the time of the data collection, there was no broad consensus among country and regional KIs about where AAP should sit at a global level as an alternative to EMOPS. Proposed options included with DAPM (now OSE), SBC, or with other people-centred approaches (gender, DI) in PG (now GPD). As outlined in more detail in Section 1.2, recent internal changes as part of UNICEF's Future Focus Initiative included the division of global responsibilities for AAP between EMOPs, SBC within PG (now GPD), and DAPM (now OSE). Significantly, programmatic support for AAP in regional and country offices will move to SBC, with EMOPS retaining the normative and interagency functions. There is potential, depending on capacity within SBC and leadership support, for this shift to expand the application of AAP across UNICEF's work irrespective of context.[65].

☑ PRELIMINARY CONCLUSIONS ON AAP BEYOND HUMANITARIAN ACTION FOR FINDINGS 2.1 TO 2.4

Preliminary conclusion 5: AAP is conceptually relevant across UNICEF's mandate, and the more systematic focus on involving communities through the programme cycle that AAP provides is valuable. However, its application remains more strongly associated with humanitarian contexts. The organization has yet to establish a clear approach to AAP in development settings, where different interpretations of UNICEF's responsibilities to communities when working with government entities, structural ambiguity and limited ownership hinder uptake. Without clearer expectations and stronger integration into programme quality frameworks, AAP risks being perceived as optional outside of emergencies. Recent institutional efforts that span all contexts – the inclusion of AAP in internal audits and UNICEF's new CFM procedure – may help shift this, but unless UNICEF addresses the conceptual and structural barriers, AAP will struggle to gain traction across all programming contexts.

Overall, the evidence for EQ2 indicates that strengthening the practical use of community feedback requires more coherent guidance, coordinated support, and clearer expectations for how country offices integrate community voice throughout the programme cycle.

People-centred approaches (coordination)

EQ 3: To what extent is there coordination and integration at regional- office and country-office levels between UNICEF's efforts for mainstreaming AAP and other cross-cutting people-centred approaches?

The third EQ also focuses primarily on Strategic Direction. This is one of the key internal enabling factors set out in the ToC (presented in Section 2.2), which needs to be in place at global, regional and country levels as a prerequisite for strong, consistent practice across UNICEF operations. In the case of EQ3, this focused on strategic intent for the coordination and integration of AAP and UNICEF's other cross-cutting people-centred approaches, specifically, DI, Gender, and PSEA which UNICEF is committed to reflecting in all programmes and which represent the organization's broader set of accountabilities to communities. It is recognized that UNICEF other commitments to localization, Adolescent Engagement and Participation, and SBC and RCCE work, are also considered people-centred.

SUMMARY OF KEY FINDINGS ON PEOPLE-CENTRED APPROACHES

Across regions, the evaluation finds that UNICEF's commitments to people-centred programming are often pursued through parallel thematic streams, which limits their collective contribution to a coherent and holistic understanding of community experiences.

The siloed global ownership of UNICEF's different cross-cutting people-centred commitments, specifically AAP, gender, DI and PSEA, is mirrored at regional and country levels where parallel staffing, focal point arrangements and different reporting lines hamper coordination and create inefficiencies.

The evaluation found many positive examples of collaboration between people-centred approaches at the activity level, with collaborations between AAP and PSEA most prominent among the positive examples. These, however, were dependent on individual initiative and interpersonal relationships. As such, the sustainability of positive practice is vulnerable to turnover. At country and regional levels, the development of separate strategies and divergent approaches adopted by leads of UNICEF's cross-cutting commitments has hindered collaboration. In particular, it harder to identify potential synergies between AAP, gender, DI and PSEA, despite the common entry points for mainstreaming UNICEF's cross-cutting people-centred approaches in programming and partnership processes and the similar challenges faced.



Finding 3.1: Fragmentation in global ownership of UNICEF's cross-cutting people-centred commitments, specifically AAP, gender, DI and PSEA, is mirrored at the regional and country level, where parallel staffing, focal point arrangements and differing reporting lines hampers coordination and creates inefficiencies.

89. **Global organizational divides between different cross-cutting people-centred commitments (AAP, gender, DI and PSEA) have been mirrored at country and regional levels, at times resulting in parallel staffing and focal point structures, contributing to inefficiencies.** This also means that commitments to people-centred approach principles and to people-centred approach to driving programming become more challenging to maintain. At a global level, organizational leads for different people-centred approaches have been split between EMOPs and PG (now GPD), leading to siloed responsibilities across the two divisions[66]. This is reflected in the regional and country offices where people-centred initiatives are often led by different teams or local networks of focal points. This leads to a lack of coherence and coordination in how commitments are implemented within different regional and country offices. KIs provided several examples of where parallel teams, as opposed to a harmonized, coordinated people-centred approach encompassing UNICEF's different commitments, had led to inefficiencies. This resulted, for example, in parallel field visits; multiple internal working groups; increased demands on sectors; and transferring the onus on sections, particularly in busy POs, to identify the linkages and overlap between different people-centred commitments and turn each into practice. For example, the Somalia country office has separate internal working groups for gender, DI and PSEA, with limited awareness of each other's work.

90. In theory, the importance of maintaining strong connections between AAP and other organizational cross-cutting priorities has been acknowledged on a global level since key AAP documents were produced in 2018[67]. This was reaffirmed in the 2022–2025 AAP strategy, which, again, called for a more coherent approach[68]. In 2024, initial steps toward greater coherence and harmonization were outlined in a joint concept note [69]; however, minimal subsequent progress has been made against the actions set out in the concept note. Conversely, some interviewees holding mandates for other cross-sectional people-centred approach commitments have suggested that, on occasion, it is AAP-led approaches that have been replicative or duplicative of already established channels for receiving community feedback. Coordination needs to be led, and KIs have indicated that this does not always occur, and some expressed that individual team identities risked undermining willingness for greater synergies.

91. Similarly, UNICEF's localization evaluation found that siloed HQ agendas, particularly between AAP, localization and the nexus, are mirrored at the country level, reducing coherence and diluting effectiveness[70]. The gender evaluation likewise noted that, while the Gender Action Plan provides strategic impetus, the sheer volume of cross-sectoral priorities in the Strategic Plan creates "competition for bandwidth" and confusion in operationalization[71]. This evaluation concurred with the localization evaluation on these points.

92. A notable positive exception at global level is UNICEF's support to clusters, where efforts have been made towards strengthening coherence and synergies between different people-centred. Through a working group, focal points from AAP, localization, gender, disability and other people-centred approaches have provided joint support to UNICEF led/co-led clusters and area of responsibility[72] developing guidance on people-centred cluster coordination.[73] Further, the Global WASH Cluster also had a dedicated post on a people-centred approach. The evaluation did not assess the extent to which Global efforts have influenced cluster practice at country level.

93. **The level of investment, staffing and the maturity of cross-cutting commitments such as gender, DI, AAP and PSEA; vary significantly across country offices. Furthermore, different reporting lines within country office structures hamper coordination.** In several case study countries and in regions, gender was the best resourced and longest established, with dedicated teams or specialists, while DI was typically the weakest, often lacking a lead and relying on overstretched focal points. AAP sat somewhere in between, sometimes benefiting from dedicated staff, as in Venezuela and Lebanon, and sometimes relying on champions to lead on AAP in addition to other responsibilities, such as in Ukraine[74]. Reporting structures also vary, creating a divide: PSEA often reports directly to the Representative, gender to the Deputy Representative, and AAP commonly to a mix of Deputy Representative, Representative and SBC[75]. This structural separation can hamper organic collaboration and requires leadership for more consistent coordination. In contrast, in Egypt SBC, Gender and ADAP are in one section

(with AAP being advanced by SBC and Gender) as attested to by the KII conducted with the UNICEF staff in country, according to which structural proximity and the same reporting line facilitated coordination and collaboration between them.[76] As this evaluation was concluding the data collection and analysis, UNICEF was determining where AAP global personnel and responsibilities for AAP pillars would be located at a global level. This presented an opportunity to address fragmentation.

94. **Country office leaders face competing priorities and, thus, often choose which cross-cutting commitments to prioritise, depending on experience of effectiveness, donor interest, and contextual factors such as the connectivity opportunities in the country or the willingness of governments.** As such, as AAP is currently effectively optional for country leaders, there is a risk it is intentionally or unintentionally deprioritized, with no requirement to justify or explain this choice. This approach can help to align resources with what matters most in each setting; however, it can also lead to inconsistency and neglect of certain cross-cutting priorities. Deputy Representatives express the need to select a limited number of themes to prioritise, recognizing CPDs, regional and HQ expectations often exceeded country office bandwidth and capacity to deliver. Attention given to themes like gender, disability or AAP; often reflects the background and interests of senior leadership, alongside external pressures. For instance, country and regional leaders recognized it is not feasible for smaller country offices such as Comoros and those in the ECA Region to have multiple different thematic focal points. Instead, themes are prioritised by Deputy Representatives, regardless of how many are included in the CPD, depending on the personal interests and professional backgrounds of senior leadership, as well as donor pressure and funding opportunities.

95. **Furthermore, donor priorities, rather than internal commitments, can significantly shape which cross-cutting commitments themes receive attention and investment, which contributes to the risk of an uneven programmatic landscape and UNICEF's own commitments not being met.** This potential risk may require more attention in the CPD or in mid-term reviews. In several contexts, cross-cutting priorities are shaped less by internal alignment and more by donor-specific requirements, which can fragment implementation and reduce the sustainability of thematic work. In Ukraine, for example, different donors prioritise different cross-cutting areas, resulting in a fragmented "cocktail" of expectations across programmes. In CAR, mainly FCDO funding enabled the recruitment of a dedicated AAP focal point. However, once this funding ended, only one interim year was covered through UNICEF core resources, after which the role was merged, resulting in a loss of visibility for UNICEF efforts at the inter-agency level[77]. Similarly, in Venezuela, donor push and funding was essential to advancing AAP efforts. This pattern was mirrored in the global localization evaluation, which found that, while donor enthusiasm can enable new initiatives, rigid funding structures and accountability requirements often limit UNICEF's ability to make long-term investments or fully implement its own agenda, highlighting how externally driven priorities can both enable and undermine coherence in cross-cutting work[78].


© UNICEF/UNI671453/Joseph Balikuddembe

Finding 3.2: While the evaluation found some positive examples of cross-cutting people-centred approaches (AAP, gender, DI and PSEA) collaborating on an activity level, these efforts were significantly dependent on individual initiative/influence and interpersonal relationships. More commonly, the evaluation found limited, and rarely sustained or formalized, collaborations among staff leading different cross-cutting people-centred priorities within country offices and regional offices.

96. **At a country level, the evaluation found some positive examples of collaboration between selected cross-cutting themes around specific activities, often initiated by the individual leads of PSEA, AAP and/or gender.** Collaborations between AAP and PSEA were commonly prominent among the positive examples, where available resources and community-facing channels were leveraged for mutual benefit. These synergies reflect a recognized overlap between the organizational commitments for AAP and PSEA, both of which emphasize community-centred approaches[79] [80]. For example, in Somalia, the PSEA lead proactively collaborated with AAP–SBC staff, leveraging existing community engagement channels such as U-Report and social mobilizer networks to understand community perspectives on PSEA and share key messages. In Venezuela, collaboration occurred particularly around CFMs, with informal coordination among leads for AAP, gender, PSEA and DI. In Ukraine, recorded PSEA messaging was incorporated into the AAP-led "Say it as it is" complaints and feedback hotline and so played to all callers. PSEA visibility materials were developed through collaboration with gender, SBC, communications and child protection teams. UNICEF Lebanon benefited from close working relationships between AAP and PSEA specialists, for example, including PSEA in AAP training. UNICEF Ukraine provided a positive example of collaboration between gender and the AAP/SBC lead in integrating gender into a human centred-design process to shape the services and layout of resilience centres near the frontline.

