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Evaluation of the interaction between Norwegian humanitarian aid, development cooperation and peace efforts

Geospatial country analysis





Geospatial country analysis,
Norwegian humanitarian aid,
development cooperation and
peace efforts

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Report

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About the Consultant

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Table 1 presents the project's team and their responsibilities.

Table 1. Project team and responsibilities.

Expert	Position	Responsibilities in the project
Jose Luis Cervera	Team leader (TL)	<ul style="list-style-type: none"> - Communication with the client - Coordination of the technical team - Design of the longitudinal and spatial analysis plans - Specification of the geo-referenced visualisations - Preparation of the inception and final reports - Quality control of the outputs and reports
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Expert	Position	Responsibilities in the project
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Disclaimer

This report is the product of its authors, and responsibility for the accuracy of data included in this report rests with the authors. The findings, interpretations, and conclusions presented in this report do not necessarily reflect the views of the Department for Evaluation.



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Acronyms and abbreviations

ACLED	Armed Conflict Location and Event Data Project
API	Application Programming Interface
ADM	Administrative level
ADB	African Development Bank
COVID	Coronavirus Disease
CRED	Centre for Renewable Energy Development
CRS	Creditor Reporting System
DAC	Development Assistance Committee
DRC	The Democratic Republic of Congo
EU	European Union
HDP	Humanitarian, Development and Peace
IATI	International Aid Transparency Initiative
ICR	Intelligent character recognition
IDMC	Internal Displacement Monitoring Centre
IDP	Internally Displaced Person(s)
IOM	The International Organization for Migration
NOK	Norwegian Kroner
Norad	Norwegian Agency for Development Cooperation
OECD	The Organisation for Economic Co-operation and Development
ToR	Terms of Reference
TPLF	Tigray People's Liberation Front
UCDP	Uppsala Conflict Data Program
UK	United Kingdom
UN	United Nations
UNCHR	United Nations High Commissioner for Refugee
UNDP	United Nations Development Programme
UNICEF	United Nations International Children's Emergency Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
US	United States
USD	United States Dollar
WHO	World Health Organization

1. Introduction and conceptual approach

The evaluation initiated by the Department for Evaluation strives to gain understanding and insight concerning the relationship between Norwegian humanitarian, development and peace (HDP) initiatives. More precisely, it is seeking to assess the extent to which such efforts have been coherent at country level to prevent, respond to, and recover from humanitarian crises, while also formulating lessons on how Norway can coherently link HDP interventions to address people's needs, risks and vulnerabilities. It is operationalising this work in two sequential phases: first, a *geospatial country analysis* (this study) considering the coherence of implementation, followed by a subsequent *implementation and policy coherence analysis*. In pursuit of the first one, evidence towards research questions have risen from a statistical analysis that has considered space and time dimensions to address coherence *among interventions, with other donor and with the context*". As described in the Terms of Reference (ToR; Annex 1), the study seeks to analyse a "broad HDP sector", then to delve deeper into health and peace interventions. Geographically, and in response to available data, the study has considered those projects ranging from 2015 to 2021 in four countries: The Democratic Republic of Congo (DRC), Ethiopia, Lebanon, and Syria.

The analysis is set to consider two distinct dimensions:

- A longitudinal dimension, analysing if interventions evolve in a consistent manner across time and evidencing trends and changes over their course (the unit of analysis is a given year); and
- A geospatial dimension, which considers concurrence and coincidence among interventions in a country or specific territory. In the case of the spatial dimension, the unit of analysis would be the maximum possible level of disaggregation as available in the geo-referenced data.

This statistical analysis is operationalised in three sequential steps and guided by the four research questions (Q1 to Q4) presented in Table 2. This implies, for each study country:

- An analysis of longitudinal coherence of HDP interventions at the aggregate, country level (not further geo-located);
- An analysis of longitudinal coherence of interventions within the health sector and peace at the aggregate, country level and not geo-located; and
- An analysis of longitudinal and spatial coherence of interventions within the health sector and peace at the sub-national geo-located level.

The four research questions as originally provided in the ToR and considered in the Technical Proposal have evolved over the course of this study for a more defined and detailed specification. This process was participatory and benefited greatly from collaborative sessions between the consultant and the Department for Evaluation held at the inception phase of this study. In the process of refining and further specification, questions were also separated along the phases of research.

Table 2 summarizes the relation between the proposed research question and the analysis dimensions as agreed and applied ("refined research questions"). These questions have been answered using evidence from the Geo-located Norwegian aid statistical data provided by the Department for Evaluation at Norad and external datasets, specifically the Armed Conflict Location & Event Data Project (ACLED), the Uppsala Conflict Data Program (UCDP), the Internal Displacement Monitoring Centre (IDMC), International Aid Transparency Initiative (IATI) and the OECD creditors reporting system (CRS), presented in Subsection 2.2.

This document is structured as follows:

- Section 2 presents the methodology of the study.
- Sections 3 to 6 provide the results of the coherence analysis implemented for DRC, Ethiopia, Lebanon and Syria respectively. The structure of each of these sections is identical and follows the three sequential levels of analysis proposed in the ToR, one in each of the subsections of the chapter: (1) longitudinal coherence analysis of HDP interventions at country level, (2) longitudinal coherence analysis of health and peace interventions at country level and (3) spatial coherence analysis of health and peace interventions at subnational levels. Each subsection is also divided in three parts, the first one presenting the results of the coherence analysis among types of intervention funded by Norway; the second provides a comparative analysis with other donors; and the third one outlines the results of the contextual coherence analysis.

Four Annexes complement the report:

- Annex 1 includes the ToR of the project.
- Annexes 2 and 3 present the lists of agreement partners and implementing institutions in each country, specifying the sectors of intervention in which each one has participated.
- Annex 4 presents the distribution of agreement partners and implementing institutions groups by year and type of intervention.

Table 2. Refined Research questions.

	Spatial	Longitudinal
Phase 1 Human, Development and Peace	- at country level -	<p>Q2.a: To what extent, and eventually how, do HDP interventions receiving Norwegian earmarked development aid combine (if at all) to respond to contextual changes (i.e., crisis dynamics and needs) in each country?</p> <p>Q4.a: To what extent do partners receiving funding support from Norway and implementing humanitarian interventions also implement development and/or peace interventions in the same country?</p> <p>Q4.b: Is there any correlation (and if yes, how) between type of partner and contextual changes (i.e., crisis dynamics and needs) at the national level?</p>
Phase 2 Health and Peace	- at country level -	<p>Q2.b: To what extent, and eventually how, do health and peace interventions receiving Norwegian earmarked development aid combine (if at all) to respond to contextual changes (i.e., crisis dynamics and needs) in each country?</p> <p>Q3: To what extent, and eventually how, do health and peace interventions receiving Norwegian earmarked development aid correlate with those funded by</p> <ul style="list-style-type: none"> - other actors (i.e., OECD DAC countries), or by - Norway through multilateral aid <p>Q4.b: Is there any correlation (and if yes, how) between type of partner and contextual changes (i.e., crisis dynamics and needs) at the national level?</p>
Phase 3 Health and Peace (subnational)	<p>Q1.a: To what extent are the relevant interventions targeting the same subnational regions...</p> <p>Q4.a: To what extent do partners receiving funding support from Norway and implementing health interventions also implement peace interventions in the same country and geographic areas at the sub-national level?</p>	<p>Q1.b: ...within the same timeframe?</p> <p>Q4.b: Is there any correlation (and if yes, how) between type of partner and contextual changes (i.e., crisis dynamics and needs) at the subnational level?</p>

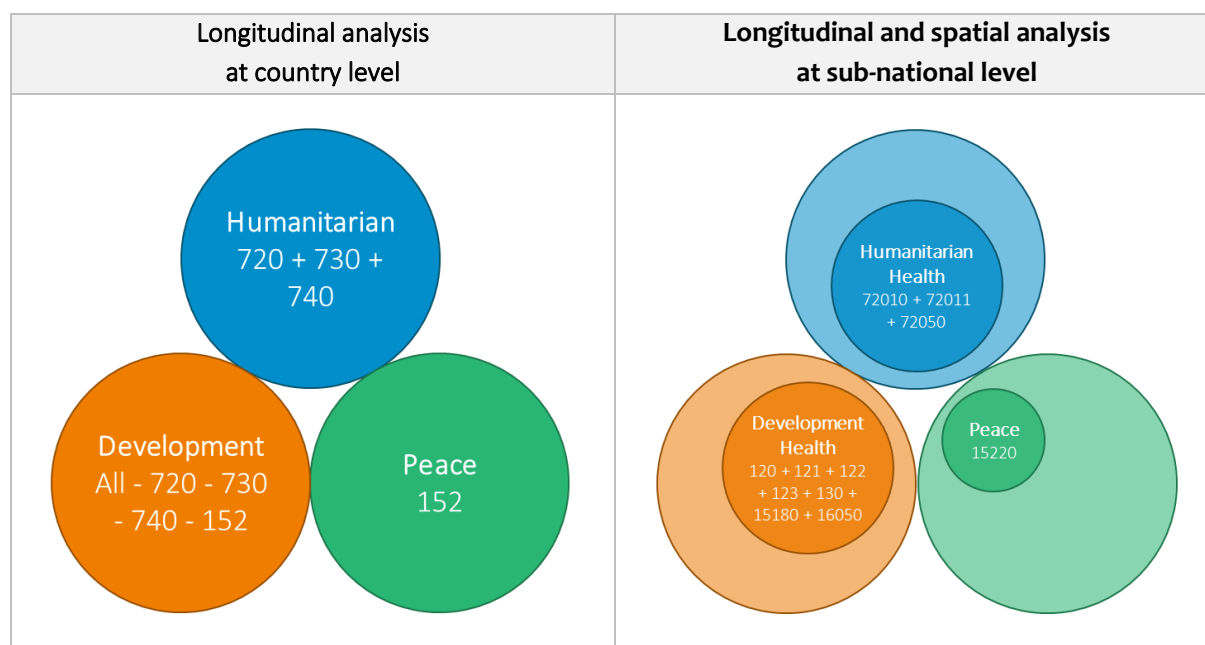
2. Methodology

2.1. Strategy of analysis to measure coherence.

The ToR are explicit in their definition of coherence, which is understood as the “the compatibility of humanitarian, development and peace interventions (projects) with other humanitarian, development and peace interventions in a given country”. The ToR provides a specific definition of the groups of interventions in terms of DAC codes to be considered for each type of analysis, as presented in Figure 1. The definitions of the groups, along with the spellings of the OECD DAC purpose code and sub-codes, are outlined in the ToR (Annex 1).

This approach is aligned with the OECD's definition¹ of the humanitarian ("H"), development ("D"), and peace ("P") categories in its States of Fragility flagship report as well as in other reports.

Figure 1. Three groups of interventions, by OECD DAC purpose code and sub-code.



Note that Health interventions in the right panel of Figure 1 includes both *humanitarian health* and *development health* interventions. For these reasons, **a breakdown of health interventions in terms of these two sub-categories (development health and humanitarian health interventions) have been considered in the analysis.**

The ToR addresses two complementary coherence analysis: *within* intervention categories (as described in Figure 1, with a breakdown of health interventions when required) and *between* each type of interventions and the context, as defined by the different crises affecting each geographic area (country and sub-national levels) at each moment of time (year).

¹ OECD, Fragility Framework Methodology, <http://www3.compareyourcountry.org/states-of-fragility/about/0/>. Last access: 6 Jan. 2023.

2.1.1. Measuring coherence among intervention categories

By using DAC² codes at 3 or 5 digits (see Figure 1), interventions can be automatically allocated to each of the 6 categories to be considered for longitudinal and spatial analysis at national and subnational levels: HDP for longitudinal analysis at country level and; Health (with its corresponding two subcategories for humanitarian health and development health interventions) and Peace (restricted). After this allocation, two statistical measures of the level (intensity) of intervention in each category have been established for each combination of year and geographical unit, as shown in Table 3:

- the total number of the interventions in each category and
- the aggregated disbursement of such interventions.

Table 3. Proposed presentation of measures of the level of intervention in the different categories.

Longitudinal analysis at country level.	Number of interventions	Disbursement (million NOK)	Longitudinal and spatial analysis at sub-national level.	Number of interventions	Disbursement (million NOK)
Humanitarian			Humanitarian health		
Development			Development health		
Peace			Peace (restricted)		

The indicators in Table 3 can be obtained (and therefore the coherence analysed) breaking down by *Type of agreement*, *Type of donor* (Norwegian and Others) and *Type of partner* (both implementing and agreement partners³). A cross-classification by *Type of partner* and *Type of donor* provides the following categories: *Norwegian NGOs*; *Local NGOs*; *International NGOs*; *NGOs of other donor countries*; *Norwegian public sector*; *Public sector of other donor countries*; *Private sector in developing countries*; *Public-private partnerships*; and *Multilateral institutions*.

The indicators of intervention intensity are computed for each year and area. From this information, the coherence among types of interventions has been analysed by comparing the evolution of these indicators along time and through space. The analysis of *the spatial coherence* among interventions was based in the elaboration of maps comparing the number of interventions of each type implemented in each administrative area (at the most detailed level available in the data sets). Finally, the longitudinal and spatial approaches have been applied simultaneously, by presenting how the maps with each type of interventions evolve along time.

2.1.2. Measuring contextual coherence

The analysis of coherences between interventions and the context (contextual coherence) has followed a similar approach to that for *coherence among crises*. To this end, *crises* were classified in different groups (see below). For each year and geographical unit, two main indicators related to crises have been considered:

- the number of crises of each type taking place, and

² The intervention sectors are numbered, grouped and named according to the OECD/DAC classification. Each code refers to a main intervention sector (the three first digits) and a sub-sector (the last two digits).

³ The agreement partner is the counterpart to Norad/the Ministry of Foreign Affairs (MFA)/embassies which is responsible for reporting according to requirements stated in the agreement. The implementing partner is the institution/person/organisation responsible for carrying out the agreement (Norad Statistical Manual 2023, available at <https://www.norad.no/contentassets/ebac048145bb41c1be9ebbec94d69faa/statmanual-2023-january.pdf>).

- three measures of their severity:
 - number of internally displaced people (IPDs) due to natural disasters,
 - deaths from armed conflicts (with a split for civilian deaths) and
 - fatalities from violence against civilians.

The analysis of contextual coherence was done by comparing the level of HDP interventions with the number and severity of three type of crises:

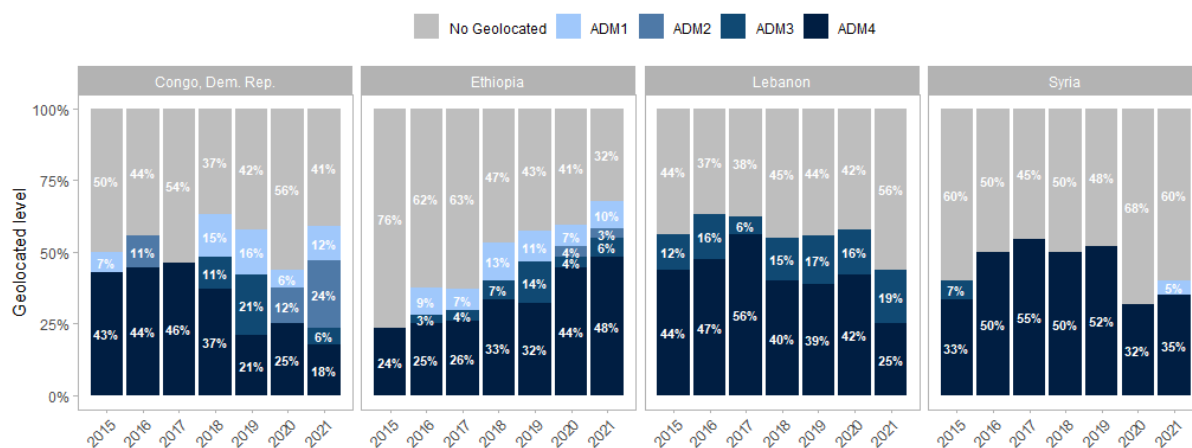
- **Natural disasters**, extracted from the Internal Displacement Monitoring Centre (IDMC), whose severity is measured in terms of the *number of Internally Displaced Persons* (IDPs) caused by the disasters.
- **Armed conflicts**, extracted from the Uppsala Conflict Data Program (UCDP), whose severity is measured in terms of number of *total deaths and civilian deaths* caused by armed conflicts.
- **Violence against civilians** (including sexual violence, violent attacks, and abduction/forced disappearance) extracted from the Armed Conflict Location and Event Data Project (ACLED), whose severity is measured by the number of fatalities.

2.2. Data sources

The analyses presented in this draft report have been implemented using data from the following sources:

- The **Norwegian aid statistical data** for active agreements in the four target countries in the 2015-2021 period. In addition, a geo-located subset of the Norwegian aid statistical data was prepared by the Department for Evaluation. This dataset has been cleaned and harmonized, including 4,258 records with information about 1,045 interventions, 341 of which are health and peace interventions with 175 of them being geo-located⁴. Figure 2 presents the distribution of the maximum level of disaggregation of the geo-located interventions per country and year (from the most aggregated administrative levels ADM1 to the most granular administrative level ADM4).

Figure 2. Maximum administrative disaggregation level of geo-located interventions by country and year.



⁴ Geolocation, the process of placing a project in a specific geographic location, is not always possible for all projects. This is due to various factors, such as the project having an advocacy focus at a national level. Additionally, project documentation and information for some projects was not received in time, preventing the team from proceeding with the data formatting and analysis. Still, it is worth noting that the percentage of geo-located data in this project (51.3%) is higher than that of data in the IATI data repository (d-portal), for health and peace interventions in the period 2015-2021, where the percentage of activities with exact location is only 31%.

- **Armed Conflict Location & Event Data Project⁵ (ACLED)** collects information on the dates, actors, locations, fatalities, and types of all reported violence against civilians around the world. ACLED defines ‘Violence against civilians’ as violent events where an organised armed group deliberately inflicts violence upon unarmed non-combatants. By definition, civilians are unarmed and cannot engage in political violence. The perpetrators of such acts include state forces and their affiliates, rebels, militias, and external/other forces. ACLED data are available to the public and are released in real-time. Data can be downloaded through the data export tool on the ACLED website or can be accessed through an API.
- **The Uppsala Conflict Data Program⁶ (UCDP)**, provides a disaggregated dataset covering individual events of armed conflict, defined as a contested incompatibility that concerns government and/or territory where the use of armed force between two parties, of which at least one is the government of a state, results in at least 25 battle-related deaths in one calendar year. The event dataset traces the events of all UCDP conflict for both active years and non-active years. UCDP includes state-based conflict, non-state conflict and one-sided violence.
- **Internal Displacement Monitoring Centre⁷ (IDMC)** which provides a country sheet with information on the number of disasters and the number of persons internally displaced. IDMC considers two types of natural disasters: geophysical disasters (earthquake, dry mass movement and volcanic eruption) and weather-related disasters (flood, extreme temperature, wet mass movement, storm, drought, wildfire and severe winter condition)⁸.
- **Internal Aid Transparency Initiative⁹ (IATI)** which includes information on cooperation projects of more than 1,500 organisations (governments, multilateral institutions, private sector and civil society organizations and others). Information is presented in a harmonized way according to IATI standards.
- **OECD Creditor Reporting System¹⁰ (CRS)**, providing a set of basic harmonized indicators for all DAC members. Data are collected on individual projects and programs and classified by sector or main purpose category (e.g., health or energy). The DAC classification also includes several categories which are not further allocable by sector: general budget support; debt relief; humanitarian aid, emergency assistance; food aid; support to non-governmental organizations and administrative costs.

⁵ <https://acleddata.com/>

⁶ <https://ucdp.uu.se>

⁷ www.internal-displacement.org. A detailed information on the monitoring applied by IDMC to monitor crises and the IDPs generated by them can be found at <https://www.internal-displacement.org/monitoring-tools>.

⁸ IDMC monitors and collects information for all reported disasters from governments’ disaster management and disaster risk reduction agencies, the UN, IFRC, national Red Cross and Red Crescent societies, NGOs and local and international media outlets.

⁹ <https://datastore.iatistandard.org/> and <https://datastore.iati.cloud/home>

¹⁰ <https://stats.oecd.org/>

2.3. Constrains and limitations of the methodology

The methodology of the study is not free of limitations. In particular, the following issues should be highlighted:

- The disbursement of the interventions is only available at country level. Analysis at sub-national level can only consider the number of interventions as indicator of the intervention level.
- On average for the four countries, only about half of the health and peace interventions (175 interventions) were geo-located in the dataset provided by the Department for Evaluation at Norad.
- Geo-located data at the lowest administrative levels can be sensitive in certain contexts and jeopardize the work of the implementing partner and the safety of their field staff. Therefore, this study does not include explicit reference to information that could reveal details of implementing partner (location, budget, type of interventions etc.).
- Data with higher time granularity than one year are not available. This fact makes difficult the analysis of the pattern of distribution of a crisis along time.
- The study covers aggregated groupings of interventions over seven years, from 2015 to 2021. The reduced number of observations makes difficult the estimation of quantitative measures of correlation or the of the testing of statistical hypothesis to assess whether such correlations are statistically significant.

Moreover, the existence of different types of interventions and crisis, different administrative levels and the number of variables defining potential interesting breakdowns of the results makes impossible to present in tables, figures and maps all the information in a comparable way for the four countries that may be potentially relevant for the different stakeholders. This fact suggests the convenience of presenting the most detailed information with the support of interactive visualisation tools, which are not possible in the current report format.

3. Coherence analysis for the Democratic Republic of Congo

3.1. Longitudinal coherence of HDP interventions at country level

The analysis of the coherence of the humanitarian, development and peace interventions supported by Norway in DRC has considered 484 interventions implemented from 2015 to 2021, with a total disbursement of NOK 1,630.34 million.

3.1.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. In relation to humanitarian and peace interventions, the total number of development interventions is remarkably higher, peaking in 2018 (Table 4 and Figure 3). Yet, this contrast is not maintained in the analysis considering disbursement, whereby differences are less pronounced with a slight predominance of humanitarian disbursements also peaking in 2018. This is partly explained by large differences in average disbursements per intervention type (Table 5), as humanitarian interventions’ average disbursement (NOK 11.4 million) is significantly higher than peace or development interventions, at two and five times larger respectively.

Figure 3. Number of HDP interventions and total disbursement by type of intervention in DRC.

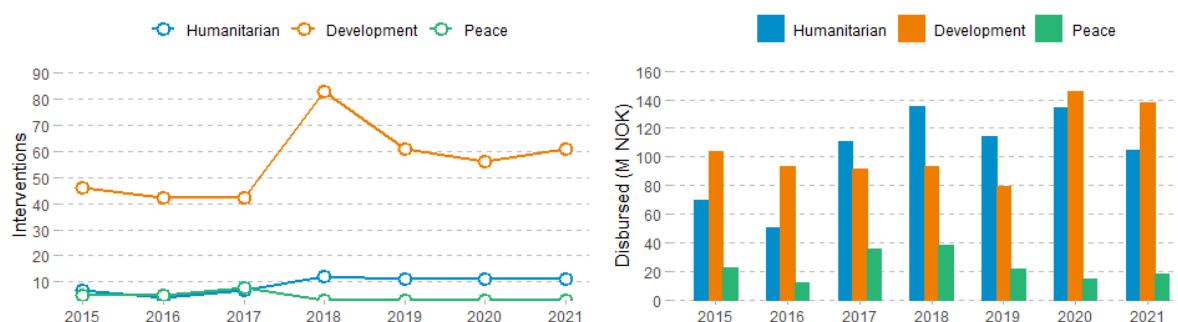


Table 4. HDP interventions supported by Norway in DRC.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian	Development	Peace	Total	Humanitarian	Development	Peace	Total
2015	7	46	5	58	69.90	104.08	23.03	197.01
2016	4	42	5	51	51.00	93.37	12.41	156.78
2017	7	42	8	57	111.00	91.72	35.96	238.68
2018	12	83	3	98	135.00	93.02	38.58	266.60
2019	11	61	3	75	114.40	79.12	21.56	215.08
2020	11	56	3	70	133.96	145.89	14.41	294.26
2021	11	61	3	75	105.07	138.21	18.65	261.93
Total	63	391	30	484	720.34	745.40	164.59	1,630.34

Table 5. Average disbursement (million NOK) per intervention, by type of HDP intervention and year in DRC.

Year	Average disbursement (million NOK)		
	Humanitarian	Development	Peace
2015	9.99	2.26	4.61
2016	12.75	2.22	2.48
2017	15.86	2.18	4.50
2018	11.25	1.12	12.86
2019	10.40	1.30	7.19
2020	12.18	2.61	4.80
2021	9.55	2.27	6.22
Total	11.43	1.91	5.49

The interventions financed by Norway in these 7 years were channelled via 47 agreement partners and 96 implementing institutions, which are listed in the Annexes (subsections 8.1 and 9.1 respectively). 36.0% of the interventions are implemented by the agreement partner themselves (75.0% for humanitarian interventions, 25.6% for development and 58.9% for peace interventions). The majority of agreement partners and implementing institutions have participated in one only type of intervention, indicating a certain degree of specialisation within partners. Most often, these have been development partners and implementers (Figure 4), whereas only 6.4% of agreement partners and 3.7% of implementing institutions have participated in all three types of interventions.

Figure 4. Percentage of agreement partners and implementing institutions participating each combination of types of HDP interventions in DRC.

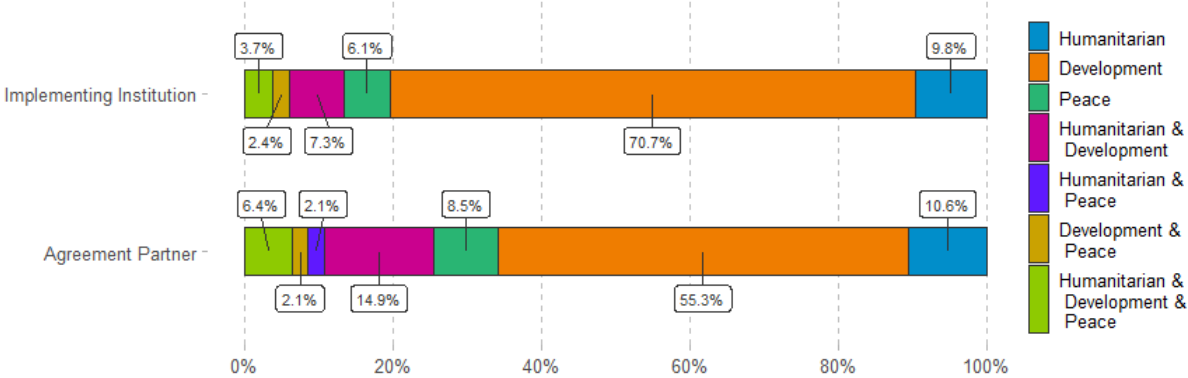
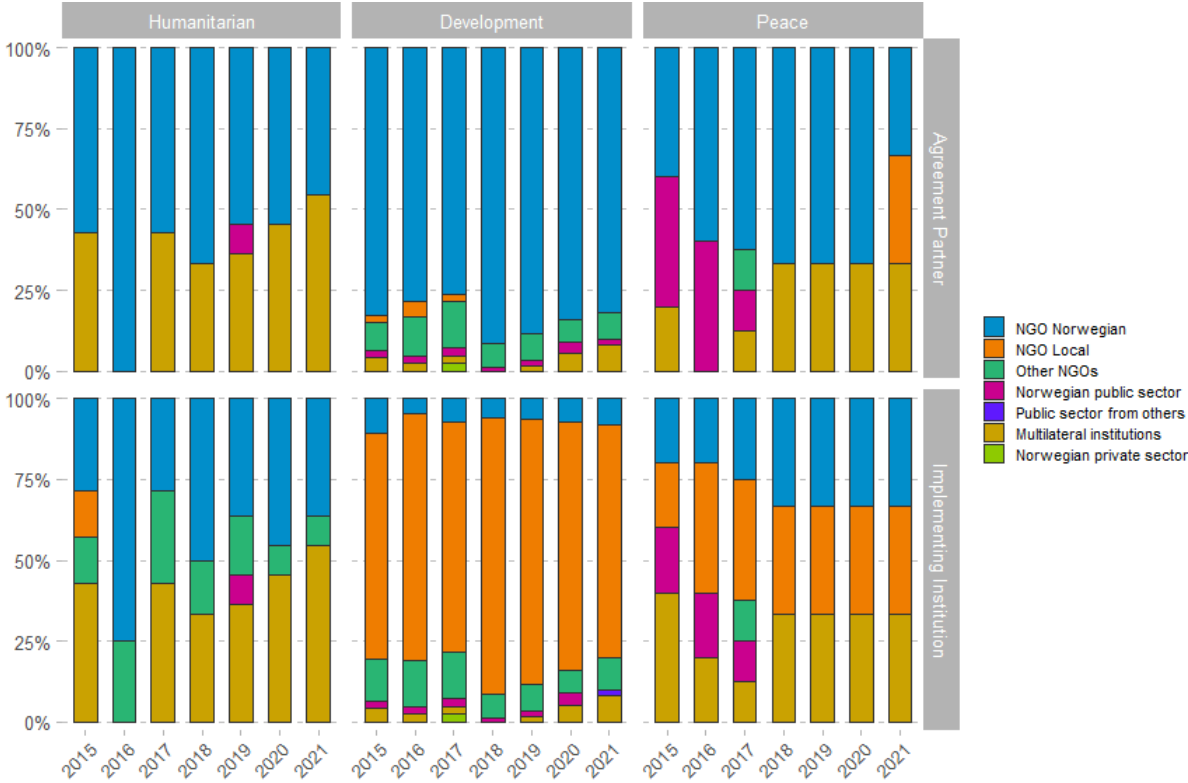


Figure 5 presents the disaggregation of the information in Figure 4 by year and type of individual agreement partners and implementing institutions (a detailed table is presented in Annex 10.1.1). A number of relevant findings emerge from this nuanced analysis. First, these figures evidence that, for all interventions, agreement partners are predominately Norwegian NGOs followed by, in the case of humanitarian and peace interventions, multilateral institutions. Then, implementing institutions appear to be largely dependent on intervention types. Development interventions are mainly implemented by local NGOs, while humanitarian and peace interventions are carried out by a combination of different types of institutions including Norwegian and international NGOs for humanitarian assistance and Norwegian and Local NGOs for peace interventions. International institutions appear to have a relevant role in both humanitarian and peace interventions. Last, in the case of development interventions, there is an important concentration of interventions with Norwegian NGOs as agreement partners and local NGOs as implementing institutions.

Figure 5. Percentage of Agreement Partners and Implementing institutions per type of HDP intervention¹¹



3.1.2. Coherence with other donors

Figure 6 presents the longitudinal coherence of HDP interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany and the United States and the aggregation for all donors that have supported at least one HDP intervention in DRC according to CRS dataset (Table 6). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad, and data for other countries draws from the OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

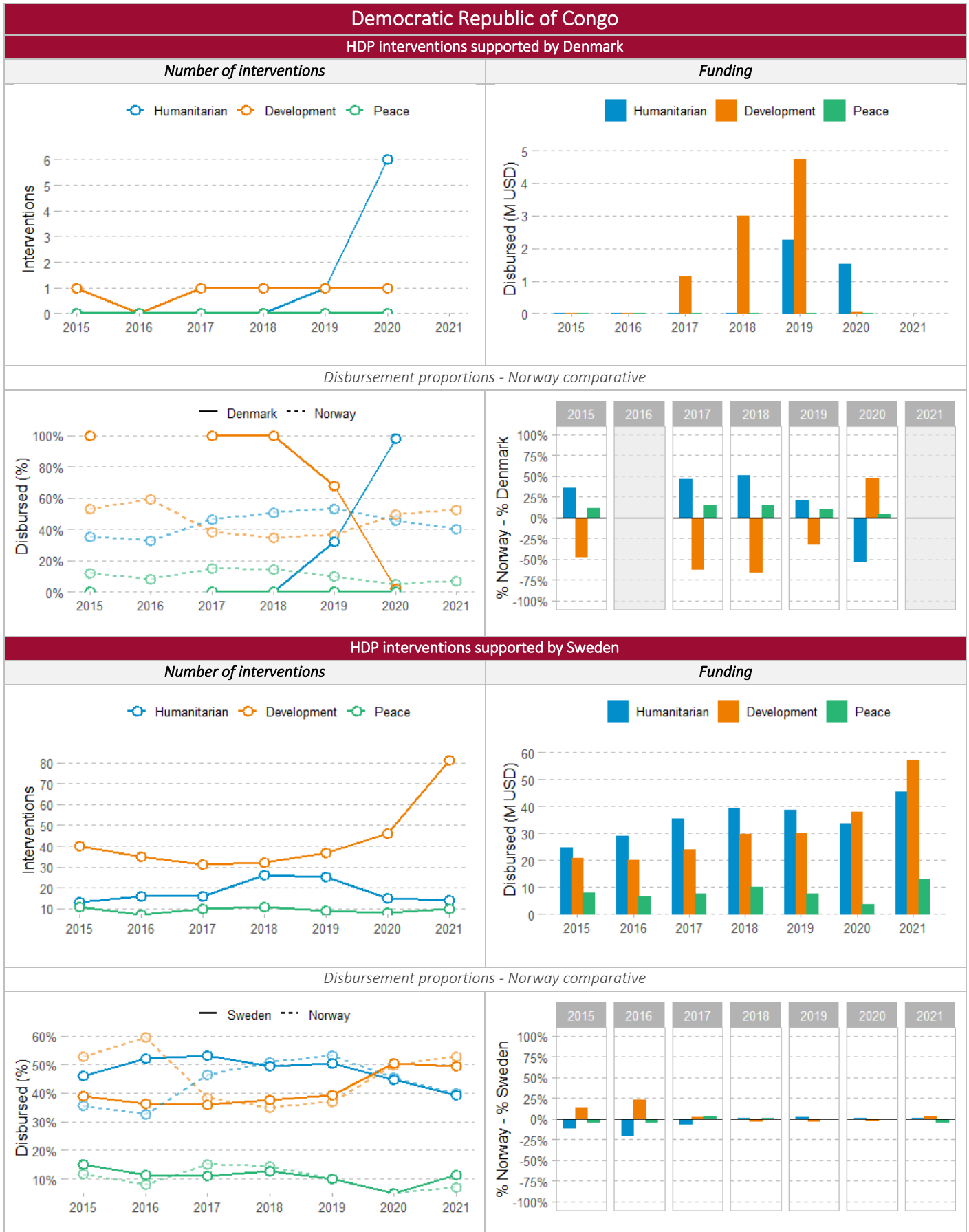
¹¹ Other NGOs joins the groups: NGO International, NGO Other donor countries; Public sector from others joins the groups: Public sector in developing countries, Public sector other donor countries.

Table 6. Donors of at least one HDP intervention implemented in DRC, 2015 - 2021 (Source: CRS).

All donors			
African Development Bank	Finland	Ireland	Slovenia
African Development Fund	Fondation Botnar	Islamic Development Bank	Spain
Arab Bank for Economic Development in Africa	Food and Agriculture Organisation	Israel	Sweden
Arcadia Fund	Ford Foundation	Italy	Swedish Postcode Lottery
Arcus Foundation	France	Japan	Switzerland
Australia	Germany	John D. & Catherine T. MacArthur Foundation	Thailand
Austria	Global Alliance for Vaccines and Immunization	Korea	Türkiye
Azerbaijan	Global Environment Facility	La Caixa Banking Foundation	UBS Optimus Foundation
Belgium	Global Fund	Luxembourg	UN Peacebuilding Fund
Bill & Melinda Gates Foundation	Grameen Crédit Agricole Foundation	Malta	UNAIDS
Bloomberg Family Foundation	Greece	Mastercard Foundation	UNDP
Canada	Green Climate Fund	Netherlands	UNFPA
Central Emergency Response Fund	H&M Foundation	Norway	UNHCR
Charity Projects Ltd (Comic Relief)	Howard G. Buffett Foundation	Oak Foundation	UNICEF
Citi Foundation	Hungary	OPEC Fund for International Development	United Arab Emirates
Climate Investment Funds	Iceland	Poland	United Kingdom
Czech Republic	IFAD	Portugal	United States
David & Lucile Packard Foundation	IMF (Concessional Trust Funds)	Qatar	Wellcome Trust
Denmark	International Atomic Energy Agency	Rockefeller Foundation	WFP
Dutch Postcode Lottery	International Development Association	Romania	World Health Organisation
EU Institutions	International Labour Organisation	Saudi Arabia	WTO - International Trade Centre

As shown in Figure 6, the coherence between HDP interventions funded by Norway and those supported by other countries is in general high. Disbursement patterns for Norway are very similar to those for Sweden and, to a lower extent, to United Kingdom and Germany. Larger differences can be found with Finland (which is more oriented towards development interventions during all years but 2020) and Denmark (which is more oriented towards humanitarian aid than Norway). The comparison with the aggregated disbursement of all donors in Table 6 is presented in the last panel of Figure 6.

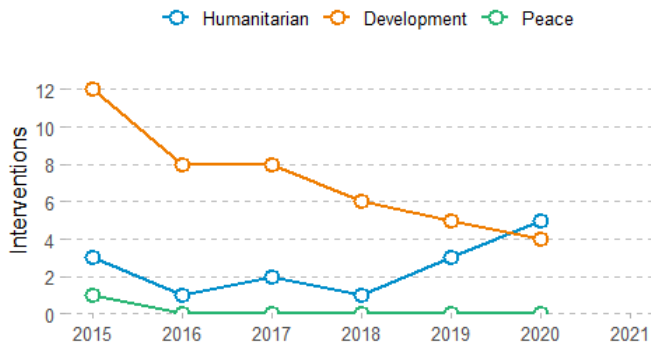
Figure 6. Longitudinal analysis of HDP coherence with other donors in DRC.



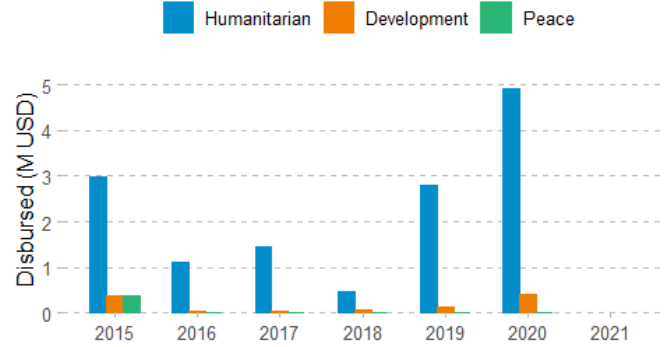
Democratic Republic of Congo

HDP interventions supported by Finland

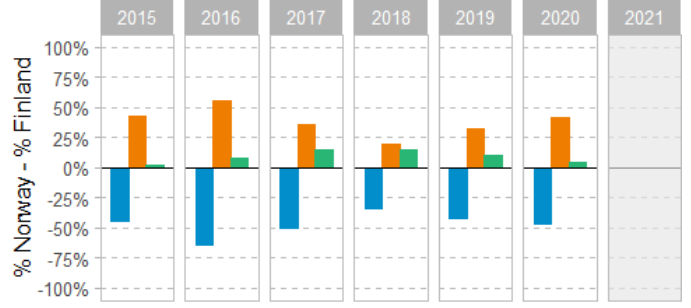
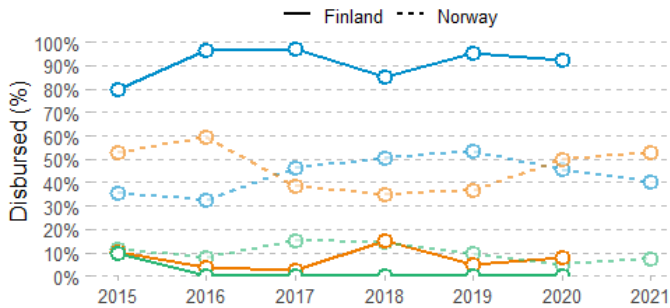
Number of interventions



Funding

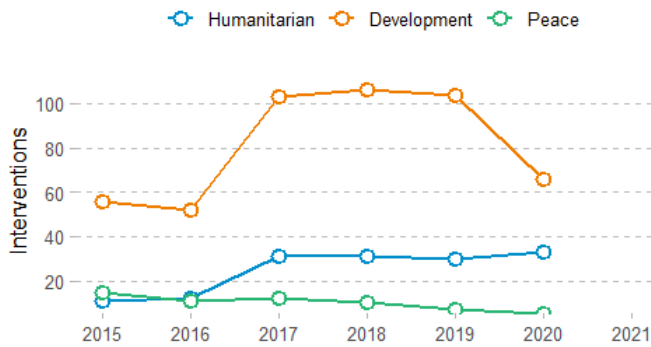


Disbursement proportions - Norway comparative

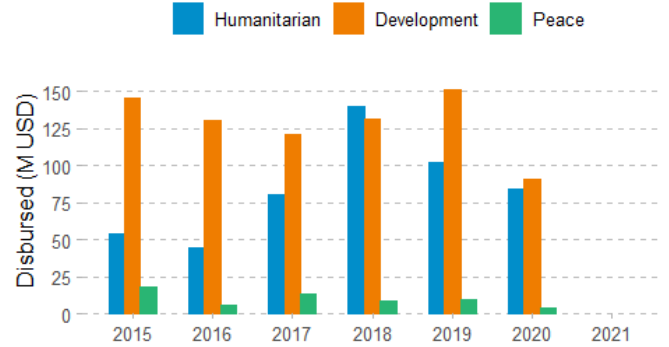


HDP interventions supported by United Kingdom

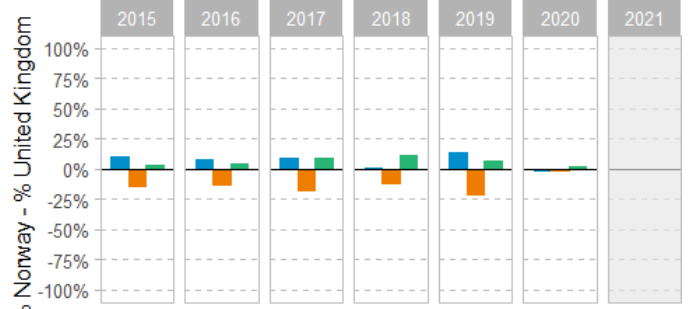
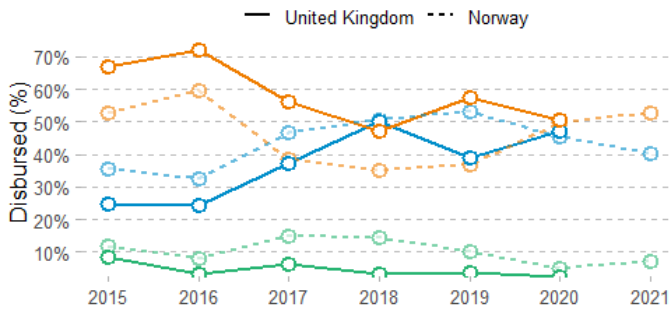
Number of interventions



Funding

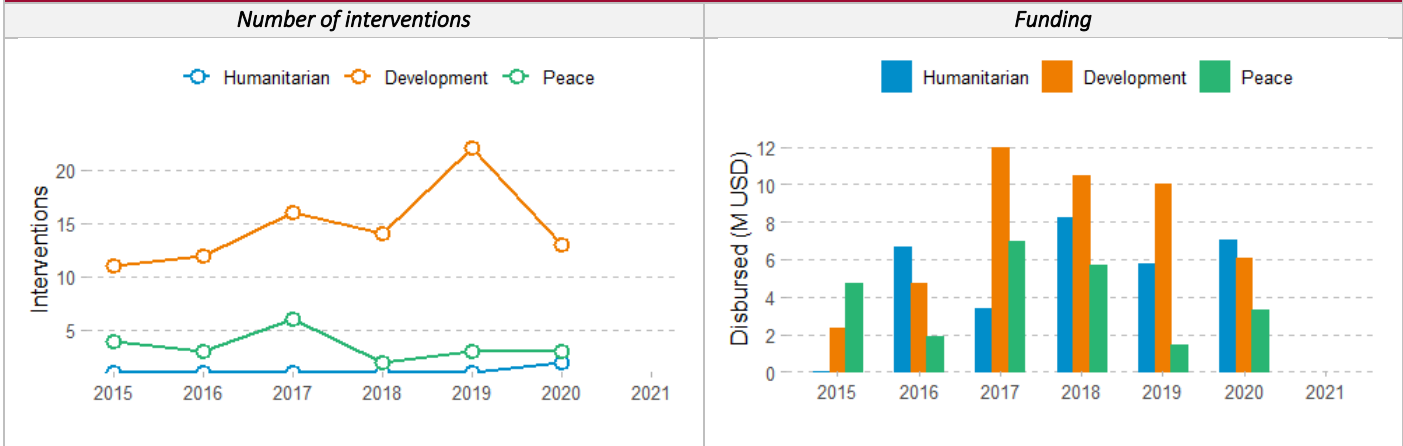


Disbursement proportions - Norway comparative

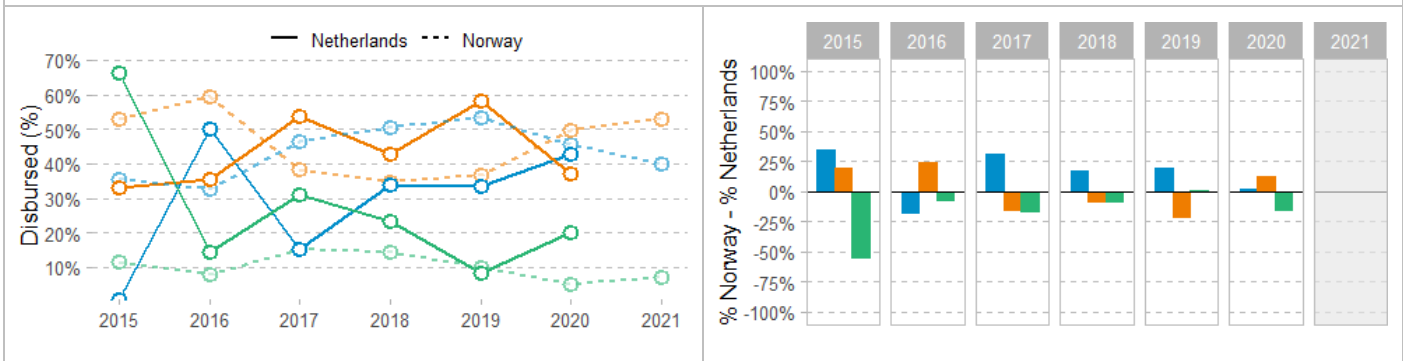


Democratic Republic of Congo

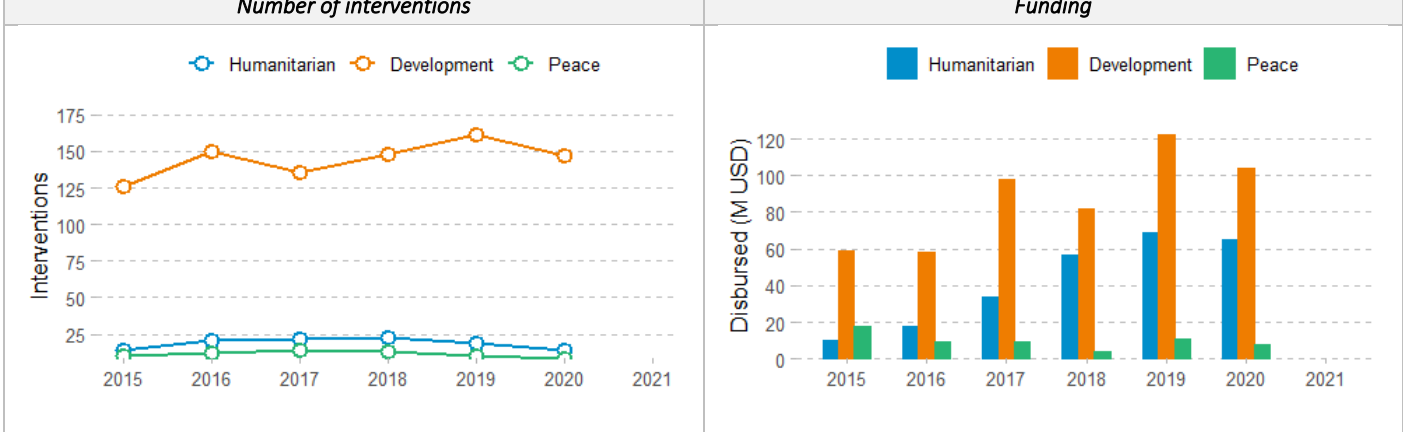
HDP interventions supported by Netherlands