97. **In some contexts, it was notable that more consistent collaboration between cross-cutting leads was facilitated by Deputy Representatives and remarked upon positively.** For example, in Somalia, a former Deputy Representative initiated weekly cross-cutting commitment meetings for AAP, gender, DI and PSEA leads, which were highly valued and enabled greater collaboration and joint action. These meetings also provided the Deputy Representative with critical oversight, allowing them to raise key priorities in Programme Management Team (PMT) meetings and with Chiefs of Sections, thereby mitigating the challenge more junior cross-cutting leads face in influencing senior roles. This practice ceased following a change in leadership. Similarly, in CAR, the current Deputy Representative convenes monthly programme coordination meetings, which are regarded as key opportunities to strengthen synergies across thematic areas. Cross-cutting commitments are a standing agenda item under their chairmanship; however, it is uncertain whether this approach would be sustained under a different Deputy Representative.

98. **When coordination among cross-cutting themes relies on individual leads or individual Deputy Representatives, its success is dependent on the intrinsic motivation and capacity of those individuals in understanding where synergies lie, making it inherently more fragile, dependent on personalities and unsustainable.** For example, in one country, weak bi-lateral coordination between AAP and gender had missed the opportunity to reflect expertise and 'lens' to each other's work, weakening the effectiveness of efforts. In this case, options provided to women and girls visiting UNICEF-supported safe spaces had not been contextualized to ensure the accessibility and safety of the channel, and so these were likely to be ineffective. Applying good practice in AAP could improve the appropriateness and accessibility of the channels provided, as well as connecting these to the office-wide CFM. In the absence of champions who see the importance of coordination between different people-centred leads, or when such champions leave the country office, positive collaboration practices often do not continue.

99. **The evaluation also found several examples of regional and country offices assigning multiple cross-cutting people-centred commitments to single roles, driven by funding pressures[81]. While joint roles may theoretically foster greater synergy and support integration, in practice, this often results in overstretched staff and limited observed benefits.** Staff frequently raised concerns about being "spread too thin", struggling to adequately prioritise each thematic area or meet the demands associated with 'double- or triple-hatting'. For example, in the LAC regional office, combining PSEA and AAP under a single role enabled the region to sustain its AAP focus by drawing on HQ funding originally earmarked for PSEA. However, 'double-hatting' makes meaningfully advancing

each theme more difficult given the limited capacity. Both the global localization and disability inclusion evaluations[82] found similar patterns: while combining responsibilities may seem efficient, in practice it hinders effectiveness and coherence. As a result of the current global funding crisis, KIs indicated that there will be a further reduction in capacity for cross-cutting commitments at all levels of UNICEF, and it is unclear if the remaining capacity will even allow for 'double- or triple-hatting'. UNICEF is examining models where, for instance, rather than having dedicated PSEA leads in each country office, models are being explored where clusters of five country offices share one lead instead.

100. A similar trend of merging or streamlining thematic responsibilities is emerging at the interagency level, again driven primarily by increasing resource constraints. KIs expressed concerns in relation to these changes. While some acknowledged the efficiency gains that may result from consolidation, others highlighted risks such as the dilution of thematic focus and the overstretching of coordinators' capacity. There were also concerns about whether a merged structure could adequately maintain the technical depth and attention required for each area, particularly in contexts with complex protection needs or limited specialist capacity. In CAR, for example, the interagency working groups for AAP, gender, and DI have recently been combined into a single forum. In Lebanon, the existing interagency PSEA coordinator has recently been tasked with coordinating AAP as well, while the PSEA and AAP working groups operate separately[83]. In Venezuela, the PSEA and AAP interagency groups are also in the process of being merged.



© UNICEF/UN644309/Stuart Tibaweswa

Finding 3.3: At the country-office level, the use of separate strategies and divergent approaches by cross-cutting commitments has hindered collaboration. This fragmentation has made it harder to identify potential synergies, despite having common entry points in UNICEF processes and similar challenges across UNICEF's cross-cutting commitments.

101. **Cross-cutting people-centred approaches, such as AAP, gender, DI and PSEA; share common entry points for integration into UNICEF programmes. However, the absence of a harmonized framework and approach based on the synergies between UNICEF's cross-cutting commitments, risks competition for attention and space within programming.** Similar touchpoints for Programme Cooperation Agreement (PCAs) include influencing CPDs and Annual Work Plans (AWPs); programme monitoring and design; embedding competencies in job descriptions and performance reviews; and building staff and partner capacity through training, internal guidance and resource networks. Common entry points were not commonly recognized by leads as the basis for strengthening collaboration and reducing competition. For instance, in Afghanistan, the approaches used by the gender team to mainstream gender mirrored many of the strategies for mainstreaming AAP seen in other country offices. Similarly, country offices working with government partners risk individual advisers competing for space with government officials rather than working collectively.

102. Similar challenges were reported by leads of other cross-cutting commitments when it comes to integrating their work into programmes, yet these shared barriers are equally rarely leveraged. Common difficulties include limited understanding among programme staff of the relevance of people-centred approaches; the need to engage multiple sections across large offices; reliance on personal relationships rather than structured systems to identify integration opportunities; and the influence of government policies on upstream work. For example, UNICEF's global evaluation on DI highlighted that progress often depends on the personal commitment of focal points or "champions", rather than being embedded as a systematic, well-resourced institutional priority, echoing many of the same constraints identified for AAP.

103. **Cross-cutting commitments within UNICEF country offices often operate through separate strategies, with low visibility of other cross-cutting commitment plans hampering staff from identifying and leveraging complementarities**. For instance, UNICEF Venezuela's AAP strategy makes no reference to gender or disability inclusion, while in Ukraine, despite the Gender Equality Strategy (2025–2029) referencing community engagement and AAP, KIs highlighted the absence of a unified approach integrating AAP, gender and PSEA as a critical gap affecting strategic coherence. This pattern was echoed in the global evaluation of UNICEF's disability inclusion work, which pointed to persistent silos and weak coordination, noting that, although some country offices are beginning to adopt innovative cross-sector strategies, "sectoral silos and insufficient structural coordination" continue to "limit the coherence, scalability, and effectiveness" of disability-inclusive programming[84].

104. **The strategies adopted to mainstream AAP can sometimes limit opportunities for synergy with other cross-cutting people-centred approaches.** At the country-office level, AAP strategies are often structured around UNICEF's seven AAP pillars, and are, therefore, less connected to UNICEF's processes, programme cycle and structures that need influencing, which are typically used by other themes. This misalignment can make integration more difficult. As an example, when PSEA is included within AAP strategies, it is frequently positioned as one of the AAP pillars rather than being developed through a joint, integrated AAP–PSEA approach. In Afghanistan, for example, AAP efforts focused heavily on building community platforms as 'services' for sectors, whereas gender gave focus to mainstreaming their approaches into country office processes and programming. These key differences made areas of synergy and overlap between AAP and other cross-cutting commitments less obvious to staff in Afghanistan.

105. At the regional level, staff also confirmed the challenges of coordination among advisers addressing people-centred approaches. Joint activity – for example, training courses – are presented as positive good practice to be replicated rather than already standardized. Joint country visits appear to be rare, with no examples being presented. There is no sense of burden-sharing being adopted or directed by regional management and leadership. A positive initiative may be the intersection between AAP and localization, especially where this is associated with regional AAP posts, which should provide an entry point for AAP to coordinate more closely with other people-centred approaches, as well as to engage in development contexts.

PRELIMINARY CONCLUSIONS ON CROSS-CUTTING PEOPLE-CENTRED COMMITMENTS FOR FINDINGS 3.1 TO 3.3

Preliminary conclusion 6: Coordination between UNICEF across cross-cutting people-centred approaches (AAP, gender, DI and PSEA) is critical for efficiency and effectiveness, but to date has been hindered by fragmented global ownership mirrored in parallel staffing with different reporting lines at regional and country levels. While these approaches share common goals and mainstreaming efforts have similar touch-points, the absence of a clear, harmonized approach and gaps in consistency of coordination at global, regional and country levels is contributing to competition, duplication and inefficiencies.

To date, models for progressing UNICEF's cross-cutting commitments at global, regional and country levels have relied on separate teams or staff leading on each, guided by separate conceptual frameworks, strategies and plans. This separation and distinct conceptualization have not allowed the synergies between UNICEF's cross-cutting people-centred commitments to be readily identified and agreed on. The stark reduction in capacity across all levels of UNICEF demands more than ever that, at a global level, the synergies between UNICEF's people-centred commitments are identified and clarified. The absence of a common cross-cutting people-centred framework, shared objectives, and joint expectations for mainstreaming around common programmatic entry points is a key barrier to greater harmonization and improved efficiencies. Therefore, it will be vital for remaining capacity in UNICEF's new centres of excellence and countries to be able to support people-centred approaches that incorporate AAP, gender, DI, PSEA and localization lenses.

Preliminary conclusion 7: To date, resource constraints have led to 'double- or triple- hatting' with individual staff expected to deliver against the objectives of one or two cross-cutting commitments (in addition to other responsibilities). However, the scale of reductions needed in response to the 2025 funding crisis and questions over the effectiveness of 'double-/triple-hatting' indicate the need for a more strategic and single cross-cutting people-centred approach, which can target key entry points for mainstreaming based on the new organizational structure and resourcing landscape.

The evidence for EQ3 suggests that the absence of an integrated approach constrains UNICEF's ability to operationalise people-centred commitments in a way that reflects the lived realities of groups in situations of vulnerability across contexts.

Leadership (efficiency)

EQ 4: To what extent is UNICEF's country leadership motivated to take on AAP as a key programming approach?

The fourth EQ focuses primarily on Leadership. This is a key internal enabling factor, as set out in the ToC (presented in Section 2.2), and is recognized as a prerequisite for strong, consistent practice across UNICEF operations. Furthermore, this EQ also assesses the extent to which community voice is a key metric of success for leaders, as a means by which UNICEF and partners hold themselves accountable for the quality and effectiveness of programmes. This is one of the Strategic Outcomes for the institutionalization of AAP, as set out in the ToC.

SUMMARY OF KEY FINDINGS ON LEADERSHIP

Across regions and programme contexts, the evaluation finds that AAP is often positioned as a technical or enabling function rather than as a core dimension of programme quality and effectiveness.

Regional and country leadership commitment to AAP has evolved, but the still frequent absence of clear leadership accountability for AAP and multiple competing priorities, means progress in AAP is often dependent on individual champions and is vulnerable to shifting priorities, linked to leadership turnover. Furthermore, while management support has been an important enabler for AAP, progress has not been consistently driven by leadership and, in many countries and regional offices, AAP continues to be viewed as the responsibility of a particular team or designated lead, rather than a shared, office-wide accountability, highlighting a gap in leadership positioning of AAP as a collective priority. This fragmented ownership has implications for efficiency, as efforts are often duplicated, siloed or not sustained, and opportunities for streamlined, coordinated implementation are missed.

Community voice is valued in principle but is not systematically used by UNICEF leaders as a metric for programme success or as a performance measure against which teams are held to account. A key barrier to this is when the views of communities are collected but are not officially incorporated within decision-making processes or UNICEF systems, which limits their reach within the organization and, thus, their influence. This limits efficiency by reducing the utility of existing feedback mechanisms to inform programme improvements.

At a global level, there is limited evidence that top management has explicitly prioritised or structurally embedded AAP. While some senior leaders demonstrate conceptual awareness, AAP is often treated as a technical add-on, rather than a core element of strategic leadership and accountability. The evaluation findings on leadership echo the findings of the global AAP audit in 2024, where a lack of leadership involvement was regarded as a key inherent risk.

Finding 4.1: Regional and country office leadership commitment to AAP has grown but remains inconsistent and often dependent on individual champions. Staff see a gap and a challenge in translating the increased commitment into practice.

106. **Overall, UNICEF staff have seen a growing commitment from leaders over the years, reflected in increased verbal support, participation in AAP-related initiatives, and allocation of resources in some offices. However, the prioritization of AAP within country and regional offices often reflects individual leaders' personal commitment, making progress vulnerable to leadership turnover and, thereby, disrupting continuity.** Across a number of country offices and regional offices, staff reported a growing awareness and verbal support for AAP among senior leaders. In Somalia, for example, the former Deputy Representative allocated significant levels of the country office's unrestricted funds to AAP and established a forum through which AAP and other cross-cutting commitments were coordinated, and the Deputy Representative was briefed directly on critical issues to push with sections. The forum also actively identified opportunities for AAP integration with sections. Similarly, in Ukraine, leadership has pushed for integrating SBC into programme design and budgets. At the regional level, LAC regional office's leadership, including the Deputy Regional Director, has actively supported AAP efforts, including the creation of the AAP LAC Network. Furthermore, leadership in countries such as Venezuela and Colombia participated in regional webinars, including the "From Words to Action" Webinar, showcasing country office experiences and promoting AAP as a leadership responsibility.