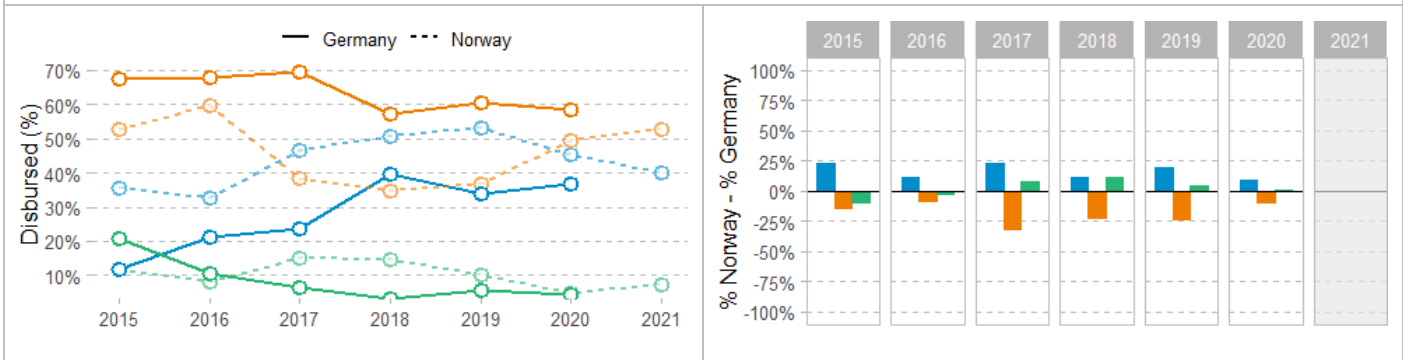
Disbursement proportions - Norway comparative



HDP interventions supported by Germany



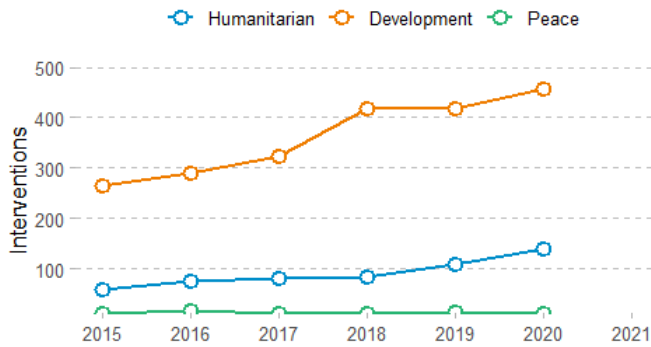
Disbursement proportions - Norway comparative



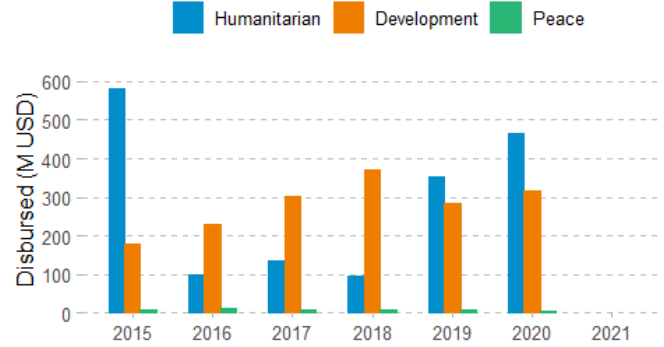
Democratic Republic of Congo

HDP interventions supported by United States

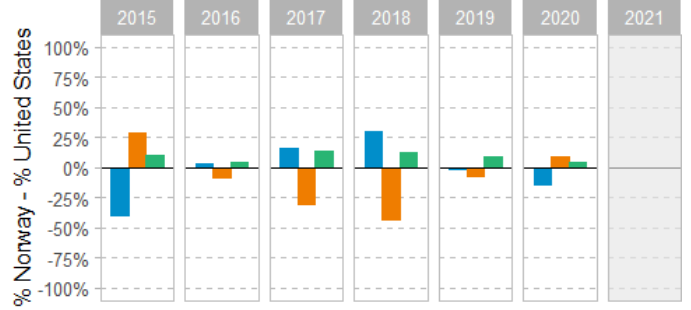
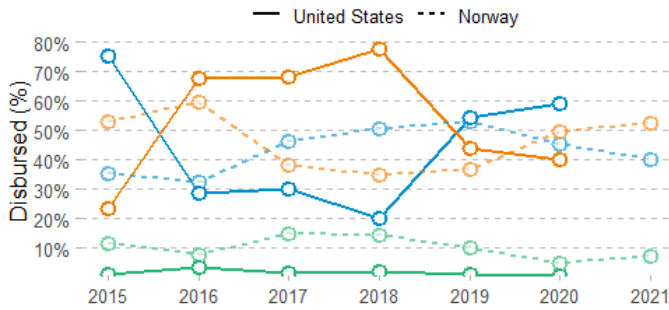
Number of interventions



Funding

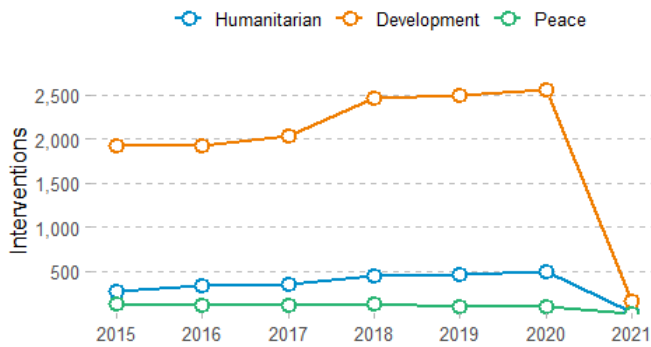


Disbursement proportions - Norway comparative

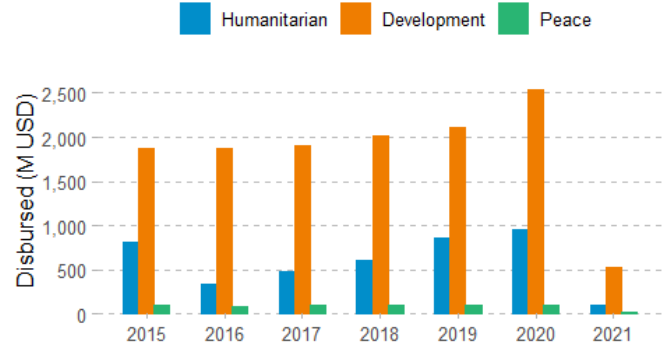


Aggregated HDP interventions supported by all donors.

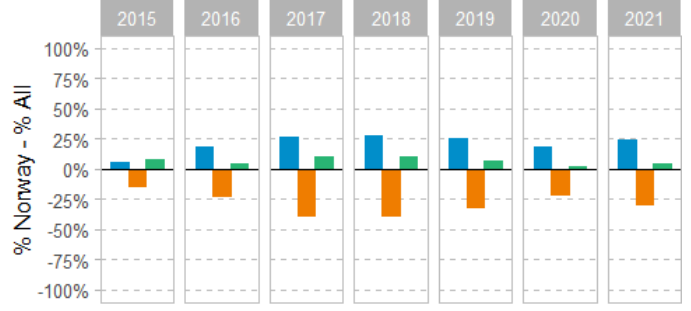
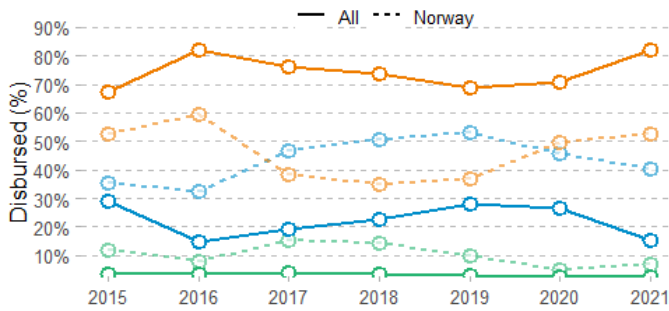
Number of interventions



Funding



Disbursement proportions - Norway comparative



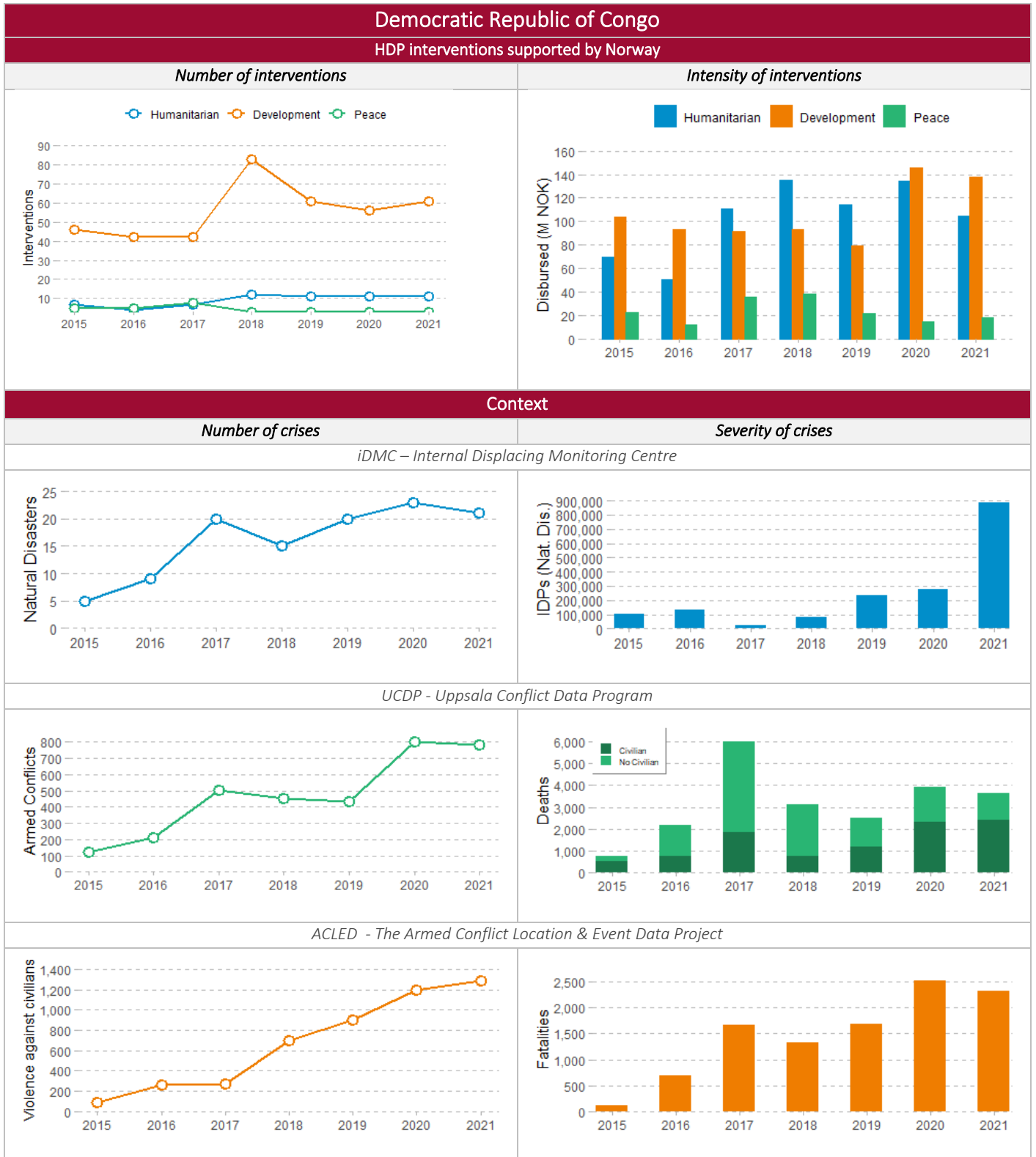
3.1.3. Contextual coherence

This section discusses the change over time (2015-2021) of each intervention type in comparison to selected crises over that period, including natural disasters, armed conflicts and violence against civilians. For the purposes of this analysis, the intensity of the interventions is measured in million NOK disbursed, and the severity of the crises is calculated in a tailored manner for each crisis type: IDPs in the case of natural disasters (as presented in the Internal Displacing Monitoring Centre), number of deaths for armed conflicts (as available in Uppsala Conflict Data Program), and fatalities for violence against civilians (as per the Armed Conflict Location & Event Data Project) (see subsection 2.2).

It evidences a dramatic situation in DRC, which has steadily worsened since 2016 events (Figure 7). Contextually, not only armed conflict and violence against civilians have been increasing since 2016 and 2018 respectively, but natural disasters have also hit the country, particularly in 2017 when the country suffered severe storms and deadly floods and in 2021 following the eruption of Mount Nyiragongo.

The evolution of disbursement in humanitarian assistance is coherent with these contextual changes. In the years preceding these crises, expenditures in development interventions were consistently largest, yet a sharp increase in humanitarian spending is perceived in the data from 2017, seemingly at the expense of disbursements in development interventions. This situation is maintained through 2020, when development again rises sharply to the predominant category, but not curtailing humanitarian spending, which in 2020 remains high. The effect of the 2021 eruption is not apparent in the humanitarian data.

Figure 7. Longitudinal analysis of HDP contextual coherence in DRC.



3.2. Longitudinal coherence of health and peace interventions at country level

For this section, the analysis focuses on the coherence of peace interventions with specific subsets of humanitarian and development ones, namely, those focused on Health. In this case, the coherence analysis of health and peace interventions supported by Norway in DRC has considered 115 interventions implemented between 2015 and 2021, consisting of a total disbursement of NOK 795.36 million.

3.2.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. In general, humanitarian health interventions are consistently the most intense (as measured in million NOK disbursed). However, the difference between all three types is not as significant when the number of interventions is considered, with the only exception of 2018 when development health peaks. Consequently, the number of humanitarian health interventions appears, on average, to be larger in disbursement amounts. (Table 7, Table 8 and Figure 8).

Figure 8. Number of health and peace interventions and total disbursement (million NOK) by type of intervention in DRC.

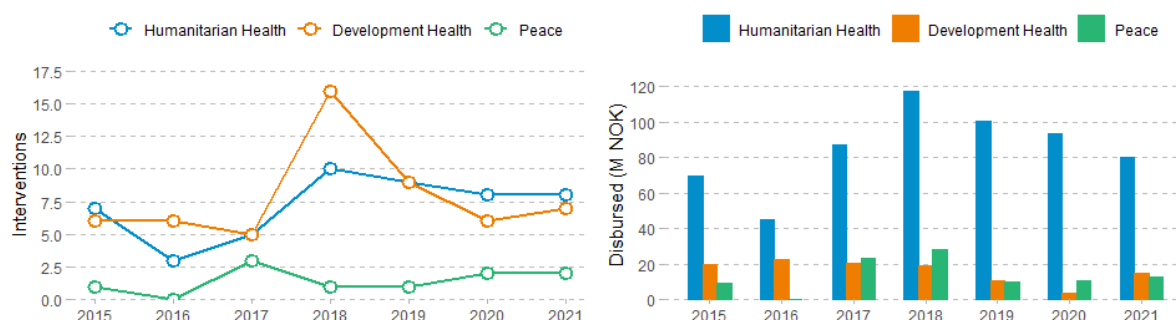


Table 7. Health and peace interventions supported by Norway in DRC.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian Health	Development Health	Peace	Total	Humanitarian Health	Development Health	Peace	Total
2015	7	6	1	14	69.90	19.66	9.00	98.56
2016	3	6	0	9	45.00	22.24	0.00	67.24
2017	5	5	3	13	87.00	20.13	23.12	130.25
2018	10	16	1	27	117.50	18.94	28.00	164.44
2019	9	9	1	19	100.45	10.29	10.00	120.74
2020	8	6	2	16	93.19	3.52	10.57	107.28
2021	8	7	2	17	79.98	14.56	12.32	106.85
Total	50	55	10	115	593.02	109.33	93.01	795.36

Table 8. Average disbursement (million NOK) by type of health and peace intervention and year in DRC.

Year	Average disbursement (million NOK)		
	Humanitarian Health	Development Health	Peace
2015	9.99	3.28	9.00
2016	15.00	3.71	0.00
2017	17.40	4.03	7.71
2018	11.75	1.18	28.00
2019	11.16	1.14	10.00
2020	11.65	0.59	5.29
2021	10.00	2.08	6.16
Total	11.86	1.99	9.3

The health and peace interventions financed by Norway during this period were channelled via 19 agreement partners and 35 implementing institutions¹². 49.2% of the interventions are implemented by the agreement partner (75.9% for humanitarian interventions, 20.0% for development and 66.7% for peace interventions). Again, most agreement partners and implementing institutions have participated in one only type of intervention, indicating a certain degree of specialisation within partners. This was most often the case for *humanitarian health* in the case of agreement partners and *development health* for implementing institutions. Only 5.3% of the agreement partners and 3.3% of the implementing institutions have participated in the three types of interventions (Figure 9).

Figure 9. Percentage of agreement partners and implementing institutions participating each combination of types of health and peace interventions in DRC.

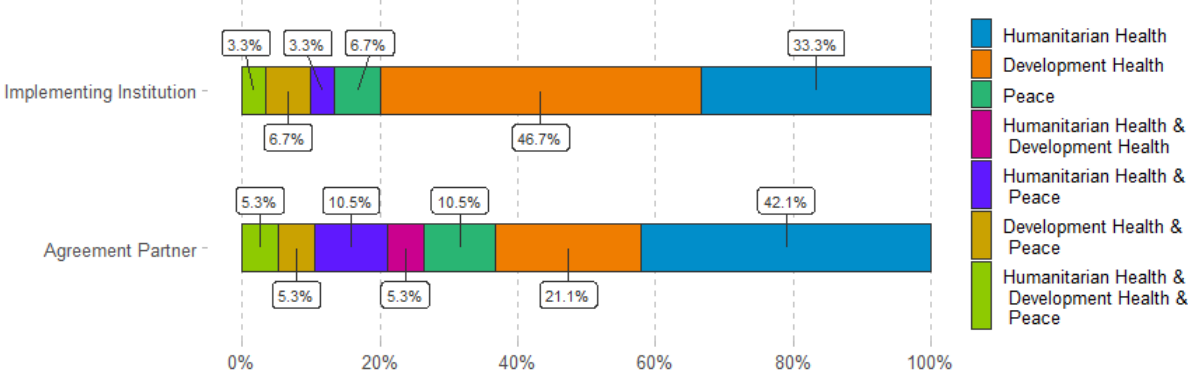


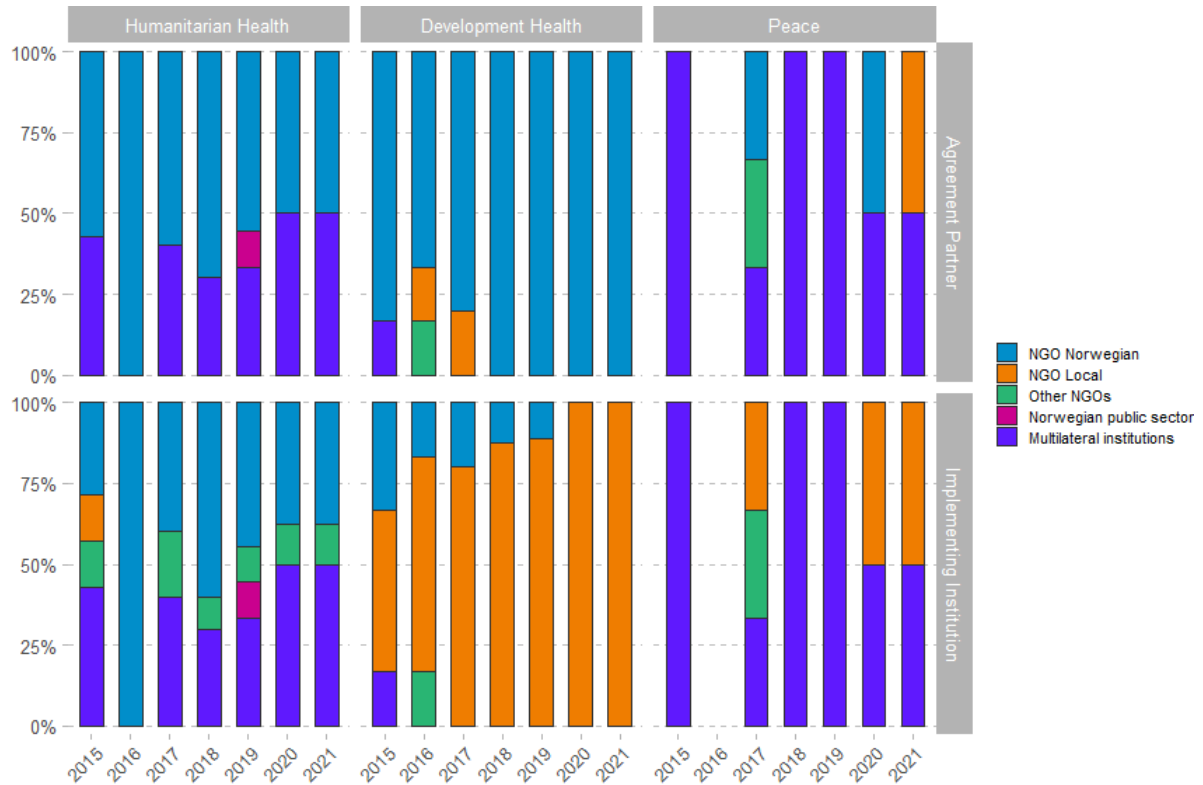
Figure 10¹³ presents the disaggregation of the information in Figure 8 by year and type of individual agreement partners and implementing institutions (a detailed table is presented in Annex 10.1.2). A number of relevant findings emerge from this nuanced analysis. For health interventions, agreement partners are overwhelmingly Norwegian NGOs in both humanitarian and development instances. In the case of humanitarian health interventions, it would appear that there are too a smaller number of multilateral institutions. This is not consistent in the analysis by implementing partner. Whereas development health interventions are almost exclusively implemented through local NGOs, humanitarian ones remain implemented majorly by Norwegian NGOs.

¹² Exclusion Policy: Due to security reasons, no further details can be provided.

¹³ Other NGOs merges the groups ‘NGO International’ and ‘NGO Other donor countries’.

The agreement partners and implementing organizations for peace interventions are mostly international institutions. Norwegian NGOs and international institutions are mainly both key players for humanitarian health interventions as both agreement partners and implementing organizations.

Figure 10. Percentage of Agreement Partner and Implement institution per type of health and peace intervention.



3.2.2. Coherence with other donors

Figure 11 presents the longitudinal coherence of health and peace interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, and the aggregation for all donors that have supported at least one health and peace intervention in DRC according to CRS dataset (Table 9). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad, and data for other countries draws from the OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

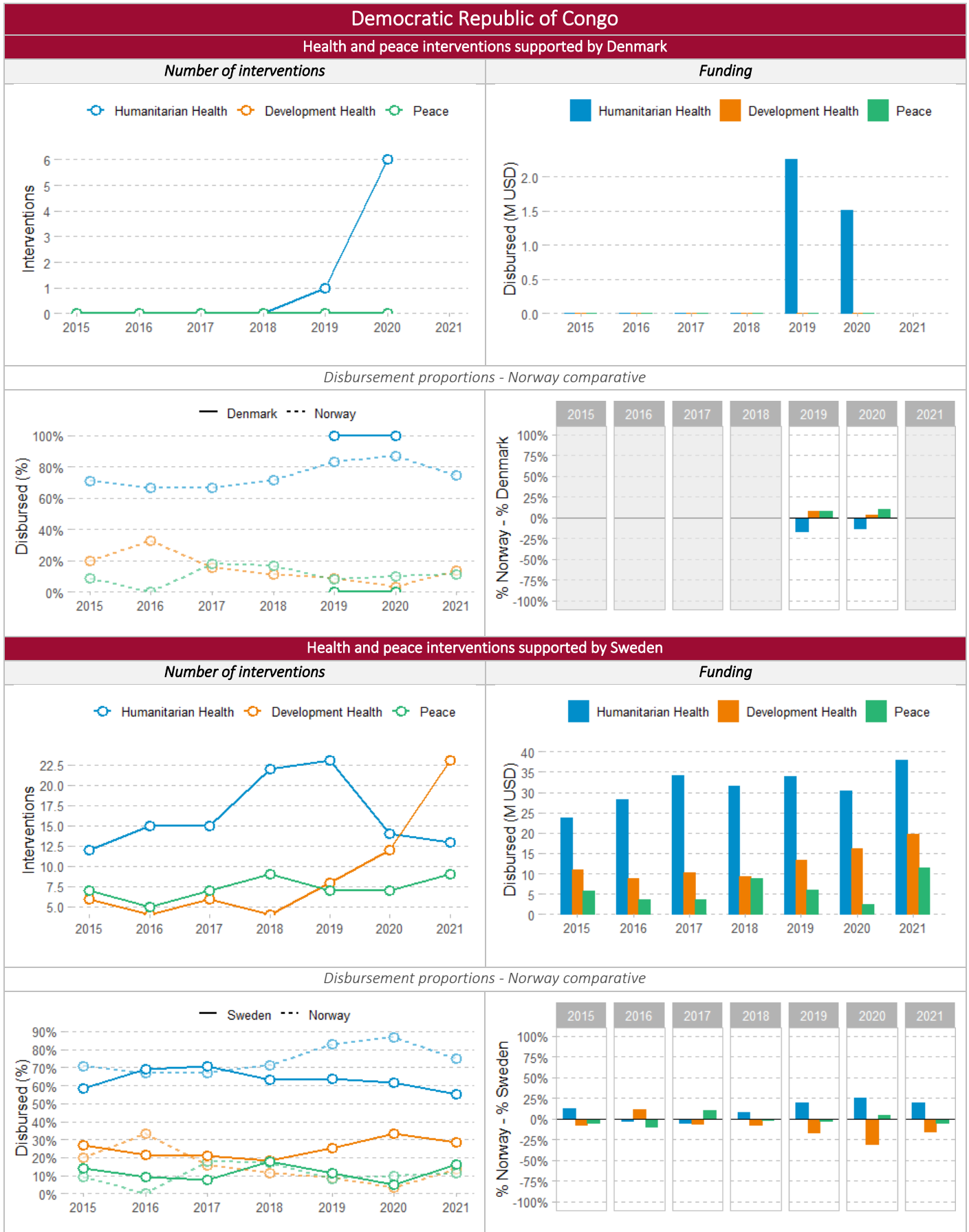
As shown in Figure 11, in comparison to the aggregated disbursement of all donors, Norway assigns a lower share of its help disbursement to development health interventions, and this difference is increasing with

time. Coherence between disbursement patterns in health and peace interventions in Norway and compared countries is high, although lower than for HDP interventions (with the exception of Finland, which is more oriented towards humanitarian health interventions). Unfortunately, information available for Denmark is very limited for health and peace interventions, and its analysis thus restricted.

Table 9. Donors of at least one health and peace intervention implemented in DRC, 2015 - 2021 (Source: CRS).

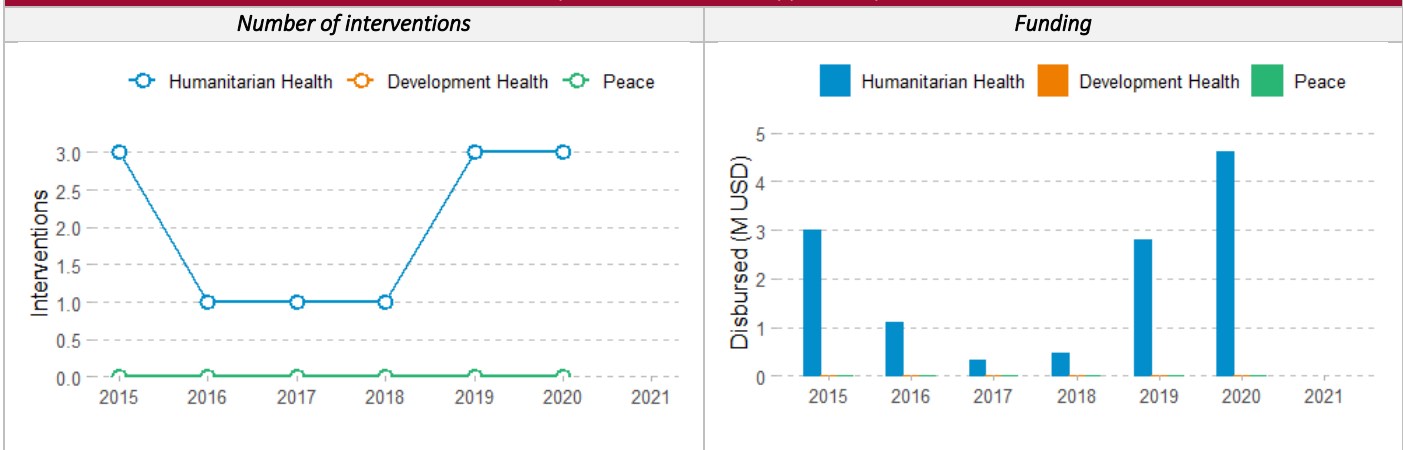
All donors			
Arab Bank for Economic Development in Africa	Fondation Botnar	Japan	Swedish Postcode Lottery
Australia	France	John D. & Catherine T. MacArthur Foundation	Switzerland
Austria	Germany	Korea	UBS Optimus Foundation
Azerbaijan	Global Alliance for Vaccines and Immunization	La Caixa Banking Foundation	UN Peacebuilding Fund
Belgium	Global Environment Facility	Luxembourg	UNAIDS
Bill & Melinda Gates Foundation	Global Fund	Netherlands	UNDP
Canada	Greece	Norway	UNFPA
Central Emergency Response Fund	H&M Foundation	Oak Foundation	UNHCR
Charity Projects Ltd (Comic Relief)	Howard G. Buffett Foundation	OPEC Fund for International Development	UNICEF
Citi Foundation	Hungary	Qatar	United Kingdom
David & Lucile Packard Foundation	Iceland	Rockefeller Foundation	United States
Denmark	International Development Association	Romania	Wellcome Trust
Dutch Postcode Lottery	International Labour Organisation	Slovenia	WFP
EU Institutions	Ireland	Spain	World Health Organisation
Finland	Italy	Sweden	

Figure 11. Longitudinal analysis of health and peace coherence with other donors in DRC.

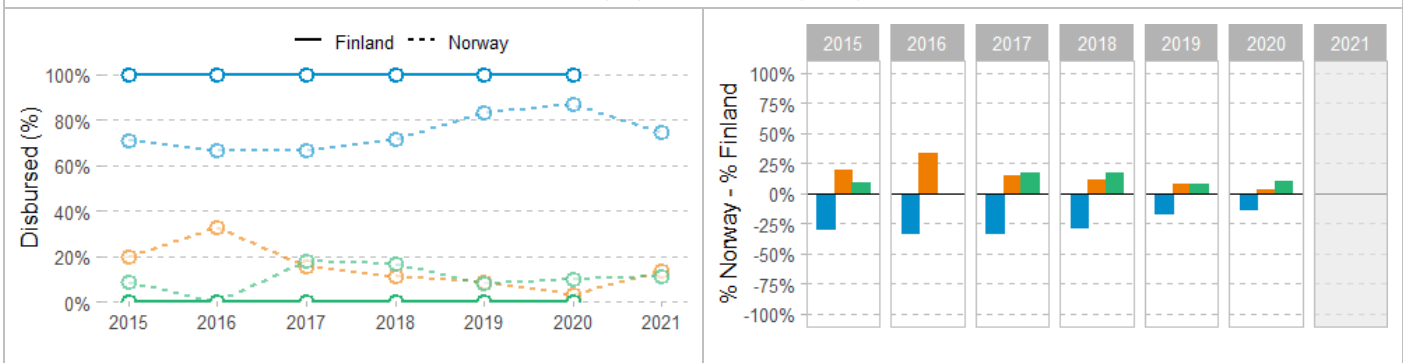


Democratic Republic of Congo

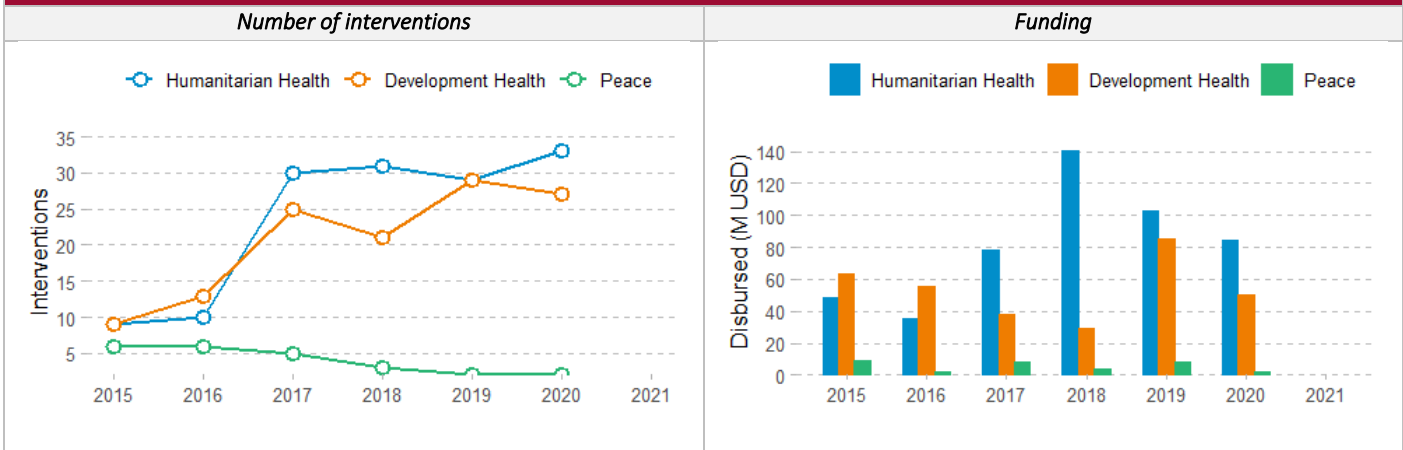
Health and peace interventions supported by Finland



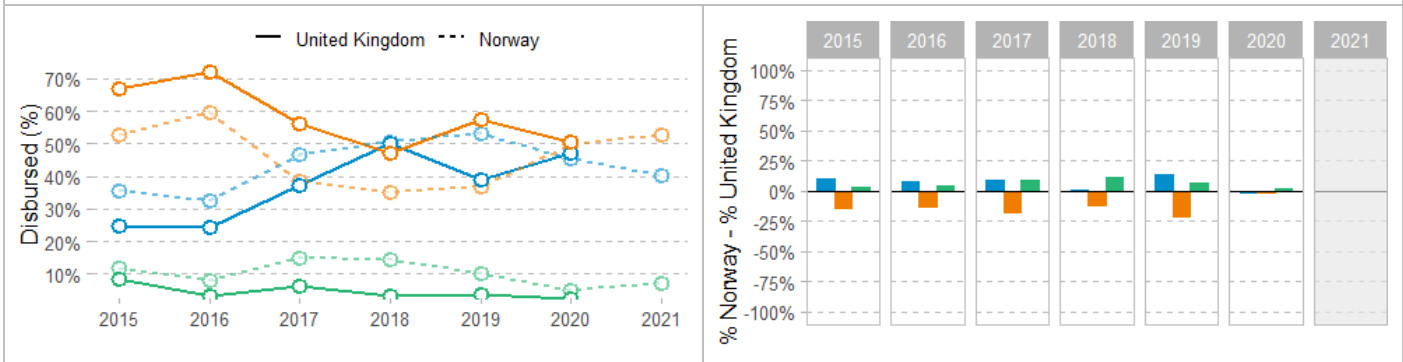
Disbursement proportions - Norway comparative



Health and peace interventions supported by United Kingdom



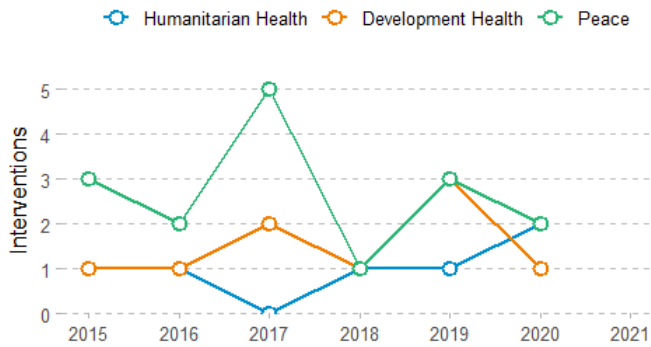
Disbursement proportions - Norway comparative



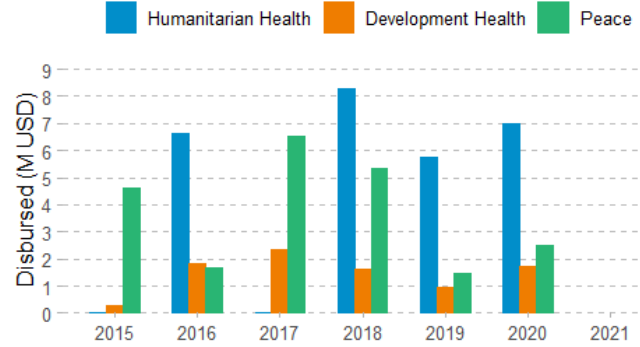
Democratic Republic of Congo

Health and peace interventions supported by Netherlands

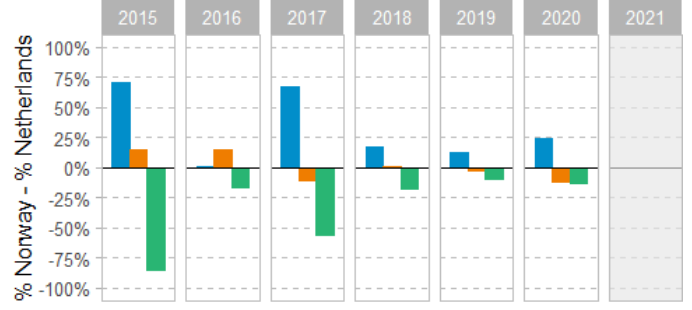
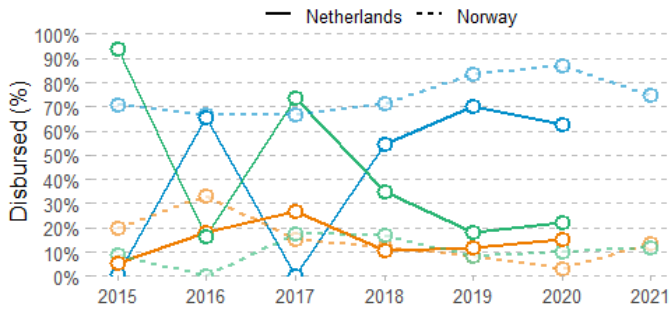
Number of interventions



Funding

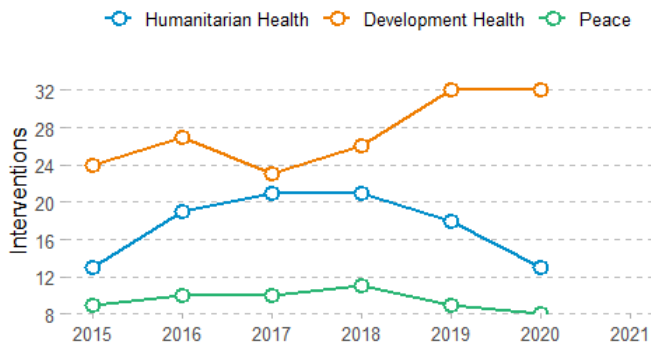


Disbursement proportions - Norway comparative

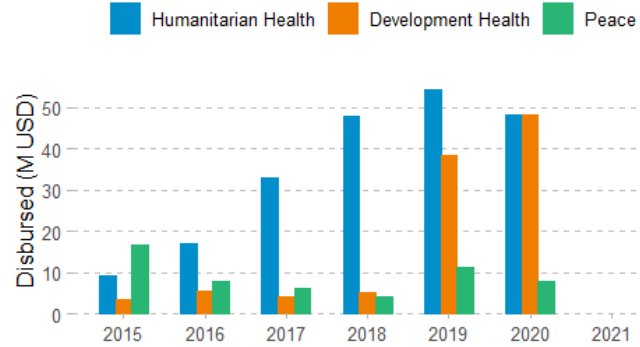


Health and peace interventions supported by Germany

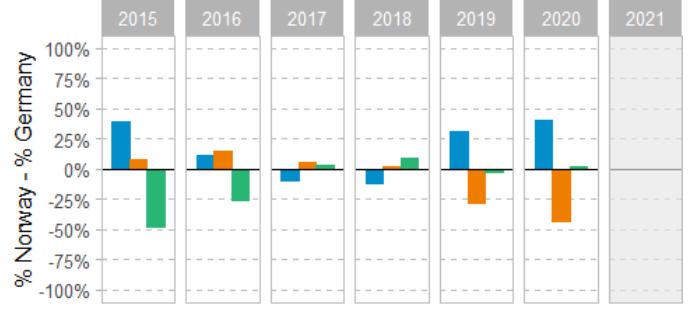
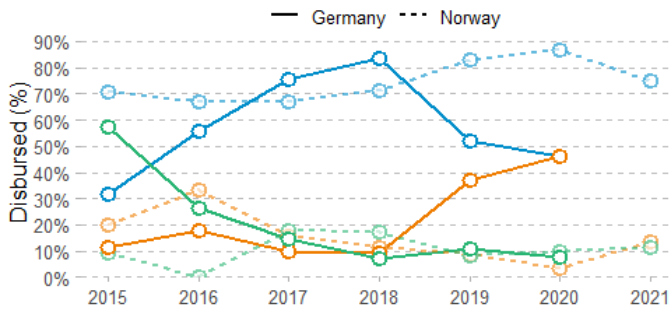
Number of interventions



Funding



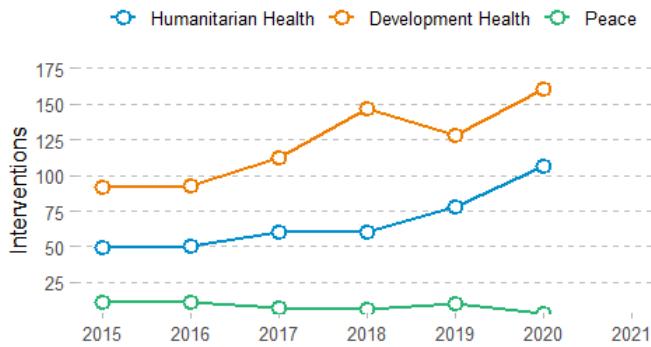
Disbursement proportions - Norway comparative



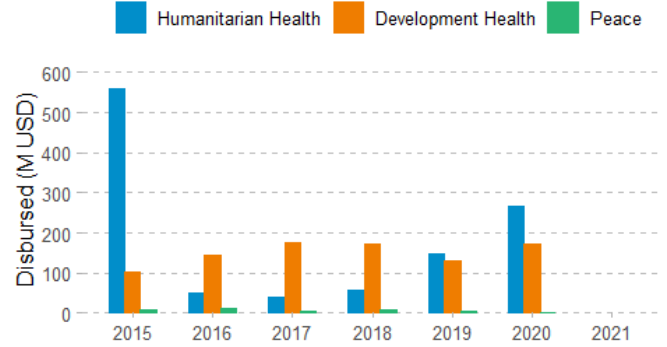
Democratic Republic of Congo

Health and peace interventions supported by United States

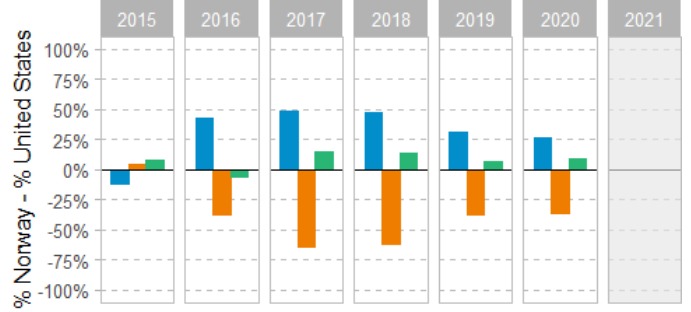
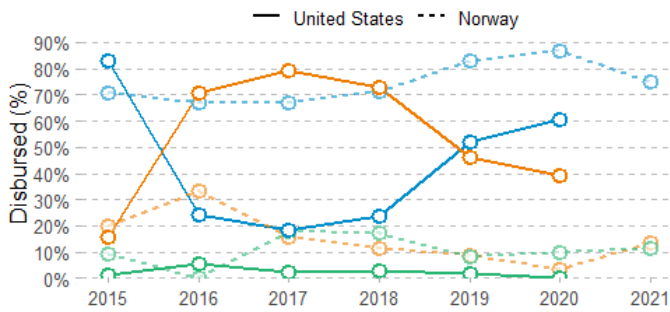
Number of interventions



Funding

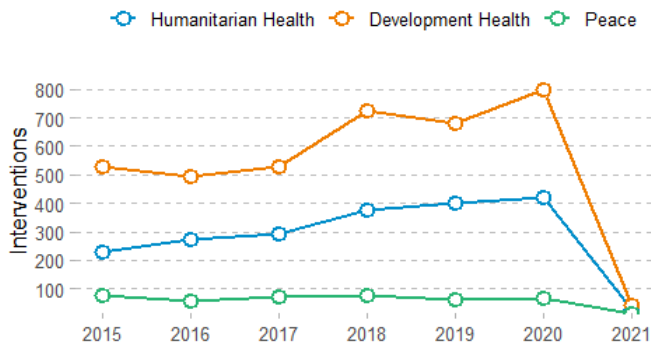


Disbursement proportions - Norway comparative

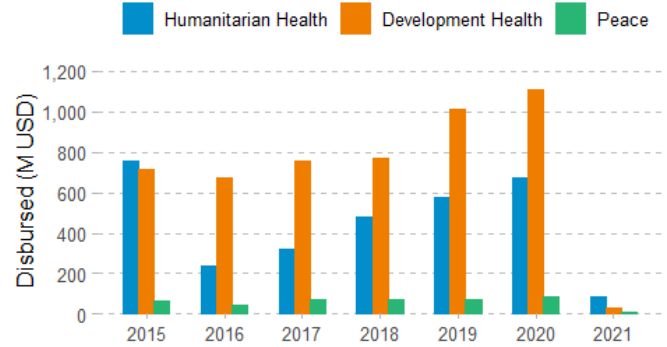


Aggregated health and peace interventions supported by all donors

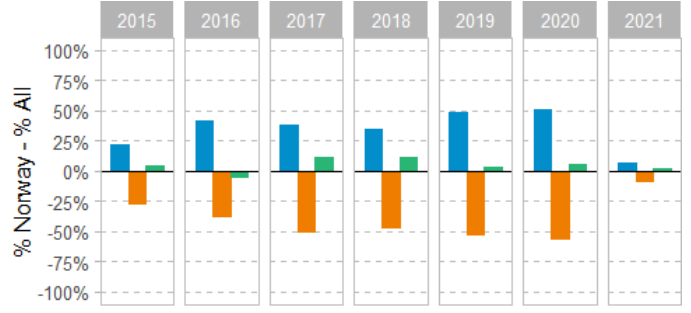
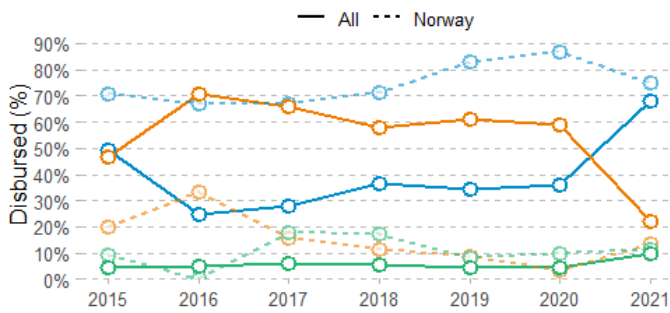
Number of interventions



Funding



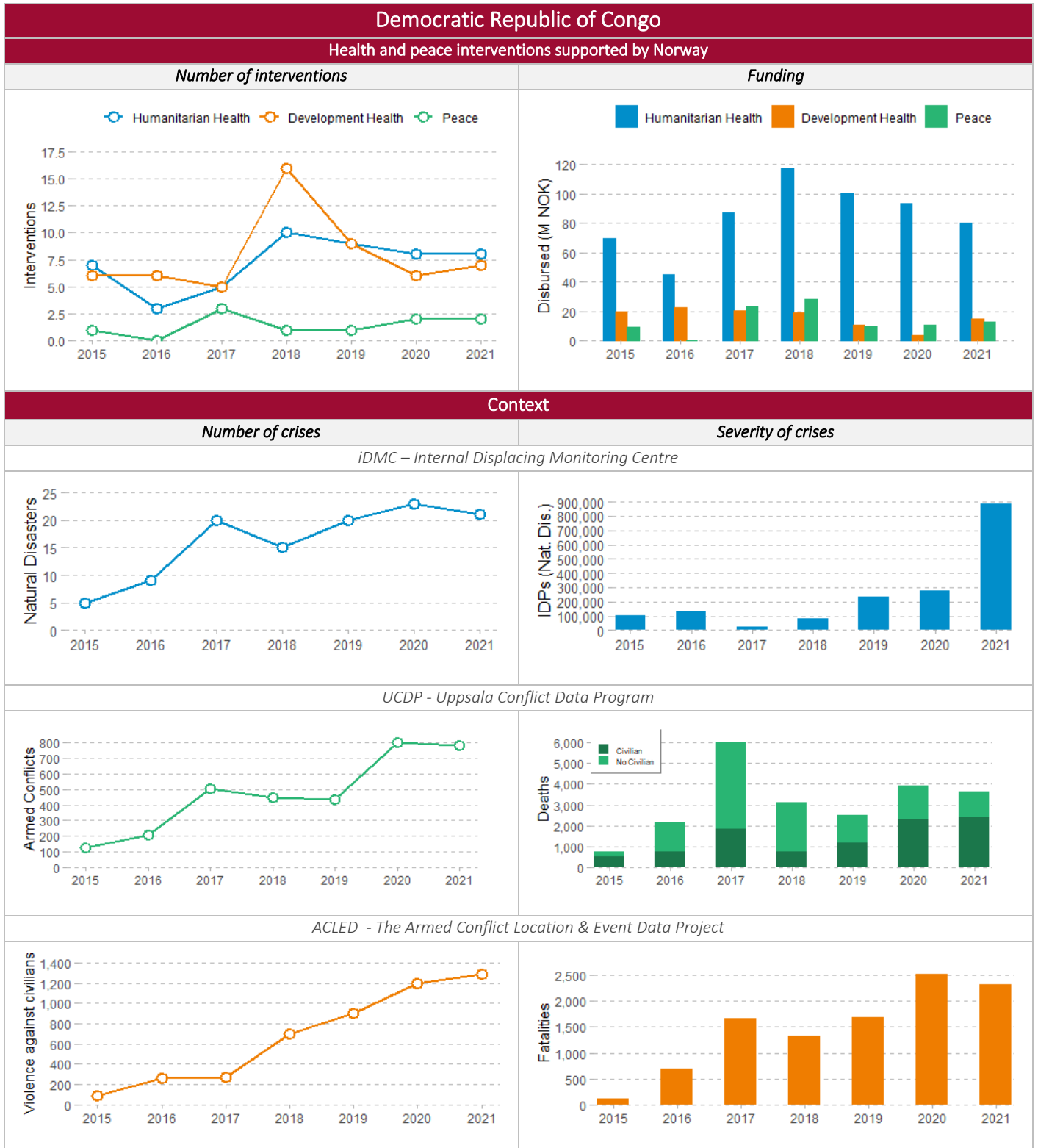
Disbursement proportions - Norway comparative



3.2.3. Contextual coherence

As discussed in section 3.1.3, the DRC has been experiencing continuous challenges since 2016. In a contextually coherent manner, Norwegian disbursement in health and peace interventions focuses on humanitarian health, peaking in 2018 (Figure 12).

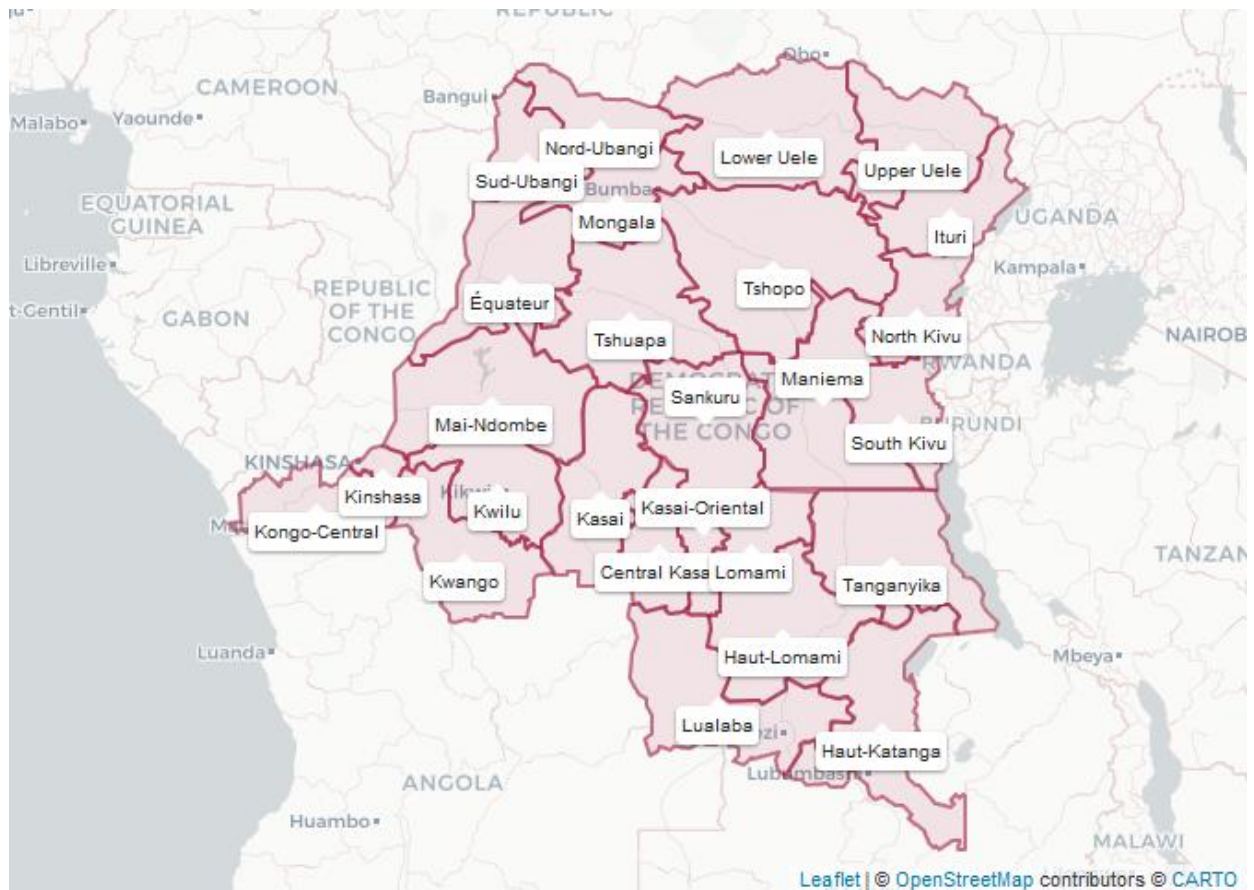
Figure 12. Longitudinal analysis of health and peace contextual coherence in DRC.



3.3. Spatial coherence of health and peace interventions at sub-national level

This subsection presents the results of the spatial coherence analysis interventions supported by Norway in the DRC according to their geographical presence, on the basis of geolocated data. It considers administrative areas at level 1 (ADM1), as per the Department of Evaluation’s database, the unit of analysis. These boundaries are described in Figure 13. Out of the 115 interventions included in the dataset provided by the Department of Evaluation, 63 are geolocated to an administrative area level 1. These are considered for the spatial analysis.

Figure 13. Administrative areas at level 1 in DRC (ADM1 - Source: geoBoundaries).



3.3.1. Spatial coherence among types of interventions

This analysis evidence that simultaneous humanitarian health and development health interventions supported by Norway in the considered period are concentrated in North Kivu and South Kivu. In 2017, peace interventions were also implemented in these areas during 2017. The geolocated analysis also documents that also both types of health interventions are implemented in Kinshasa since 2018. In an intermittent manner, in 2017 and 2021, these interventions have also appeared in combination in the region of Tshopo, in Equateur (2018) and Ituri (2019). In all the other areas health interventions are either humanitarian or developmental exclusively (Figure 14 and Figure 15).

Figure 14. Distribution of the number of health and peace interventions by type of intervention, year and administrative area at level 1 (From 0=0% to 1=100%; ratios add up 1 for the three types of intervention in each area and year).

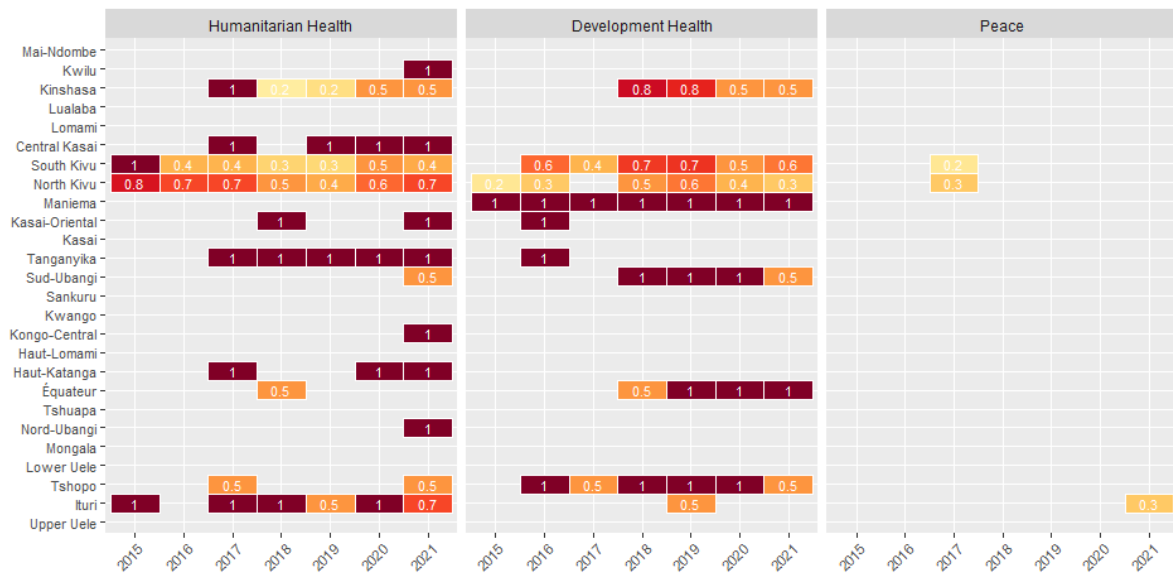
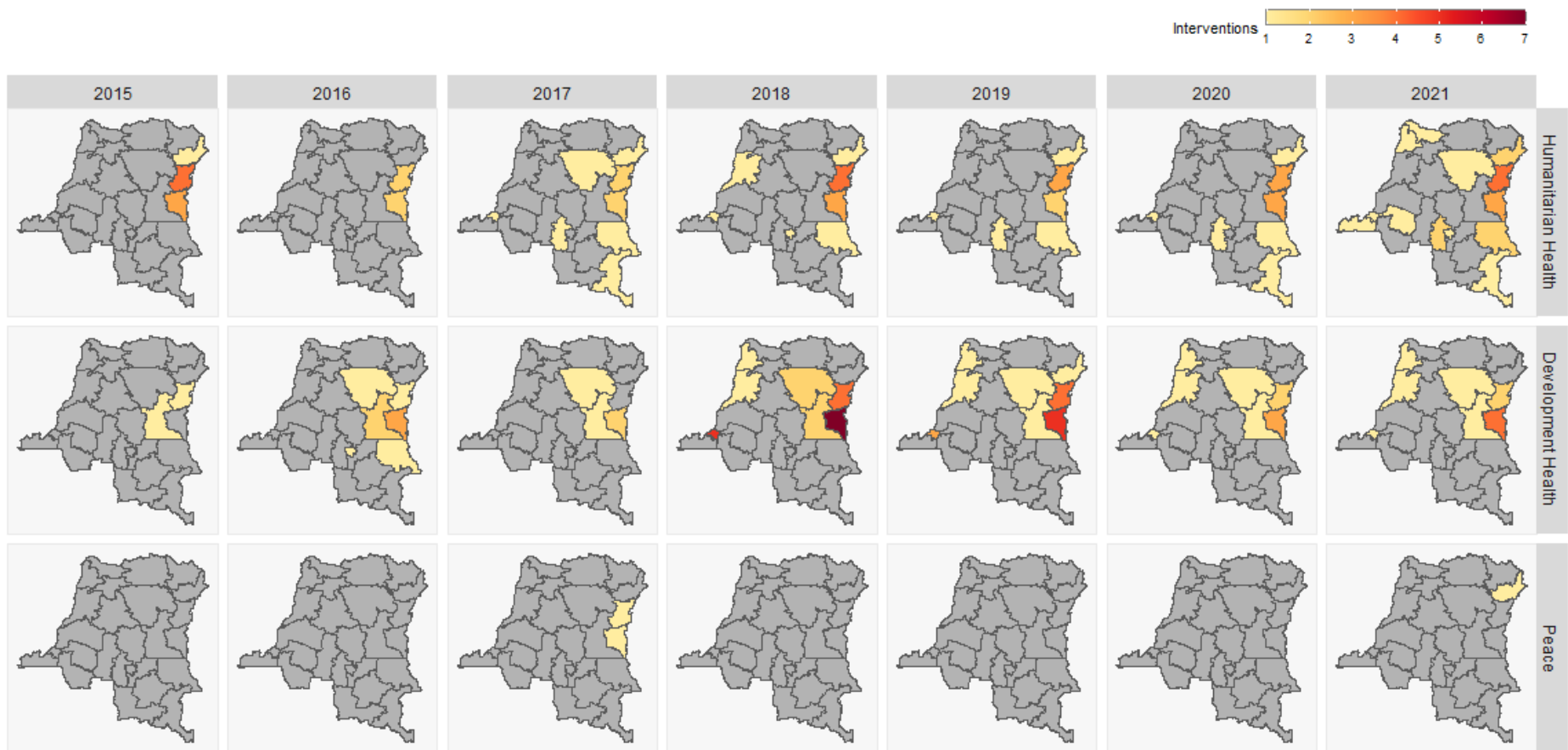


Figure 15. Number of health and peace interventions by type of intervention and year at administrative level 1 in DRC



3.3.2. Coherence with other donors and multilateral institutions

This section analyses the spatial coherence between the number of health and peace interventions funded by Norway and those funded by other donors and multilateral institutions. These are depicted in Figure 16 where Norway's is represented by the colour of each administrative area at level one, and other donors are represented by the number in each administrative area at level one.

For the purposes of this analysis, the comparator donors considered include both other countries foreign aid and also multilateral donors. Precisely, Norway's disbursement is presented in comparison to that of Germany, the Netherlands, the UK and the US, and also AfDB, the EU, Gavi, the World Bank, IOM, UNICEF, UNOCHA, WHO, UNDP, and UNHCR.

The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad and the data for other countries and multilateral institutions from IATI (see subsection 2.2).

Table 10. Donors included on each donor's group for DRC (Source IATI).

IATI Code	Name	Group
44000	World Bank	World Bank
47122	Gavi, The Vaccine Alliance	Gavi
DE-1	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung (BMZ)	Germany
DE-1	Federal Ministry for Economic Cooperation and Development (BMZ)	Germany
GB-GOV-1	Foreign, Commonwealth and Development Office	UK
US-USAGOV	The federal government of the United States	US
XI-IATI-EC_ECHO	Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)	EU
XI-IATI-EC_FPI	European Commission - Service for Foreign Policy Instruments	EU
XI-IATI-EC_INTPA	European Commission - International Partnerships	EU
XM-DAC-41114	United Nations Development Programme	UNDP
XM-DAC-41121	United Nations High Commissioner for Refugees (UNHCR)	UNHCR
XM-DAC-41122	UNICEF	UNICEF
XM-DAC-41127	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-DAC-46002	African Development Bank	AfDB
XM-DAC-47066	International Organization for Migration (IOM)	IOM
XM-DAC-5-7	Germany - Federal Foreign Office	Germany
XM-DAC-7	Ministry of Foreign Affairs of the Netherlands	Netherlands
XM-DAC-928	World Health Organization	WHO
XM-OCHA-CBPF	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-OCHA-CERF	UNOCHA - Central Emergency Response Fund (CERF)	UNOCHA

The analysis presents two clear results. First, spatial coherence is high in North Kivu and South Kivu, where Norway and all other countries implement a large number of health and peace interventions. Secondly, other donors appear to be significantly involved in Kinshasa¹⁴ and Kasai, where Norway's presence for health and peace interventions is very limited (Kinshasa) or inexistent (Kasai).

The disaggregation of this information by year and type of intervention confirms that this is the case for both humanitarian health and development health, for all the years analysed (Figure 17).

¹⁴ A large number of other donors' interventions are located in DRC's capital city (Kinshasa). This could be caused either due to some donors not specifying the exact locations when they register their data in IATI or because these donors centralized the interventions within the capital and distribute them to other locations registering the intervention in the capital.

Figure 16. Spatial coherence between the combined number of health and peace interventions funded by Norway (represented by colour of each administrative area) and the combined number of health and peace interventions funded by other donors (represented by the number in each area) in DRC from 2015 to 2021.

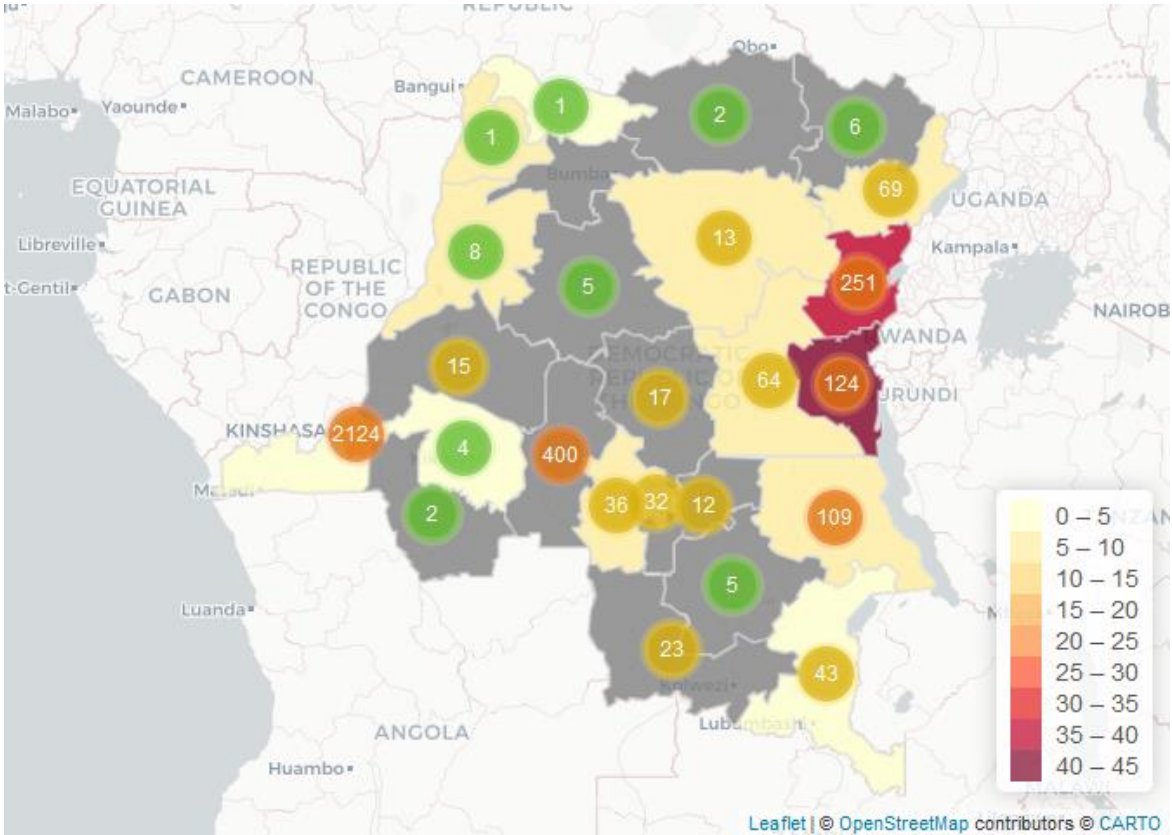


Figure 17. Spatial coherence between the number of health and peace interventions funded by Norway (colour of each administrative area) and other donors (bubble in each area) by year and type of intervention.

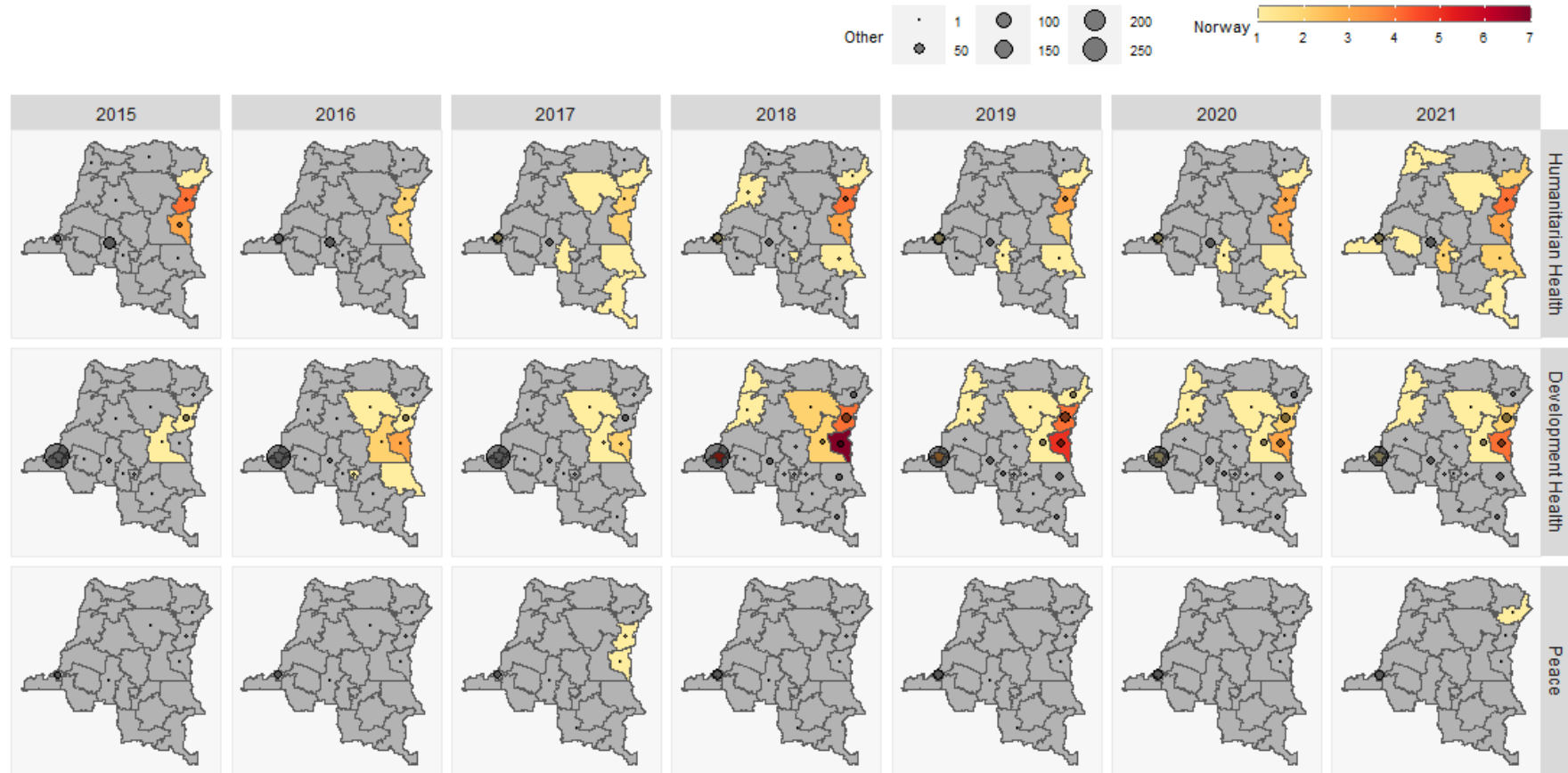


Figure 18. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor country.

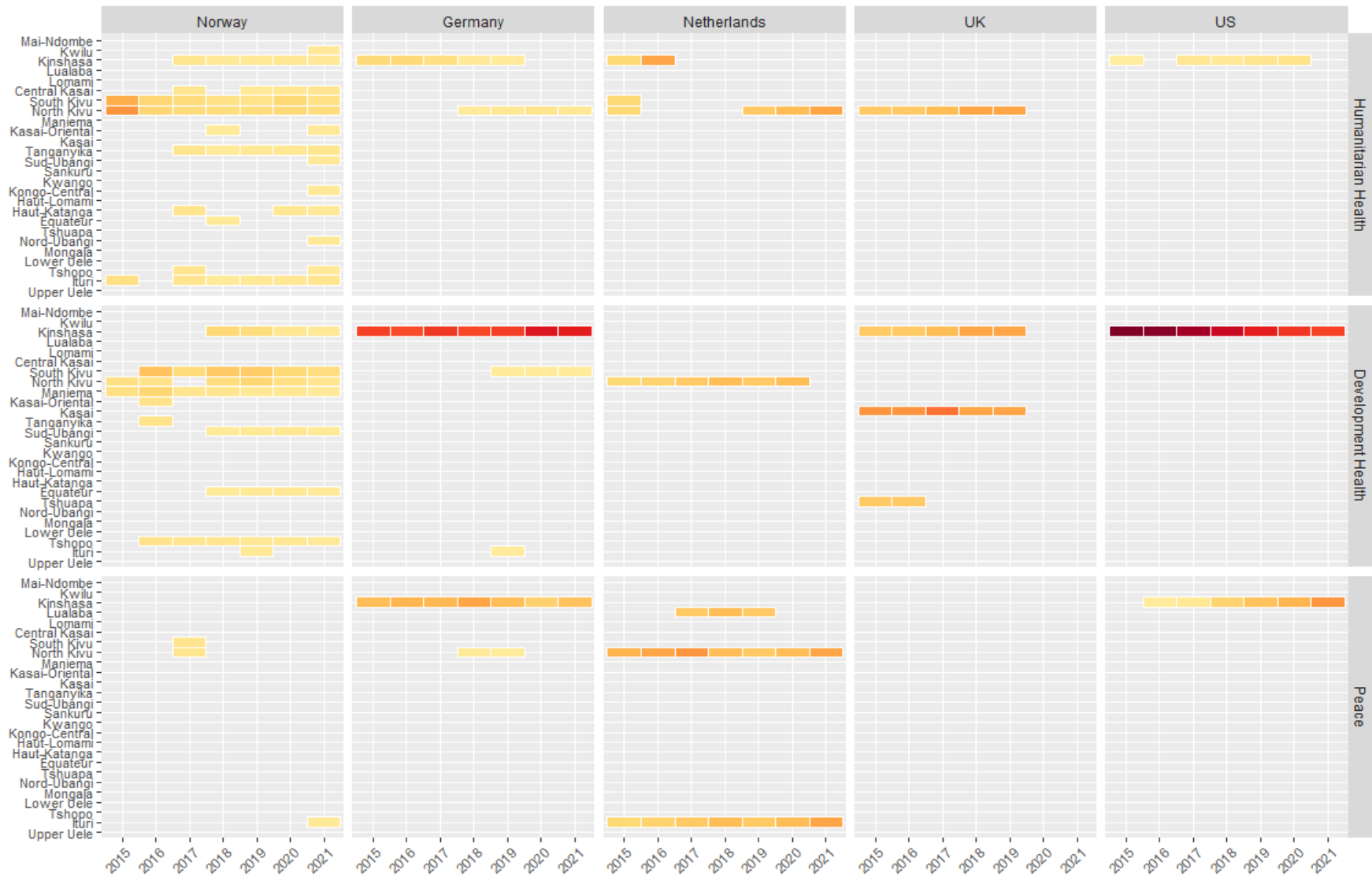


Figure 19. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor international institution.

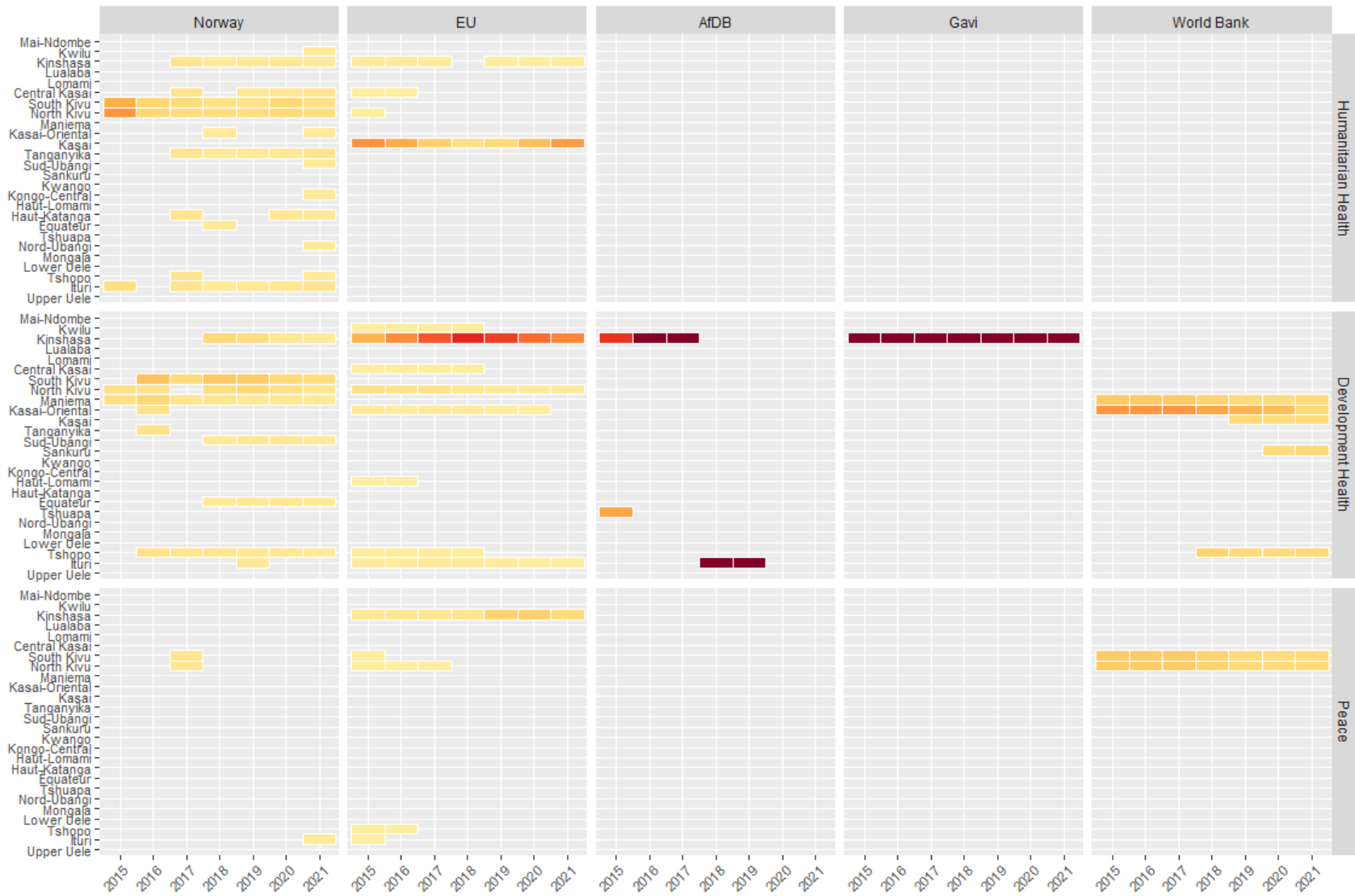
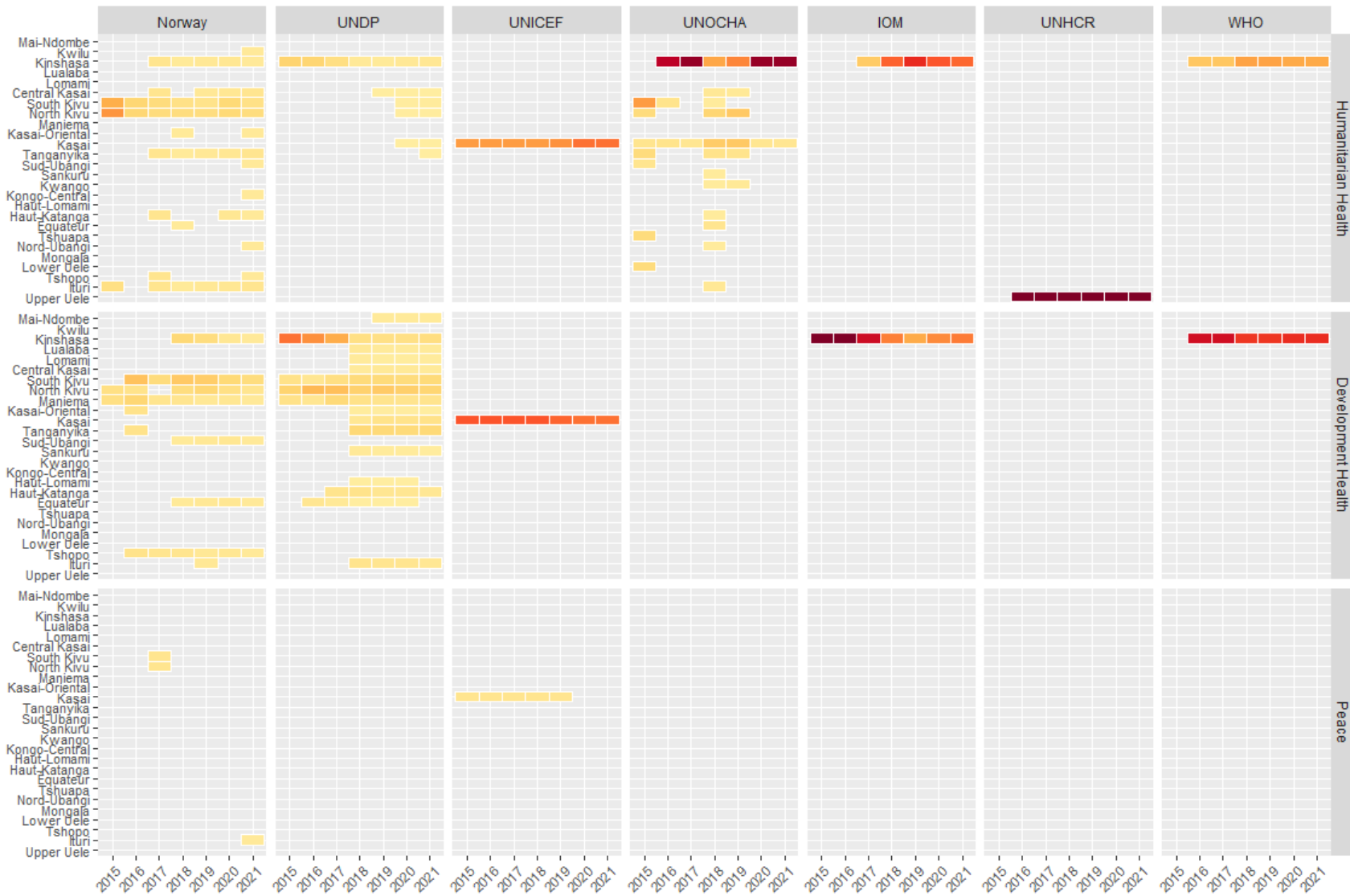


Figure 20. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor UN agency.



The spatial coherence with other donors at individual donor level is presented in Figure 18, Figure 19 and Figure 20. A clear conclusion from these figures is that Norwegian aid, in comparison to other donors, is the most extensive geographically, spreading among more administrative areas in the DRC than the help funded by each of the other individual donors. Only the EU and UNDP (for development health) and UNOCHA (for humanitarian health) exhibit similar levels of coverage of different administrative areas, although not equally sustained across the years of analysis. Last, this nuanced analyses also reveal that the concurrent presence in Kinshasa of Norway and other donors applies to both humanitarian and development health interventions. Concurrence with other donors in the areas of North and South Kivu is also evident, although this is less sustained across time and across donors.

3.3.3. Contextual coherence

This section considers contextual coherence between type of crises (natural disasters, armed conflicts and violence against civilians) and the number of health and peace interventions funded by Norway. As in the preceding section, for each administrative area the colour indicates the magnitude of Norway interventions, and the number refers to the number of ongoing crises over the period of analysis (2015-2021).

At this stage, the analysis considers all three types of interventions in combination, and their response to each crisis type, It evidencing coherence between these and crises, particularly armed conflicts and violence against civilians (Figure 21, Figure 22 and Figure 23). Most specifically, these are all concentrated in areas of North Kivu and South Kivu.

A second telling finding emerging from this analysis is that the areas of Kasai and Central Kasai are also experiencing armed conflicts and, to a lesser level, problems of violence against civilians, but Norwegian assistance is not present in those locations. Finally, for natural disasters crisis, there is too coherence as the highest number of interventions are also in the same area as the highest number of crises but the magnitude of these is significantly smaller than that of the health domains.

Figure 21. Spatial contextual coherence with natural disasters (number of interventions and number of crisis 2015-2021).

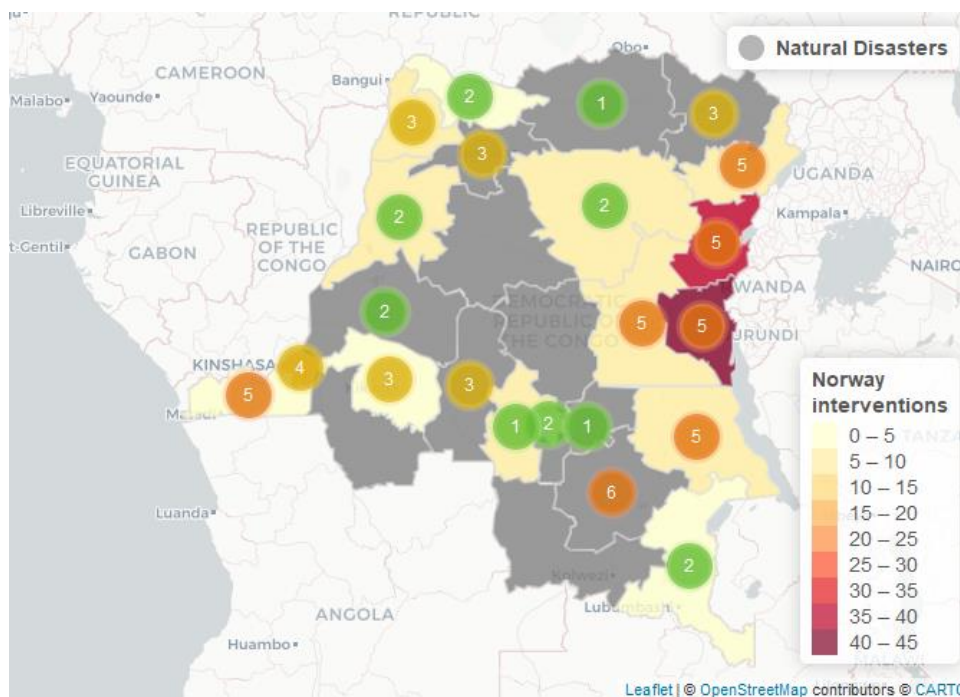


Figure 22. Spatial contextual coherence with armed conflicts (number of interventions and number of crisis 2015-2021).