107. This commitment has not been uniform. At the regional level, leadership engagement with AAP has varied, described by UNICEF staff as a "spectrum" with some leaders actively championing AAP and others less clear on their responsibilities and role. In the MENA regional office and EAP regional office, several regional staff noted that AAP does not consistently feature on senior leadership agendas, speculating that this is often due to competing demands, such as large-scale direct delivery operations. At the country level, similar dynamics are observed. In Venezuela, strong leadership in earlier years has helped to advance AAP, but subsequent shifts in leadership priorities have contributed to a slowdown in momentum and, at times, left staff feeling uncertain about the direction of AAP. In Colombia, the discontinuation of the AAP Specialist role has created ambiguity around how AAP is to be prioritised. Lebanon and Somalia also illustrate this pattern, where AAP was strongly championed by a former Deputy Representative, but leadership changes have since introduced uncertainty about its continued prioritization.

108. Moreover, when leadership changes or places less value on particular themes, some approaches may lose visibility or support. Findings from UNICEF evaluations on emergency preparedness, gender, localization and disability[85] echo this pattern, highlighting that progress in these areas often hinges on whether leadership actively champions them. Where senior management prioritises an issue, staff are empowered and resources tend to follow; where it is deprioritized, efforts stall. The absence of formal accountability for cross-cutting areas reinforces this dependency on individual leaders' interests. The risk, as several interviewees mentioned, is that AAP becomes a "nice to have".

109. **While management support has been an important enabler for AAP, progress has not been consistently driven by leadership. In many country and regional offices, AAP continues to be viewed as the responsibility of a particular team or designated lead, rather than a shared, office-wide accountability, highlighting a gap in leadership positioning of AAP as a collective priority.** While management support has helped enable AAP practice, it has rarely been the primary driver. In Afghanistan, for example, staff acknowledged that, while leadership support was helpful in advancing AAP initiatives, AAP progress was not management-driven. Similarly, in Comoros, the AAP focal point reported that AAP was "pushed out" to them under pressure, rather than being championed from the top. In MENA regional office staff also noted that AAP was often delegated to partners or treated as a compliance item in partners' PDs, rather than being actively led by UNICEF's management. This reflects a broader theme highlighted by the country offices and regional offices, where verbal support exists but structured, sustained leadership action on AAP is lacking.

110. KIIs with country office and regional office staff have also highlighted that AAP continues to be viewed as primarily SBC-led, despite recognition that it should be cross-cutting. For example, in Somalia, CAR, Comoros and other country offices, AAP leads reported needing to constantly push others to engage, and progress often sliding when those leads are absent. In Ukraine and Afghanistan, KIs noted that AAP is also not embedded in leadership oversight and is sometimes seen as a "thing" for an individual team to implement rather than part of quality programming.

111. **AAP is often advanced through informal focal point networks rather than formal leadership structures, except during emergencies, when leadership engagement tends to increase.** In several country offices, AAP momentum has been sustained primarily through the initiative of focal points and technical leads, rather than through structured management channels. This pattern highlights a structural gap and, while focal point networks are effective in maintaining technical continuity, they are not a substitute for formal leadership ownership, and without integration into management lines and decision-making forums, AAP remains vulnerable to deprioritization. For example, in Ukraine, staff noted that AAP was promoted through SBC and AAP networks, with limited engagement from emergency or programme leadership. As covered in Finding 2.4, in Comoros and Somalia, AAP gained visibility during emergencies, such as cholera and drought responses, when external pressure and interagency coordination prompted broader leadership involvement. In the MENA region, the regional AAP adviser also lost their entry point with Yemen after the country office Temporary Assignment (TA) AAP position ended, and the CO's absence in the regional AAP network further limited engagement. Despite the country office previously making significant investments in AAP, once the country AAP lead left, the "door was closed". Yemen is making significant investments into a new model of CFM and is currently considering how to best address other AAP

commitments. It will be important that lessons are communicated and absorbed in real time.

112. **There is limited understanding among some leaders of how to operationalize the different components of AAP, and evidence from highlights that attention has often been disproportionately focused on CFMs, with other aspects receiving less emphasis.** In several cases, Deputy Representatives and Deputy Regional Directors demonstrated a limited understanding of AAP, while a few showed a stronger conceptual grasp, though it remains unclear how this is currently being operationalized in their roles. Notably, interviewees have expressed concern that most leaders may not fully understand AAP, limiting their ability to lead on it effectively, and noted that middle management, including Chiefs of Section and Chiefs of Field Offices, were also identified as critical actors, particularly given the limited bandwidth of Deputy Representatives. This aligned with findings from the UNICEF gender evaluation (2024)[86] , which highlighted the need to consolidate leadership for gender at the middle management level, and noted significant variability in the knowledge and motivation of country office middle managers. Similarly, the UNICEF localization evaluation (2025)[87] found that, in many country offices, senior leadership does not prioritise or push for localization, which, in turn, discourages staff from treating it as a strategic area of work.

113. Evidence from country offices also highlights that leaderships' attention to AAP is often narrow in scope. While some investment has been made, such as allocating unrestricted funds or establishing coordination forums, leaders generally lack a solid understanding of AAP and its implications. Attention has focused heavily on CFMs, and this emphasis has often overshadowed broader AAP elements, like participation and programme adaptation. For example, in Afghanistan, AAP is frequently equated with grievance redressal, reflecting a misunderstanding of its full scope. This trend, overall, may be driven by the relative ease of setting up CFMs, their visibility to donors, and their alignment with risk management frameworks. However, it has narrowed AAP to feedback collection alone, rather than promoting it as a strategic, people-centred approach.

Finding 4.2: Community voice is valued in principle but is not systematically used by UNICEF leaders as a metric for programme success or as a performance measure against which teams are held to account. Where the views of communities are collected, they are not fully incorporated within decision-making processes or UNICEF systems and so have limited influence.

114. **UNICEF's monitoring and reporting systems, decision-making forums and leadership structures currently place limited emphasis on incorporating community perspectives on programme quality or results. Despite widespread recognition among staff that community voice is important and should inform programming, there is a strong focus on quantitative data, which is largely driven by internal reporting requirements. As a result, these systems do not effectively incentivize the collection and elevation of community views on programmes as the basis for leaders to use in assessing programme success.** Evidence from the document review and KIIs across multiple contexts highlighted that internal systems and leadership forums prioritise outputs and numerical indicators over community perspectives. For example, in Afghanistan, PMT meetings focus heavily on budgets and output metrics, with limited space for qualitative insights. Similarly, in Yemen, UNICEF staff noted that the volume and fragmentation of data streams made it difficult for managers to track community feedback and meaningfully use this data, leading to the creation of a risk management unit to support oversight. In the EAP regional office, UNICEF staff also highlighted that the organizational culture leans toward quantitative reporting, making it difficult to absorb and act on qualitative, community-led insights. This systemic bias has been limiting the visibility and influence of community perspectives in strategic decision-making.

115. In several country offices, UNICEF staff also indicated that, where community views are collected, they are not consistently escalated to senior leadership, reflecting a gap between the principle of valuing community voice and the practice of embedding it into formal accountability structures. In MENA regional office, KIs emphasized that, unless PME teams present data in a way that is meaningful to strategic processes, it risks being overlooked. KIIs with regional offices and country offices highlighted that leadership often assumes programme staff are engaging communities appropriately in the review of programmes, without mechanisms to verify this assumption. As a result, community voice remains peripheral to performance management.

116. **Programme design often focuses on outputs rather than outcomes, with limited reflection on the broader impact or the "so what?", a shift that would require more engagement with communities. As outlined in Finding 1.9, the lack of incentives from internal systems and leadership means, even when community data is collected, it is not consistently used by leadership to inform decisions, and there is little evidence of accountability for programme quality.** KIIs with UNICEF staff highlighted that there is widespread recognition that programme design often stops at output-level thinking. Several stakeholders also noted the consistent emphasis on output across country offices, with limited attention to broader programme impact. This output-centric approach shapes reporting expectations and deprioritizes the collection of community-level data, which speaks to programme effectiveness. Staff in multiple country offices acknowledged that the "so what" of programming – what changes for communities, as well as the successes and challenges of programmes from community perspectives – only emerges during evaluations, if at all. Where community data is collected, evidence shows it is not consistently used by leaders to inform decisions, and the ET found no examples of holding teams to account for programme quality. In Venezuela, for example, donor pressure, not community feedback, was the primary driver for reallocating funds to humanitarian programming, and, while community voices were collected, their influence on strategic decisions remained limited. Similarly, in Lebanon, although AAP indicators were embedded in sectoral workplans under the previous leadership, staff noted that community feedback was still considered "one among many" measures rather than a core accountability metric. The ET found that, across all the case studies, there was no consistent framework linking community perspectives to leadership performance reviews.

> "I feel very rewarded if feel the programme is responsive to community needs. Whether someone holds me accountable for this? It's not in my evaluation – not explicitly, maybe implicit. We do not attach value to this [community views on programmes] in way we operate the organization." – Deputy Regional Director

Finding 4.3: Without structural incentives, leadership engagement with AAP remains ad hoc and vulnerable to shifting priorities. While factors such as donor requirements and contextual pressures can catalyze action, they also risk distorting AAP's purpose and deprioritizing it amid competing demands.

AAP practice is often driven by external and individual factors, such as donor expectations and requirements; contextual factors; and individual initiative to align practice with the global AAP Strategy. Across country offices, AAP implementation has frequently been shaped by donor expectations, contextual pressures, or the initiative of individual staff. While these drivers can catalyze action, they can also extensively decrease AAP focus, highlighting the absence of internal leadership systems that consistently prioritise AAP. Donor influence, for example, can narrow the scope of AAP and distort its purpose. The document review and KIIs conducted by the evaluation team highlighted that donor requirements often focus on specific accountability mechanisms, such as CFMs or grievance redressal, rather than UNICEF's broader vision of AAP as a people-centred programming approach. In Afghanistan, the establishment of GRMs was a direct response to donor risk management requirements and this led to parallel systems for CFMs (led by SBC) and GRM (led by their PMU) creating inefficiencies. Furthermore, the inclusion of community views in TPM was down to donor stipulations rather than this being part of UNICEF's standard practice. UNICEF staff also noted that some donors' narrow interpretations of AAP risk reducing it to a compliance tool rather than a strategic enabler of programme quality and community participation. This distortion can also undermine community ownership. In Ukraine, for example, donor-driven programme designs overrode community preferences during the winterization response, delaying the shift from in-kind to cash assistance, despite the clear feedback from affected populations, raising concerns about the integrity of participatory approaches. In Somalia and CAR, AAP-related activities also slowed or ceased as donor priorities shifted and funding for AAP diminished. UNICEF's forthcoming Complaints and Feedback Management procedure will make it mandatory for all country offices to have in place approaches for complaints and feedback management, and provides a new internal requirement intended to drive more consistent practice in CFMs across the organization in the future. Similarly, the new Policy on Environmental and Social Standards

in Programming (effective June 2025) provides additional internal emphasis to programme stakeholder engagement in detecting and mitigating risks affecting people and programmes.