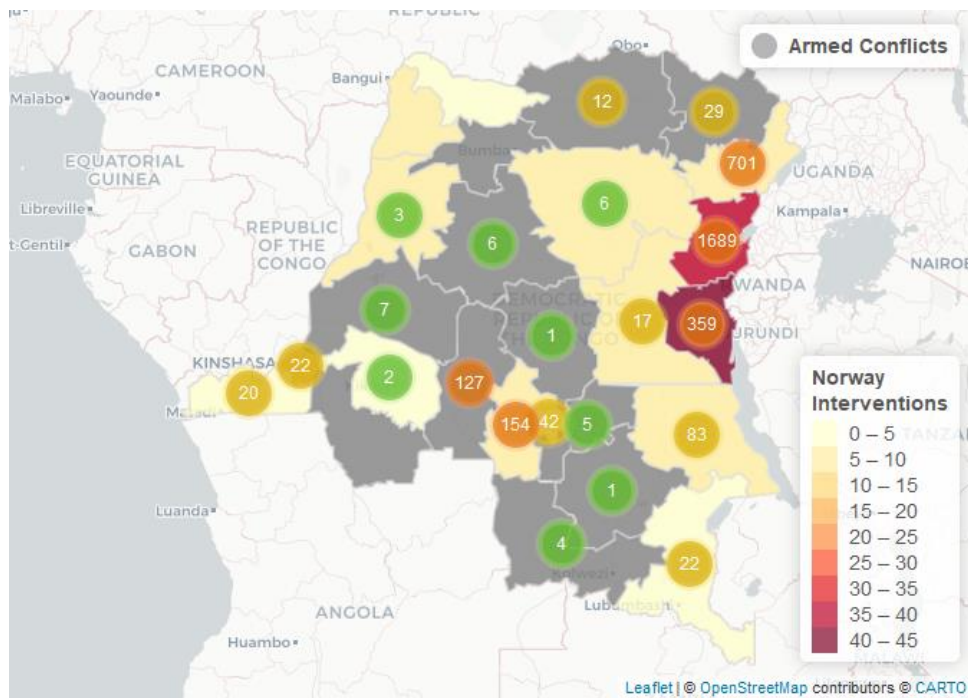
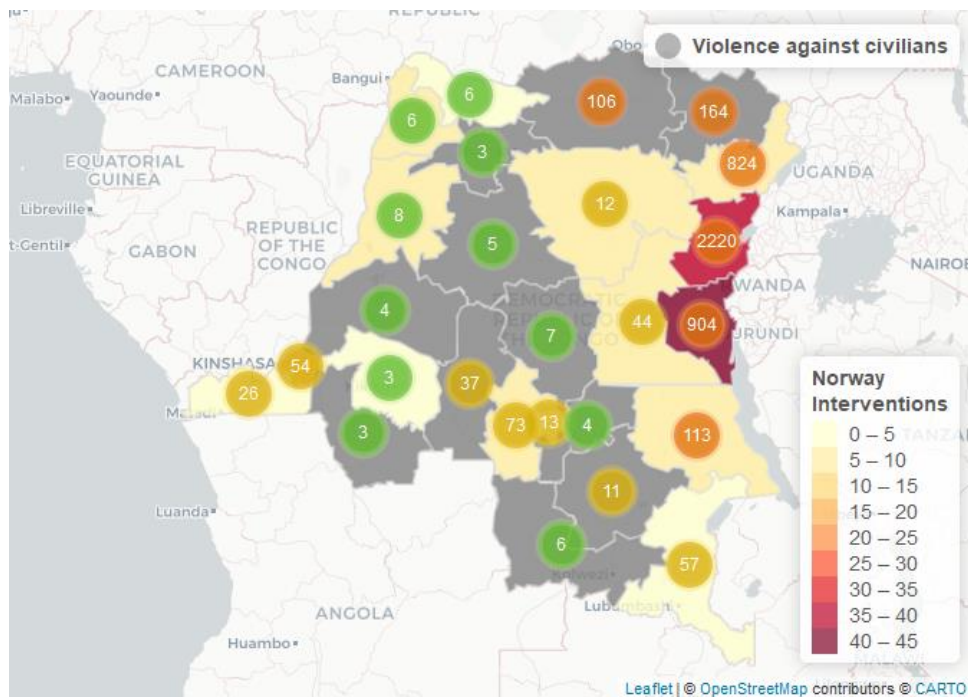


Figure 23. Spatial contextual coherence with violence against civilians (number of interventions and number of crisis 2015-2021).



Finally, the analysis delves into the details of this contextual coherence by year and type of intervention (Figure 24, Figure 25 and Figure 26 for natural disasters, armed conflicts and violence against civilians respectively). The first row in each figure presents the location of the corresponding type of crisis, meanwhile the number of interventions of each type is represented by the colour of the administrative area.

Consistent with the results from earlier sections, the east part of the country is suffering a high concentration of these two types of conflicts and has received most of the Norwegian health and peace interventions since 2016. Thus, spatial coherence is most significant for interventions and crisis of armed conflicts and violence against civilians in areas of East DRC (around but also beyond Kivu), which have been increasing since 2015. Conversely, data also reveals a number of armed conflicts and violence against civilians in the south in 2016 and 2017, but an absence of Norway supported interventions during these years.

Contextual coherence with natural disasters is vague. Given the variability of these types of crises, their geographical location is quite widespread and varied when the whole period of analysis is considered in combination. Therefore, the spatial coherence that could not be established in earlier the aggregated analysis, can be slightly observed in Figure 24 at an annual level. Particularly in the case of humanitarian health and development health interventions, where the geographical spread across the analysis time of interventions appears to respond to the presence and location of these crises.

Figure 24. Spatial contextual coherence with natural disasters by year and type of intervention (number of interventions and number of crisis 2015-2021)

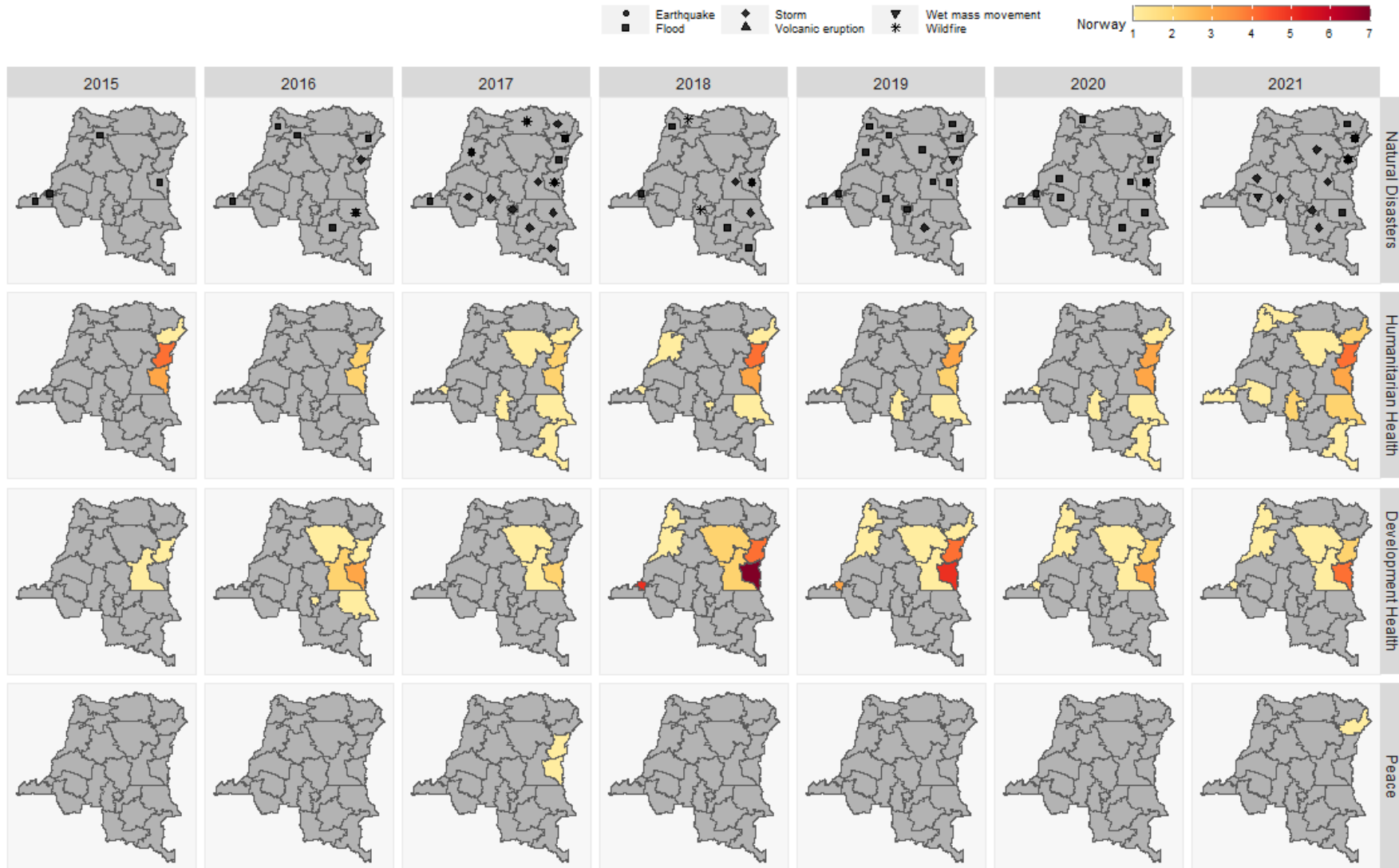


Figure 25. Spatial contextual coherence with armed conflicts by year and type of intervention (number of interventions and number of crisis 2015-2021)

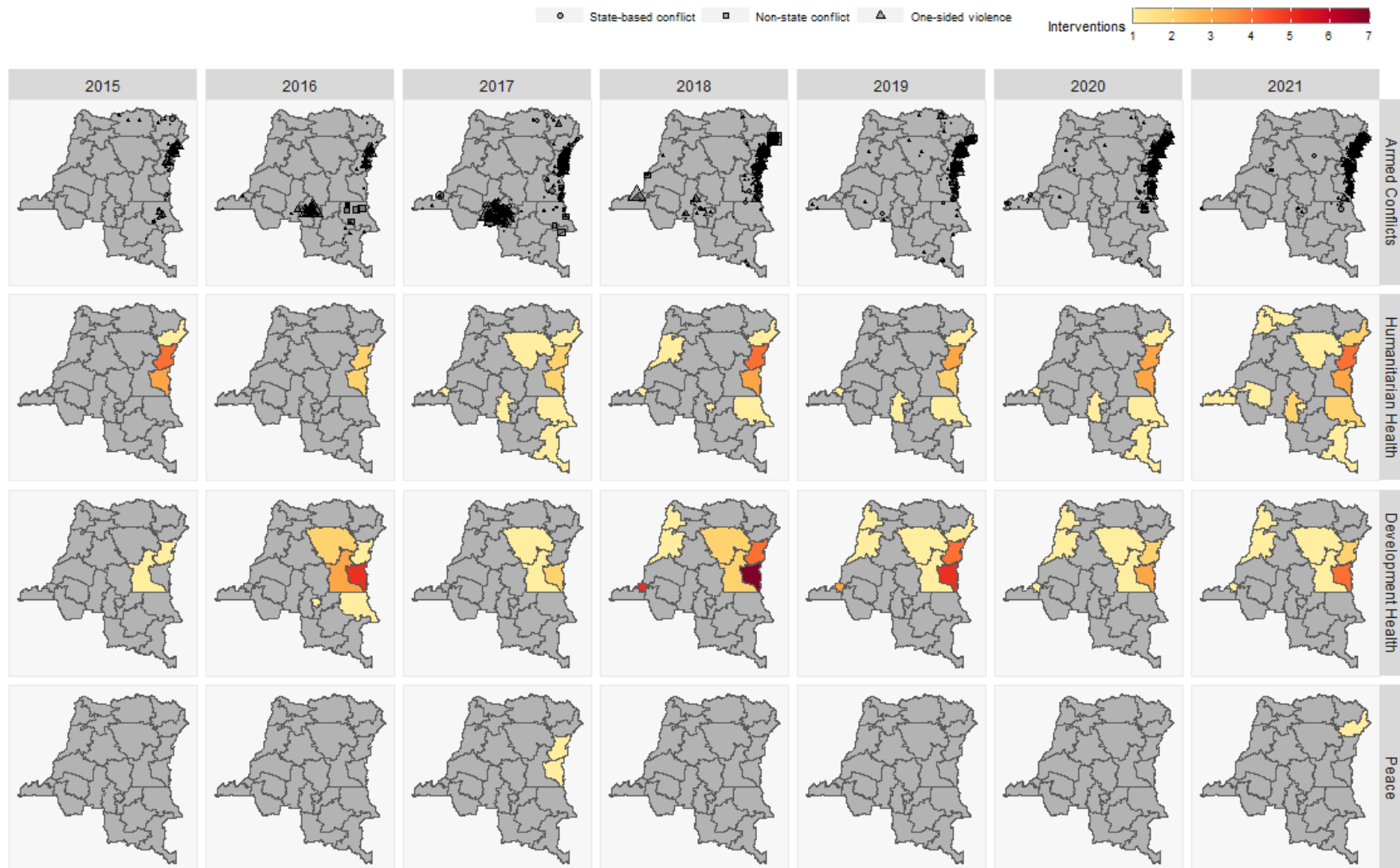
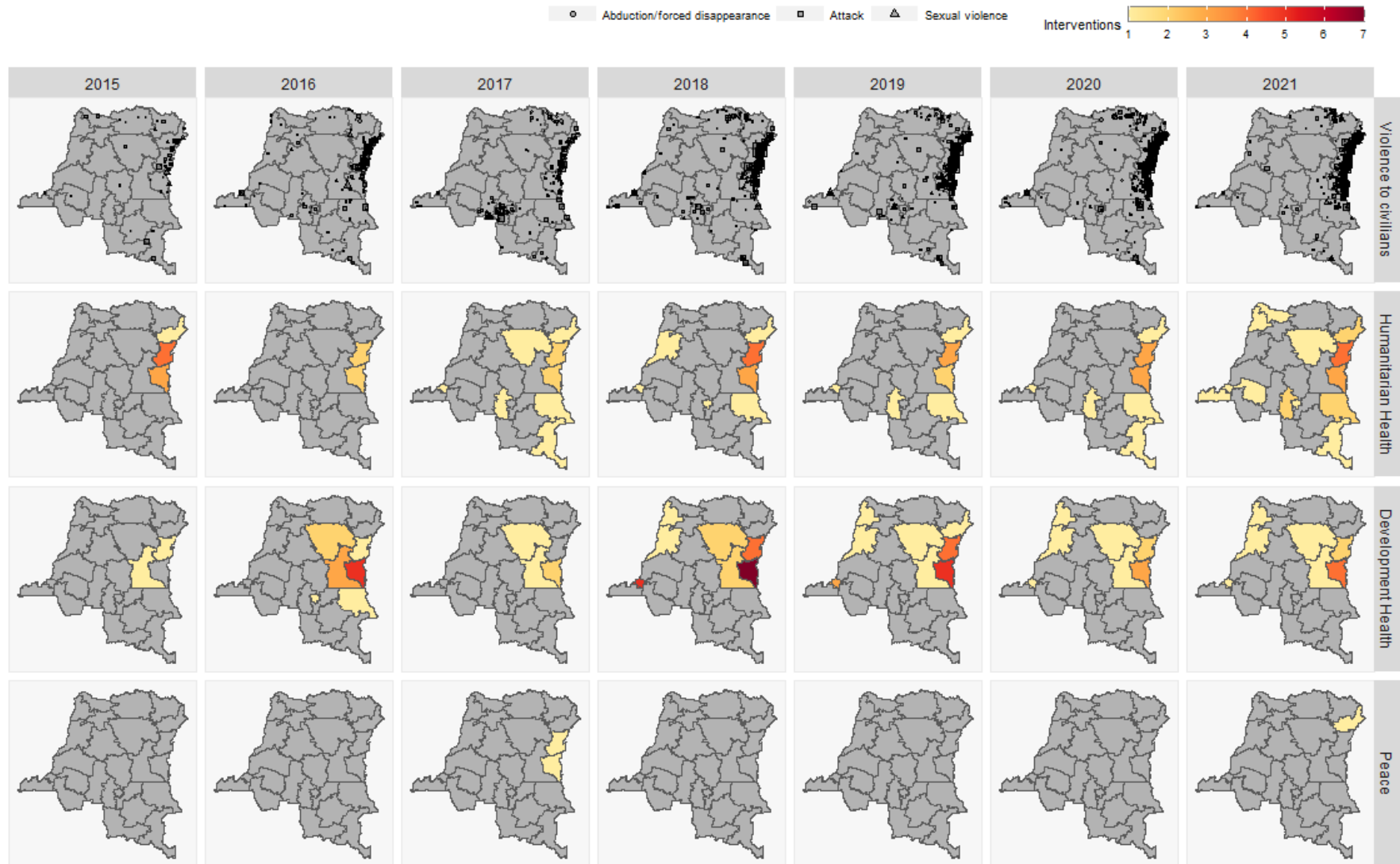


Figure 26. Spatial contextual coherence with violence against civilians by year and type of intervention (number of interventions and number of crisis 2015-2021)



4. Coherence analysis for Ethiopia

4.1. Longitudinal coherence of HDP interventions at country level

The analysis of the coherence of the intervention supported by Norway in Ethiopia has considered 1,009 interventions implemented between 2015 and 2021, with a total disbursement of NOK 4,067.26 million.

4.1.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. The data reveals a clear predominance of *development interventions*, over humanitarian and peace ones. Development interventions are the most prevalent in Ethiopia both in terms of number of interventions and disbursement (Table 11 and Figure 27), and this stark difference is sustained across the period of analysis. In fact, during these years, only four peace interventions and 28 humanitarian interventions have been implemented, in comparison to close to one thousand development ones. The difference in magnitude is even larger when total disbursement is considered. Interestingly, it is however humanitarian interventions that have the largest average disbursement, at NOK 15.4 million (Table 12).

Figure 27. Number of interventions and total disbursement by type of HDP intervention in Ethiopia.

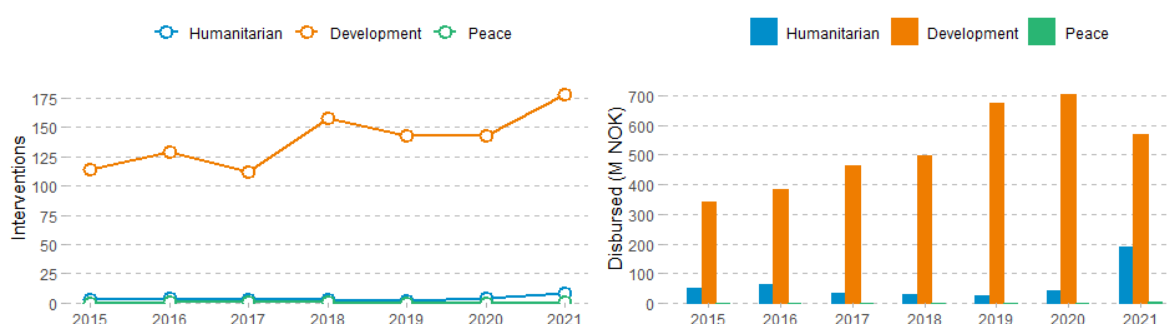


Table 11. HDP interventions supported by Norway in Ethiopia.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian	Development	Peace	Total	Humanitarian	Development	Peace	Total
2015	3	114	0	117	50.14	342.60	0.00	392.74
2016	4	129	1	134	62.00	381.92	0.32	444.24
2017	3	112	1	116	33.00	464.54	0.30	497.85
2018	3	158	1	162	27.50	496.49	0.32	524.31
2019	2	143	0	145	24.00	674.15	0.00	698.15
2020	4	143	0	147	43.40	705.14	0.00	748.54
2021	9	178	1	188	190.31	568.42	2.70	761.43
Total	28	977	4	1,009	430.35	3,633.26	3.65	4,067.26

Table 12. Average disbursement (million NOK) per intervention, by type of HDP intervention and year in Ethiopia.

Year	Average disbursement (million NOK)		
	Humanitarian	Development	Peace
2015	16.71	3.01	0.00
2016	15.50	2.96	0.32
2017	11.00	4.15	0.30
2018	9.17	3.14	0.32
2019	12.00	4.71	0.00
2020	10.85	4.93	0.00
2021	21.15	3.19	2.70
Total	15.37	3.72	0.91

The interventions financed by Norway in these 7 years were channelled via 102 agreements partners and 156 implementing institutions, which are listed in the Annexes (subsections 8.2 and 9.2, respectively). 34.5% of the interventions are implemented by the agreement partner (90.0% for humanitarian interventions, 32.1% for development and 50.0% for peace interventions). Again, with a clear predominance of development operations. Most of the agreement partners and implementing institution have participated only in one type of interventions and more than 90% only in development interventions (Figure 28).

Figure 28. Percentage of agreement partners and implementing institutions participating each combination of HDP types of interventions in Ethiopia.

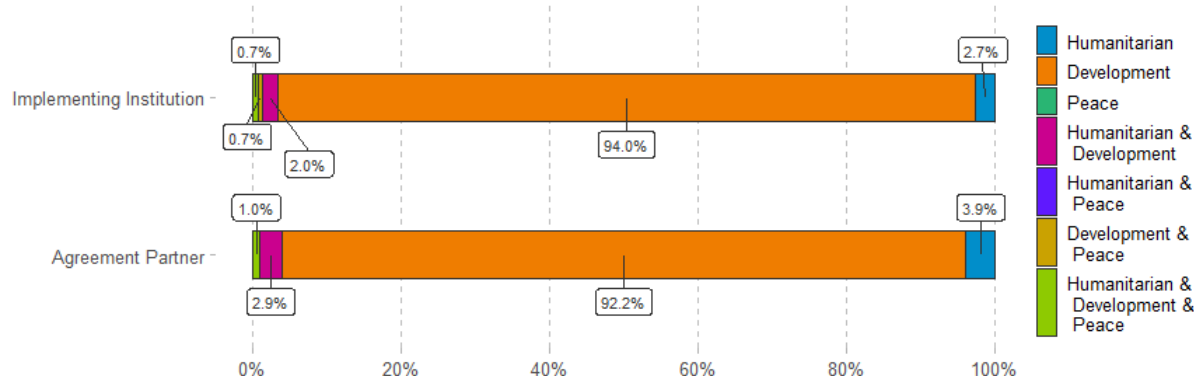
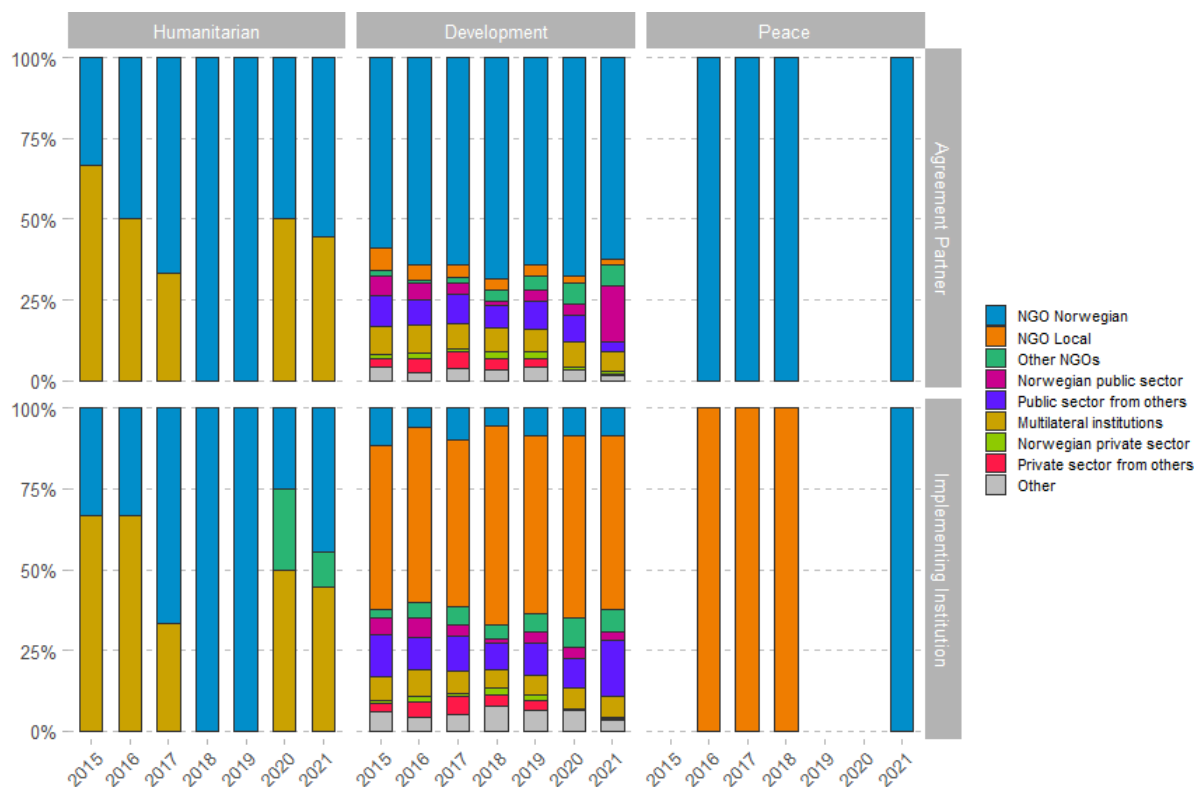


Figure 29¹⁵ presents the disaggregation of the information in Figure 28 by year and type of individual agreement partners and implementing institutions. A number of relevant findings emerge from this nuanced analysis. First, these figures evidence that, for all interventions, agreement partners are predominately Norwegian NGOs. But differences emerge according to the intervention type. In the case of humanitarian interventions, a minority of agreement partners were signed too with multilateral institutions, but this was not constant across the years studied. All agreement partners were exclusively Norwegian NGOs in the case of peace interventions. Last, all types of agreement partners were engaged in development interventions.

¹⁵ Other NGOs joins the groups: NGO International, NGO Other donor countries; Public sector from others joins the groups: Public sector in developing countries, Public sector other donor countries; Private sector from others joins the groups: Private sector in developing countries, Private sector in other donor countries; Others joins the groups: Governments/Ministries in developing countries, Public-private partnerships.

The picture is more varied in the case of implementing partners. Development and peace interventions were implemented primarily through local NGOs, whereas humanitarian saw a somehow even combination of Norwegian NGOs and multilateral with the only exception of two years (2018 and 2019) which were exclusive to Norwegian NGOs.

Figure 29. Percentage of Agreement Partners per type of HDP intervention (Percentages add up 100% for each type of institution and each year)



4.1.2. Coherence with other donors

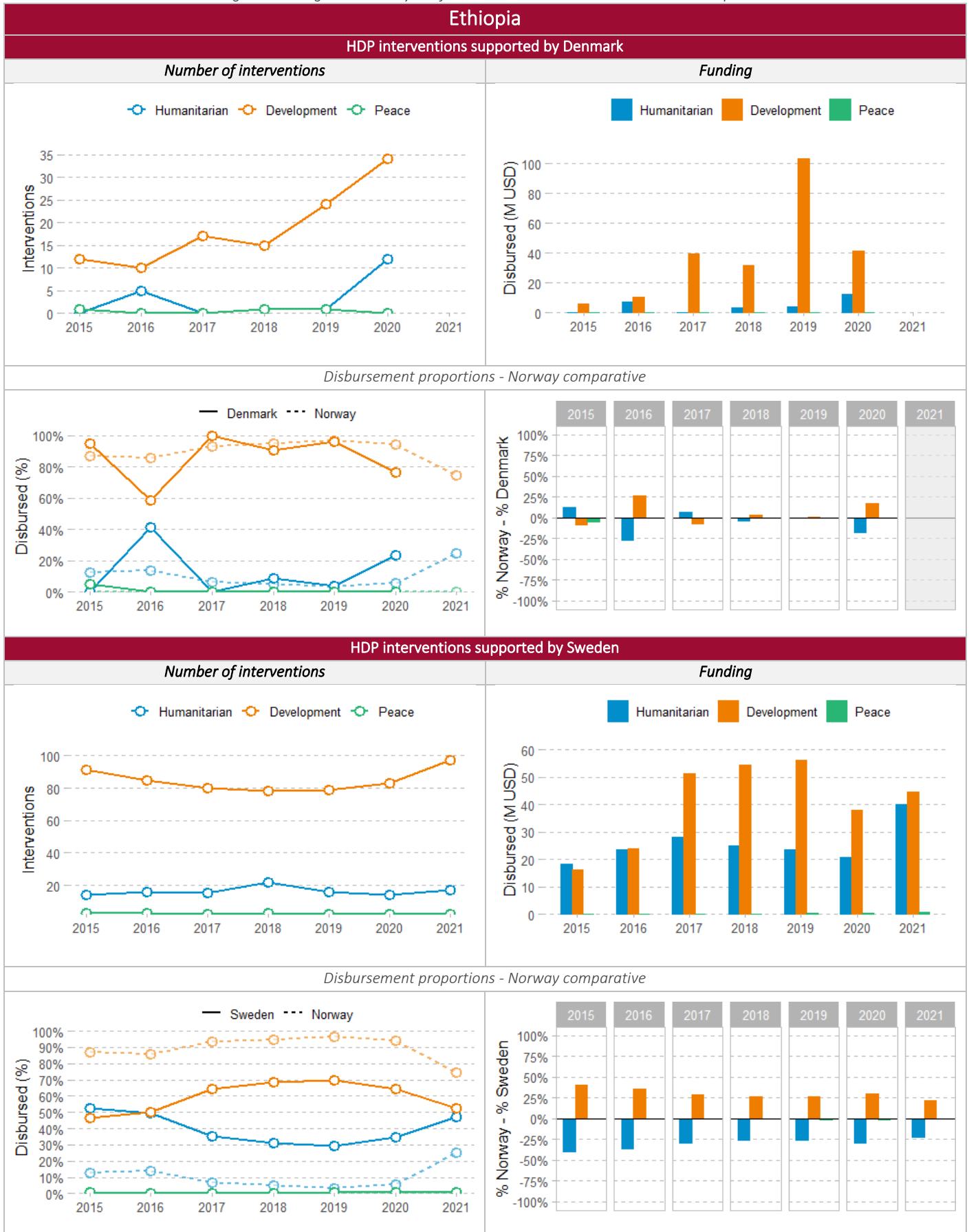
Figure 30 presents the longitudinal coherence of HDP interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, and the aggregation for all donors that have supported at least one HDP intervention in Ethiopia according to CRS dataset (Table 13). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad, and data for other countries draws from the OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

Table 13. Donors of at least one HDP intervention implemented in Ethiopia, 2015 - 2021 (Source: CRS).

All donors			
Adaptation Fund	France	La Caixa Banking Foundation	Swedish Postcode Lottery
African Development Bank	Germany	Laudes Foundation	Switzerland
African Development Fund	Global Alliance for Vaccines and Immunization	LEGO Foundation	Thailand
Arab Bank for Economic Development in Africa	Global Environment Facility	Lithuania	Türkiye
Arcadia Fund	Global Fund	Luxembourg	UBS Optimus Foundation
Australia	Global Green Growth Institute	Malta	UN Capital Development Fund
Austria	Greece	Margaret A. Cargill Foundation	UN Peacebuilding Fund
Belgium	Green Climate Fund	Mastercard Foundation	UNAIDS
Bernard van Leer Foundation	H&M Foundation	McKnight Foundation	UNDP
Bill & Melinda Gates Foundation	Hungary	Michael & Susan Dell Foundation	UNFPA
Canada	Iceland	Netherlands	UNHCR
Central Emergency Response Fund	IFAD	New Zealand	UNICEF
Charity Projects Ltd (Comic Relief)	IKEA Foundation	Norway	United Arab Emirates
Children's Investment Fund Foundation	IMF (Concessional Trust Funds)	Oak Foundation	United Kingdom
Climate Investment Funds	International Atomic Energy Agency	OPEC Fund for International Development	United Nations Industrial Development Organization
Conrad N. Hilton Foundation	International Development Association	Poland	United States
Czech Republic	International Labour Organisation	Portugal	Wellcome Trust
David & Lucile Packard Foundation	Ireland	Qatar	WFP
Denmark	Islamic Development Bank	Rockefeller Foundation	William & Flora Hewlett Foundation
Dutch Postcode Lottery	Israel	Romania	World Diabetes Foundation
Estonia	Italy	Saudi Arabia	World Health Organisation
EU Institutions	Japan	Slovak Republic	WTO - International Trade Centre
Finland	John D. & Catherine T. MacArthur Foundation	Spain	
Food and Agriculture Organisation	Korea	Susan T. Buffett Foundation	
Ford Foundation	Kuwait	Sweden	

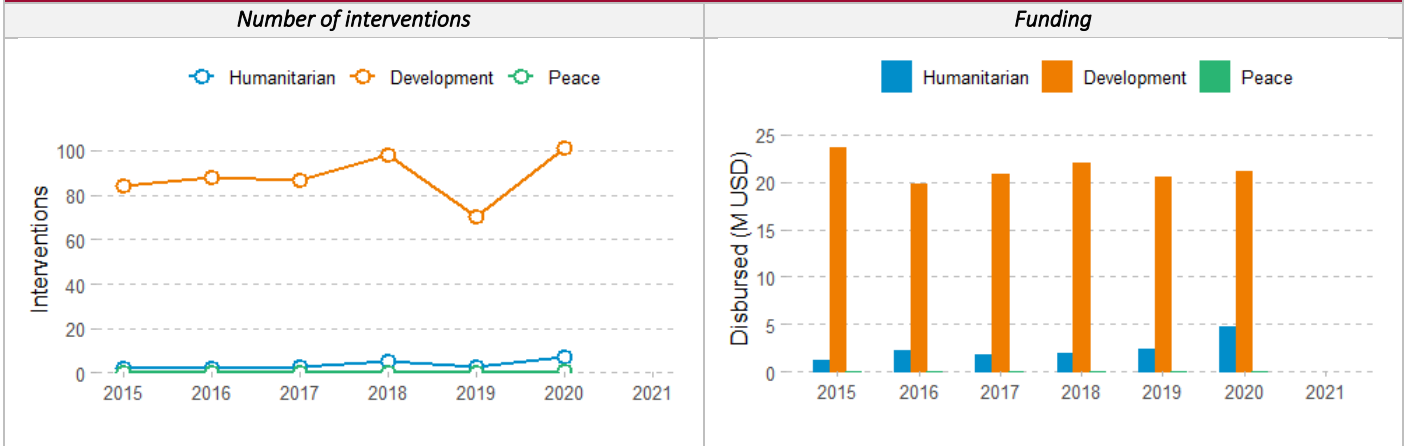
As shown in Figure 30, the predominance of development interventions is shared with other compared countries, which also give prominence to these types of interventions in Ethiopia. Differences in normalised spending values seem negligible in several cases (most evidently Finland and the Netherlands) and most evident in the cases of Sweden and the United States. In all cases, these differences apply to Humanitarian and Development interventions, as the extent of Peace programs renders their comparison limited.

Figure 30. Longitudinal analysis of HDP coherence with other donors in Ethiopia.

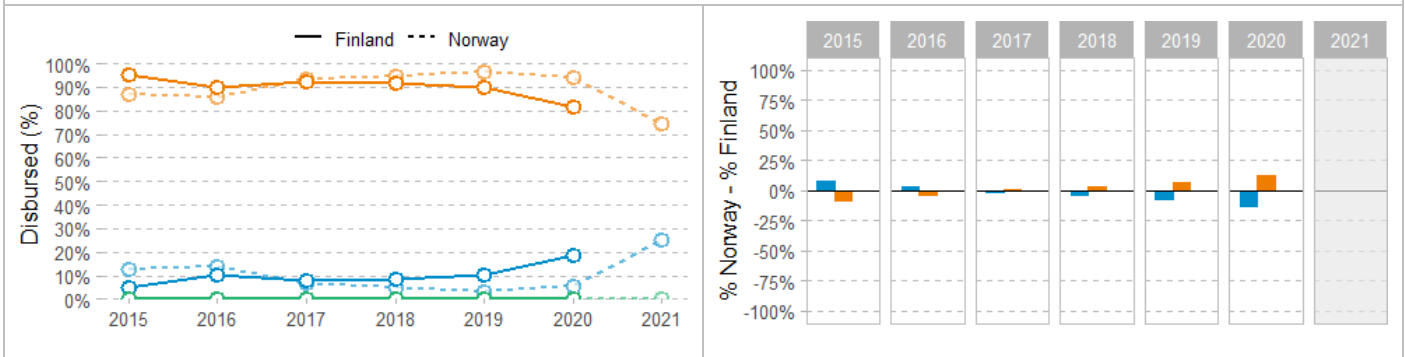


Ethiopia

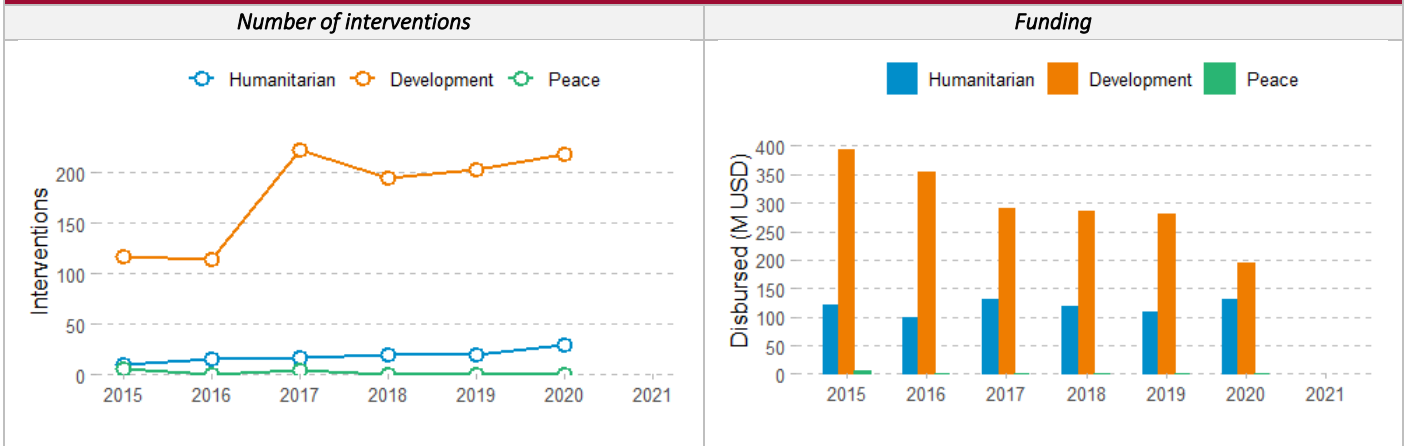
HDP interventions supported by Finland



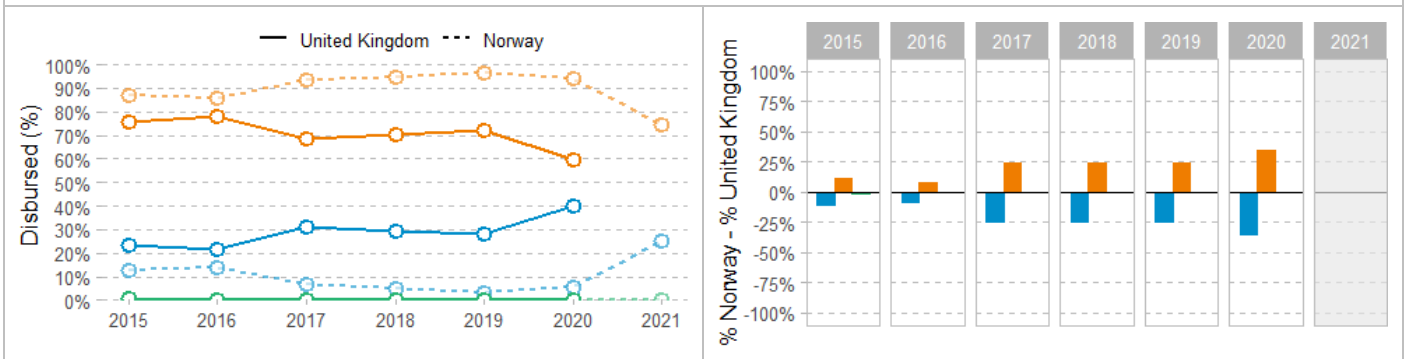
Disbursement proportions - Norway comparative



HDP interventions supported by United Kingdom



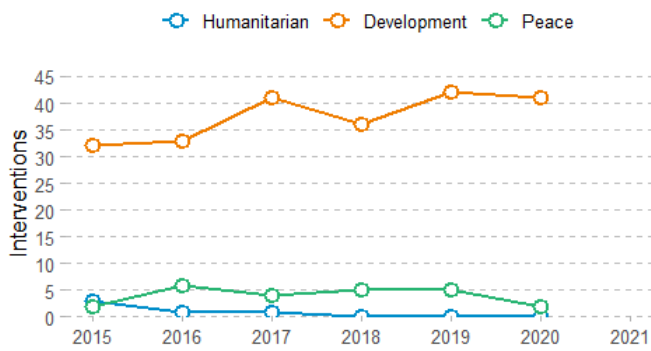
Disbursement proportions - Norway comparative



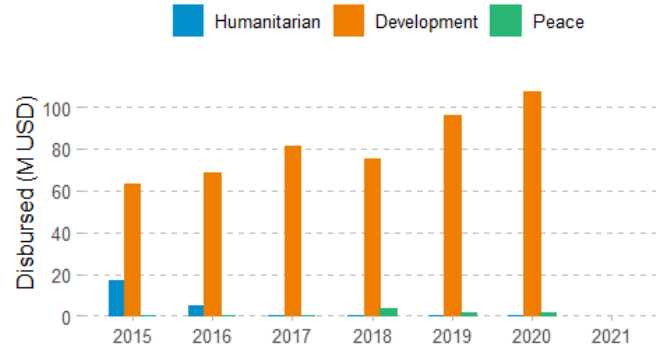
Ethiopia

HDP interventions supported by Netherlands

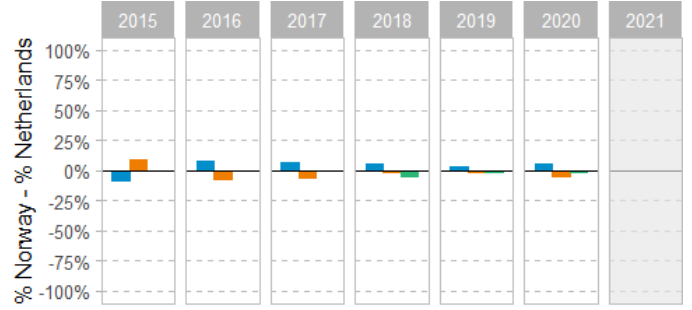
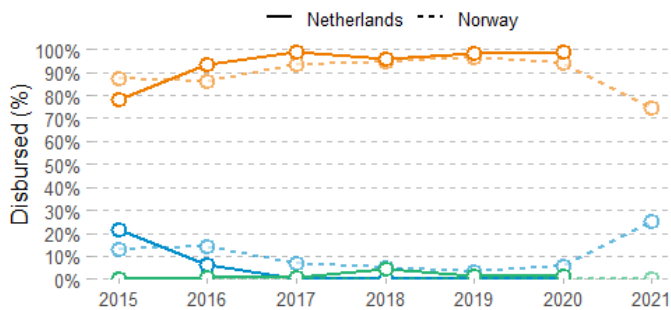
Number of interventions



Funding

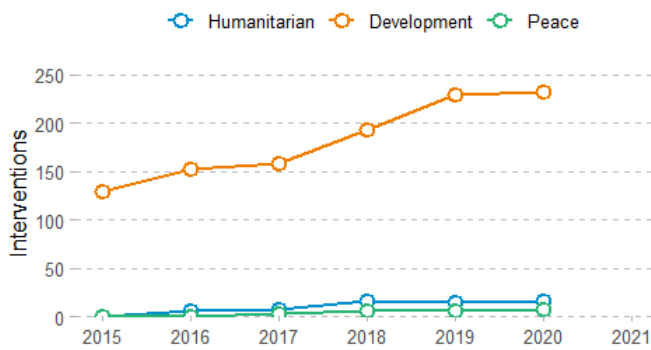


Disbursement proportions - Norway comparative

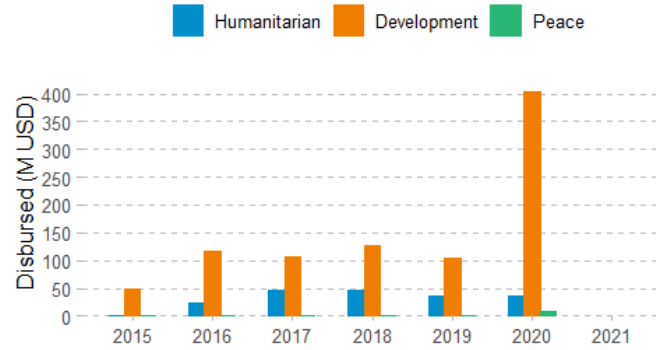


HDP interventions supported by Germany

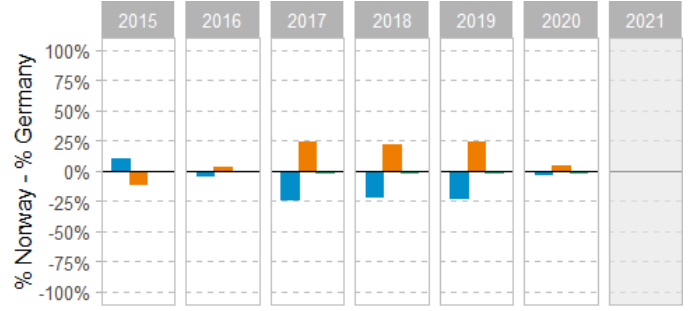
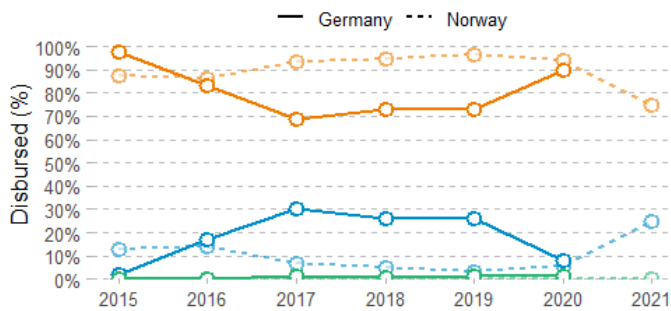
Number of interventions



Funding



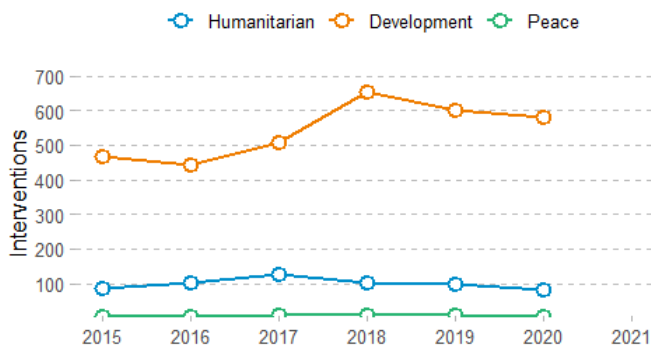
Disbursement proportions - Norway comparative



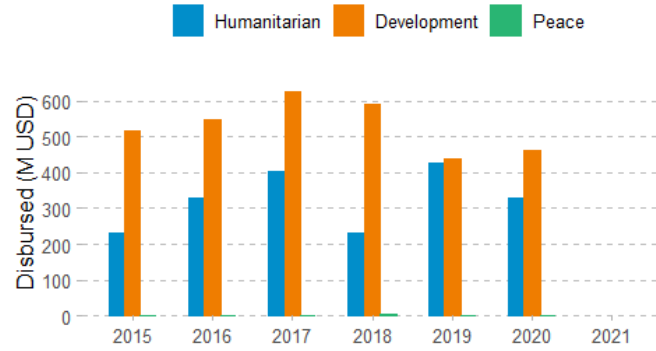
Ethiopia

HDP interventions supported by United States

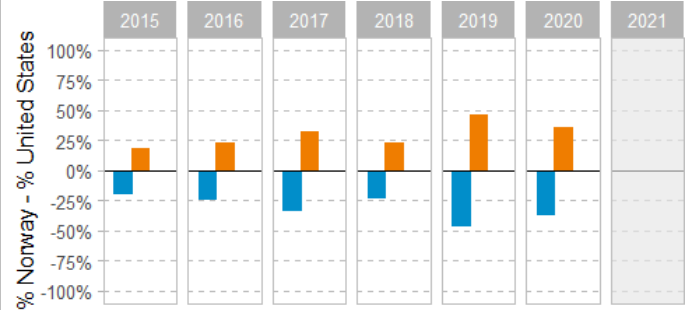
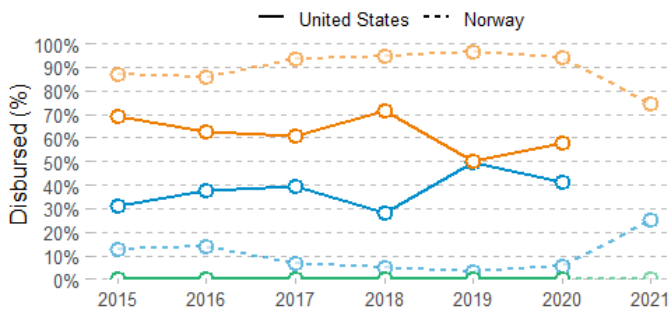
Number of interventions



Funding

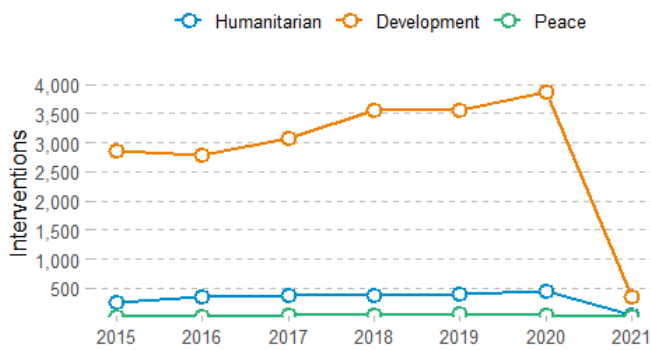


Disbursement proportions - Norway comparative

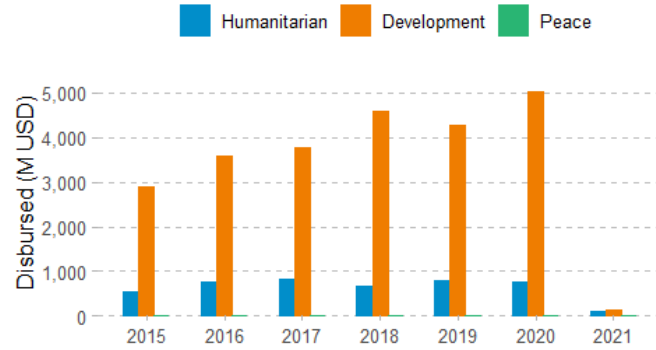


Aggregated HDP interventions supported by all donors.

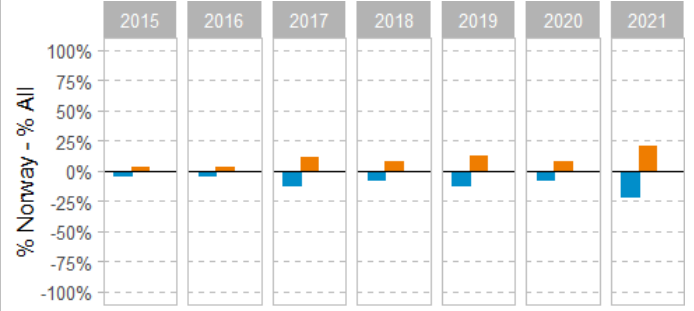
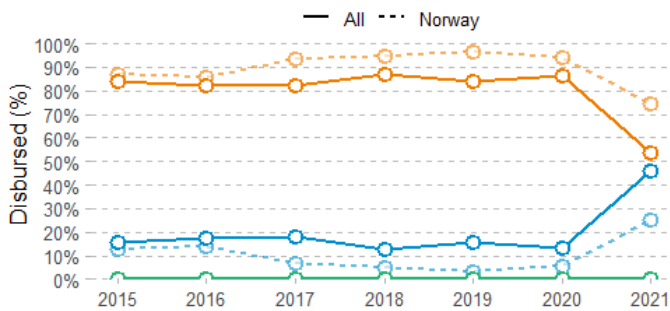
Number of interventions



Funding



Disbursement proportions - Norway comparative

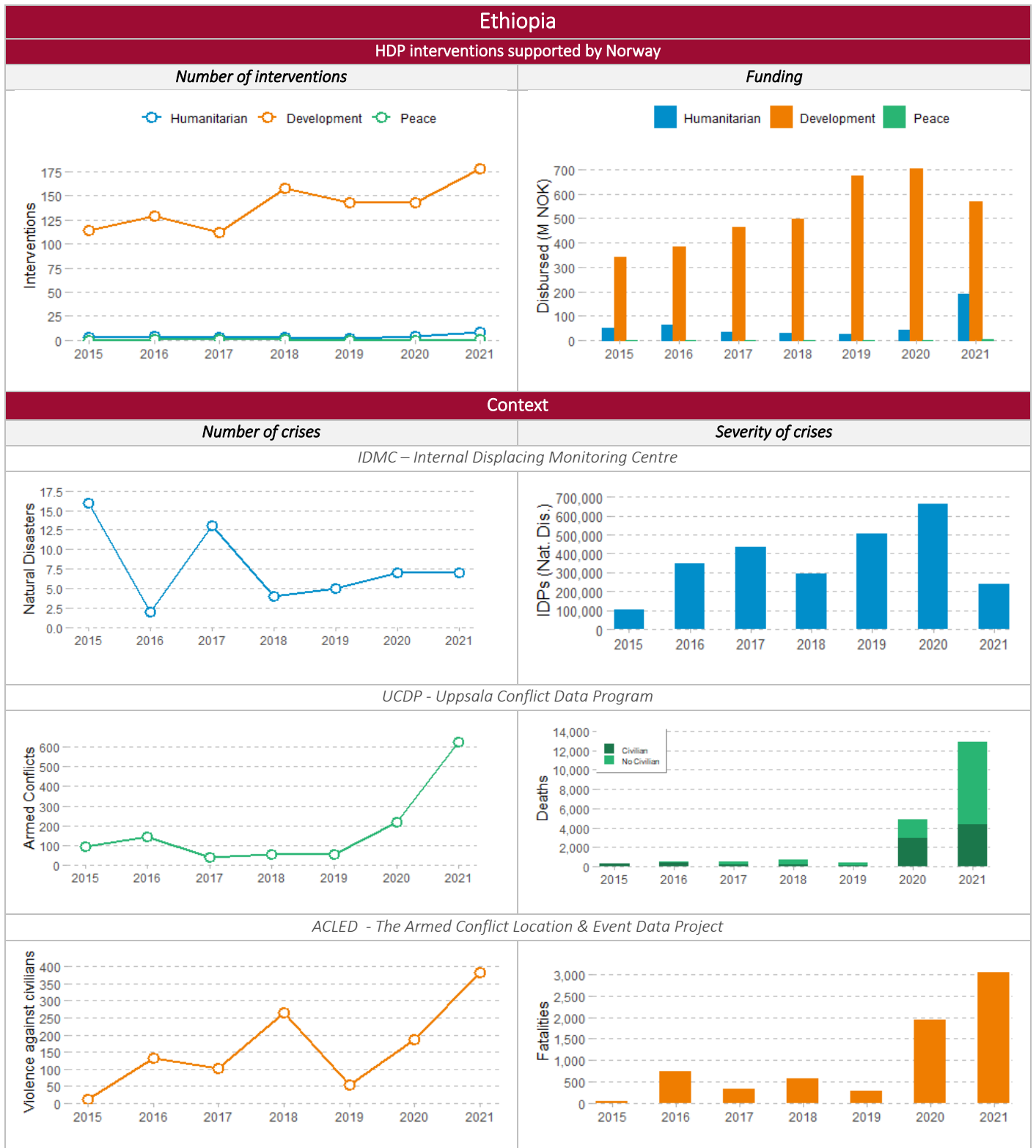


4.1.3. Contextual coherence

This section discusses the change over time (2015-2021) of each intervention type in comparison to selected crises over that period, including natural disasters, armed conflicts and violence against civilians. For the purposes of this analysis, the intensity of the interventions is measured in million NOK disbursed, and the severity of the crises is calculated in a tailored manner for each crisis type: IDPs in the case of natural disasters (as presented in the Internal Displacing Monitoring Centre), number of deaths for armed conflicts (as available in Uppsala Conflict Data Program), and fatalities for violence against civilians (as per the Armed Conflict Location & Event Data Project) (see subsection 2.2).

Figure 31 evidences the presence of severe natural disasters in Ethiopia. In 2015, 2016, 2020 a combination of floods and draughts led to significant IDPs. Armed conflicts, particularly since 2020, have also increased in the analysis period. For all types of crises considered in this study, the context significantly worsened over the period of analysis. Consequently, number and funding of interventions feature an increasing trend over these years. At a lower scale, humanitarian interventions also increase in amount and volume.

Figure 31. Longitudinal analysis of HDP contextual coherence in Ethiopia.



4.2. Longitudinal coherence of health and peace interventions at country level

For this section, the analysis focuses on the coherence of peace interventions with specific subsets of humanitarian and development ones, namely, those focused on Health. In this case, the analysis of the coherence of the intervention supported by Norway in Ethiopia has considered 192 health and peace interventions implemented in the period from 2015 to 2021, with a total disbursement of NOK 647.49 million.

4.2.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. This more detailed analysis of intervention subgroups reveals findings slightly different from those obtained in the earlier section. It coincides in the predominance of development health interventions over all other types. Yet, the increase in humanitarian health in this case, which peaks in 2021, does in this case treble the disbursed amounts in development health interventions. (Table 14 and Figure 32). Humanitarian health interventions are less frequent but have a higher average disbursement (Table 15).

Figure 32. Number of health and peace interventions and total disbursement (million NOK) by type of intervention in Ethiopia.

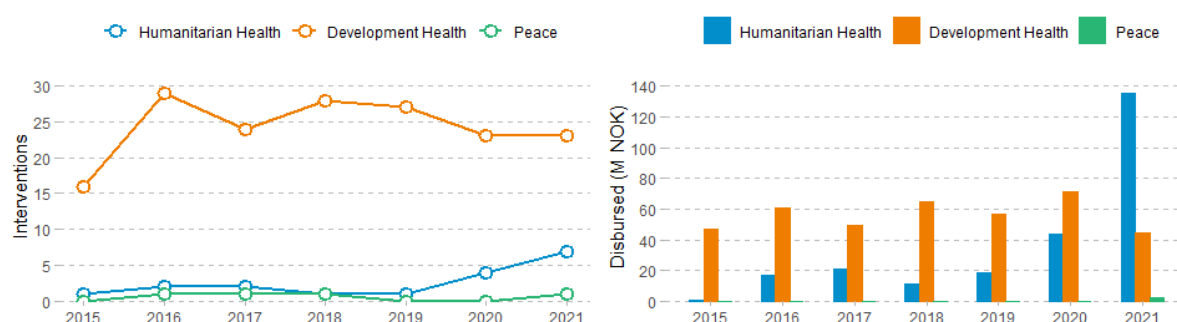


Table 14. health and peace interventions supported by Norway in Ethiopia.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian Health	Development Health	Peace	Total	Humanitarian Health	Development Health	Peace	Total
2015	1	16	0	17	1.14	47.32	0.00	48.46
2016	2	29	1	32	17.00	61.01	0.32	78.34
2017	2	24	1	27	21.00	49.70	0.30	71.01
2018	1	28	1	30	11.00	64.81	0.32	76.13
2019	1	27	0	28	19.00	56.58	0.00	75.58
2020	4	23	0	27	43.40	71.49	0.00	114.89
2021	7	23	1	31	135.51	44.88	2.70	183.09
Total	18	170	4	192	248.05	395.79	3.65	647.49

Table 15. Average disbursement (million NOK) by type health and peace intervention and year in Ethiopia.

Year	Average disbursement (million NOK)		
	Humanitarian Health	Development Health	Peace
2015	1.14	2.96	0.00
2016	8.50	2.10	0.32
2017	10.50	2.07	0.30
2018	11.00	2.31	0.32
2019	19.00	2.10	0.00
2020	10.85	3.11	0.00
2021	19.36	1.95	2.70
Total	13.78	2.33	0.91

The interventions financed by Norway in the 7 years counted with 20 agreement partners and 41 implementing institutions¹⁶. Again, most agreement partners and implementing institutions have participated in one only type of intervention, the most common being development health interventions (Figure 33), indicating a certain degree of specialisation within partners.

Figure 33. Percentage of agreement partners and implementing institutions participating each combination of health and peace types of interventions in Ethiopia.

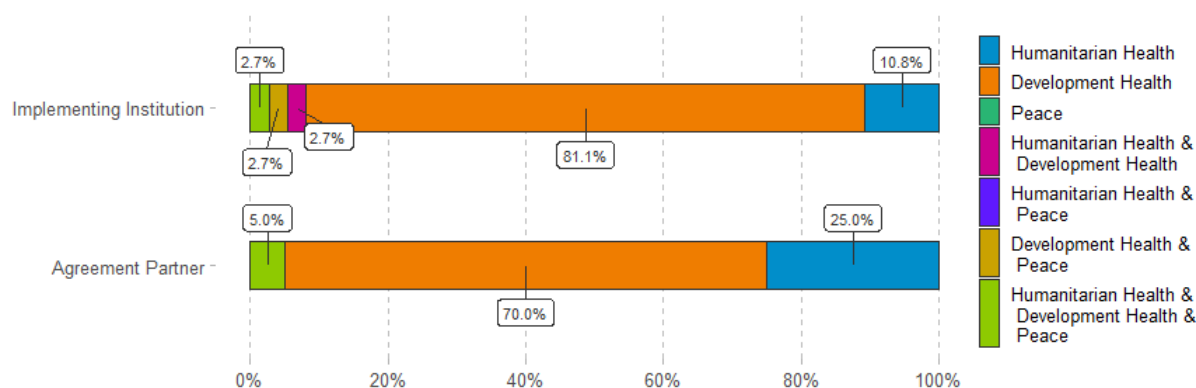
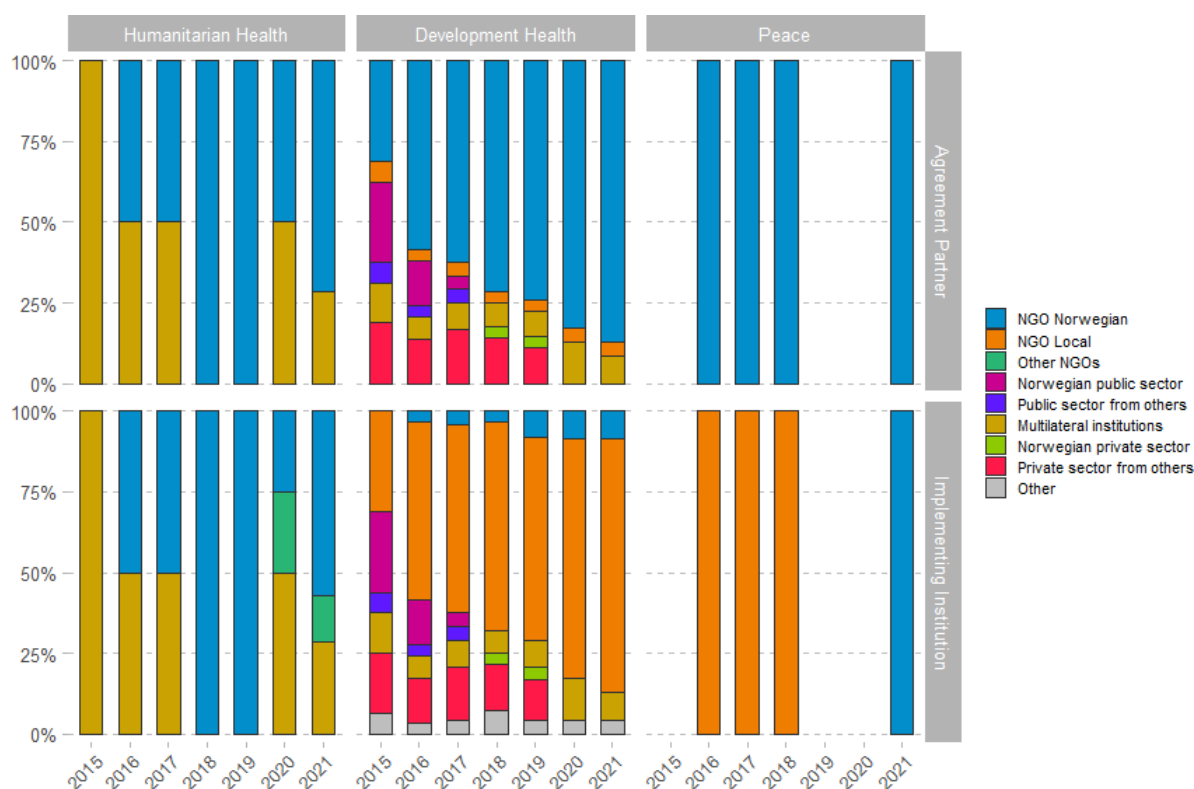


Figure 34¹⁷ presents the disaggregation of the information in Figure 32 by year and type of individual agreement partners and implementing institutions (a detailed table is presented in Annex 10.2.2). Namely, in terms of agreement partners there is an evident predominance of Norwegian NGOs, only shared in the case of humanitarian health with multilateral institutions. Peace interventions, a total of four over the period, have been exclusively arranged with Norwegian NGOs. And the most variance is seen among developmental health agreement partners. The picture for implementing institutions is more diverse, with a slight predominance for local NGOs for developmental health and peace interventions. For humanitarian health, implementing partners remain a combination of Norwegian NGOs and multilaterals.

¹⁶ Exclusion Policy: Due to security reasons, no further details can be provided.

¹⁷ Other NGOs joins the groups: NGO International, NGO Other donor countries; Public sector from others joins the groups: Public sector in developing countries, Public sector other donor countries; Private sector from others joins the groups: Private sector in developing countries, Private sector in other donor countries; Others joins the groups: Governments/Ministries in developing countries, Public-private partnerships.

Figure 34. Percentage of Agreement Partner per type of health and peace intervention



4.2.2. Coherence with other donors

Figure 35 presents the longitudinal coherence of health and peace interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, and the aggregation for all donors that have supported at least one health and peace intervention in Ethiopia according to CRS dataset (Table 16). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad, and data for other countries draws from the OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

The results of these analyses are varied, both by country but also by theme, and a clear pattern or trend is not self-evident. For all domains, differences in normalised disbursement appear much starker in the cases of Denmark, Sweden, Finland and Germany. In contrast, differences are minimal with the UK and the US. In terms of percentage of disbursement, the predominance of developmental health seems to be shared, except in Sweden and Germany, where graphs indicate reversed priorities.

Table 16. Donors of at least one health and peace intervention implemented in Ethiopia, 2015 – 2021 (Source: CRS).

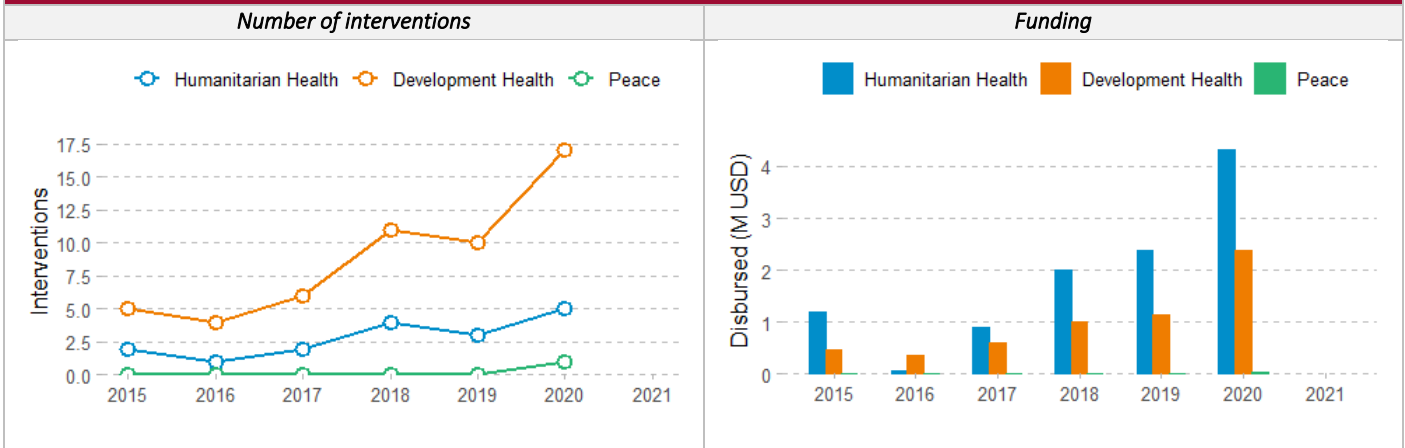
All donors			
Australia	France	Lithuania	Swedish Postcode Lottery
Austria	Germany	Luxembourg	Switzerland
Belgium	Global Alliance for Vaccines and Immunization	Margaret A. Cargill Foundation	Türkiye
Bill & Melinda Gates Foundation	Global Environment Facility	Mastercard Foundation	UBS Optimus Foundation
Canada	Global Fund	Netherlands	UN Peacebuilding Fund
Central Emergency Response Fund	H&M Foundation	New Zealand	UNAIDS
Charity Projects Ltd (Comic Relief)	Hungary	Norway	UNDP
Children's Investment Fund Foundation	Iceland	Oak Foundation	UNFPA
Conrad N. Hilton Foundation	IKEA Foundation	OPEC Fund for International Development	UNHCR
Czech Republic	International Development Association	Poland	UNICEF
David & Lucile Packard Foundation	International Labour Organisation	Qatar	United Arab Emirates
Denmark	Ireland	Rockefeller Foundation	United Kingdom
Estonia	Italy	Saudi Arabia	United States
EU Institutions	Japan	Slovak Republic	Wellcome Trust
Finland	Korea	Spain	WFP
Food and Agriculture Organisation	La Caixa Banking Foundation	Susan T. Buffett Foundation	World Diabetes Foundation
Ford Foundation	Laudes Foundation	Sweden	World Health Organisation

Figure 35. Longitudinal analysis of health and peace coherence with other donors in Ethiopia.

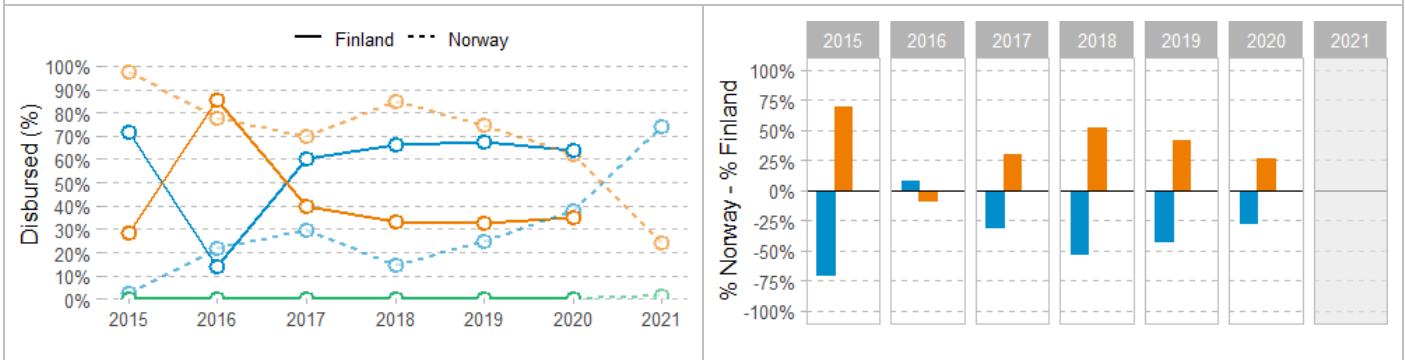


Ethiopia

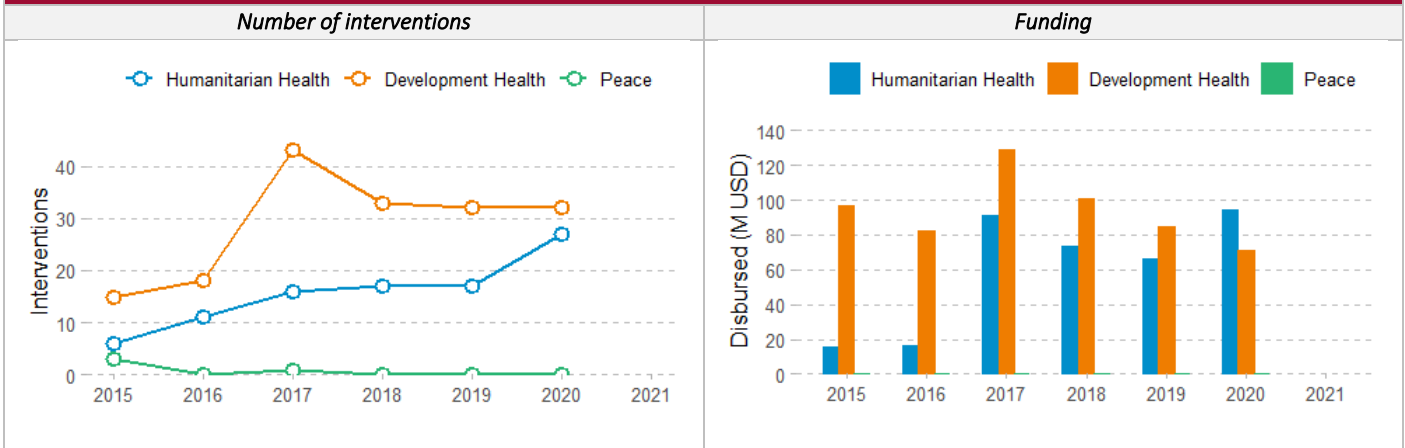
Health and peace interventions supported by Finland



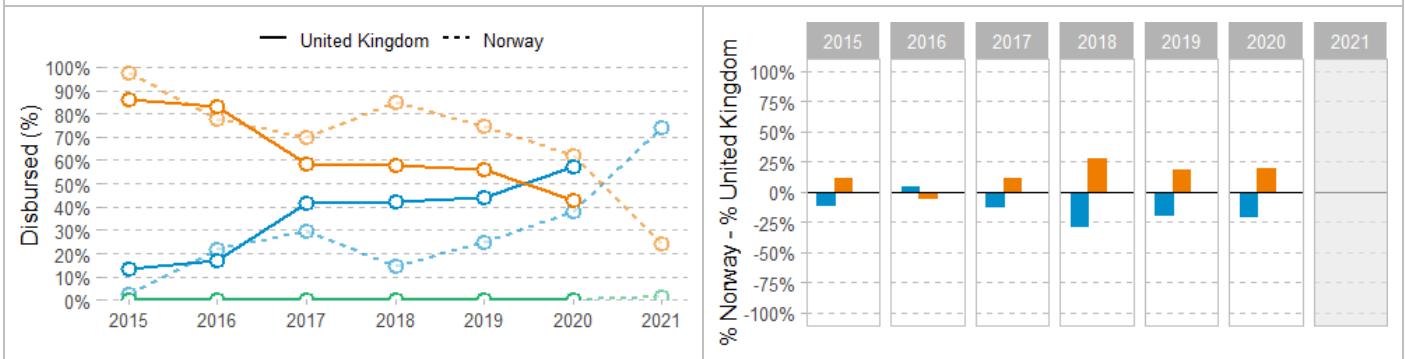
Disbursement proportions – Norway comparative



Health and peace interventions supported by United Kingdom

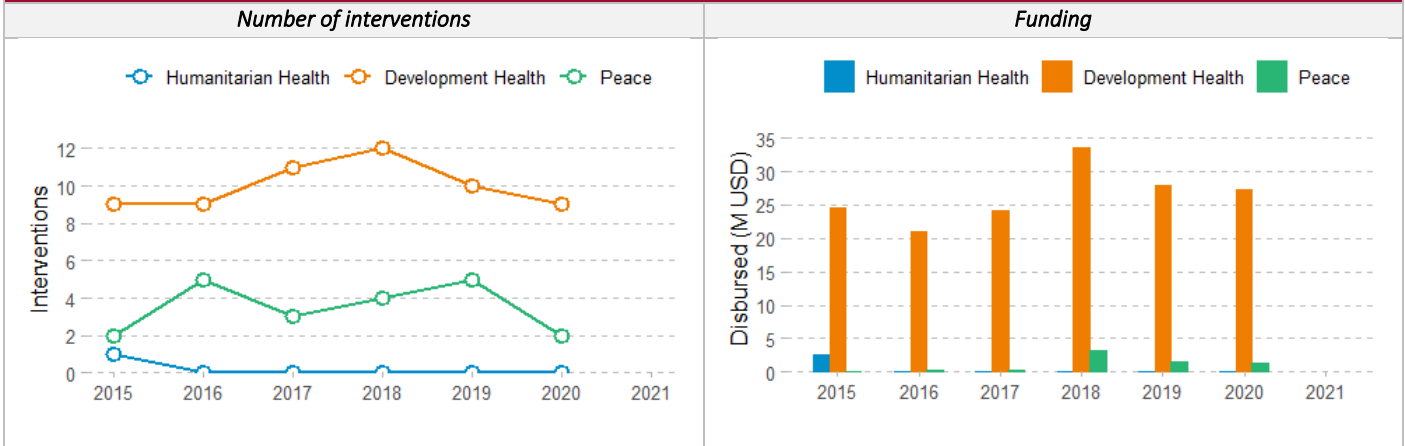


Disbursement proportions – Norway comparative

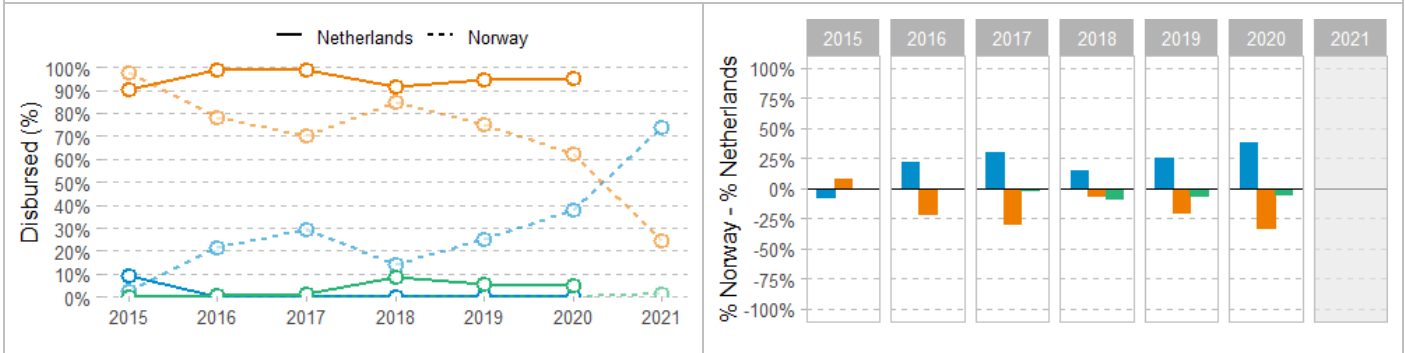


Ethiopia

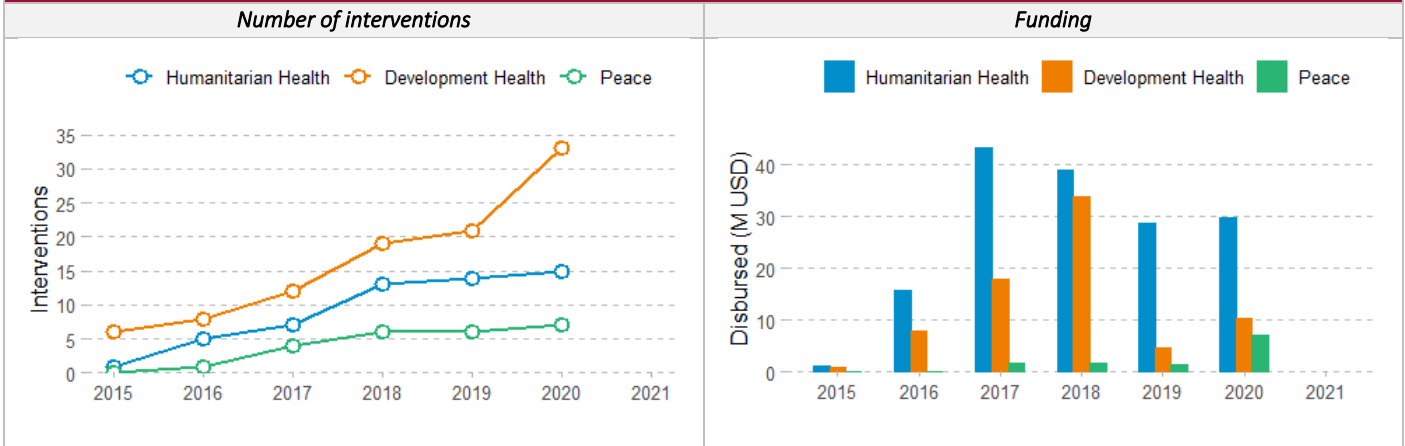
Health and peace interventions supported by Netherlands



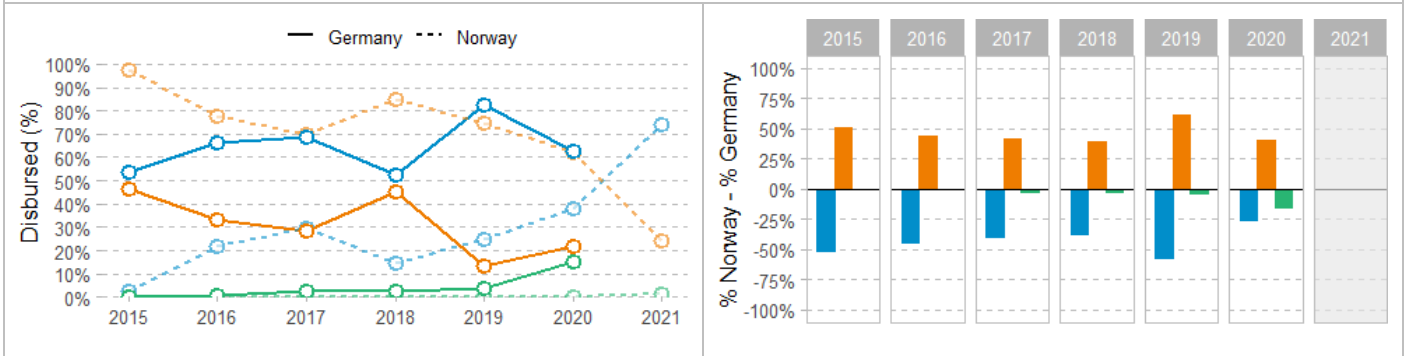
Disbursement proportions – Norway comparative



Health and peace interventions supported by Germany



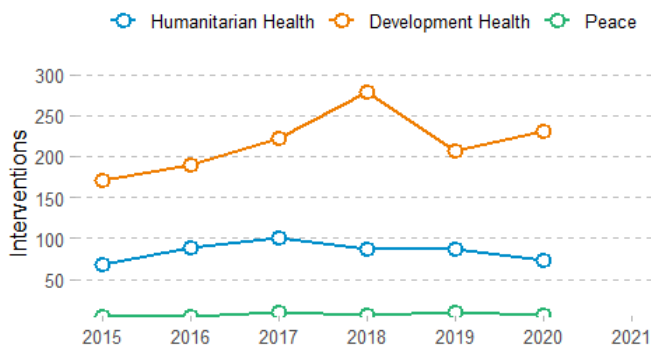
Disbursement proportions – Norway comparative



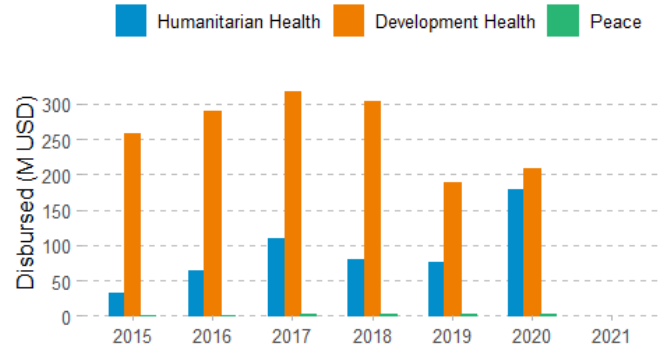
Ethiopia

Health and peace interventions supported by United States

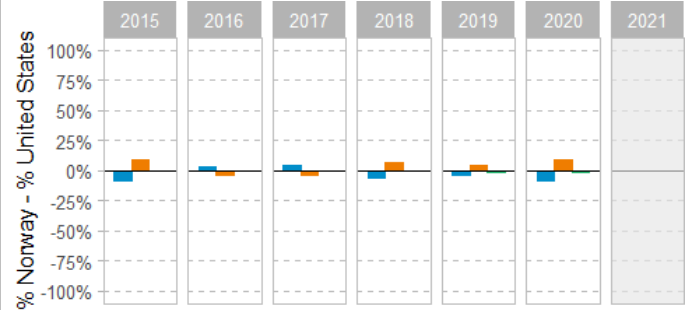
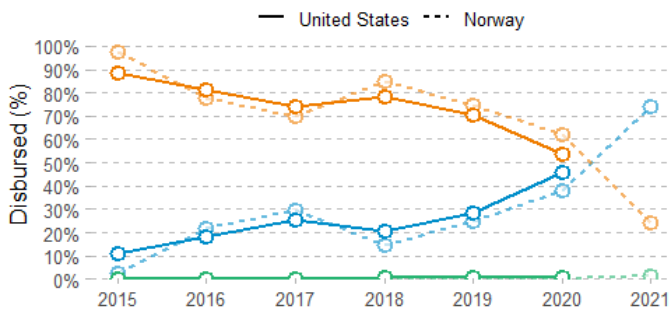
Number of interventions



Funding

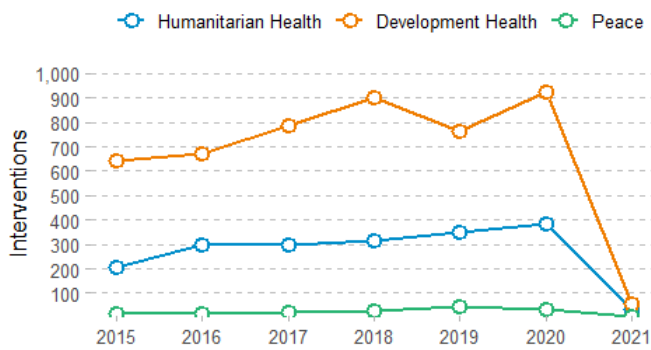


Disbursement proportions – Norway comparative

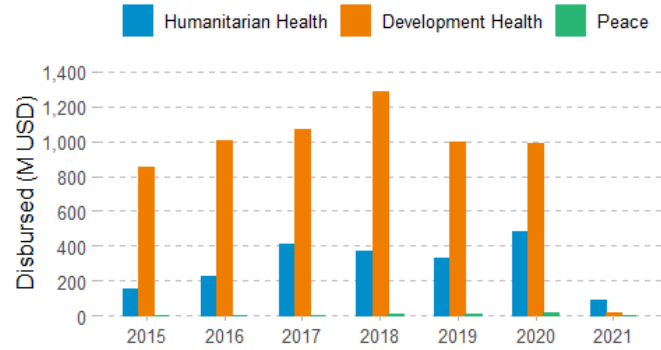


Aggregated health and peace interventions supported by all donors

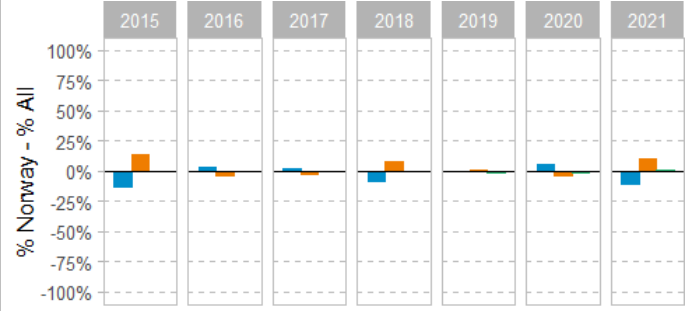
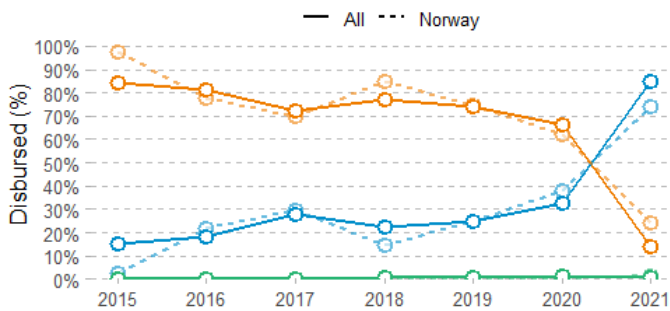
Number of interventions



Funding



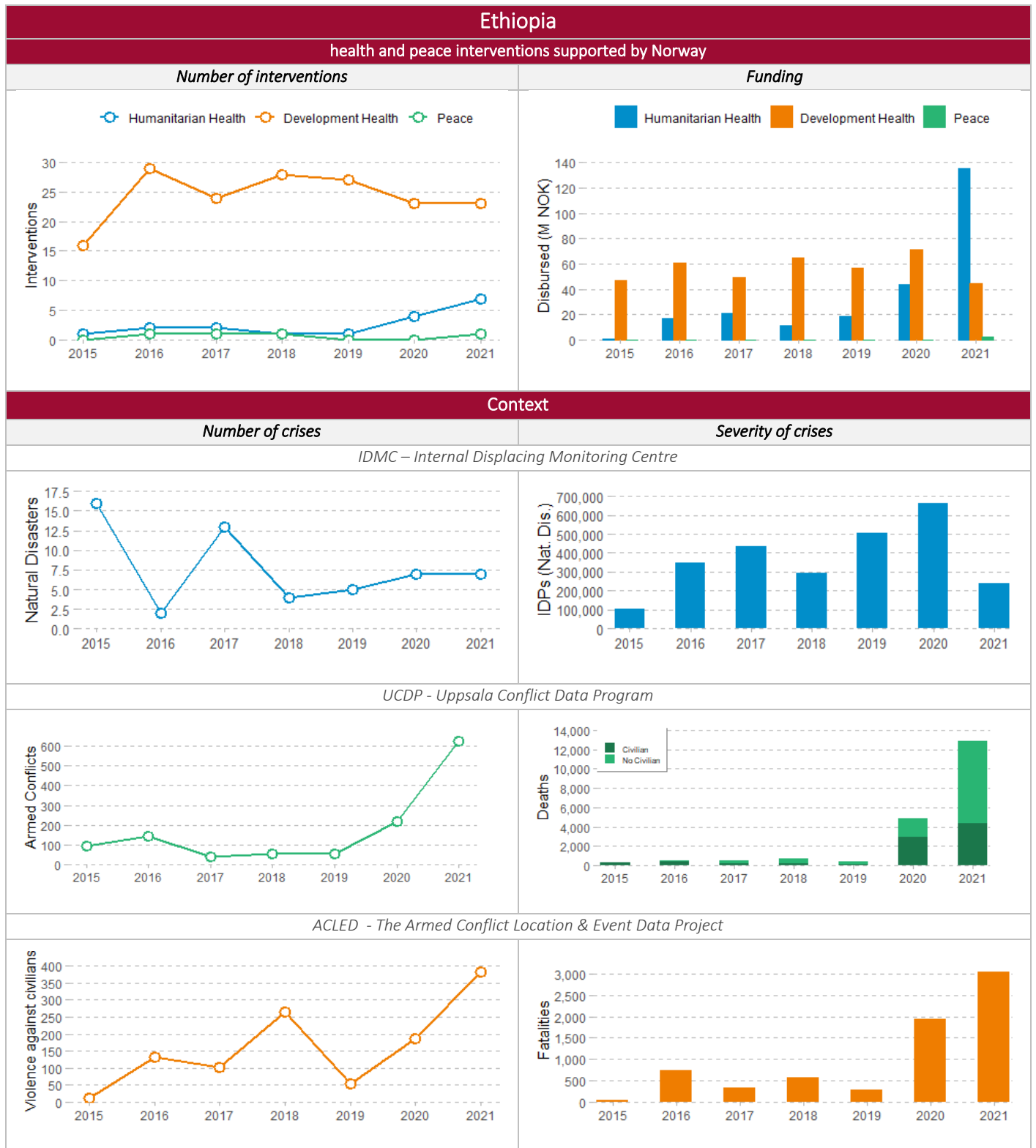
Disbursement proportions – Norway comparative



4.2.3. Contextual coherence

As stated earlier, the Ethiopian context over the period of analysis has deteriorated over the years considered in scope, and crises in number and intensity have worsened over the period. Ethiopia has suffered severe armed conflicts and violence against civilians in the last years (Figure 36). In response, assistance under all three domains has experienced an increasing trend over this time. Most remarkably, this is the case for humanitarian health interventions, which have indeed increased in number but most significantly increased in magnitude of disbursement, going from 1 million NOK to 135 million NOK over these seven years.