> "There are more disincentives than incentives [for leaders]. Have difficulties in understanding as leaders how we can deliver on the myriads of organization accountabilities in resource- constrained environments." – Deputy Regional Director

117. **Barriers to greater motivation for AAP among country office leaders include the absence of clear accountability for AAP, competing priorities, and a lack of clarity on how leaders can effectively advance AAP within programmes. These challenges are compounded by internal systems that hinder community engagement and people-centred programming, with Key Performance Indicators (KPIs) that fail to reflect or prioritise community experiences.** The UNICEF Workforce Assessment (2025) found that AAP-related roles and responsibilities for Country Representatives, Deputy Representatives and other senior leaders; have not been integrated as such in their job profiles. While they might include specific statements on individual AAP pillars, such as PSEA, partnerships with local organizations and CFMs, 'AAP' is not specifically and explicitly mentioned. The Workforce Assessment (2025) identified only three generic job profiles out of the 250 available on SharePoint that reference AAP, namely Senior SBC Specialist (P5), SBC Specialist (P4), and Social Science Specialist (P3). Furthermore, AAP is not embedded in leadership KPIs, performance reviews, or strategic planning processes, and this lack of formal accountability mechanisms limits incentives for leaders to engage meaningfully. Across country offices and regional offices, UNICEF staff called for stronger management accountability, noting that, while some leaders are proactive, others remain silent. As one staff member noted, *"If AAP is not in KPIs, it won't get implemented".*

118. This pattern is not unique to AAP. The UNICEF gender evaluation[88] similarly found that, while there is broad recognition that gender is everyone's responsibility, the absence of formal accountability measures means this responsibility is not consistently acted upon. It also noted that wider staff ownership is limited by the lack of precise accountabilities beyond gender-focused staff. Likewise, the UNICEF localization evaluation[89] highlighted that most country offices lack KPIs against which staff are judged on localization, apart from some areas such as funding. As a result, staff are not incentivized or held accountable for implementing localization, which discourages them from prioritizing it amid competing demands.

119. Competing priorities and lack of clarity on leadership roles further limit motivation. This ambiguity around roles and expectations has been contributing to inconsistent leadership engagement and has been reinforcing the perception that AAP is a technical responsibility rather than a strategic priority. Deputy Representatives are often expected to lead AAP, but KIs highlighted that they are frequently overburdened and lack the support needed to drive office-wide change. In Ukraine and Afghanistan, for example, senior staff expressed uncertainty about how to practically lead AAP across programmes. The Humanitarian Review[90] also noted that unclear AAP responsibilities weaken accountability in emergency contexts. As mentioned in Finding 2.2, KIs also noted that AAP feels like a repackaging of existing concepts, and this further reduces buy-in and deprioritizes it amid other demands.



© UNICEF/UN0907277/Alejandro Saena

Finding 4.4: At HQ level, there is limited evidence that top management has explicitly prioritised or structurally embedded AAP. While some senior leaders demonstrate conceptual awareness, AAP is often treated as a technical add-on rather than a core element of strategic leadership and accountability.

120. **There have been limited organizational advances against key priority areas that are critical for taking AAP to the next level, where more senior leadership positioning is needed.** UNICEF's 2022–2025 strategy set out the following five main priority areas, which are critical for taking AAP to the next level:

- Integration into UNICEF's planning and monitoring systems and processes;
- Application of AAP beyond humanitarian action;
- Stronger country leadership engagement and accountability for AAP;
- Building a people-centred approach (with greater coherence between AAP, gender, PSEA and DI);
- Boing beyond UNICEF. Steps have been taken to integrate AAP with global efforts, showing promising results when time has allowed a full roll-out.

121. However, as set out in Section 3.2 on AAP beyond humanitarian action, Section 3.3 on people-centred approaches and this section on leadership; limited steps have been taken to unblock the key challenges linked to each of these areas that are required to advance AAP and people-centred approaches to programming systematically across the organization. The 2023 Global AAP Audit recommended that UNICEF Deputy Directors clarify whether the current AAP framework is applicable beyond humanitarian contexts. If it is not, the audit advised identifying who will take responsibility for addressing this gap and emphasized the importance of communicating AAP as a matter of organizational priority. Some important progress against the audit recommendations was made in mid-2025 when, as per the FFI and the agreements between EMOPS and PG/GPD directors, it was agreed that the Global SBC team would be responsible for providing technical assistance to COs on AAP, while EMOPS, through the People-Centred Humanitarian Partnerships (PCHP) team would still be responsible for the global normative work and inter-agency engagement, while OSE/Risk Management Programming and Safeguarding (RMPS) team would be responsible for the Complaints and Feedback Management procedure roll-out and the safeguarding/PSEA component of the AAP agenda.

122. **Senior leaders have voiced support for AAP and regional directors were engaged during the development of the AAP strategy. However, this engagement has not been sustained and is not at the level seen by other UNICEF people-centred commitments.** For example, following the strategy's approval, EMOPS leadership did not maintain regular convenings of Regional Directors, and the level of cross-organizational leadership engagement has since declined. This lack of sustained leadership attention is reflected in operational gaps as well. KIIs noted that top management has not explicitly prioritised AAP or embedded it structurally, for instance, by issuing guidance on AAP in office structure reviews. In comparison, both PSEA and gender have benefited from strong leadership statements at HQ level, such as the Executive Director's prioritization of adolescent girls' empowerment, which has contributed to greater ownership across UNICEF[91]. Moreover, the establishment of a global gender equality steering committee, attended by Deputy Executive Directors and regional and divisional directors, has been instrumental in maintaining senior-level engagement and accountability for gender. Likewise, the UNICEF localization evaluation[92] highlighted that strong support from senior leadership in some parts of HQ, notably EMOPS, has helped drive the localization agenda by signalling its importance to staff. Without such signals from the highest levels, including the Deputy Executive Director, country offices have been unable to maintain momentum and invest in existing AAP capacities. Taken together, this evidence suggests that, while rhetorical support for AAP exists at the global level, the absence of formal accountability mechanisms, structural integration, and sustained leadership engagement limits its institutionalization.



© UNICEF/UNI954896/Fouad Choufany

PRELIMINARY CONCLUSIONS ON LEADERSHIP FOR FINDINGS 4.1 TO 4.4

Preliminary conclusion 8: At present, there is no formal accountability for leaders to deliver on AAP, which is a critical structural gap. AAP is not embedded in KPIs, performance reviews or strategic planning processes. This lack of institutional incentives means that leadership engagement is often ad hoc, and AAP is deprioritized amid competing demands. Community voice, while valued in principle, is not used as a key metric of success for leaders or a basis for holding teams to account. Instead, it is often assumed that staff closer to communities are capturing and using this feedback, but this is not systematically verified or supported.

At the global level, AAP has suffered from a lack of sustained director-level support. While senior leaders were engaged in the development of the AAP strategy, this engagement has not been maintained. UNICEF's AAP commitments have been undermined by a disconnect between global oversight of the full AAP framework and the limited influence of the AAP section, who, in practice, have given more focus to selected pillars. This has weakened strategic direction and left country offices and regional offices without the high-level backing needed to institutionalize AAP.

As a result, AAP continues to be seen as the responsibility of a particular team or focal point, rather than a shared leadership priority. This reinforces the perception that AAP is a technical function rather than a strategic imperative.

Taken together, the evidence for EQ4 suggests that the AAP organizational positioning limits its strategic use across humanitarian and development settings and constrains its contribution to improving programme quality and results.



4 Lessons Learned

This section provides a series of lessons learned drawn from the findings and analysis presented across the previous sections on UNICEF's efforts and approaches to institutionalize AAP. The lessons have been consolidated into a set of thematic learning areas aligned with UNICEF's corporate change processes, including leadership accountability, systems integration, programme quality assurance, and people-centred decision-making. They are applicable at global, regional and country levels. Across all learning areas, gender equality, disability inclusion, PSEA, humanitarian contexts, and equity were treated as integral to AAP rather than as standalone themes.

Learning Area 1: Institutional culture, leadership, and accountability

This learning area highlights that institutionalizing AAP is fundamentally a leadership and accountability challenge, requiring sustained commitment, clear ownership, and organizational incentives at global, regional, and country levels.

AAP is a long-term commitment that requires institutional cultural change and power shifts. The evaluation findings highlight that **time, trust, and embedded presence are required for AAP to flourish.** AAP, including meaningful community participation, cannot be achieved through standalone mechanisms or quick fixes introduced during emergencies or at other times. Establishing genuine engagement with communities requires consistency, proximity and patience. The evaluation country case studies revealed furthering AAP across UNICEF's programmers also involves shifting organizational mindsets and cultures to value and practice people-centred programming, an ongoing process of raising standards, challenging entrenched ways of working and fostering inclusive approaches. Supporting NGO and government partners to develop their own systems and approaches also calls for long-term investment in systems strengthening and continued accompaniment.

Through longstanding presence in countries, and ongoing programmes to realize the rights of groups in situations of vulnerability, working with government and civil society partners, UNICEF is well positioned to meet this longer-term view of AAP. Evidence confirms that, where UNICEF has a long-standing

presence in communities and has built strong relationships with partners over time, this has facilitated progress on AAP through deeper trust and more meaningful collaboration with communities. KIIs recognized that UNICEF's unique role working in long-term partnerships with multiple ministries offers an opportunity to promote people-centred accountability as part of UNICEF's systems strengthening support with different government entities, enhancing the delivery of quality services and programmes and contributing to the strengthening of broader governance structures among duty-bearers.

In the absence of consistent global leadership and oversight, the full scope of UNICEF's AAP commitment as well as its broader accountabilities to communities, is unclear. Although UNICEF's normative framework sets out seven pillars of AAP, spanning the work of multiple global sections, it remains unclear, at a leadership level, where overall accountability for this sits and how the full scope of these pillars is being implemented in practice. Structurally, the global AAP section is not positioned to provide organization-wide leadership or to connect the contributions of different global sections. As a result, AAP efforts at global, regional and country levels tend to give focus to three pillars (most commonly information-sharing, participation and complaints and feedback). This reflects the benchmarks for AAP set out in UNICEF's CCCs. Furthermore, beyond the individuals directly leading on AAP, staff frequently equate AAP with CFMs, reflecting an even narrower interpretation of the organization's broader commitment.

When AAP depends on external drivers or individual champions rather than organizational-wide internal incentives, the effectiveness, coverage, sustainability and efficiency of AAP investments and progress is undermined. Learning from the evaluation shows organizational direction, sustained engagement and formal accountability for AAP from global leadership. Regional and country offices have been left to interpret and implement AAP independently[93]. Consequently, country AAP efforts have been driven by donor requirements, country contextual demands and individual champions, and, as such, their reach and consistency have been limited by which programmes interested donors have funded (and specific donor requirements) and where champions sit within country office structures. These drivers, as opposed to organizational internal incentives, also risk the sustainability of investments, contribute to the duplication of efforts, and weaken UNICEF's ability to demonstrate and negotiate around its organizational commitment to AAP with donors.

Country office leaders play a pivotal role in determining whether and how AAP is embedded across all programmes. While institutionalization requires sustained global-level commitment, the evaluation country case studies show visible progress where individual country leaders have prioritised and elevated AAP. Strong leadership at country level can, therefore, accelerate the uptake of AAP, rather than waiting for or relying solely on global directives.

Dedicated AAP capacity with access to senior leadership can enhance integration and mainstreaming across UNICEF's work. A combination of dedicated AAP resources (such as designated AAP focal points, full time AAP staff); senior-level positioning; direct reporting to senior leadership (such as Deputy Representatives or Representatives); and access to decision-making forums where AAP can be actively placed on the agenda has proven effective for advancing AAP. This aligns with key takeaways from the AAP workforce assessment (2025), which showed that offices with these investments consistently meet AAP benchmarks. However, sustaining this model presents a growing challenge for UNICEF and other agencies operating across both humanitarian and development contexts. As resources continue to shrink, and capacity for AAP becomes more stretched and diluted, UNICEF will need to explore other models that can fast-track results.

Embedding AAP within country office programmes requires whole-of-office ownership and effort, it cannot be delegated to a single individual or team. The positioning of AAP technical leads within different parts of a country office (e.g., SBC, PME, Emergencies, or other teams) offers distinct opportunities and limitations in terms of their influence. To date, country offices have had the flexibility to decide themselves where to position AAP within their structure. However, embedding good practice in AAP across programmes cannot be achieved by one team alone. Rather, it requires a combination of complementary skills across teams, active leadership oversight and drive, and clear recognition by each section of their own responsibilities for AAP.

Learning Area 2: Coherence and integration of people-centred commitments

This learning area underscores the need to integrate AAP with other people-centred commitments to clarify UNICEF's overall accountability to communities and reduce fragmentation.