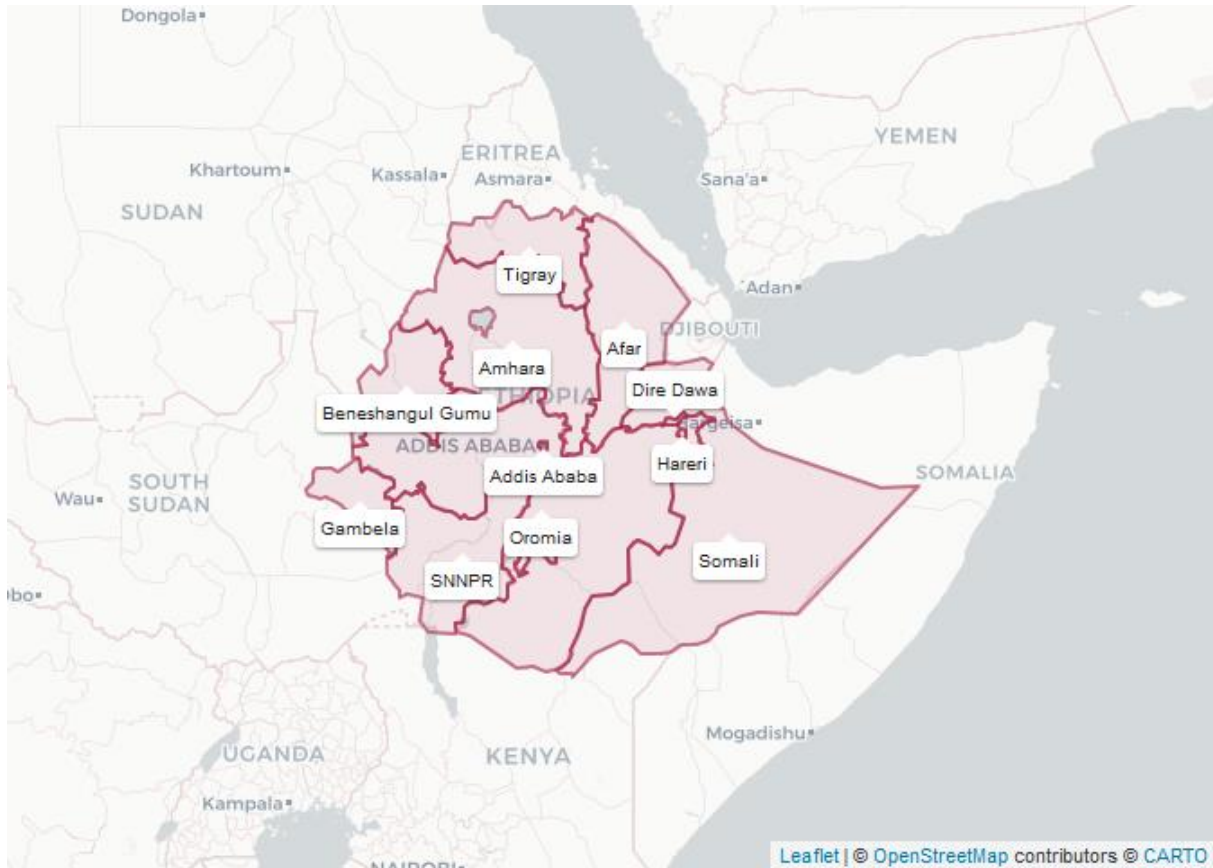
Figure 36. Longitudinal analysis of health and peace contextual coherence in Ethiopia.



4.3. Spatial coherence of health and peace interventions at sub-national level

This subsection presents the results of the spatial coherence analysis of interventions supported by Norway in Ethiopia, on the basis of geolocated data. The analysis has been implemented for areas of Ethiopia at administrative level 1 (ADM1), as shown in Figure 37. Out of the 192 interventions included in the dataset provided by the Department for Evaluation, 95 interventions are geolocated in an administrative area at level ADM1 and have been used for the spatial analysis.

Figure 37. Administrative areas at level 1 in Ethiopia (ADM1 - Source: geoBoundaries).



4.3.1. Spatial coherence among types of interventions

As shown in Figure 38 and Figure 39, the spatial evolution of geolocated health and peace interventions is quite different. Peace interventions are punctual and located in very specific areas and only in 2021. Geolocated humanitarian health interventions data are only available for the last two years. Development health interventions data are only available for the last two years. Development health interventions exhibit a continuous diffusion pattern, stressing its importance in the south of Ethiopia.

Development health interventions are widely spread across the country, and the last years of analysis offer some variation as humanitarian health interventions get implemented across the country. A noteworthy finding emerges from the fact that Gambela seems to be the only region without otherwise extensive development health interventions, yet it features both humanitarian health and peace programs.

Figure 38. Distribution of the number of health and peace interventions by type of intervention, year and administrative area at level 1 (From 0=0% to 1=100%; ratios add up 1 for the three types of intervention in each area and year).

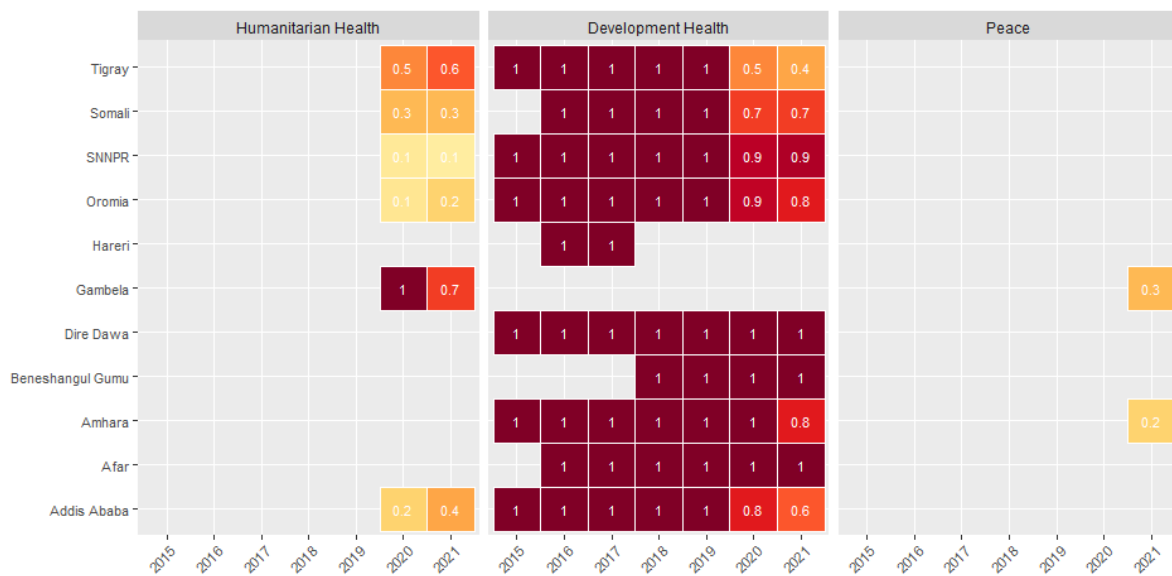
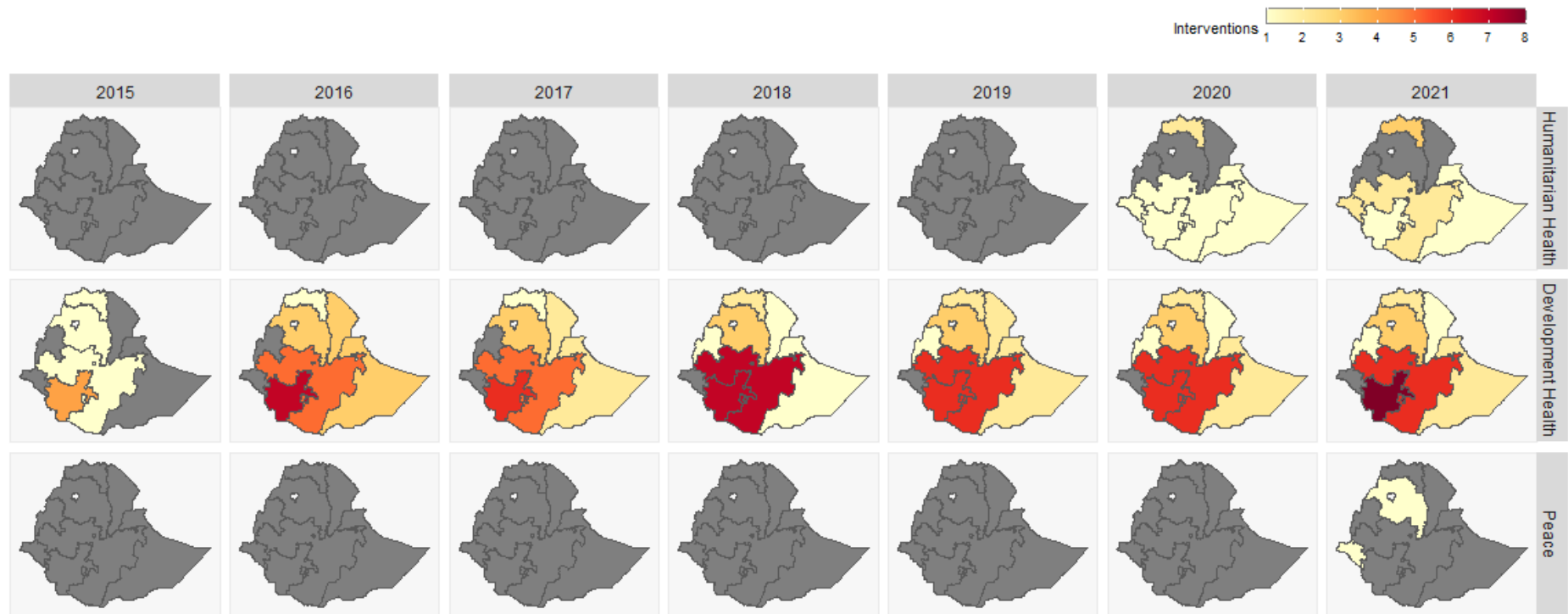


Figure 39. Number of h Health and peace interventions by type of intervention and year at administrative level 1 in Ethiopia



4.3.2. Coherence with other donors and multilateral institutions

This section analyses the spatial coherence between the number of health and peace interventions funded by Norway and those funded by other donors and multilateral institutions. These are depicted in Figure 40 where Norway's is represented by the colour of each administrative area at level one, and other donors are represented by the number in each administrative area at level one.

For the purposes of this analysis, the comparator donors considered include both other countries foreign aid and also multilateral donors. Precisely, Norway's disbursement is presented in comparison to that of Germany, the Netherlands, the UK and the US, and also AfDB, the EU, Gavi, the World Bank, IOM, UNICEF, UNOCHA, WHO, UNDP, and UNCHR.

The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad and the data for other countries and multilateral institutions from IATI (see subsection 2.2).

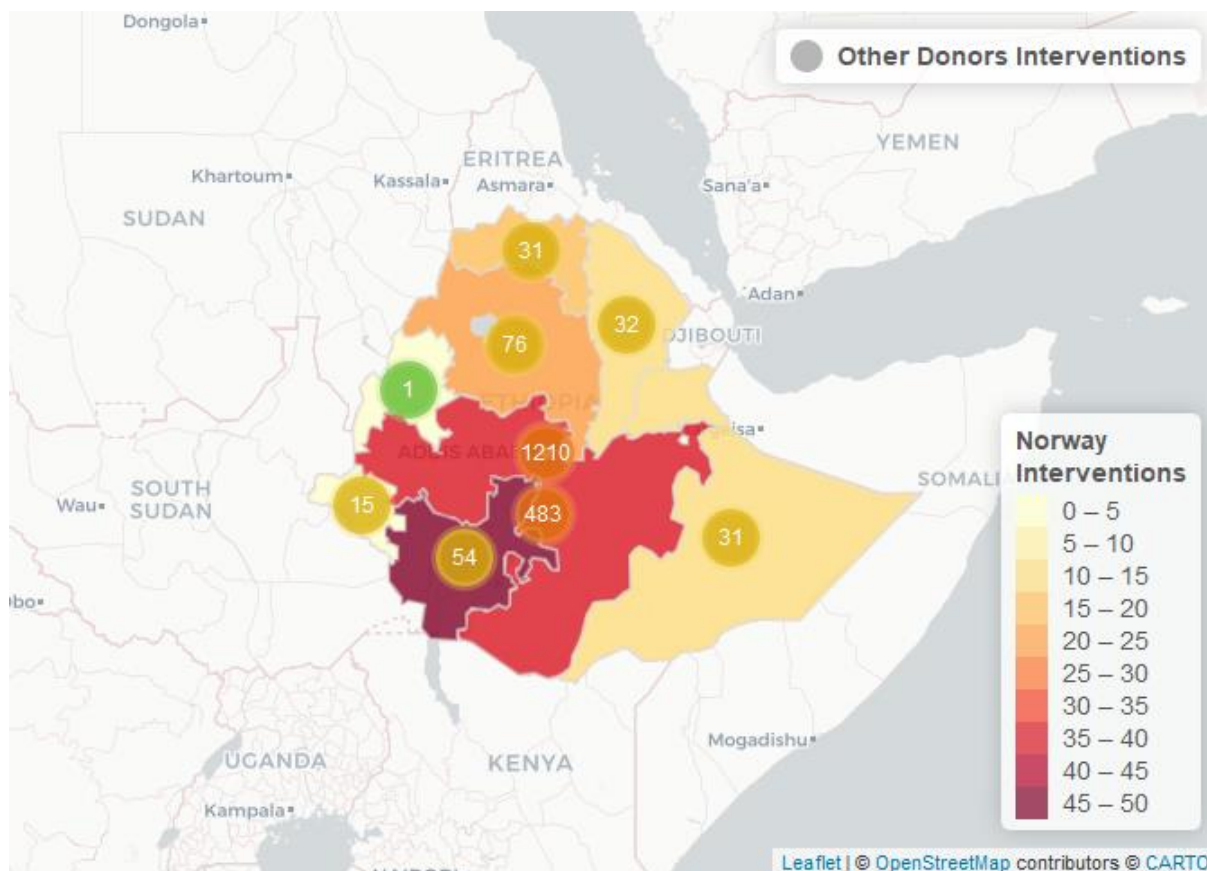
Table 17. Donors included on each donor's group for Ethiopia (Source IATI).

IATI Code	Name	Group
44000	World Bank	World Bank
47122	Gavi, The Vaccine Alliance	Gavi
DE-1	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung (BMZ)	Germany
FI-3	Ministry for Foreign Affairs of Finland	Finland
GB-GOV-1	Foreign, Commonwealth and Development Office	UK
XI-IATI-EC_ECHO	Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)	EU
XI-IATI-EC_FPI	European Commission - Service for Foreign Policy Instruments	EU
XI-IATI-EC_INTPA	European Commission - International Partnerships	EU
XM-DAC-41114	United Nations Development Programme	UNDP
XM-DAC-41121	United Nations High Commissioner for Refugees (UNHCR)	UNHCR
XM-DAC-41122	UNICEF	UNICEF
XM-DAC-41127	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-DAC-46002	African Development Bank	AfDB
XM-DAC-47066	International Organization for Migration (IOM)	IOM
XM-DAC-5-7	Germany - Federal Foreign Office	Germany
XM-DAC-7	Ministry of Foreign Affairs of the Netherlands	Netherlands
XM-DAC-928	World Health Organization	WHO
XM-OCHA-CBPF	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-OCHA-CERF	UNOCHA - Central Emergency Response Fund (CERF)	UNOCHA

Overall, Figure 41 does evidence a weak spatial coherence between the number of health and peace interventions funded by Norway (colour of each administrative area) and other donors (number in each area). Norwegian interventions are strongly concentrated in or around Southern Nations, Nationalities, and Peoples' Region (SNNPR), whereas other considered donors geolocate their interventions in Addis Ababa¹⁸.

¹⁸ A large number of other donors' interventions are located in Ethiopia's capital city (Addis Ababa). This could be caused either due to some donors not specifying the exact locations or because these donors centralized the interventions within the capital and distribute them to other locations registering the intervention in the capital.

Figure 40. Spatial coherence between the combined number of health and peace interventions funded by Norway (represented by colour of each administrative area) and the combined number of health and peace interventions funded by other donors (represented by the number in each area) in Ethiopia from 2015 to 2021.



The disaggregation of this information by year and type of intervention confirms that this is the case for both humanitarian health and development health, for all the years analysed (Figure 40).

This analysis is sustained when the total period aggregation is broken down by years. It confirms that Norway’s reach and breadth across the country is the case for all domains and sustained across time. The absence of presence in Gambela is also the case for all years and themes. For other donors, be it in the form of other countries, multilateral or UN agencies, the presence is more targeted in terms of geographical presence, most often pivoting around Addis Ababa, and in all cases sustained overtime.

Figure 41. Spatial coherence between the number of health and peace interventions funded by Norway (colour of each administrative area) and other donors (bubble in each area) by year and type of intervention.

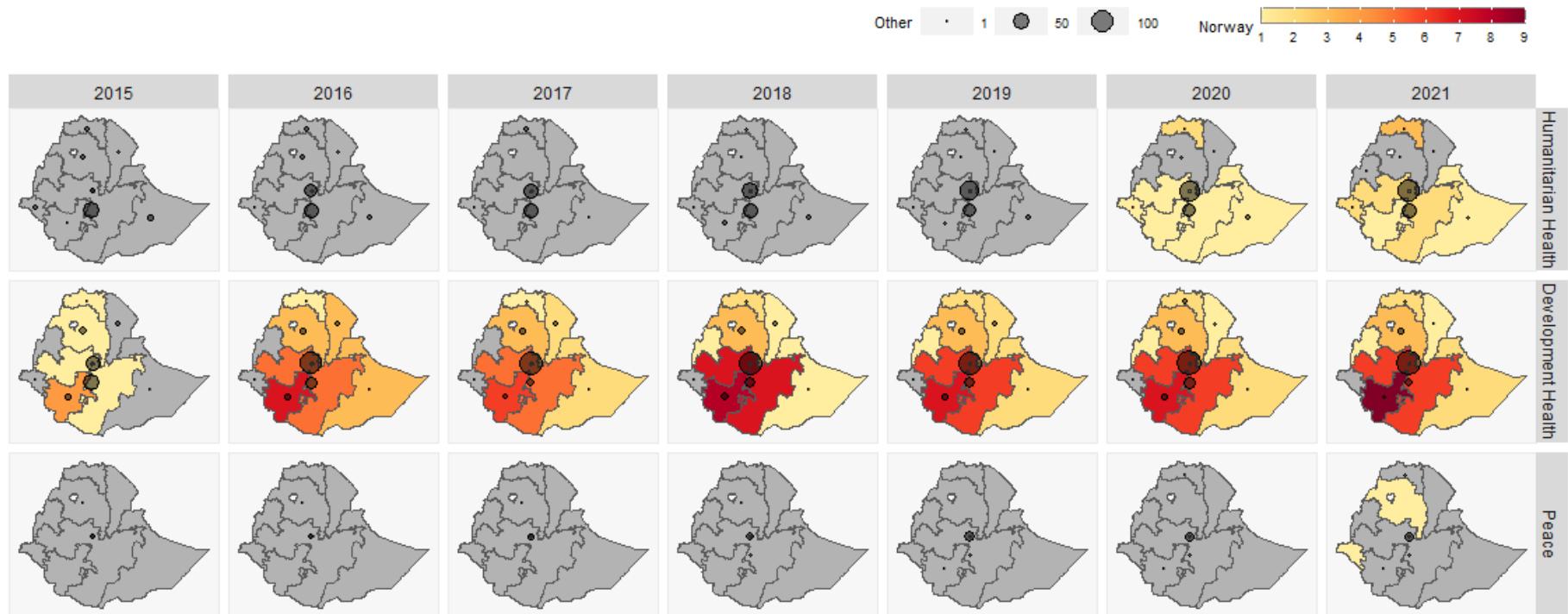


Figure 42. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor country.

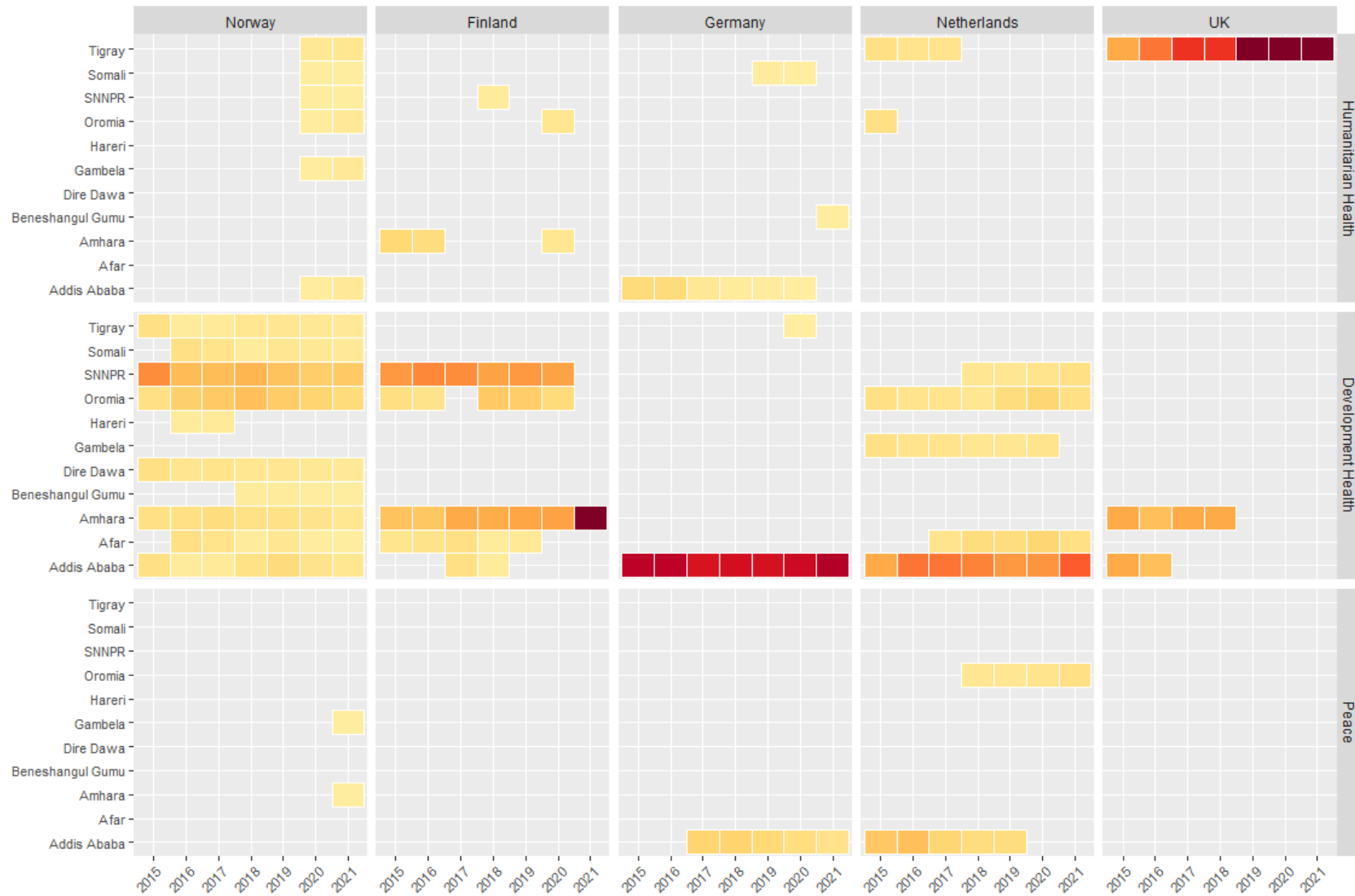


Figure 43. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor international institution.

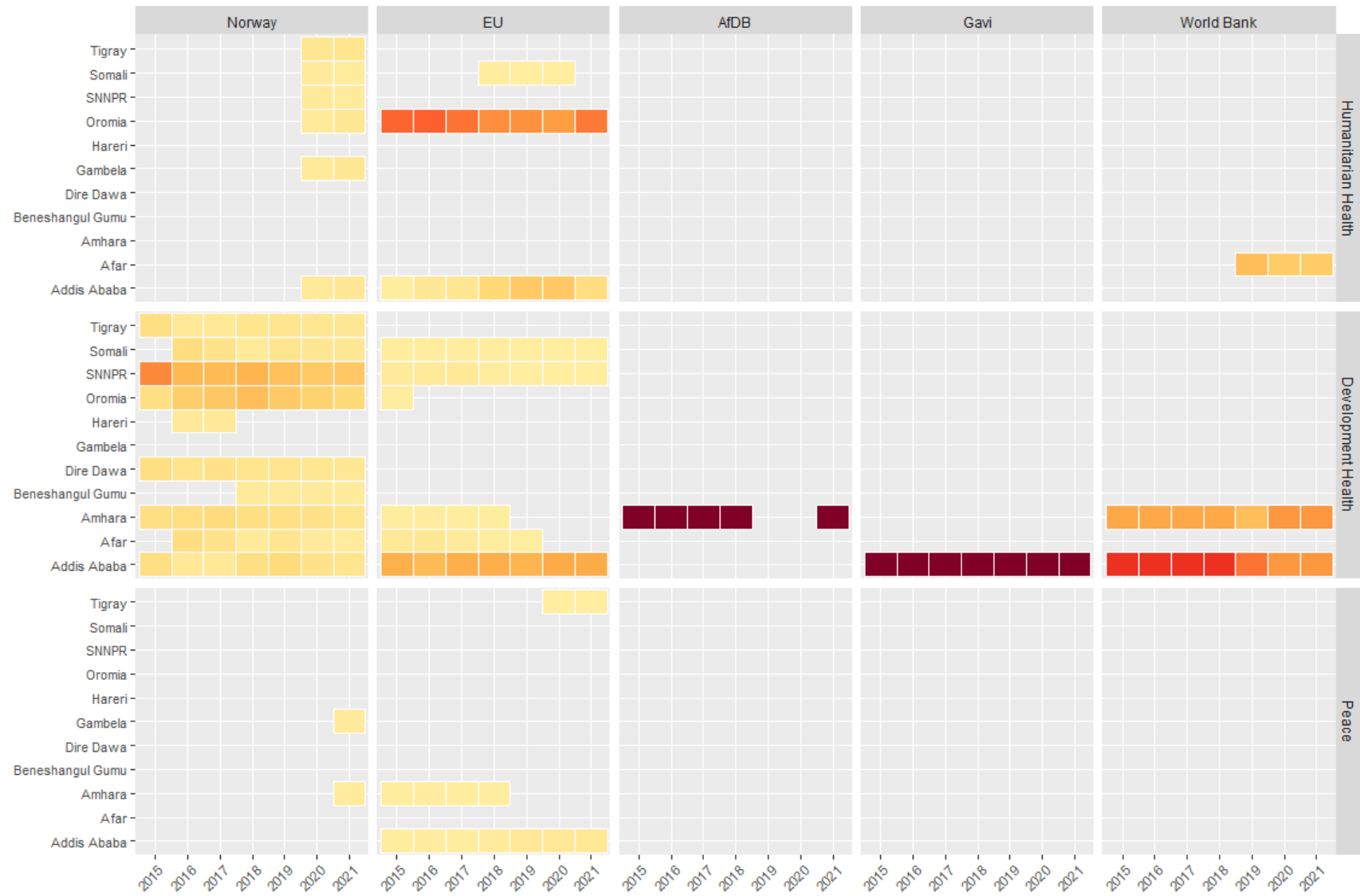
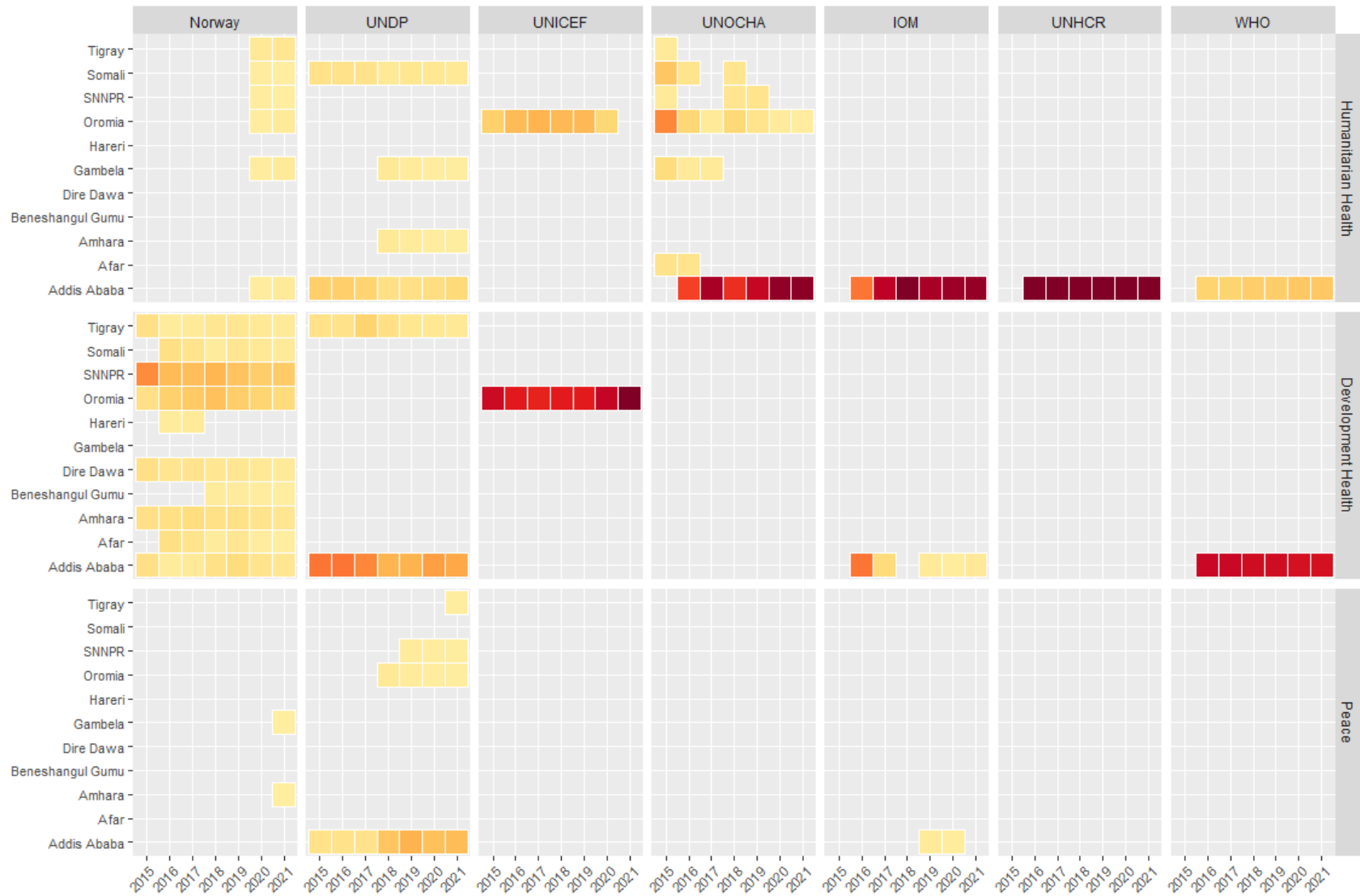


Figure 44. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor UN agency.



4.3.3. Contextual coherence

This section considers contextual coherence between type of crises (natural disasters, armed conflicts and violence against civilians) and the number of health and peace interventions funded by Norway. As in the preceding section, for each administrative area the colour indicates the magnitude of Norway interventions, and the number refers to the number of ongoing crises over the period of analysis (2015-2021).

At this stage, the analysis considers all three types of interventions in combination, and their response to each crisis type. In this case, it does reveal certain degree of spatial contextual coherence depending on the nature of each crisis. For natural disasters, Norway activities are concentrated in the southwest of the country where these crises are taking place. No evident synergies are revealed in the case of armed conflicts: the higher presence of armed conflicts is in Oromia meanwhile the higher presence of interventions is in SNNPR. Again, no clear correlation is observed in the interventions considered against violence against civilians crises, Norway interventions remain focused in the South West, whereas incidence of crisis seems more prevalent in the centre and north of the country.

Figure 45. Spatial contextual coherence with natural disasters (number of interventions and number of crisis 2015-2021).

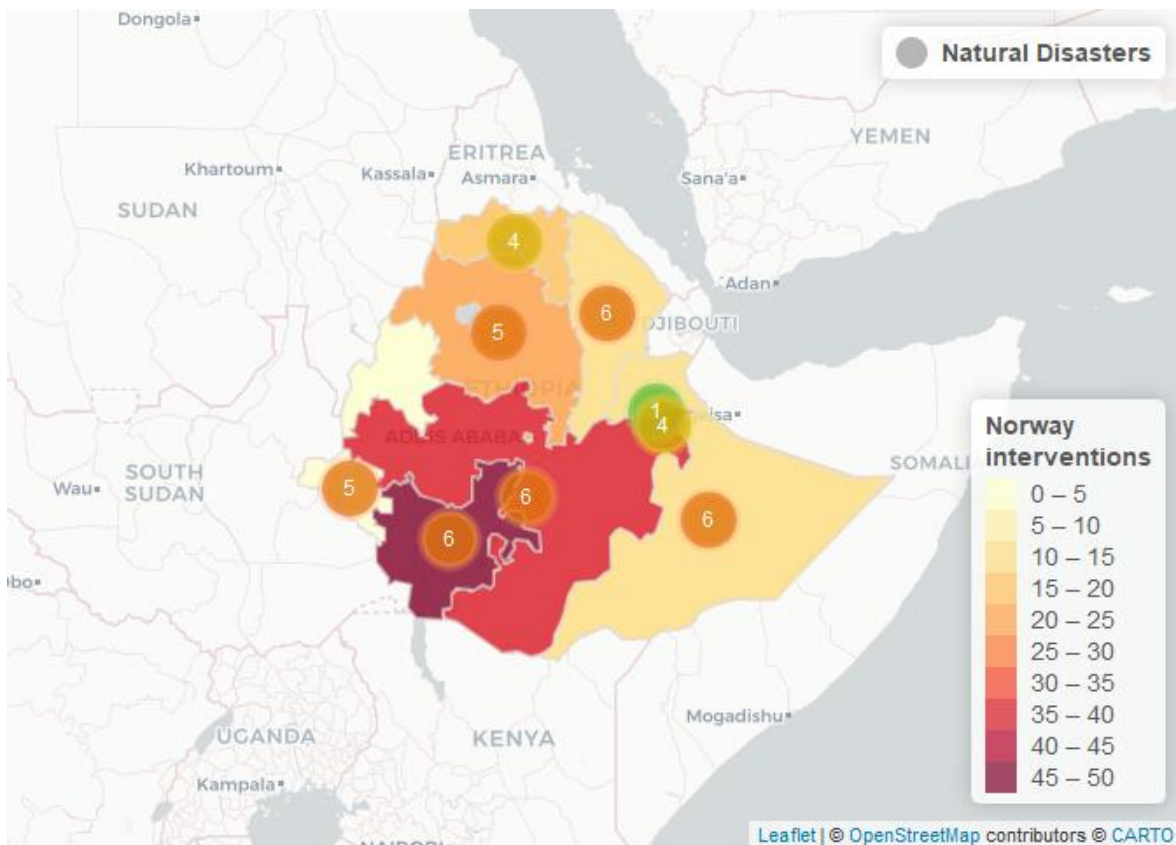


Figure 46. Spatial contextual coherence with armed conflicts (number of interventions and number of crisis 2015-2021).

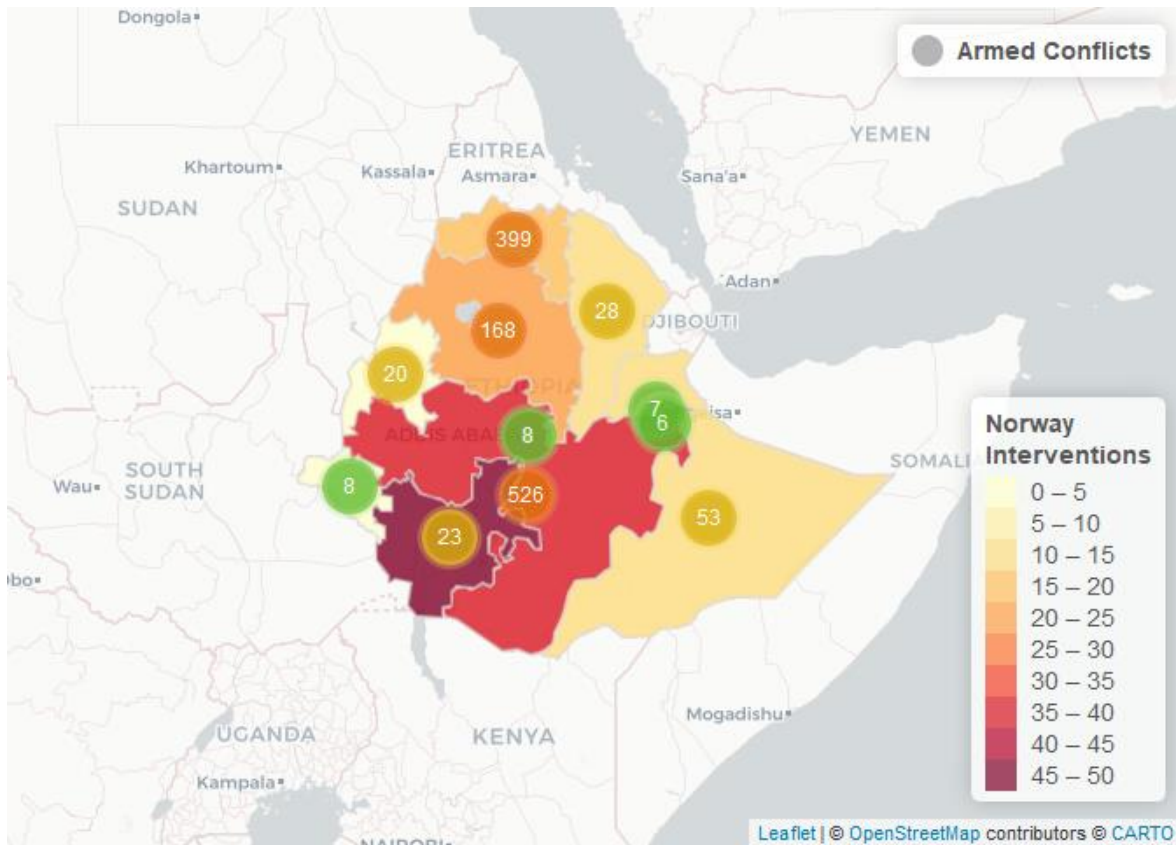
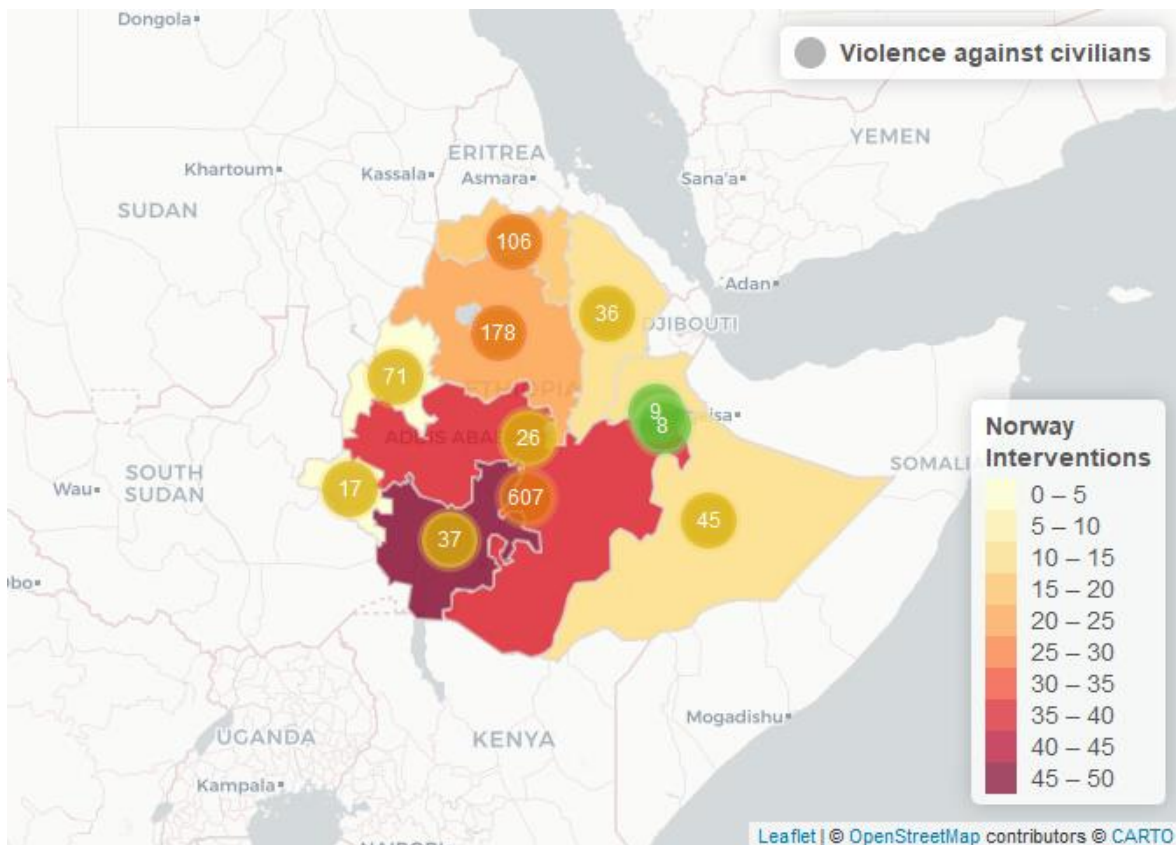


Figure 47. Spatial contextual coherence with violence against civilians (number of interventions and number of crisis 2015-2021).



Finally, the analysis delves into the details of this contextual coherence by year and type of intervention (Figure 48, Figure 49 and Figure 50 for natural disasters, armed conflicts and violence against civilians respectively). The first row in each figure presents the location of the corresponding type of crisis, while the number of interventions of each type is represented by the colour of the administrative area.

As shown in these figures, geo-located interventions in Ethiopia are mainly focused on the development health dimension and scattered throughout the country. Since the location of armed conflicts and violence against civilians changes over time and appear simultaneously in different areas of Ethiopia, it is difficult to establish specific coherence patterns in the case of development health interventions. However, the humanitarian health and peace interventions appear just after the beginning of the civil war in Tigray (2020).

Figure 48. Spatial contextual coherence with natural disasters by year and type of intervention (number of interventions and number of crisis 2015-2021).

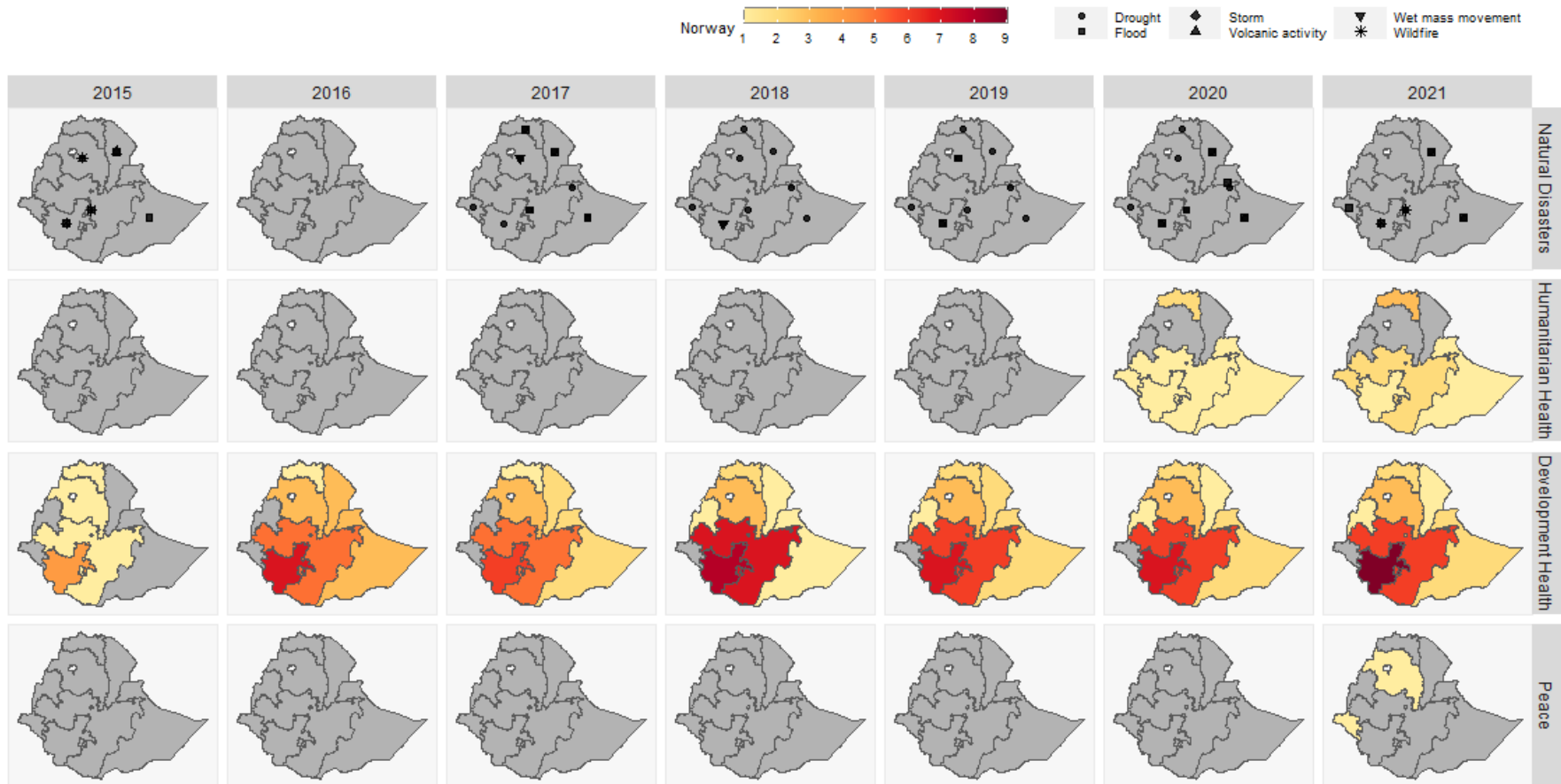


Figure 49. Spatial contextual coherence with armed conflicts by year and type of intervention (number of interventions and number of crisis 2015-2021).