UNICEF has additional cross-cutting people-centred commitments – including on gender, DI and PSEA – which also represent critical accountabilities to communities. However, these are overseen through separate frameworks and teams at global, regional and country levels. The absence of senior leadership to align and integrate these parallel commitments contributes to a lack of clarity regarding UNICEF's full scope of accountabilities to communities. More recent regulatory frameworks issued by UNICEF, including the Policy on Safeguarding and Policy on Environmental and Social Standards in Programming mandates inclusive programme stakeholder engagement and AAP – with reference to several AAP Pillars, and so adds dimensions to the governance of UNICEF's accountabilities to communities.


© UNICEF/UN0798231/Maria Spiridonova

Learning Area 3: Incentives, systems, and organizational drivers of practice

This learning area highlights how organizational systems, incentives, and underlying assumptions critically shape whether AAP is applied meaningfully in practice. **Systematizing AAP is not only about adding requirements for AAP into organizational systems and processes, it also requires reducing competing demands that divert attention away from people-centred approaches.** Organisational systems and processes are a strong driver of practice in UNICEF, including staff performance review processes and KPIs; programme prioritization and design processes (CPP/CPD, AWP and PDs); and monitoring and reporting requirements. As such, efforts to systematize AAP have looked to integrate requirements for AAP into key organizational systems and processes. However, the evaluation found that current internal systems and processes inadvertently deprioritize community engagement by giving greater importance to other measures of success and by overlooking the costs (reduced efficiency and effectiveness) of not shaping programmes around the views of communities and groups in situations of vulnerability. Efforts for prompting more people-centred programming (and AAP) will have limited impact if structural disincentives are also not simultaneously addressed.

Effective AAP strategies require clear logic - unpacking the activities and assumptions underpinning expected changes – and follow-up. While country-level strategies for strengthening AAP vary in form, AAP cannot be achieved through one-off activities. The success of any approach is contingent on sections' uptake and action, which often lies beyond the direct influence of AAP leads.

As examples, when AAP leads provide direct mechanisms to connect UNICEF with communities (as a "service" to sections), this assumes that sections recognize the value, use the established channels, and act on community feedback. When AAP prompts are embedded in programming processes (e.g., indicators in partner documents or questions in monitoring tools), this assumes they will trigger quality action and that the data generated will be used to monitor practice. In both cases, leadership oversight and additional reinforcing activities are essential to ensure assumptions hold true and AAP is effectively embedded.

Learning Area 4: Evidence, organizational learning, and community-informed decision-making

This learning area emphasizes that strengthening AAP requires evidence that demonstrates how community perspectives inform decisions and lead to concrete programme change.

Current global and country-level AAP indicators and reporting expectations have limited utility and do not provide evidence on the effectiveness and impact of AAP investments needed to gain leadership traction. The current focus on tracking AAP activities and outputs (e.g., if country offices have an AAP strategy in place and the number of people providing feedback) does not capture whether programmes are adapting based on community feedback, nor does it elevate the perspectives of communities. As such, current indicators have limited utility and are self-serving.

Leaders have expressed strong interest in evidence that demonstrates concrete action and change resulting from AAP efforts, both to highlight the importance of AAP and to make the case for investment. Shifting the emphasis in the monitoring and tracking of AAP efforts would allow UNICEF to gather such evidence on an ongoing basis through refocusing AAP indicators; embracing more qualitative reporting of how programmes have adapted to the localised preferences of communities; and ensuring CFM systems, including UNICARE, capture both the typologies of feedback received and the typologies of actions taken in response. For more details on the link between AAP and UNICEF M&E system see paragraph 2 under 3.1).

CFMs are an important tool for accountability and troubleshooting programme issues. However, evidence from country case studies shows that the extent to which CFMs provide insights to drive programme decision-making is limited. The aspiration that CFMs alone will inform programme adjustments does not align with the type of feedback they typically generate. While CFMs have become the go-to practice for AAP, monitoring with communities, on the other hand – as a proactive way to understand community views during implementation and adapting programmes – has received comparatively little attention by those leading on AAP. Greater emphasis in strengthening how communities are engaged in monitoring programmes may be more appropriate to support decision-makers in adapting programmes in real time to better meet the needs and preferences of communities and groups in situations of vulnerability.

Taken together, these learning areas demonstrate that advancing AAP is a long-term change process requiring alignment across leadership, systems, incentives, and learning mechanisms, rather than a set of standalone technical interventions. While UNICEF's mandate, longstanding presence, and partnerships position it well to advance AAP, the evaluation finds that these strengths have not yet translated into consistent, organization-wide leadership, accountability, or practice.



5 Conclusions

This section presents the evaluation's overall conclusions, which are drawn from the findings and analysis across the preceding sections, including the preliminary conclusions. Each overall conclusion has been mapped against the relevant preliminary conclusions (referred to below as 'pc') presented in the findings section to ensure alignment and coherence. This mapping helps clarify how the evidence supports the overarching insights. The five conclusions outlined here directly inform the targeted recommendations presented in Section 5. Overall, they indicate that **strengthening AAP within UNICEF is primarily an institutional change agenda – requiring alignment across leadership, incentives, systems, and organizational culture – rather than a technical or compliance-driven effort**.

Overall conclusion 1: There is growing momentum and commitment across UNICEF to strengthen AAP, with promising signs of progress in visibility, practice and integration. However, the desired power shift in its programming approach has yet to be realized (PC1, PC3).

The evaluation found that AAP is no longer peripheral in many country offices, with increased visibility and engagement across regions. Offices have adopted diverse strategies to integrate AAP, reflecting adaptability and innovation in different contexts. There have been significant efforts to embed AAP in emergency settings, and there is clear evidence that AAP is now part of the conversation in humanitarian and emergency response planning. There are also some positive examples of AAP being applied beyond humanitarian settings, such as in systems strengthening and government partnerships, demonstrating its relevance across UNICEF's mandate. The inclusion of AAP in internal audits, programme guidance, and performance indicators has helped prompt dialogue and action, and signals a growing organizational commitment. However, despite this momentum, there is limited evidence that UNICEF has achieved the desired power shift in its programming approach, and most internal stakeholders do not view this as the purpose of AAP. As highlighted by other evaluations[94],

AAP is often treated as a technical add-on rather than as integral to the organization's core ways of working.

Overall conclusion 2: AAP is not yet institutionalized within systems and cannot be without structural commitment and leadership ownership at the top (PC1, PC2, PC6, PC7, PC8).

Despite growing awareness and scattered good practices, AAP remains largely projectized and fragmented across UNICEF. While UNICEF made external commitments to AAP as far back as 2011, the organization has been slow to respond at the level needed to make significant progress. Over nearly a decade, leadership has not demonstrated sufficient urgency or invested adequately in policy, strategic global positioning or the resources necessary to drive institutional change and deliver on those commitments. It lacks the systemic integration seen in other cross-cutting priorities, such as gender or PSEA. AAP is not embedded in strategic planning, budgeting, performance management, or results reporting systems. This absence of institutionalization limits its influence and sustainability and reinforces the perception of AAP as an optional or humanitarian-only concern, rather than a foundational accountability principle. While a global strategy exists, it has not been backed by structural integration, accountability mechanisms, or sustained leadership engagement. This has left country and regional offices to interpret and implement AAP independently, often relying on individual champions. The AAP section has produced valued frameworks and, in places, provided direct support, shaping practice in some region and country offices. However, it has missed opportunities – such as leveraging the Regional Director Steering Group that was set up to guide the AAP strategy development – to secure sustained senior-level buy-in and drive cross-organizational change. The flexible placement of AAP leads has also enabled adaptation to diverse contexts, but without consistent guidance or strategic positioning, their influence remains variable

Overall Conclusion 3: UNICEF's internal systems not only fail to incentivize community-centred programming, but, in some cases actively work against it (PC4, PC1, PC3, PC6).

There is limited clarity across the organization on when and how communities should be engaged throughout the programme cycle. Entry points for participation, particularly in programme design and in assessing results, are not systematically defined. While the addition of AAP indicators has helped prompt dialogue and reporting, they often fail to capture the depth or variation of practice across sectors and programmes, and do not consistently elevate community perspectives in decision-making. This is not a 'nice to have', but critical for programme efficiency and effectiveness. Evaluation evidence shows when communities are engaged and heard this contributes to better and more appropriate programme design, timely troubleshooting of programmatic bottlenecks and issues, and the identification of incorrect programme design assumptions and choices.

Critically, the evaluation highlighted that organizational systems do not prioritise or reward community-centred programming. Staff are not incentivized to engage meaningfully with affected populations, and internal processes often favour compliance and output tracking over responsiveness to community feedback. This is not a matter of adding new structures or teams, but rather reflects how existing systems shape practice, what is measured, what is reported, and where staff are expected to focus their time. In some cases, these systems disincentivize AAP by creating competing demands that make meaningful engagement with communities difficult to sustain. The lack of institutional signals that position community voice as central to programming contributes to its discouragement and reinforces the perception of AAP as a technical add-on rather than a core programming principle.

Overall conclusion 4: AAP is relevant beyond humanitarian contexts, but its application in development settings remains conceptually and structurally ambiguous (PC3, PC5).

The evaluation found positive examples of AAP being applied in development contexts, including in systems strengthening with government partners. Staff who connected AAP to UNICEF's rights-based mandate and the CRC viewed it as relevant beyond emergencies. However, the organizational framing of AAP continues to be closely tied to humanitarian action, and expectations for its use in development remain unclear. Structural factors, such as the positioning of AAP within EMOPS to date and limited ownership from PGs, reinforce this ambiguity. Furthermore, longstanding challenges – including the separation of AAP from other people-centred commitments, and unclear responsibilities for AAP when working with

government partners – continue to hinder progress. While recent developments, such as the inclusion of AAP in internal audits and guidance documents, may help expand its relevance, the coherence of AAP across UNICEF's work remains weak.

Overall conclusion 5: Coordination across people-centred approaches is essential but currently hindered by fragmented ownership and competing frameworks (PC6, PC7, PC8).

AAP, gender, DI and PSEA share common goals and touchpoints, yet are often managed separately with distinct strategies, staffing arrangements and reporting lines. This fragmentation has led to duplication, inefficiencies and missed opportunities for synergy. The absence of a unified framework and shared objectives limits the effectiveness of mainstreaming efforts, particularly in the context of reduced capacity and resources. Current models rely on separate teams or individuals leading each approach, often with overlapping responsibilities and limited support. The lack of a common people-centred framework and joint expectations for integration has made it difficult to identify and act on synergies, especially in country contexts where staff are expected to deliver across multiple cross-cutting commitments.

BOX M

Final remarks on the ToC for the institutionalization of AAP across UNICEF, developed for this evaluation.

During the evaluation's inception phase, the ET developed a ToC for UNICEF's institutionalization of AAP, setting out pathways for change that drew on key documents and conversations (see Section 2.2 for more details). This informed the EQs, against which the findings and conclusions have been drawn.

Based on the data collected and the analysis conducted throughout the evaluation, the ET found the pathways for change and underpinning assumptions, as set out at the beginning of the evaluation.

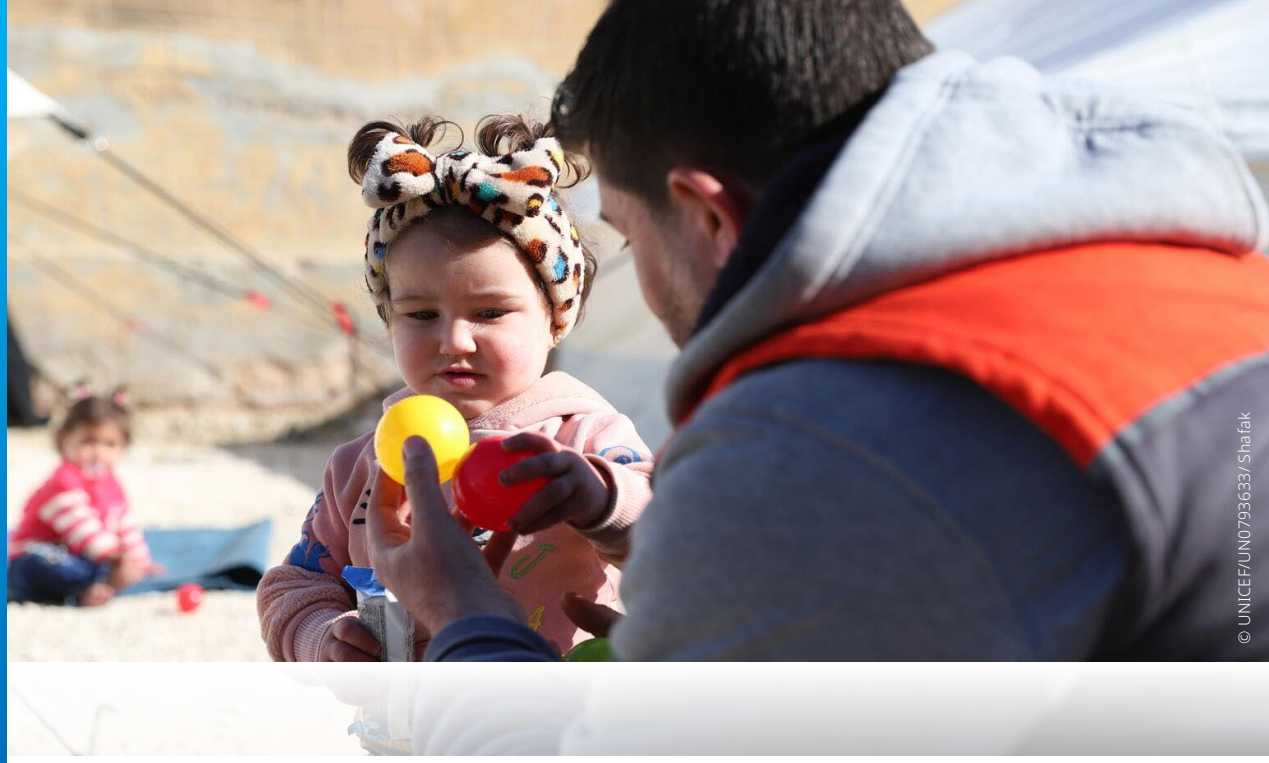
UNICEF is currently undergoing substantive internal changes, in response to the 2025 funding crisis. The implications for UNICEF's AAP commitment are still being worked through, but include reductions in capacity across the organization, including in AAP and shifts in global AAP responsibilities. This is accompanied by the introduction of new regulatory frameworks, which will make it a requirement for country offices to have a CFM in place (as one element of AAP). Discussions were actively ongoing at the time of finalizing this evaluation, and initial proposals for how the recommendations could be actioned are being written. Given this, UNICEF may need to revisit the ToC presented here, in particular the internal enabling factors and underpinning assumptions, which may need further unpacking and adding to.

Table 5. Mapping of preliminary conclusions against overall conclusions.

Overall Conclusion (OC)	Preliminary Conclusion with summary
OC1: There is growing momentum and commitment across UNICEF to strengthen AAP, with promising signs of progress in visibility, practice, and integration.	PC1: Flexible placement of AAP leads has enabled adaptation but resulted in varied influence and visibility.
	PC3: Progress in AAP visibility and engagement exists, but integration into core systems is inconsistent.
OC2: AAP is not yet institutionalized within systems and cannot be without structural commitment and leadership ownership at the top.	PC1: Flexible placement of AAP leads has enabled adaptation but resulted in varied influence and visibility.
	PC2: Dedicated roles and funding enable better AAP integration; informal arrangements hinder progress.
	PC6: Coordination across people-centred approaches is hindered by fragmented ownership and parallel staffing.
	PC7: Resource constraints and 'double-/triple-hatting' highlight the need for a unified people-centred strategy.
	PC8: Lack of formal accountability for leaders undermines strategic direction and institutionalization of AAP.

OC3: UNICEF's internal systems not only fail to incentivize community-centred programming, but, in some cases, actively work against it.	PC4: Community voice is not yet institutionalized across the programme cycle; engagement remains ad hoc and disconnected from core decision-making.
	PC1: Flexible placement of AAP leads has enabled adaptation but resulted in varied influence and visibility.
	PC3: Progress in AAP visibility and engagement exists, but integration into core systems is inconsistent.
	PC6: Fragmented coordination across people-centred approaches leads to inefficiencies and duplication.
OC4: AAP is relevant beyond humanitarian contexts, but its application in development settings remains conceptually and structurally ambiguous.	PC3: Progress in AAP visibility and engagement exists, but integration into core systems is inconsistent.
	PC5: AAP is relevant beyond emergencies, but its value and coherence in development contexts are unclear.
OC5: Coordination across people-centred approaches is essential but currently hindered by fragmented ownership and competing frameworks.	PC6: Fragmented coordination across people-centred approaches leads to inefficiencies and duplication.
	PC7: Resource constraints and 'double-/triple-hatting' highlight the need for a unified people-centred strategy.
	PC8: Lack of formal accountability for leaders undermines strategic direction and institutionalization of AAP.

These conclusions inform the recommendations presented in the following section, which are intended to support practical, phased improvements to accountability to affected populations across UNICEF.



6 Recommendations

This section presents the evaluation recommendations addressed to UNICEF staff at the global, regional and country levels. The recommendations were developed by the ET based on the findings and conclusions and were further informed by stakeholder input during the sense-making sessions held on 30 and 31 July 2025. These sense-making sessions provided an opportunity for stakeholders to offer initial feedback on the findings and reflect collectively on possible ways forward. Given the global scope and institutional focus of the evaluation, recommendations were validated with duty bearers rather than directly co-developed with rights holders. Community perspectives were nonetheless integrated through participatory analysis in Venezuela (see Section 2.4 and Annex 6.3), and the evaluation's findings draw substantially on community voices gathered during consultations. Furthermore, in the context of ongoing organizational changes under UNICEF's recent Future Focus Initiative, these recommendations present a timely opportunity for reflection and decision-making. They offer a critical moment to reposition AAP as integral to organizational effectiveness and quality programming, rather than as a fragmented set of technical tasks dispersed across already-stretched teams.

Overall, the evaluation team developed the **four following overarching recommendations** (each supported by a set of sub-recommendations). While all four recommendations are considered important, their implementation will require sequencing over time and adaptation to different operational contexts, capacities and resource realities across the organization. Taken together, they are intended to support phased decision-making and action within existing institutional arrangements. As such, the recommendations are intended to guide strategic choices by senior management while remaining adaptable to regional and country-level realities.

1. **Leadership:** UNICEF should establish clear organizational ownership and accountability for AAP and people-centred programming, at the most senior level and embedded formally across all levels of the organization.
2. **Community voice and support:** UNICEF should strengthen community voice as central to programming at all stages of the programme cycle, and ensure country offices are equipped with the practical, coordinated guidance needed to make this a reality.

3. **UNICEF Approach**: UNICEF should adopt a more unified cross-cutting people-centred approach bringing together organizational commitments to areas such as AAP, gender, DI, and Safeguarding, and enabling strategies such as SBC, participation and inclusion, allowing programmes to operate within a more holistic understanding of the lived experience of groups in situations of vulnerability rather than thematic silos. The current organizational restructuring provides a timely opportunity[95].

4. **Positioning:** UNICEF should reposition AAP as a core component of quality, people-centred programming across humanitarian and development contexts.

These recommendations are **interlinked and mutually reinforcing**. Progress in adopting a more unified people-centred approach (Recommendation 3), for example, will shape the scope and effectiveness of senior oversight of UNICEF's accountabilities to communities (Recommendation 2). Similarly, strengthening leadership accountability for AAP (Recommendation 1) will support the prioritization of community voice throughout the programming cycle (Recommendation 4). Collectively, the recommendations address both the need to further embed AAP within sectoral work and the need for greater coordination and harmonization where technical expertise on people-centred commitments is required. In this way, the recommendations should be read as a coherent package rather than as standalone actions.


© UNICEF/UNI644919/ Dang Thai Binh

The recommendations should be also read alongside those of the recent **Evaluation of UNICEF's Work on Localization in Humanitarian Action**, which was conducted in parallel and reaches **highly complementary conclusions** regarding the direction of change required for UNICEF to strengthen quality, rights-based, people-centred programming across humanitarian and development contexts. Both evaluations converge on the following needs:

- To move beyond transactional approaches toward relationships grounded in accountability, trust and influence over decisions;
- To ensure that communities and local actors meaningfully shape programmes rather than being consulted after key decisions are made;
- To embed commitments through formal leadership accountability, performance management and organizational systems; and
- To strengthen evidence, learning and feedback loops that focus on outcomes and use of input rather than activity-level compliance.

The four AAP recommendations vary in their **degree of overlap** with the localization evaluation recommendations. Several recommendations align fully in intent and mechanism, others partially overlap through related but distinct institutional entry points, and a small number address AAP-specific accountability issues not covered by localization. To facilitate the preparation of the AAP evaluation Management Response and Implementation Action Plan, the table of recommendations (Table 5) includes explanatory text indicating where recommended actions - under each one of the four overarching recommendations- overlaps either fully or partially with those identified in the localization evaluation. The references to the localization evaluation are intended to support coherent implementation (considering that the corresponding recipients are identical across the two evaluations), by enabling UNICEF not only to maximize synergies across agendas but also preserving the AAP's distinct added value.

Responsibility for taking the recommendations forward rests with relevant UNICEF duty bearers at global, regional and country levels, in line with existing mandates, governance arrangements and accountability structures. Some actions are expected to be achievable in the shorter term, while others will require medium- to longer-term institutional change.

RECOMMENDATION 1: UNICEF should establish clear organizational ownership and accountability for AAP and people-centred programming, at the most senior level and embedded formally across all levels of the organization.					
Preliminary Conclusions	**Sub-recommendations**	**Responsibility**	**Overlap with Localization**	**Comments**	**Priority**
	1.1 Appoint a Director-level sponsor for the organization's cross-cutting people-centred programming commitments, including AAP, to provide senior ownership and oversight of UNICEF's accountabilities to communities and groups in situations of vulnerability across UNICEF's humanitarian and development work. This is vital given that the current reallocation of AAP components to different HQ teams means senior oversight of UNICEF's accountabilities to communities is even more vital (e.g. with CO requirements to put in place a Complaint and Feedback Mechanism (CFM), technical assistance in AAP to COs moving to GPD-SBC, the EMOPS-PCHP Section retaining responsibilities on the normative part of the AAP agenda and engagement at inter-agency level , while Safeguarding will be led by OSE/RMPS).	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC Team), Office of Strategy and Evidence (RMPS team)	Localization Rec 4.2 — Maintain strong UNICEF leadership and advocacy for localization at inter agency level.	Both the AAP and Localization evaluations call for visible senior leadership ownership, but at different loci: AAP focuses on internal governance; localization emphasizes external advocacy. These roles are reinforcing rather than duplicative.	High
PC6, PC7, PC 8	1.2 Establish accountability for people-centred programming in JDs, PERs, and KPIs for all levels of managers and leaders in UNICEF, including regional, centres of excellence, and country leadership (Representatives, Deputy Representatives for programmes, and Chiefs of Sections). This includes accountability for hearing and acting on the views of groups in situations of vulnerability in prioritizing, designing and measuring the success of programmes.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC, Gender and DI teams); CSSC	Localization Rec 2.3 — Embed localization requirements in performance expectations of senior country office leadership.	Both the AAP and Localization evaluations call for formal performance accountability mechanisms for senior country office leadership (Representatives, Deputies, Chiefs). The mechanism and roles are effectively identical; the difference lies only in framing (AAP vs. localization).	High