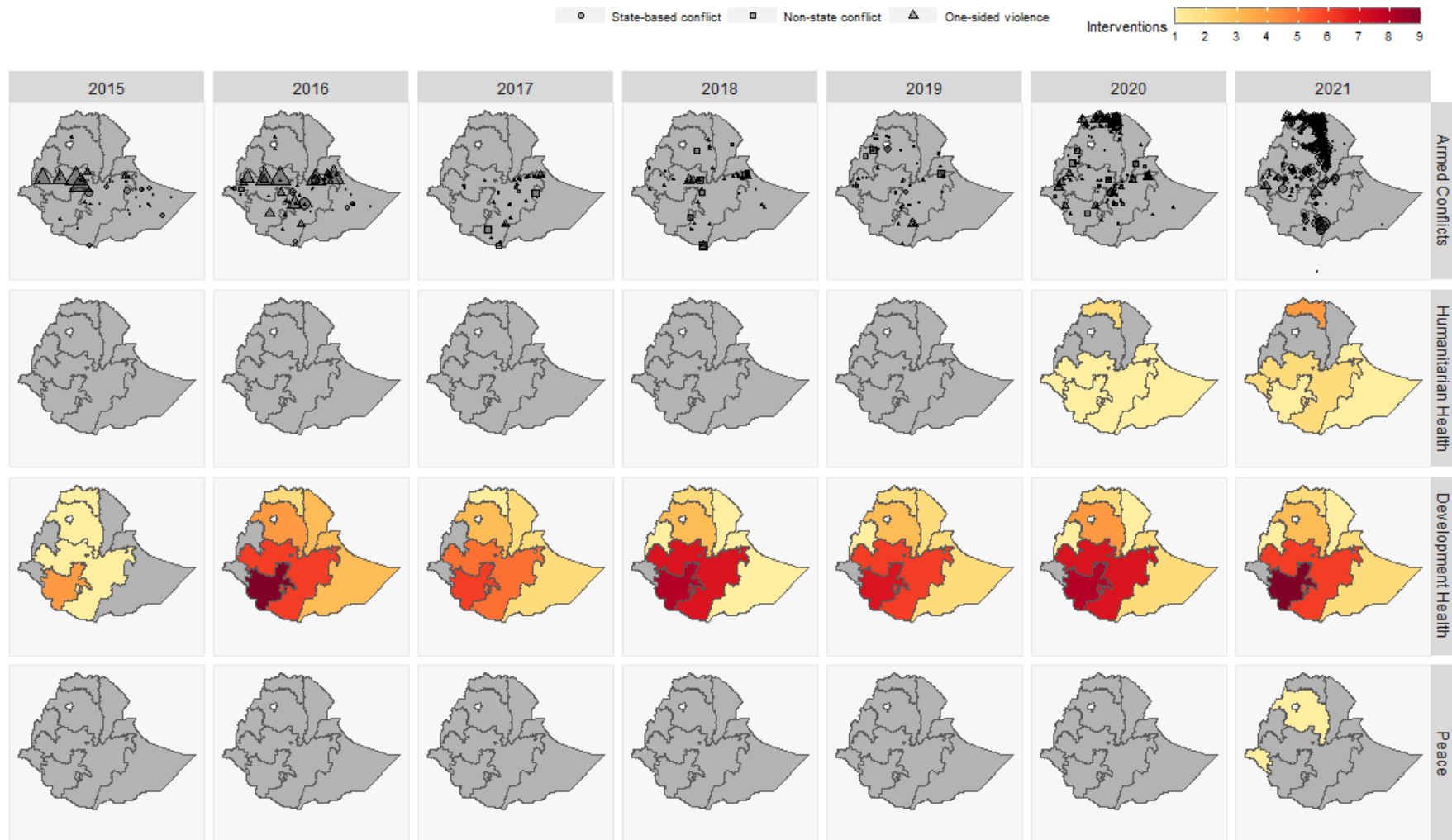
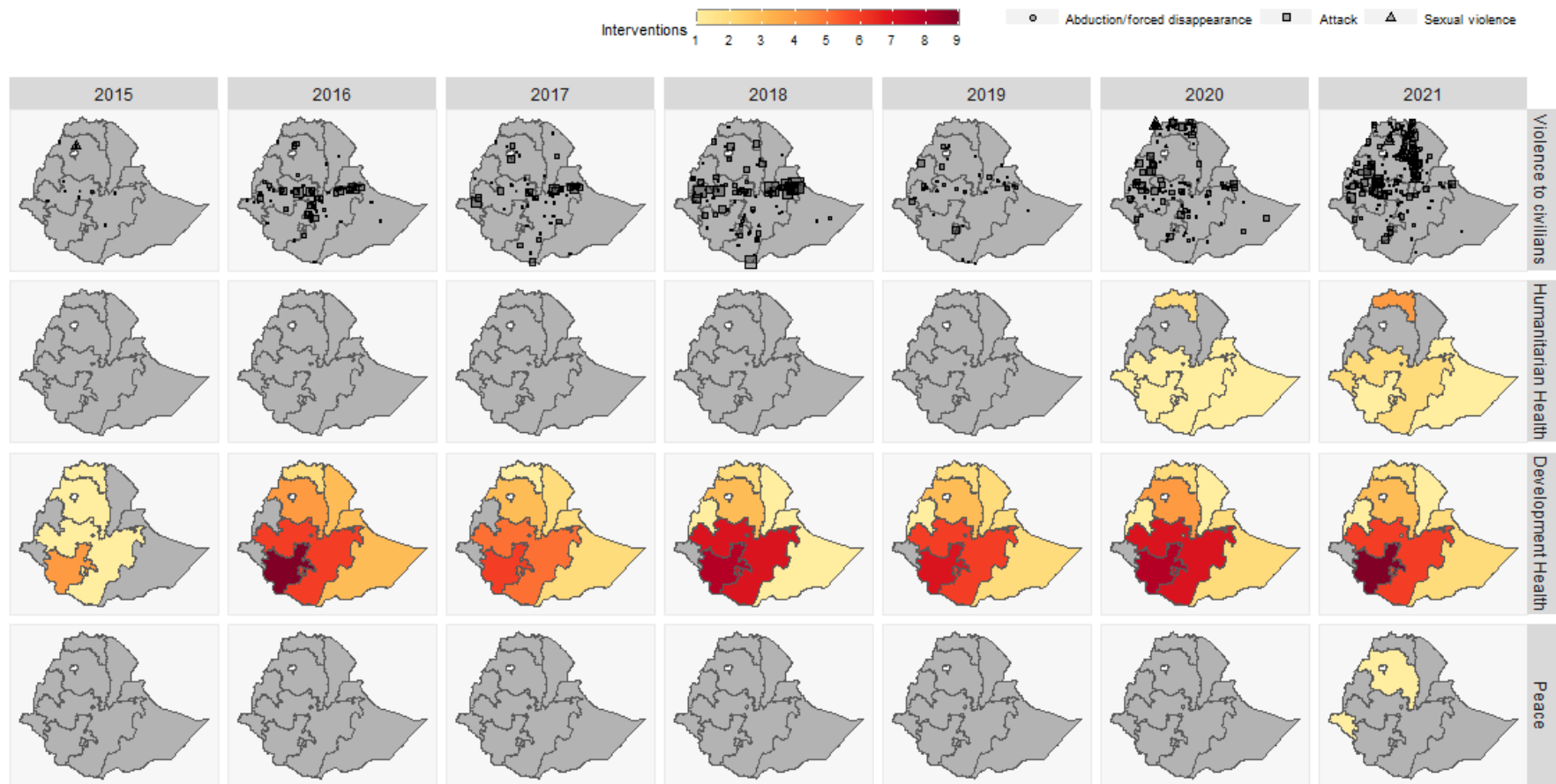


Figure 50. Spatial contextual coherence with violence against civilians by year and type of intervention (number of interventions and number of crisis 2015-2021).



5. Coherence analysis for Lebanon

5.1. Longitudinal coherence of HDP interventions at country level

The analysis of the coherence of the intervention supported by Norway in Lebanon has considered 313 interventions implemented in the period from 2015 to 2021, with a total disbursement of NOK 3,327.37 million.

5.1.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. *Development interventions* are the most frequent in Lebanon over the analysis period and have remained roughly constant over these years with 24 to 30 interventions active in any given year. However, the most significant disbursements have occurred in the case of *humanitarian interventions*, which have also considerably changed over these years, peaking in 2018 at over four times their initial value, to then decrease again. This trend, although less marked, is mirrored in Development interventions, with a slight decrease over the period which ascends towards its end (Figure 51 and Table 18). The differences are explained by larger average expenditures in humanitarian interventions, which at NOK 21.2 million are over three times the average development expenditures. Peace interventions are smaller than these, in both number and value, and this remains constant over the period.

Figure 51. Number of HDP interventions and total disbursement by type of intervention in Lebanon.

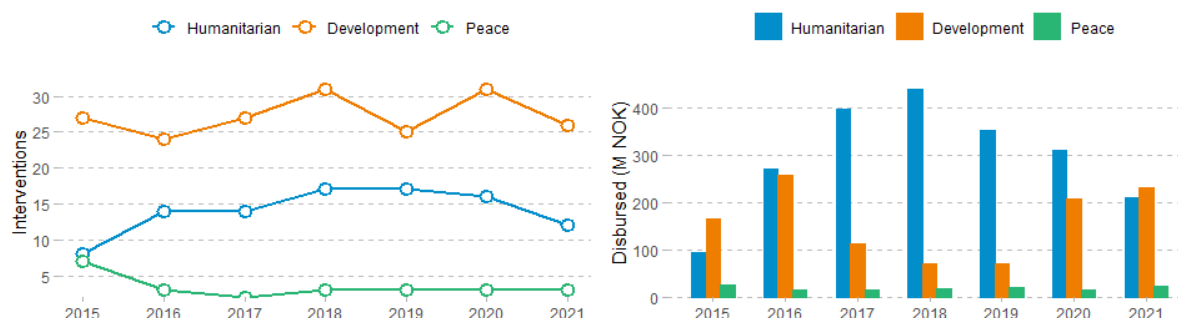


Table 18. HDP interventions supported by Norway in Lebanon.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian	Development	Peace	Total	Humanitarian	Development	Peace	Total
2015	8	27	7	42	93.79	166.06	26.26	286.10
2016	14	24	3	41	271.67	257.90	16.86	546.43
2017	14	27	2	43	396.49	113.17	15.49	525.16
2018	17	31	3	51	439.09	70.54	17.90	527.53
2019	17	25	3	45	352.10	72.03	21.80	445.93
2020	16	31	3	50	308.91	206.89	15.82	531.63
2021	12	26	3	41	209.80	231.89	22.90	464.59
Total	98	191	24	313	2,071.85	1,118.47	137.04	3,327.37

Table 19. Average disbursement (million NOK) per intervention, by type of HDP intervention and year in Lebanon.

Year	Average disbursement (million NOK)		
	Humanitarian	Development	Peace
2015	11.72	6.15	3.75
2016	19.40	10.75	5.62
2017	28.32	4.19	7.75
2018	25.83	2.28	5.97
2019	20.71	2.88	7.27
2020	19.31	6.67	5.27
2021	17.48	8.92	7.63
Total	21.14	5.86	5.71

The interventions financed by Norway in these 7 years were channelled via 73 agreement partners and 90 implementing institutions, which are listed in the Annexes (subsections 8.3 and 9.3, respectively). 86.3% of the interventions are implemented by the agreement partner (82.1% for humanitarian interventions, 88.1% for development and 88.2% for peace interventions). In line with earlier findings, both implementing institutions and agreement partners are more numerous for development interventions (64.1% and 65.8% respectively) followed by humanitarian (17.9% and 16.4%). A significant majority of agreement partners and implementing institutions have participated only in one type of interventions, and this is most evidently the case in development interventions (Figure 52), which indicates a high level of specialisation among partners.

Figure 52. Percentage of agreement partners and implementing institutions participating each combination of types of HDP interventions in Lebanon.

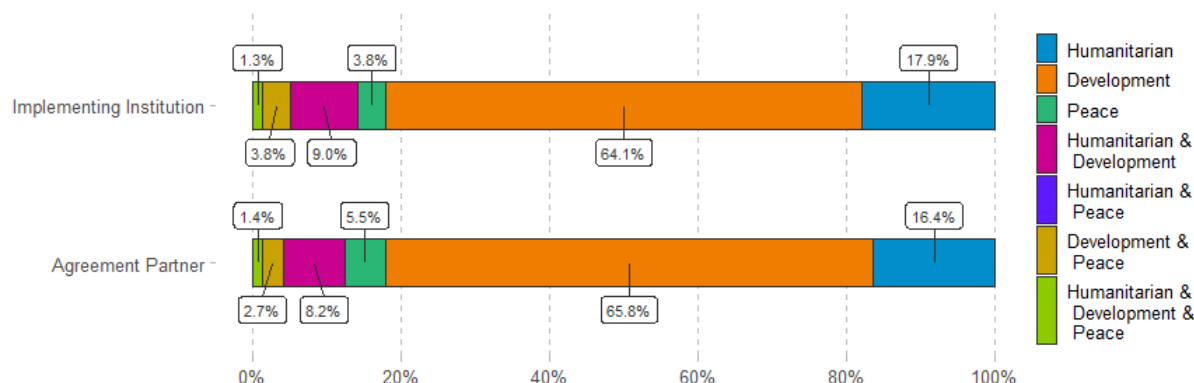
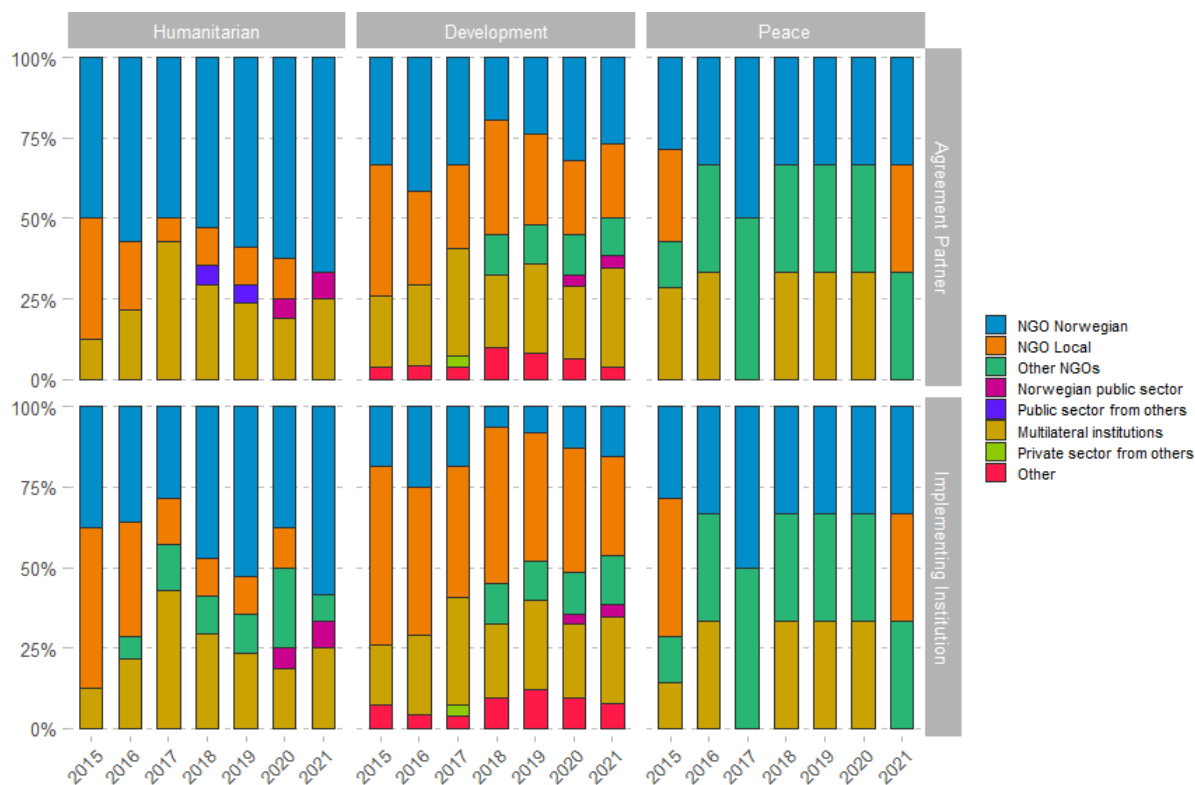


Figure 53¹⁹ presents the disaggregation of the information in Figure 52 by year and type of individual agreement partners and implementing institutions (a detailed table is presented in Annex 10.3.1). This figure shows how local NGOs are not only implementing projects, but also acting as agreement partners, particularly with regards to development and peace interventions. The role of Norwegian NGOs is also relevant as agreement partners, especially for humanitarian interventions.

¹⁹ Other NGOs joins the groups: NGO International, NGO Other donor countries; Public sector from others joins the groups: Public sector in developing countries, Public sector other donor countries; Private sector from others joins the groups: Private sector in developing countries, Private sector in other donor countries; Others joins the groups: Governments/Ministries in developing countries, Public-private partnerships.

Figure 53: Percentage of Agreement Partners and Implementing institutions per type of HDP intervention



5.1.2. Coherence with other donors

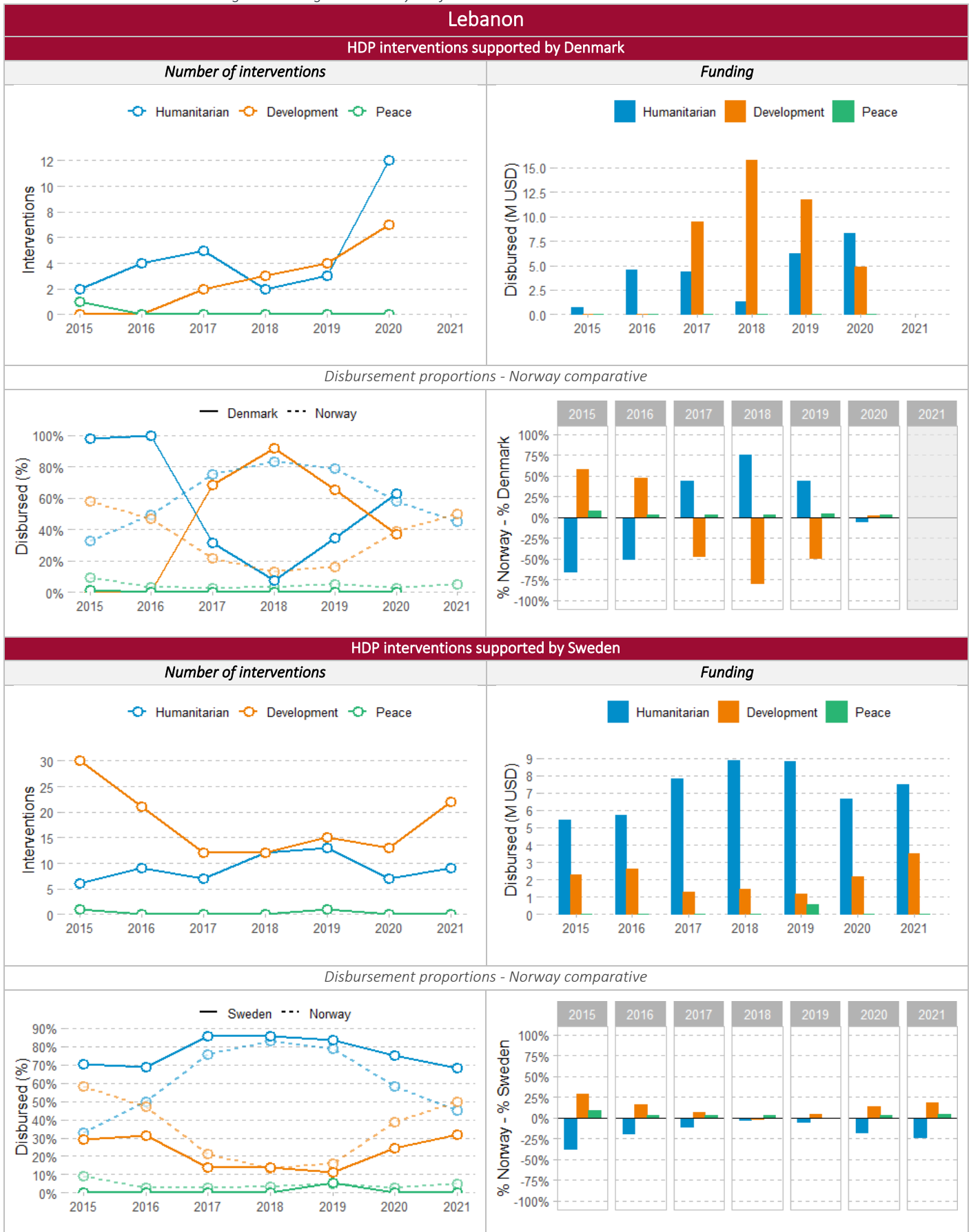
Figure 54 presents the longitudinal coherence of HDP interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, and the aggregation for all donors that have supported at least one HDP intervention in Lebanon according to CRS dataset Table 20). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad, and data for other countries draws from the OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

As shown in Figure 54, disbursement patterns for Norway in Lebanon exhibit similarities to those of Sweden. For all other countries considered, differences emerge. The Netherlands, Denmark and Finland disbursement patterns are opposite to those of Norway, as development predominates over humanitarian. Differences in disbursements done by Germany and the UK are smaller in magnitude, and do not elucidate such a clear pattern. A comparison with the aggregated disbursement patterns of all donors in Lebanon (last panel in Figure 54) evidence that although predominance for development interventions is shared, the disbursed amounts reflect opposite trends.

Table 20. Donors of at least one HDP intervention implemented in Lebanon, 2015 - 2021 (Source: CRS).

All donors			
Adaptation Fund	European Bank for Reconstruction and Development	John D. & Catherine T. MacArthur Foundation	Slovenia
Arab Fund (AFESD)	Finland	Korea	Spain
Arcus Foundation	Food and Agriculture Organisation	Kuwait	Sweden
Australia	Ford Foundation	Latvia	Swedish Postcode Lottery
Austria	France	Lithuania	Switzerland
Azerbaijan	Germany	Luxembourg	Thailand
Belgium	Global Environment Facility	Malta	Türkiye
Bernard van Leer Foundation	Greece	Mastercard Foundation	UBS Optimus Foundation
Bill & Melinda Gates Foundation	Green Climate Fund	MAVA Foundation	UN Peacebuilding Fund
Bulgaria	H&M Foundation	MetLife Foundation	UNDP
Canada	Hungary	Netherlands	UNFPA
Carnegie Corporation of New York	Iceland	New Zealand	UNHCR
Central Emergency Response Fund	IFAD	Norway	UNICEF
Citi Foundation	International Atomic Energy Agency	Oak Foundation	United Arab Emirates
Conrad N. Hilton Foundation	International Bank for Reconstruction and Development	OPEC Fund for International Development	United Kingdom
Croatia	International Development Association	People's Postcode Lottery	United Nations Industrial Development Organization
Cyprus	International Labour Organisation	Poland	United States
Czech Republic	Ireland	Portugal	UNRWA
Denmark	Islamic Development Bank	Qatar	WFP
Dutch Postcode Lottery	Israel	Romania	World Diabetes Foundation
Estonia	Italy	Saudi Arabia	World Health Organisation
EU Institutions	Japan	Slovak Republic	

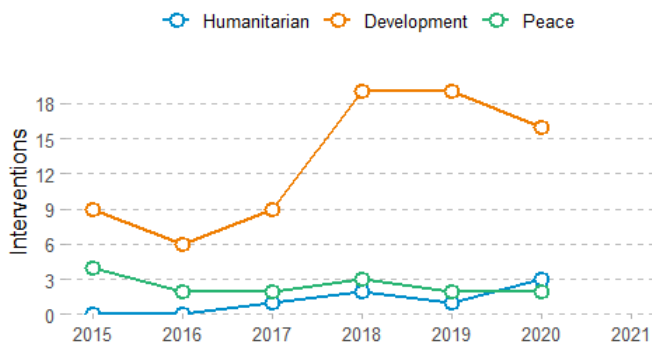
Figure 54. Longitudinal analysis of HDP coherence with other donors in Lebanon.



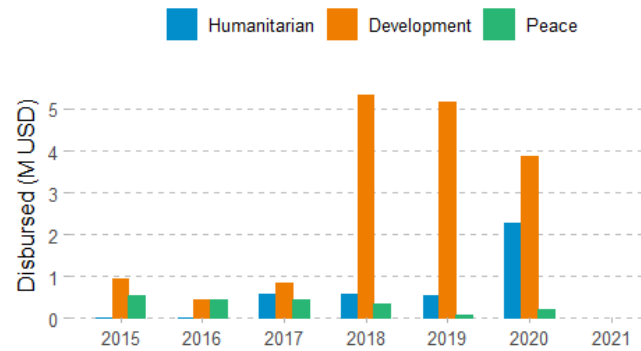
Lebanon

HDP interventions supported by Finland

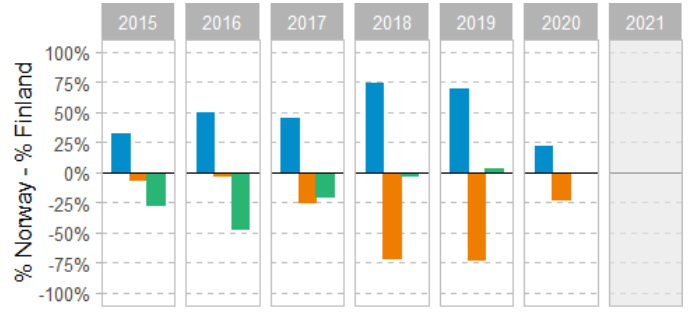
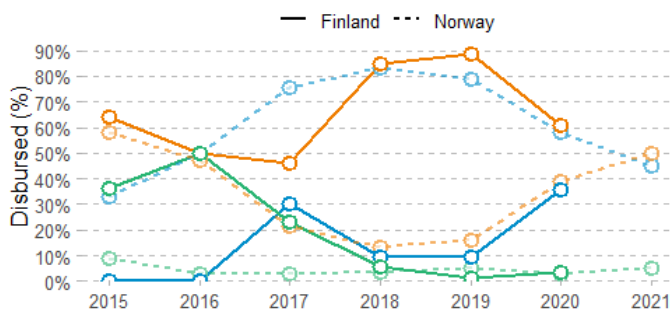
Number of interventions



Funding

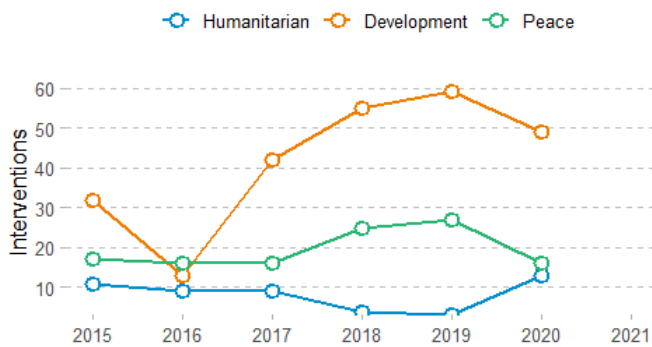


Disbursement proportions - Norway comparative

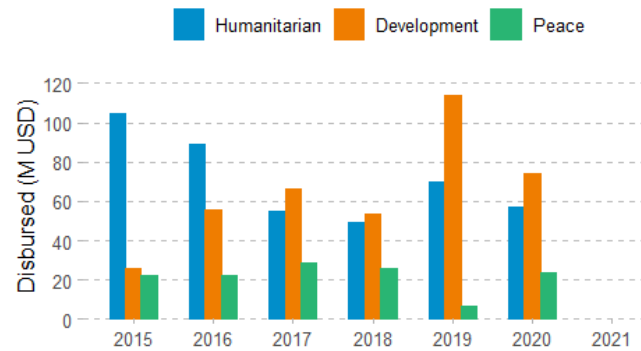


HDP interventions supported by United Kingdom

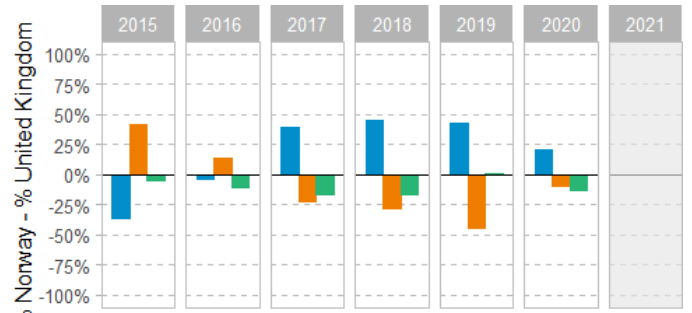
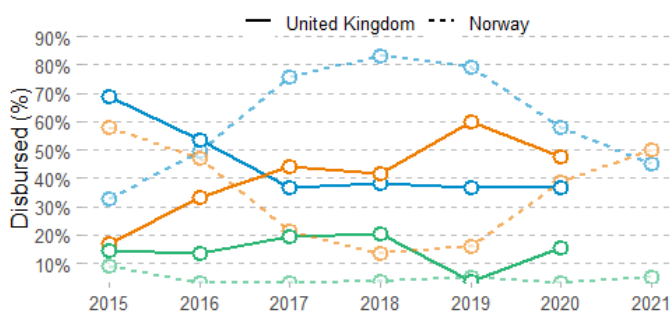
Number of interventions



Funding



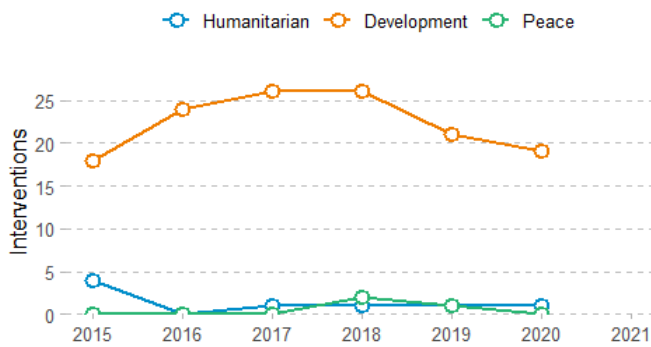
Disbursement proportions - Norway comparative



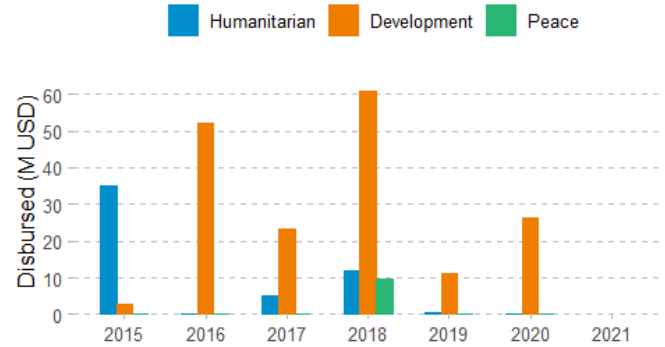
Lebanon

HDP interventions supported by Netherlands

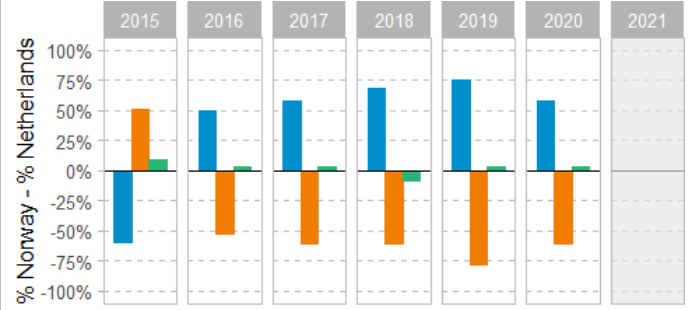
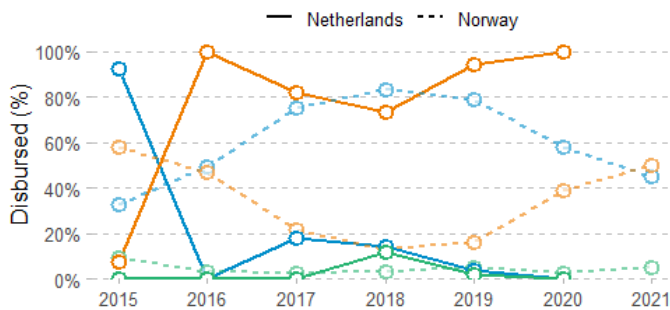
Number of interventions



Funding

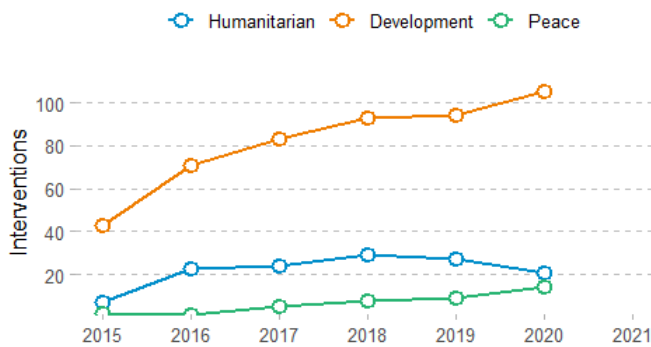


Disbursement proportions - Norway comparative

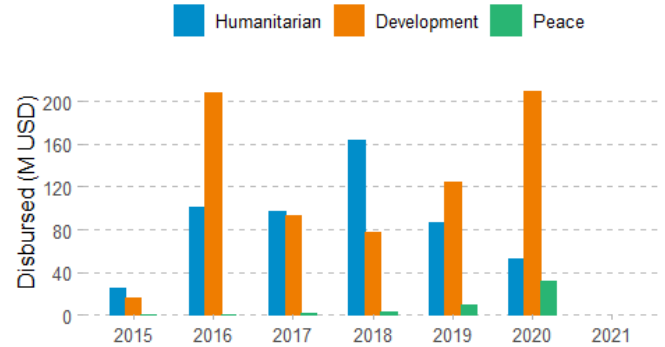


HDP interventions supported by Germany

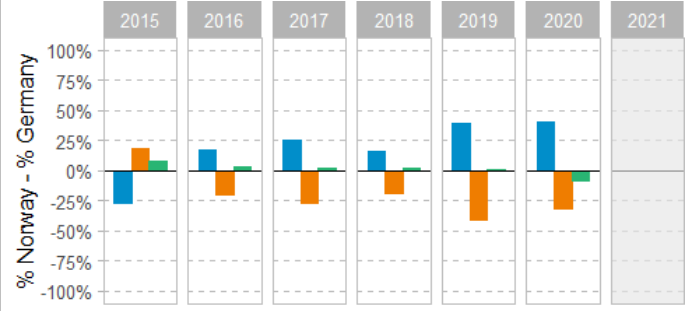
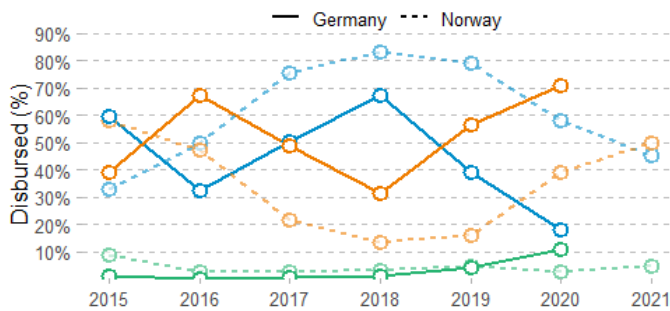
Number of interventions



Funding



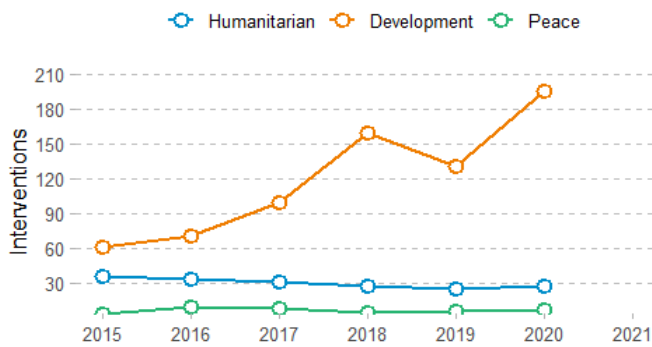
Disbursement proportions - Norway comparative



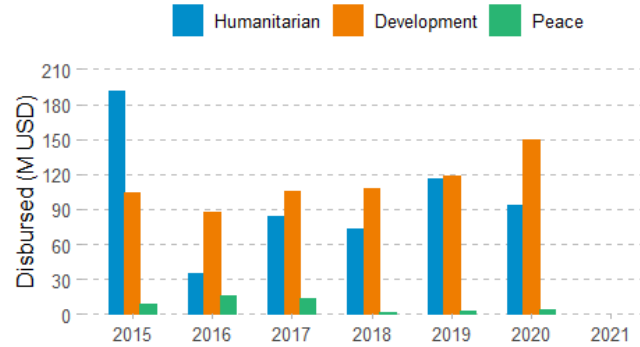
Lebanon

HDP interventions supported by United States

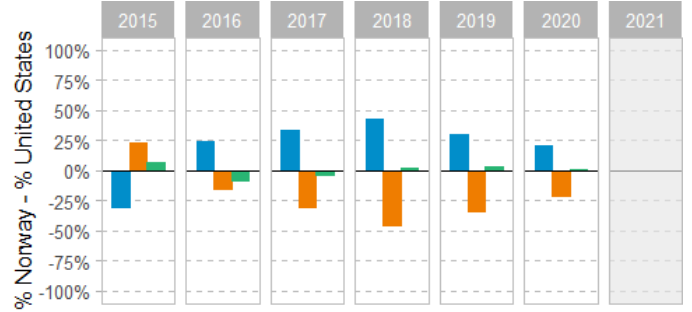
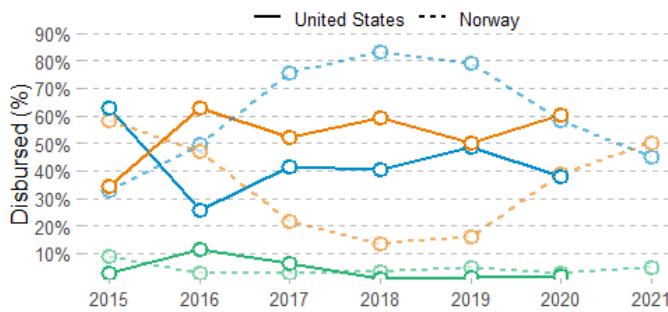
Number of interventions



Funding

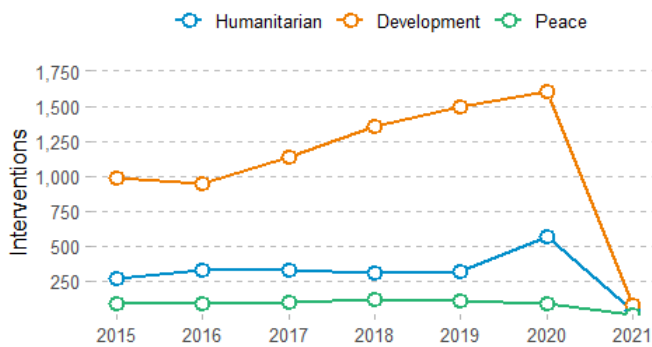


Disbursement proportions - Norway comparative

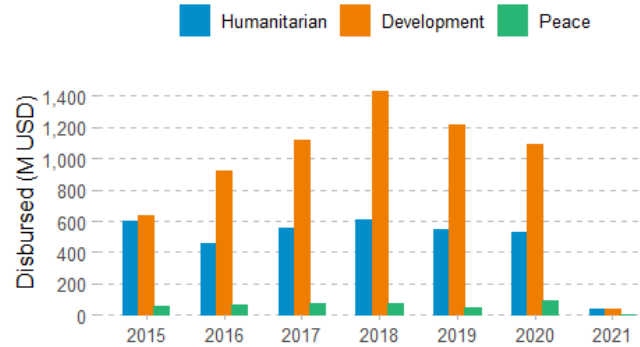


Aggregated HDP interventions supported by all donors.

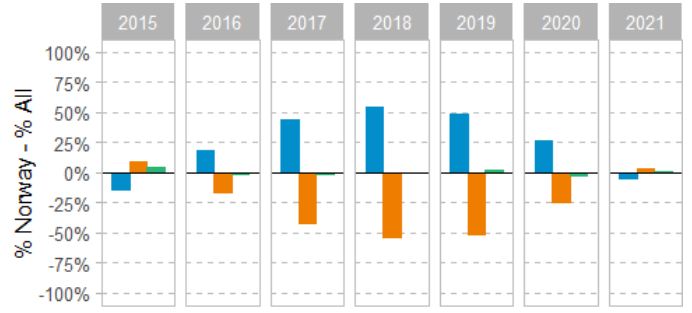
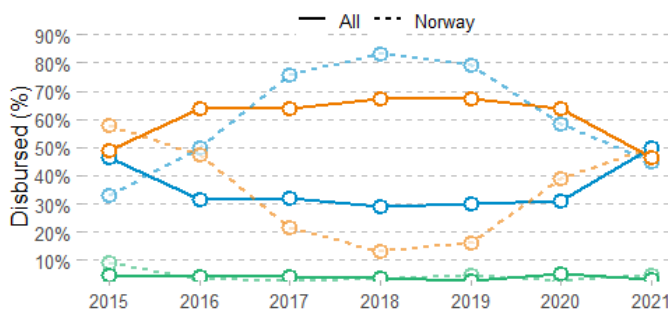
Number of interventions



Funding



Disbursement proportions - Norway comparative



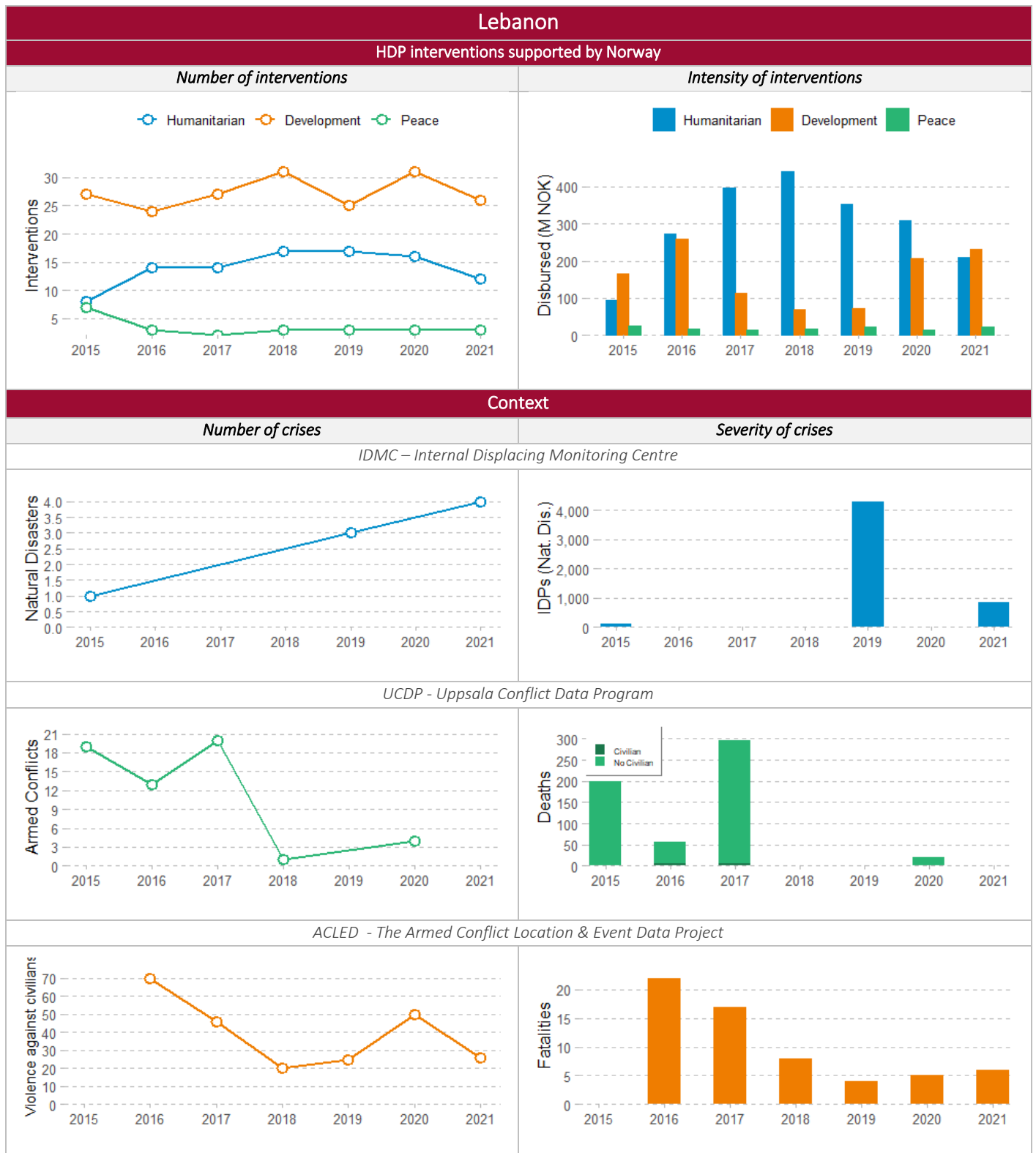
5.1.3. Contextual coherence

This section discusses the change over time (2015-2021) of each intervention type in comparison to selected crises over that period, including natural disasters, armed conflicts, and violence against civilians. For the purposes of this analysis, the intensity of the interventions is measured in million NOK disbursed, and the severity of the crises is calculated in a tailored manner for each crisis type: IDPs in the case of natural disasters (as presented in the Internal Displacing Monitoring Centre), number of deaths for armed conflicts (as available in Uppsala Conflict Data Program), and fatalities for violence against civilians (as per the Armed Conflict Location & Event Data Project) (see subsection 2.2).