PC 4, PC8	1.3 Engage with each global sector lead, to identify how UNICEF's cross-cutting people-centred programming offer, including AAP, can be further embedded into their work and communications. This may include development or strengthening sector-specific guidance/standards; clarification of aligned concepts (e.g. social accountability) and their intersections; addition of mandatory indicators in relevant programme areas; inclusion as standard in all sector evaluations; continued communication, interest, and fostering a culture of accountability and people-centred programming; continued effort to enhance inclusion and participation in different stages of programming; communication through sectoral reporting and other communication lines at all levels.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (SBC, Gender and Disability Inclusion teams)	Localization Rec 1.1 — Define localization in a way that applies across sectors and beyond humanitarian action.	Both the AAP and Localization evaluations seek mainstreaming across sectors. AAP proposes sector specific engagement mechanisms; localization embeds cross sectoral application through its strategic framing.	Medium
PC 6, PC7, PC8	1.4 All levels of managers and leaders – from centres of excellence to regional and country offices - should be expected to have periodic but regular direct conversations with communities. This is intended to ensure leaders across the organization remain connected to the people UNICEF aims to serve, as well as providing a means by which UNICEF can hear directly from communities when working with partners. It is recognized that ongoing monitoring with communities (and ensuring their participation throughout the programme cycle) should still be done by partners and UNICEF staff as part of programme implementation.	HQ: Global Programme Division (Global SBC); Country Offices (Deputy Representatives); ROs: Regional Directors; Regional Emergency Advisers)	Localization Rec 4.3 — Institutionalize meaningful participation and leadership of local and national actors (LNAs) in coordination and decision-making mechanisms.	Both the AAP and Localization evaluations aim to ensure that local voices shape decisions, not merely inform them. AAP emphasizes direct dialogue with communities; localization emphasizes structural leadership roles for LNAs. The underlying principle—meaningful influence over decisions—is shared.	Medium
PC4, PC8	1.5 Reconsider the current reliance on activity-level indicators for measuring AAP results, to give greater focus to the results from AAP investments and quality of approaches, for example, going beyond the numbers of engaged people to evidencing if and how feedback has been acted on. This includes AAP CSIs, HAC and programme AAP indicators, and KPIs used to assess the extent to which country office action meets new AAP requirements (including the CFM procedure) and are effective and appropriate for their context. This will require embracing more qualitative evidence and re-introducing mandatory corporate performance indicators on AAP/people-centred programming in the next corporate performance framework revision.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC Team), Office of Strategy and Evidence (RMPS team)	Localization Rec 3.2 — Measure whether Local National Actors (LNAs) have influence over decisions in clusters, not just presence.	Both the AAP and Localization evaluations call for a shift from counting participation to measuring quality, influence, and downstream impact. The conceptual change is identical, applied to different accountability relationships.	High

RECOMMENDATION 2: UNICEF should strengthen community voice as central to programming at all stages of the programme cycle, and ensure country offices are equipped with the practical, coordinated guidance needed to make this a reality.

Preliminary Conclusions	Sub-recommendations	Responsibility	Overlap with Localization	Comments	Priority
PC4	2.1 Give greater focus at global and country levels to how feedback and community voices are acted on and used to inform programmes. This includes: ▶ Strengthening the integration of AAP data (for example, data collected via CFMs) with PME and other monitoring systems to aid triangulation and provide a more holistic picture for programmes. ▶ Global and country CFM metrics for leadership oversight should include more informative categorization of *how* feedback has been acted on/used what results/impact this has produced. ▶ Conducting data audits to trace collection and flows of community data (monitoring and CFMs) from collection by UNICEF and partners to UNICEF decision-makers, to identify the extent to which community data is reaching managers. ▶ Ensure CFM design and community participation mechanisms are gender-responsive, including accessibility for women and girls in contexts with mobility or social norms barriers, and that gender-disaggregated data on feedback volume and follow-up action is routinely collected and reported	HQ: Global Programme Division (Global SBC Team), Office of Strategy and Evidence (RMPS team). Gender Team COs: Deputy Representative and PME	Localization Recs 3.1 and 3.3 — Track localization investments and establish feedback loops linking evidence to management decisions.	Both the AAP and localization evaluations focus on ensuring that data flows reach decision makers and influence resource and programme choices, emphasizing accountability for use of evidence rather than collection alone.	High

PC4	2.2 Review programme processes and expectations set within systems at each stage of the programme cycle to better incentivize and remove disincentives for community participation in decision-making. This includes: ▶ Clarifying key points in time throughout the programme cycle when community engagement and participation to shape and inform key decisions is expected as standard. This should include priority setting, programme design, and monitoring of programmes. ▶ Reviewing and reprioritizing the internal requirements at each stage of the programme cycle, creating stronger incentives and space for community participation to inform key programming processes. ▶ Clarifying who will ensure community participation is planned for at each stage of the programme cycle, and where expertise and skills needed to design and facilitate community participation will come from.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC)	Localization Rec 4.3 — Enable LNAs to influence decision-making in coordination and implementation structures.	Both the AAP and Localization evaluations aim to move from consultation to influence. AAP spans the full programme cycle across contexts; localization focuses on humanitarian coordination and leadership by LNAs. The level and scope differ, but the intent aligns.	High
	2.3 Give greater focus to strengthening the depth and consistency of hearing from communities and groups in situations of vulnerability in the monitoring of programmes, to complement CFM efforts. This includes: ▶ Articulating programme results beyond outputs and including activities and measures of success from the perspective of communities. ▶ Expecting programmes to evidence community experiences and views on UNICEF supported services and programmes as standard. ▶ Recognizing the importance of the proactive collection of feedback via participatory monitoring in addition to reactive CFMs.	HQ: Global Programme Division (Global SBC Team), Office of Strategy and Evidence (RMPS team) COs: Deputy Representative and PME	Localization Rec 4.3 — Institutionalize meaningful participation and leadership of local and national actors (LNAs) in coordination and decision-making mechanisms.	Both the AAP and Localization evaluations aim to ensure that local voices shape decisions, not merely inform them. AAP emphasizes direct dialogue with communities; localization emphasizes structural leadership roles for LNAs. The underlying principle—meaningful influence over decisions—is shared.	Medium
	2.4 Include as standard in all evaluations an assessment of the extent to which communities in their diversities have participated in decision-making at different stages of the programming cycle and how community feedback and views have been acted on.	HQ: Global Programme Division (Global SBC Team), Evaluation Office			High

PC1, PC2, PC7	2.5 Support country offices with tailored, practical guidance, for example, by providing sector-specific guidance, which helps programme leads to understand how AAP (as part of UNICEF's cross-cutting people-centred commitments) applies to different intervention types and modalities.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC)	Localization Recs 2.1 and 2.2 — Strengthen operational guidance and ensure effective rollout to country offices.	Both the AAP and Localization evaluations identify the same gap – insufficiently actionable guidance at country level – but propose different instruments (AAP training and guidance vs. localization technical notes). Joint or aligned guidance products are feasible.	Low
	2.6 Update the AAP Agora course and other training materials to reflect progress made against recommendation 1 and 2 (adoption of more unified cross-cutting people-centred programming). Ensure this is in line with feedback from users and staff on the need for this course to be more practical; shorter; relevant for different contexts, intervention types and modalities; and suitable for partners. Linked to Recommendation 4, consider making this course mandatory for all UNICEF staff.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC)			Low
	2.7 Give focus to supporting country offices navigate UNICEF's commitment people-centred programming in its support to government partners and as part of systems strengthening. This could include: ▶ Support governments in priority contexts (e.g. conflict settings, centralized vs. decentralized governments) in developing strategies and implementing people-centred commitments. ▶ Facilitating exchanges between country offices working in similar contexts to foster mutual learning and support. ▶ Developing learning case studies and a practical framework for accountability when working with governments, covering both UNICEF's own commitments and systems strengthening. ▶ Connecting AAP to emergency preparedness systems strengthening with government entities.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC)			Low

RECOMMENDATION 3: UNICEF should adopt a more unified cross-cutting people-centred approach bringing together organizational commitments to areas such as AAP, gender, DI, and Safeguarding, and enabling strategies such as SBC, participation and inclusion, allowing programmes to operate within a more holistic understanding of the lived experience of groups in situations of vulnerability rather than thematic silos. The current organizational restructuring provides a timely opportunity[96].

Preliminary Conclusions	Sub-recommendations	Responsibility	Overlap with Localization	Comments	Priority
PC6, PC7	3.1 Develop a unified cross-cutting people-centred programming framework, setting out common programme standards and expectations for AAP, gender, DI, and PSEA that set out the synergies (and critical areas of divergence) centred on the lived experience of groups in situations of vulnerability rather than thematic silos.	HQ: EMOPS (People-centered humanitarian partnership team), Global Programme Division (Global SBC, Gender and Disability Inclusion teams)	Localization Recs 1.2, 1.3, 1.4 — Develop a comprehensive Localization Strategy, Theory of Change, and mapping of strategic areas.	Both the AAP and Localization evaluations greater coherence and reduced fragmentation, but through different structures. AAP advocates for an integrated people-centred framework; localization calls for a standalone strategy aligned with AAP. The approaches are complementary but require clarity on boundaries and governance.	High
	3.2 Prioritise joint planning and shared objectives between UNICEF's key cross-cutting people-centred commitments to breakdown structural divides. Identifying common strategic and programmatic entry points for mainstreaming people-centred programming considering the new organizational structures and resourcing landscape.	HQ: EMOPS (People-centered humanitarian partnership team), Global Programme Division (Global SBC, Gender and Disability Inclusion teams)			Medium
	3.3 Revisit strategies and global guidance for mainstreaming AAP, Gender equality, DI and Safeguarding in programmes, and consolidate into one simple and coherent people-centred package for country and regional offices. In particular, review expectations for *how these commitments will be* mainstreamed and strengthened in programme given reduced human and financial resources. This should move away from models of 'double- or triple-hatting' (as a common response to reduced resources) to consider what can be achieved and the priorities within the remaining capacity.	HQ: EMOPS (People-centered humanitarian partnership team), Global Programme Division (Global SBC, Gender and Disability Inclusion teams), Office of Strategy and Evidence (RMPS team)			Medium
	3.4 At centres of excellence, regional and country levels, where technical expertise in AAP, Disability Inclusion, gender, and PSEA is needed, UNICEF should shift from separate teams, leads and strategies for each to integrated programme quality teams, leads and strategies. Where separate teams or leads exist, UNICEF should ensure they have shared oversight and report through the same structure to enable coordination and joint approaches.	COs, ROs, CoEs			Medium

RECOMMENDATION 4: UNICEF should reposition AAP as a core component of quality people-centred programming, applicable for all work in humanitarian and development contexts.					
Preliminary Conclusions	**Sub-recommendations**	**Responsibility**	**Overlap with Localization**	**Comments**	**Priority**
PC1, PC2, PC3, PC5	4.1 Reframe AAP as a core component of quality, rights-based, people-centred programming - ensuring language that resonates beyond humanitarian contexts - while maintaining alignment with global and inter-agency 'AAP' commitments. This could include: ▶ Strengthening organization-wide understanding of UNICEF AAP commitments ▶ Revisiting the practical application of the current seven AAP pillars, which, in practice, are not given equal attention. ▶ Framing AAP within broader programming processes that staff can relate to, to complement pillar-based thinking. ▶ Adopting plain-language framing (e.g., people-centred programming, accountability, localization), ensuring alignment with inter-agency terminology, and applicable to humanitarian and development programming. ▶ Providing clarity on expectations for accountable people-centred programming in UNICEF's systems strengthening and other support to government entities.	HQ: EMOPS (People-centred humanitarian partnership team), Global Programme Division (Global SBC Team)	None	This recommendation addresses the conceptual framing and identity of AAP, including its pillars and language. Localization does not face an equivalent reframing challenge.	High

Endnotes

1 UNICEF's forthcoming CFM Procedure uses the term Complaints and Feedback Management, however the prevailing term used by regions and countries during the evaluation was Complaints and Feedback Mechanism.
2 The Grand Bargain (Official website) | IASC
3 This AAP thematic evaluation is the last evaluation envisaged under the 2022-2025 Strategic Plan. The others were focused on the Nexus, the Cluster and AoR Leadership and Coordination, Localization of Humanitarian Action, and Emergency Preparedness.
4 Case studies included the following country by region: LAC (Latin America and the Caribbean), MENA (Middle East and North Africa), EAP (East Asia and the Pacific Regional Office) Regional Offices, and Afghanistan, Central African Republic, Comoros, Lebanon, Somalia, Ukraine, and Venezuela Country Offices.
5 Global Humanitarian Overview 2024 [EN/AR/FR/ES] | OCHA
6 Total reported funding 2024 | Financial Tracking Service
7 Global Humanitarian Assistance Report 2016 - World | ReliefWeb
8 final_participation_revolution_workstream_reccomendations.pdf
9 The Grand Bargain in 2022: an independent review | ODI: Think change
10 UN General Assembly (22 Sept 2024). Resolution adopted by the General Assembly on 22 September 2024.
11 Global humanitarian assistance: Crisis and funding response - Development Initiatives
12 Flagship Initiative Second Year Learning Report, April 2025 | OCHA
13 ICVA (June 2025). The IASC Humanitarian Reset examined: A strategic briefing for NGOs.
14 Statements from the Emergency Relief Coordinator (ERC) Tom Fletcher on March 2025 and June 2025.
15 OCHA (July 2025). Accountability to Affected People OCHA Evaluation Report.
16 ibid.
17 UNICEF (2020), Accountability to Affected Populations: A handbook for UNICEF and partners.
18 First issued in 2011 and recently reinforced in 2022 by the IASC Principals joint statement on AAP in humanitarian action, which elevated AAP to leadership levels.
19 UNICEF (2022). Taking Accountability to Affected Populations to the next level - Strategy 2022–2025.
20 As an example of scale, UNICEF 's Future Focus Initiative, launched in response to the funding cuts, includes the reduction of existing positions in country offices by 10-15%, the consolidation of other offices, and the closure of some. This will have a significant impact on AAP.
21 Notes from a meeting on 10 September 2025, shared by UNICEF.
22 UNICEF (19 Sept 2025). AAP Transition Plan – draft.
23 Including Centres of Excellence (CoEs) that were introduced while the evaluation was conducted.
24 Sphere Association. (2018). The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response (4th ed.).
25 A more detailed version of this ToC pathway, mapping the strategic objectives from UNICEF's AAP Strategy (2022–2025) and AAP CSI against key stages, is included in the Annex 3.
26 These included the evaluation reference group, HQ personnel, representatives of regional offices, regional evaluation advisers, AAP focal points and advisers, and the EO.
27 HML IRB is the company responsible for providing research ethics reviews and services to all UNICEF regional offices and individual country offices.
28 The term AAP Technical Lead and AAP Lead is used in this report and includes staff with dedicated AAP roles and focal points leading AAP within country offices. It aims to distinguish between those leading on AAP in a technical function and broader networks of AAP Focal points set up within country offices to support on AAP efforts.
29 UNICEF, 2025. AAP at UNICEF, Workforce Assessment.
30 Tool 3.3 from UNICEF's AAP Toolkit (2020) 'Overview of AAP responsibilities in a Country Office' provides an overview of responsibilities for AAP across country office functions. KIIs suggest country staff are not familiar with this tool.
31 UNICEF, 2025. Accountability to Affected populations at UNICEF, Workforce Assessment.
32 Ibid
33 UNICEF (October 2024), Evaluation Report: Transforming programming: Evaluation of the implementation of the UNICEF Gender Policy and Gender Action Plans (GAP 2 and GAP 3).
34 UNICEF, 2025. Accountability to Affected Populations at UNICEF, Workforce Assessment.
35 UNICEF, 2025. Accountability to Affected Populations at UNICEF, Workforce Assessment
36 For example, gender has institutional Gender Action Plan (GAP) funds and gender thematic funds, UNICEF aligns itself with the UN-SWAP benchmark of 15% expenditures to advance sectoral gender results. PSEA has an automatic set aside in L2/L3 responses
37 ibid
38 UNICEF (2025). AAP CSI Report 2024.
39 The potential positive bias in these sources of evidence is noted. The AAP Audit and KIs raised concerns about the quality of the self-reported data and extent to which country-wide measures against some indicators (for example on participation) are meaningful. These do not allow variation in practice between sections to be captured, but instead provide an average score based on the assessment of the staff member responsible for responding on behalf of the country office.
40 UNICEF, 2024. Accountability to Affected Populations in Action
41 AAP Activities Mapping, UNICEF Lebanon Country Office 2022
42 Darcey, J. (Sept 2025 draft). Interagency Humanitarian Evaluation synthesis exercise – extract on AAP and community engagement.
43 OCHA (July 2025). Accountability to Affected People - OCHA Evaluation Report.
44 Although, noting it has not been possible to fully evaluate the inclusivity and extensiveness of this.
45 UNICEF (2023). Programme Implementation Handbook
46 UNICEF Afghanistan (2023). Formative evaluation of the cash-based assistance (CBA) programme in Afghanistan (2020-2023)
47 UNICEF (2025). CSO facing handbook (April 2025)
48 UNICEF (2025), Draft Evaluation Report Localization.

49 UNICEF Afghanistan (2025). Synthesis of evidence generated by UNICEF Afghanistan 2021-2024.
50 UNICEF, (2020). Accountability to Affected Populations Handbook. Available at: from https://www.corecommitments.unicef.org/kp/unicef_aap_handbook_en_webdouble.pdf
51 UNICEF, (2022). Accountability to Affected Populations Strategy 2022–2025. Retrieved from https://www.corecommitments.unicef.org/kp/unicef-accountability-to-affected-populations-strategy-2022-2025
52 It was not possible within the scope of this evaluation to unpack the extent to which development programmes are applying principles of AAP throughout the programme cycle, nor the extent to which UNICEF 'ground-truths' with communities are part of the organization's own accountability when working with government partners. The focus of this evaluation and country case studies gave focus to more humanitarian and protracted contexts.
53 (UNICEF 2025). Package of 15 Tipsheets for AAP in country programme planning and monitoring
54 UNICEF (2024). Report on the Internal Audit of UNICEF's Accountability to Affected Populations.
55 UNICEF (2024). Report on the Internal Audit of UNICEF's Accountability to Affected Populations.
56 UNICEF AAP Auditee Response Table - Progress Update June 2025.
57 The Ukraine response was seen one of the first contexts requiring more thinking about how UNICEF supported strong government systems as part of an emergency response.
58 UNICEF (Oct 2024). UNICEF's commitment to Accountability to Affected Populations (AAP) and marginalized groups when working with governments. Unpacking what this means in practice.
59 UNICEF (2024). AAP Technical Brief Supporting Municipalities in High-Income Countries to Strengthen People-Centred Decision-Making.
60 UNICEF (2024). Report on the Internal Audit of UNICEF's Accountability to Affected Populations.
61 UNICEF (2024). Report on the Internal Audit of UNICEF's Accountability to Affected Populations.
62 UNICEF (2024). Report on the Internal Audit of UNICEF's Accountability to Affected Populations.
63 Including by Global staff, Regional AAP Specialists and Emergency Advisers, and Country AAP Leads and Dep Reps for Programmes.
64 UNICEF (2024). Report on the Internal Audit of UNICEF's Accountability to Affected Populations.
65 UNICEF (19 Sept 2025). AAP Transition plan - draft
66 At the time of finalizing this evaluation a decision had been made to move responsibility for programmatic support to regions and country offices to SBC within PG, with EMOPs retaining responsibility for normative frameworks and interagency engagement for AAP.
67 UNICEF, AAP Business Case and Roadmap, 2018
68 UNICEF (2022). Taking Accountability to Affected Populations to the next level: Strategy 2022–2025
69 UNICEF (2024). Concept Note: Towards Quality, accountable, and inclusive programming - Strengthening coherence and harmonization among cross-sectoral thematic issues in UNICEF. (internal document)
70 UNICEF (2025), Draft Evaluation Report Localization.
71 UNICEF (October 2024), Evaluation Report: Transforming programming: Evaluation of the implementation of the UNICEF Gender Policy and Gender Action Plans (GAP 2 and GAP 3).
72 UNICEF leads the Nutrition, Water, Sanitation and Hygiene (WASH) clusters, and Child Protection Area of Responsibility (AoR), and co-leads the Education cluster with Save the Children International.
73 This guidance combines UNICEF institutional commitments to GBV risk mitigation and Disability Inclusion and four key Inter-Agency Standing Committee (IASC)-mandated cross-cutting issues (Centrality of Protection, AAP, humanitarian-development-peace nexus, and localization). Available here: UNICEF Practical Guide people centred cluster coordination.pdf
74 Recognizing current funding cuts are greatly impacting on levels of capacity for cross-cutting commitments across UNICEF and dedicated roles will become increasingly rare. For instance, Lebanon's AAP specialist contract is ending in October 2025.
75 Specifically, 35% of AAP focal points report to Deputy Representatives, 9% to Representatives, and 23% to SBC Chiefs, Managers, or Specialists, according to the UNICEF AAP Workforce Assessment (2025).
76 Reported during a global evaluation sensemaking session.
77 As of mid-2025, UNICEF CAR is in discussions with FCDO regarding the potential short-term recruitment of a new AAP specialist.
78 UNICEF (2025), Draft Evaluation Report Localization.
79 UNICEF (2023). AAP Technical Brief – Leveraging and linking AAP and PSEA for a community-focused approach.
80 PSEA is one of UNICEF's pillars of AAP, and UNICEF's first outcome focused on safe and accessible report options.
81 These predate the additional funding pressures of 2025.
82 UNICEF (2025), Draft Evaluation Report Localization; UNICEF (2024), Disability Inclusion - Evaluation of UNICEF Work on Disability Inclusion Final Report 2024.
83 The creation of the AAP inter-agency working group in Lebanon is very recent with the first meeting to be held in July 2025.
84 UNICEF (2024), Disability Inclusion - Evaluation of UNICEF Work on Disability Inclusion Final Report 2024.
85 UNICEF (October 2024), Evaluation Report: Transforming programming: Evaluation of the implementation of the UNICEF Gender Policy and Gender Action Plans (GAP 2 and GAP 3; UNICEF (2025), Draft Evaluation Report Localization; UNICEF (2024), Disability Inclusion - Evaluation of UNICEF Work on Disability Inclusion Final Report 2024.
86 UNICEF (October 2024), Evaluation Report: Transforming programming: Evaluation of the implementation of the UNICEF Gender Policy and Gender Action Plans (GAP 2 and GAP 3).
87 UNICEF (2025), Draft Evaluation Report Localization.
88 UNICEF (October 2024), Evaluation Report: Transforming programming: Evaluation of the implementation of the UNICEF Gender Policy and Gender Action Plans (GAP 2 and GAP 3).
89 UNICEF (2025), Draft Evaluation Report Localization
90 UNICEF (2020), Strengthening UNICEF's Humanitarian Action - The Humanitarian Review Findings and Recommendations.
91 UNICEF (October 2024), Evaluation Report: Transforming programming: Evaluation of the implementation of the UNICEF Gender Policy and Gender Action Plans (GAP 2 and GAP 3).
92 UNICEF (2025), Draft Evaluation Report Localization
93 An exception was noted in HAC emergency responses, where internal drivers provided stronger impetus for AAP practice.

94 OCHA, 2025. Accountability to Affected People – OCHA Evaluation Report

95 UNICEF may want to consider if other people-centred approaches (such as SBC and RCCE, and Adolescent Engagement and Participation) and commitments (such as to localization) should be part of this unified approach, included in a unified framework (sub recommendation 4.1), supported by joint planning and objectives (sub-recommendation 4.2), and included in programme quality teams (sub-recommendation 4.4). Noting broadening the scope of this recommendation may risk speed of progress. The newly agreed move of AAP programmatic support from the AAP Section to SBC within the new Global Programme Division presents an opportunity to clarify the connection between SBC and UNIEF's cross-cutting commitments).

96 UNICEF may want to consider if other people-centred approaches (such as SBC and RCCE, and Adolescent Engagement and Participation) and commitments (such as to localization) should be part of this unified approach, included in a unified framework (sub recommendation 4.1), supported by joint planning and objectives (sub-recommendation 4.2), and included in programme quality teams (sub-recommendation 4.4). Noting broadening the scope of this recommendation may risk speed of progress. The newly agreed move of AAP programmatic support from the AAP Section to SBC within the new Global Programme Division presents an opportunity to clarify the connection between SBC and UNIEF's cross-cutting commitments).

For every child,
trusted evidence driving impact

unicef
for every child

For further information, please contact:

UNICEF
Evaluation Office
3 United Nations Plaza
New York, NY 10017
USA

www.unicef.org/evaluation
UNICEF Evaluation
@unicef-evaluation.bsky.social
@UNICEFEval
Evaluation YouTube channel
evalhelp@unicef.org

© United Nations Children's Fund (UNICEF)
March 2026