During the first three years (2015 to 2017), the country endured conflicts resulting from political violence and protest events (Figure 55). A series of armed conflicts have been active during these. Additionally at the end of this period (2019 and 2021), Lebanon suffered also natural disasters. The explosion in Beirut port (2020) added more complexity to the already dire situation in the country.

Thus, despite their different nature, crises, of varied severity, have been ongoing in the country throughout this period. From this analysis of contextual coherence in response to selected crises, it is not clear what explains the changes (increase and later decrease) of humanitarian expenditures.

Figure 55. Longitudinal analysis of HDP contextual coherence in Lebanon.



5.2. Longitudinal coherence of health and peace interventions at country level

For this section, the analysis focuses on the coherence of peace interventions with specific subsets of humanitarian and development ones, namely, those focused on Health. In this case the coherence analysis of health and peace interventions supported by Norway in Lebanon has considered 124 interventions implemented between 2015 and 2021, consisting of a total disbursement of NOK 2,063.3 million.

5.2.1. Coherence among types of intervention

This first coherence analysis draws on indicators selected to measure their magnitude according to the total number of interventions and their disbursement, and the results offer new insights. In this case, humanitarian health interventions are most prevalent, both in terms of number and disbursement. (Figure 56 and Table 21). Disbursement in humanitarian health remains roughly constant over the period at around 250 to 290 million NOK, with two marked exceptions, a peak in 2018 (in line with the findings in the earlier section), and a sharp increase between 2015 and 2016 where disbursement more than doubles. The pattern in development health is too slightly different to that observed in the complete development sector, as it remains roughly stable over the years and below 50 million NOK, but rises significantly in 2020 and 2021 to 150 million NOK. Interestingly the number of development health interventions does not follow this same pattern, which indicates a much larger average expenditure per intervention in the last two years. Again, in terms of average expenditure, humanitarian health exhibits the larger average expenditures, and its fluctuation although noticeable is less marked over time. (Table 22).

Figure 56. Number of health and peace interventions and total disbursement (million NOK) by type of intervention in Lebanon.

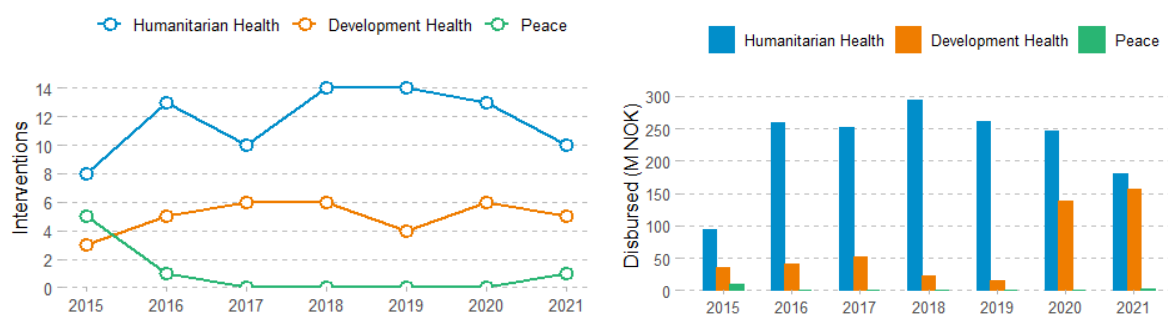


Table 21. Health and peace interventions supported by Norway in Lebanon.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian Health	Development Health	Peace	Total	Humanitarian Health	Development Health	Peace	Total
2015	8	3	5	16	93.79	36.30	10.76	140.84
2016	13	5	1	19	259.67	41.25	0.36	301.28
2017	10	6	0	16	251.37	52.12	0.00	303.50
2018	14	6	0	20	293.59	23.20	0.00	316.79
2019	14	4	0	18	260.60	15.43	0.00	276.03
2020	13	6	0	19	246.20	139.12	0.00	385.32
2021	10	5	1	16	180.88	156.22	2.40	339.50
Total	82	35	7	124	1,586.10	463.66	13.52	2,063.28

Table 22. Average disbursement (million NOK) by type of Health and peace intervention and year in Lebanon.

Year	Average disbursement (million NOK)		
	Humanitarian Health	Development Health	Peace
2015	11.72	12.10	2.15
2016	19.97	8.25	0.36
2017	25.14	8.69	0.00
2018	20.97	3.87	0.00
2019	18.61	3.86	0.00
2020	18.94	23.19	0.00
2021	18.09	31.24	2.40
Total	19.34	13.25	1.93

The interventions financed by Norway in the 7 years included 29 agreement partners and 36 implementing institutions²⁰. 82.9% of the interventions are implemented by the agreement partner (84.0% for humanitarian health interventions, 85.0% for development health and 66.7% for peace interventions). Again, in this case, the analysis indicates certain degree of specialisation among agreement partners and implementing institution, as most of them intervened in only one of these three domains. Exceptionally, humanitarian health is combined with development health (16.7% implementing institutions and 10.3% agreement partners), and development health is combined with peace (3.3% implementing institutions and 3.4% agreement partners). There are no combinations of humanitarian health and peace, and no cases of an agreement partner or implementing institution participating in all three types of interventions. (Figure 57).

Figure 57. Percentage of agreement partners and implementing institutions participating each combination of types of interventions in Lebanon.

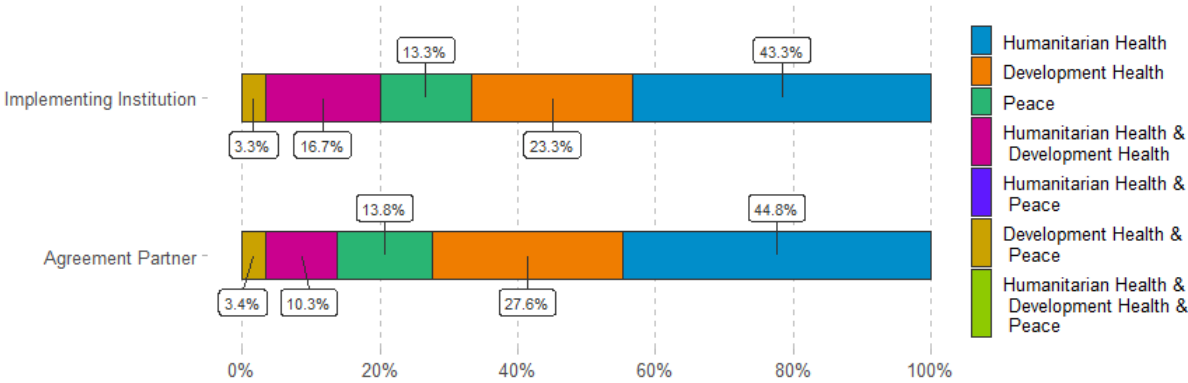
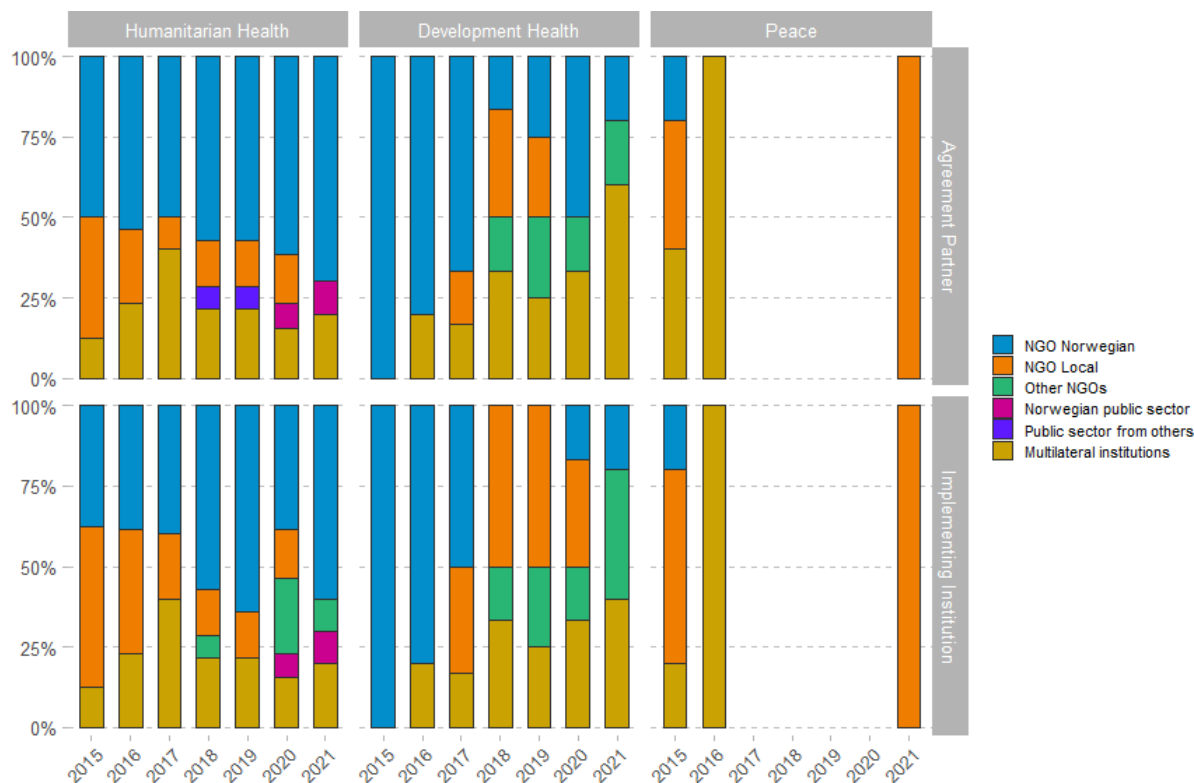


Figure 58²¹ presents the disaggregation of the information in Figure 56 by year and type of individual agreement partners and implementing institutions (a detailed table is presented in Annex 10.3.2). A number of relevant findings emerge from this nuanced analysis. First, humanitarian health interventions are agreed and implemented with a combination of Norwegian NGOs and multilateral organisations, with local NGOs being more prevalent in the earlier years of implementation. Also, Developmental health interventions are agreed with a majority of Norwegian NGOs (in fact exclusively in the first year), more evident in the earlier years, and implemented more variedly, again starting with exclusively Norwegian NGOs and diversifying over

²⁰ Exclusion Policy: Due to security reasons, no further details can be provided.
²¹ Other NGOs joins the groups: NGO International, NGO Other donor countries; Public sector from others joins the groups: Public sector in developing countries, Public sector other donor countries.

time to a combination of these with local NGOs, multilaterals, and NGOs both from other countries and international, but not local.

Figure 58. Percentage of Agreement Partner and Implementing institutions per type of health and peace intervention



5.2.2. Coherence with other donors

Figure 59 presents the longitudinal coherence of health and peace interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, and the aggregation for all donors that have supported at least one health and peace intervention in Lebanon according to CRS dataset (Table 23). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad and the data for other countries from OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

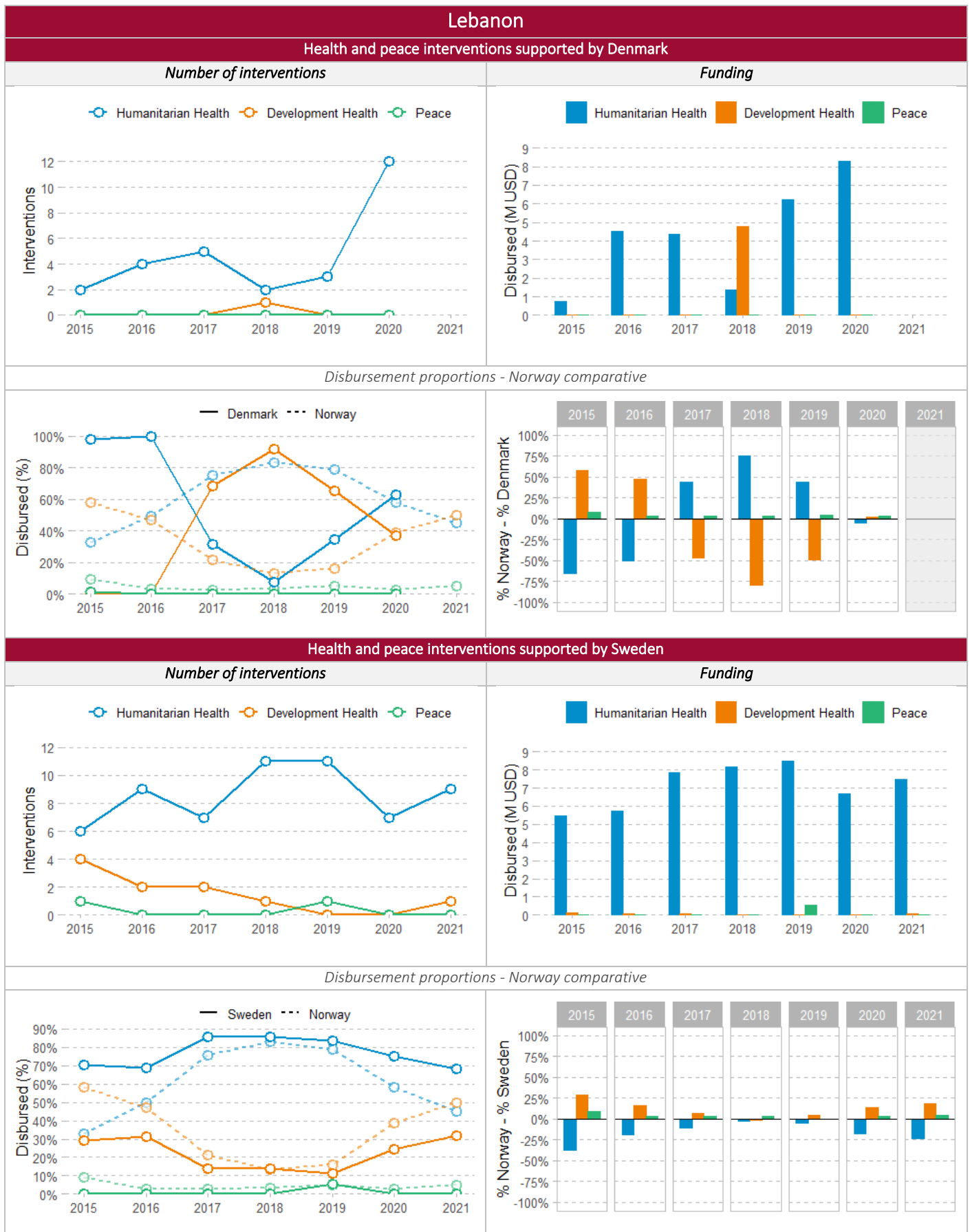
In this case, the compared analysis against other countries offers the most similarities with worldwide and US expenditure. In terms of intervention numbers, Norway is aligned to all other comparator countries except Finland in the predominance of humanitarian health over developmental health. However, there are

more nuances in terms of disbursement. Although generally in line with Germany and the US, there are marked differences in Denmark (in 2018), increasing differences over time with Sweden, recurrent differences with Finland.

Table 23. Donors of at least one health and peace intervention implemented in Lebanon, 2015 – 2021 (Source: CRS).

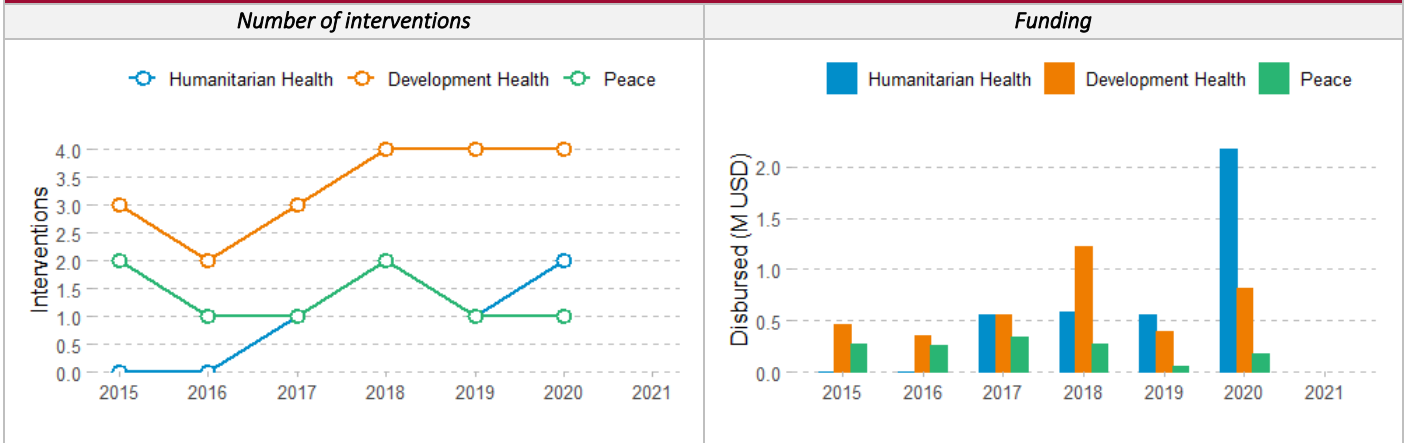
All donors			
Arab Fund (AFESD)	EU Institutions	Lithuania	Switzerland
Australia	Finland	Luxembourg	Türkiye
Austria	Ford Foundation	Netherlands	UBS Optimus Foundation
Azerbaijan	France	New Zealand	UN Peacebuilding Fund
Belgium	Germany	Norway	UNDP
Bernard van Leer Foundation	H&M Foundation	OPEC Fund for International Development	UNFPA
Bill & Melinda Gates Foundation	Hungary	People's Postcode Lottery	UNHCR
Canada	Iceland	Poland	UNICEF
Central Emergency Response Fund	International Bank for Reconstruction and Development	Portugal	United Arab Emirates
Citi Foundation	International Labour Organisation	Qatar	United Kingdom
Conrad N. Hilton Foundation	Ireland	Romania	United States
Croatia	Italy	Saudi Arabia	UNRWA
Cyprus	Japan	Slovak Republic	WFP
Czech Republic	Korea	Slovenia	World Diabetes Foundation
Denmark	Kuwait	Spain	World Health Organisation
Estonia	Latvia	Sweden	

Figure 59. Longitudinal analysis of health and peace coherence with other donors in Lebanon.

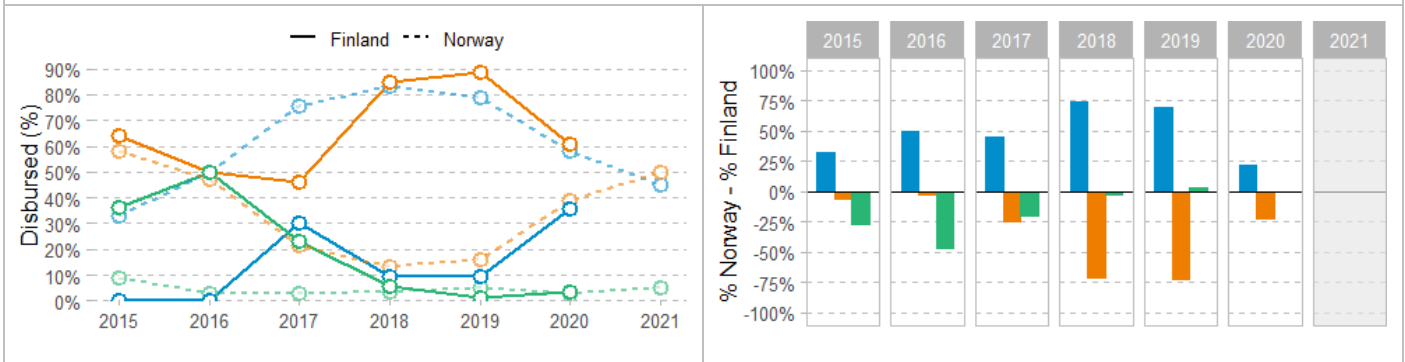


Lebanon

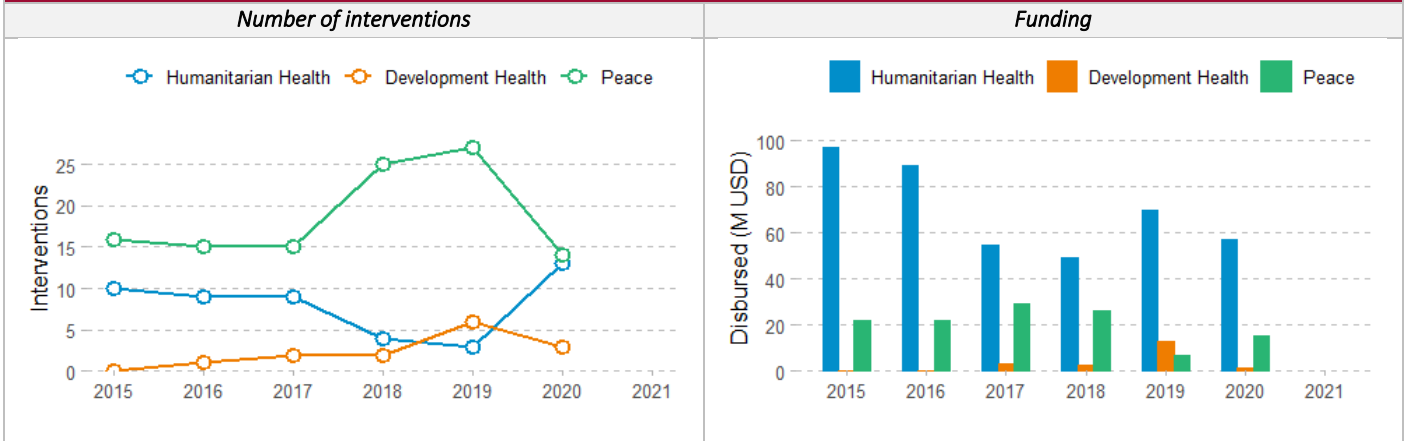
Health and peace interventions supported by Finland



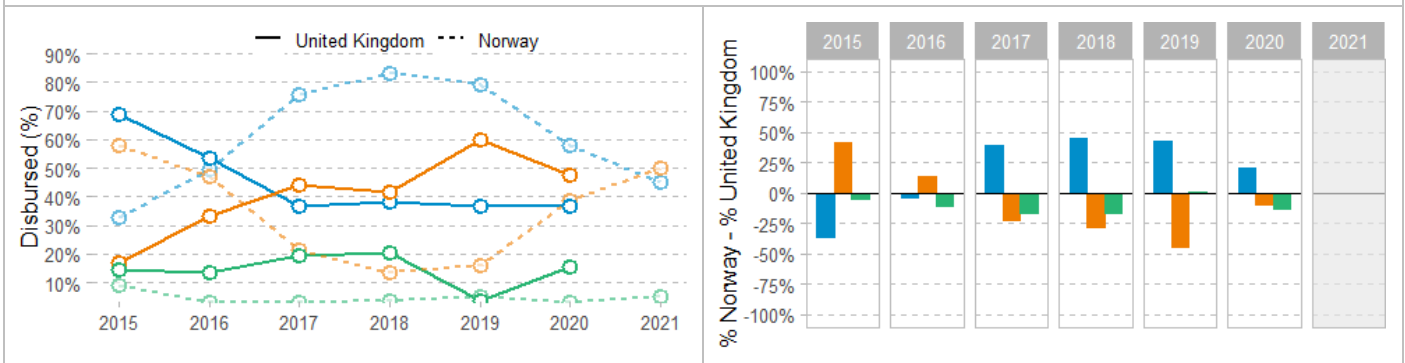
Disbursement proportions - Norway comparative



Health and peace interventions supported by United Kingdom



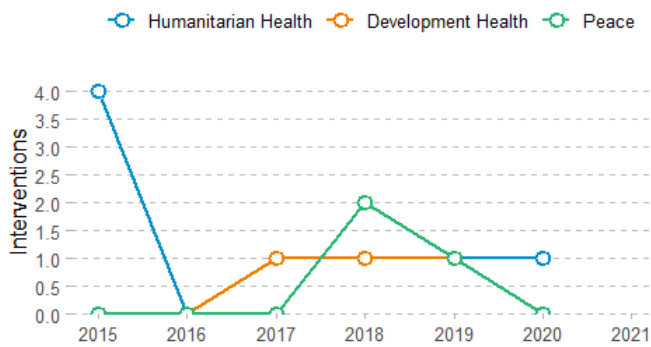
Disbursement proportions - Norway comparative



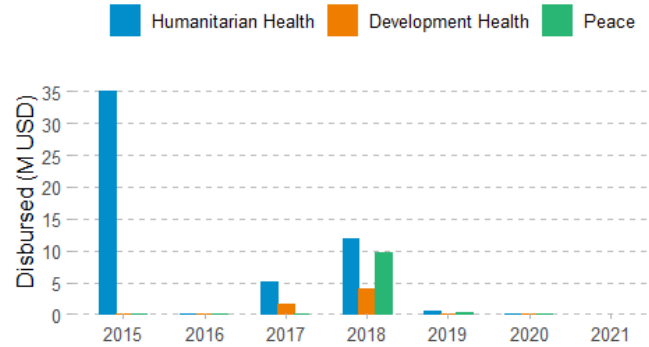
Lebanon

Health and peace interventions supported by Netherlands

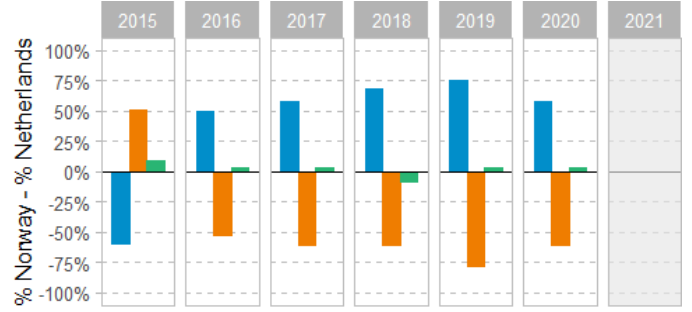
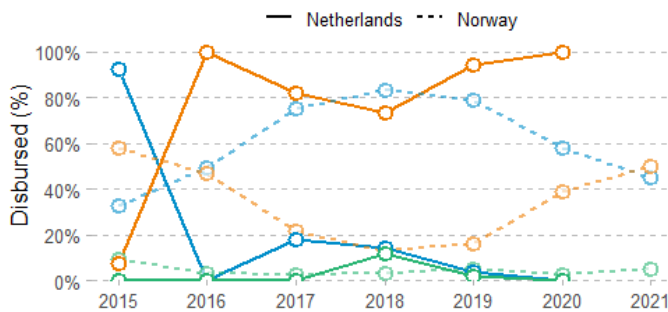
Number of interventions



Funding

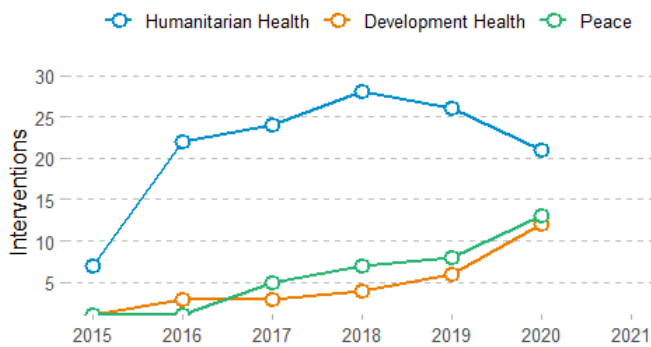


Disbursement proportions - Norway comparative

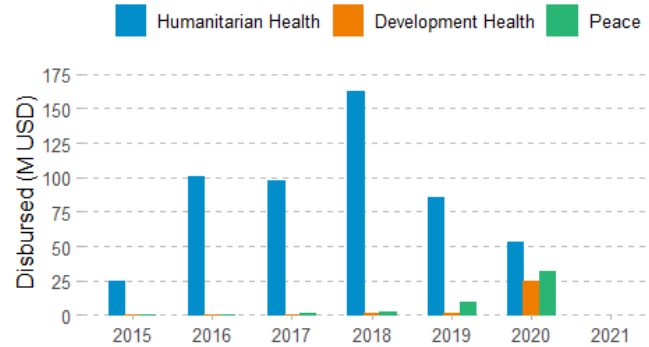


Health and peace interventions supported by Germany

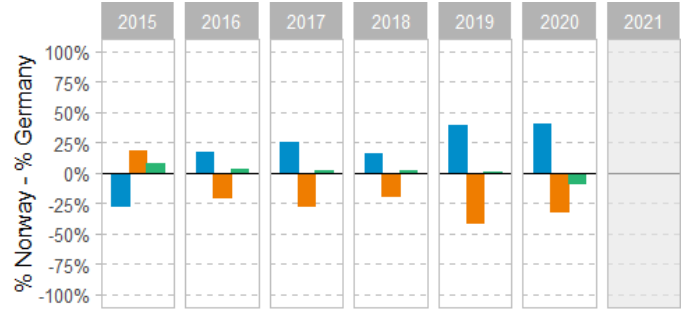
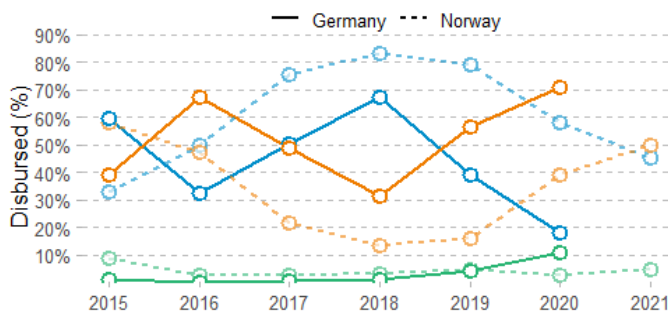
Number of interventions



Funding



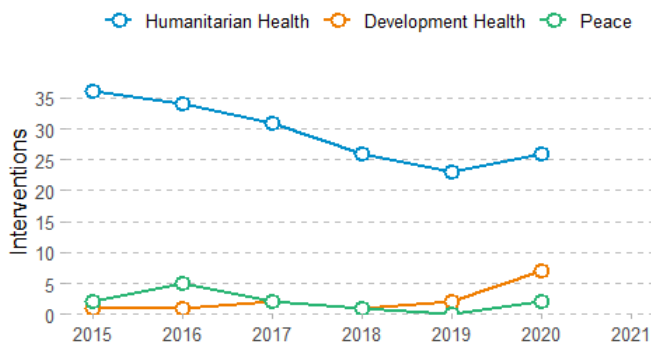
Disbursement proportions - Norway comparative



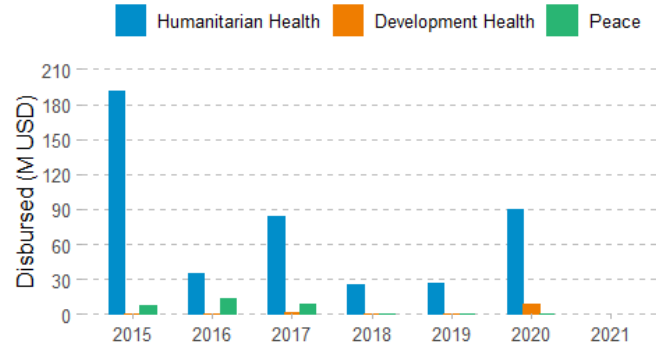
Lebanon

Health and peace interventions supported by United States

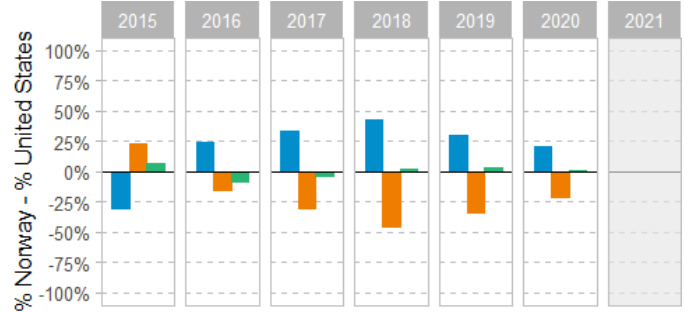
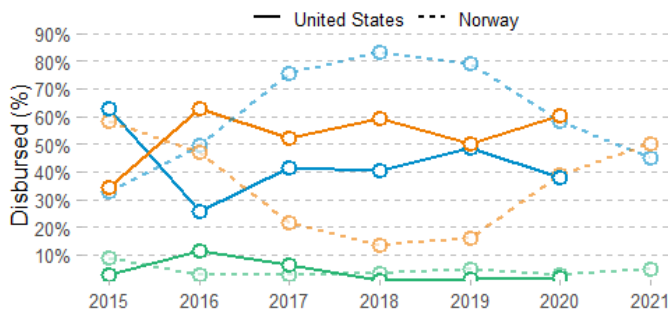
Number of interventions



Funding

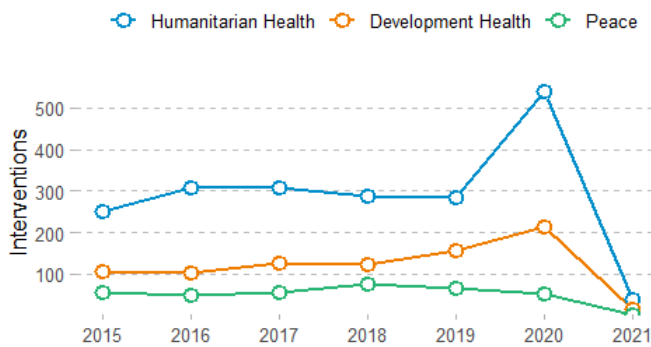


Disbursement proportions - Norway comparative

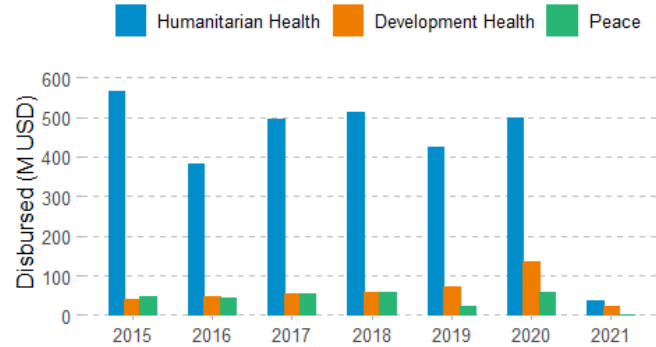


Aggregated health and peace interventions supported by all donors

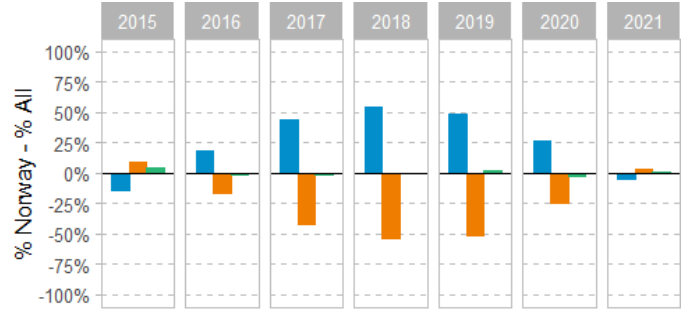
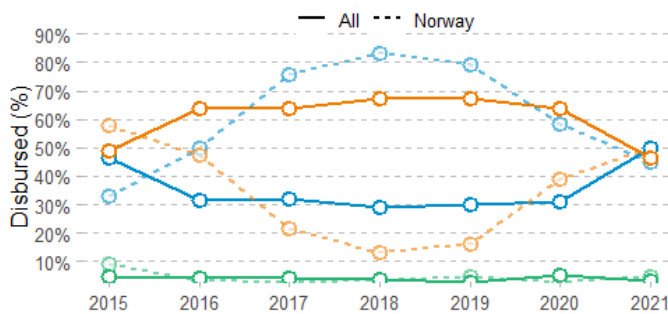
Number of interventions



Funding



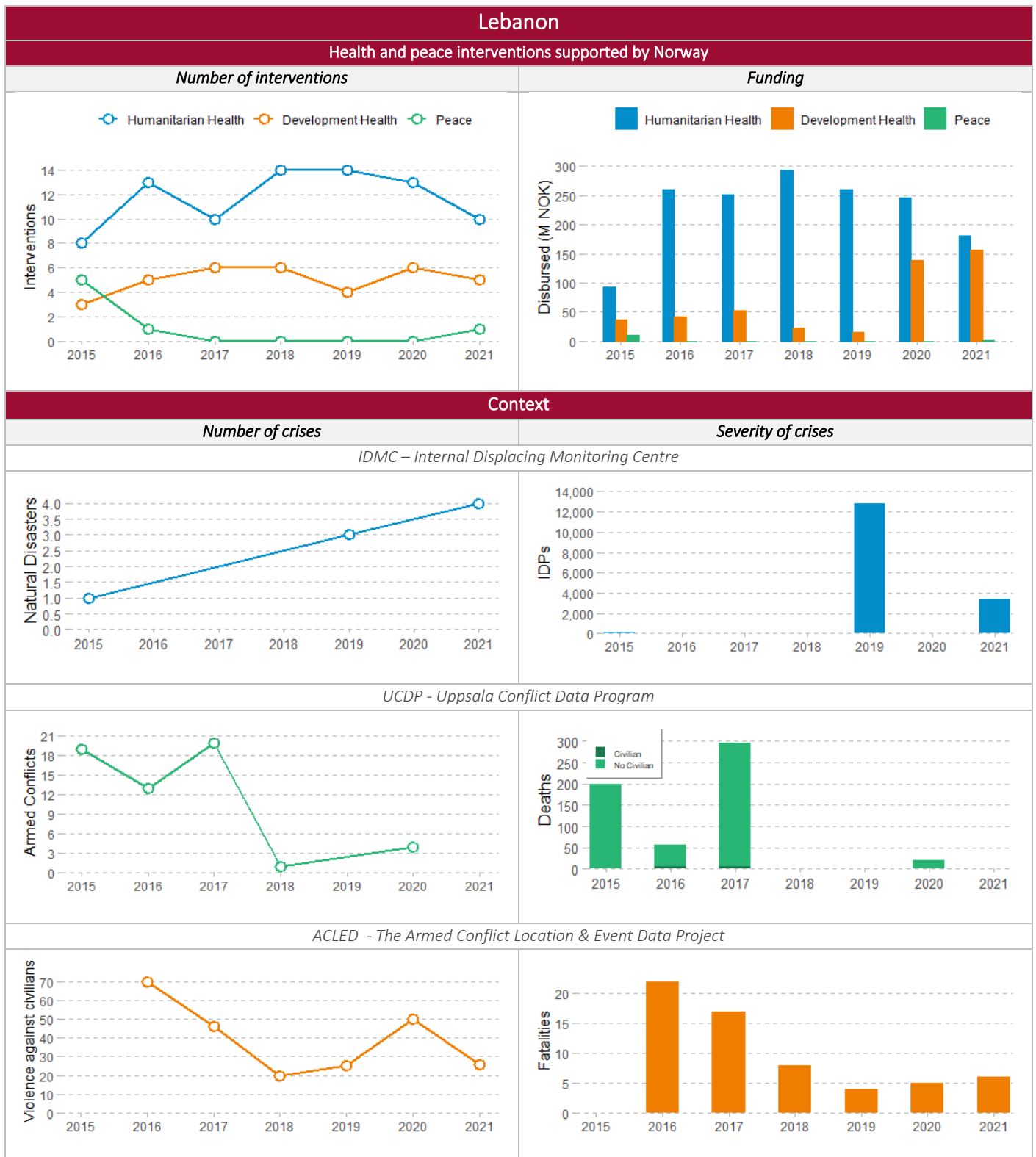
Disbursement proportions - Norway comparative



5.2.3. Contextual coherence

The results of this analysis are in line with those of the contextual coherence of the humanitarian and development fields. That is, although the last two years have seen a decrease in humanitarian health coupled with an increase of developmental health, these do not seem to be explained by the presence or severity of ongoing crises.

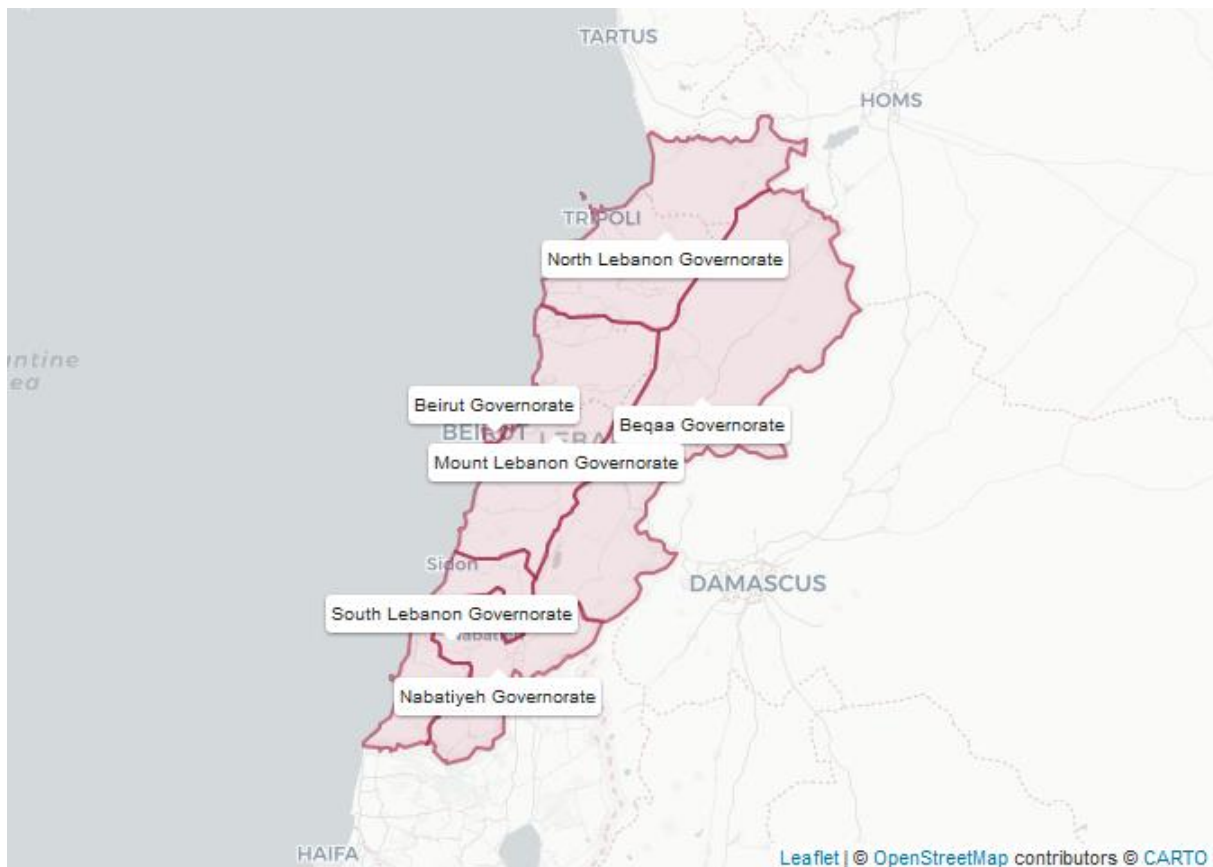
Figure 60. Longitudinal analysis of health and peace contextual coherence in Lebanon.



5.3. Spatial coherence of health and peace interventions at sub-national level

This section presents the results of the spatial coherence analysis interventions supported by Norway in Lebanon according to their geographical presence, on the basis of geo-located data. It considers the administrative areas at the first disaggregation level 1 shown in Figure 61, as per the Department of Evaluation's, the unit of analysis. These boundaries are described in Figure 61. Administrative areas at level 1 in Lebanon (ADM1 - Source: geoBoundaries). The analysis has been implemented at the administrative areas in the country at level 1. Out of the 124 interventions included in the dataset provided by the Department for Evaluation at Norad, 70 interventions are geo-located in an administrative area at level 1 and have been used for the spatial analysis.

Figure 61. Administrative areas at level 1 in Lebanon (ADM1 - Source: geoBoundaries).



5.3.1. Spatial coherence among types of interventions

As shown in Figure 62 and Figure 63, the geo-located analysis reveals that the Nabatiyeh Governorate receives exclusively humanitarian health interventions, whereas the rest of the regions combine humanitarian health (predominately) with development health. The North Lebanon governorate benefited from one peace intervention in 2015, being the only location to have received all three types of interventions. The more granular analysis reveals that this was specifically in Tripoli.

These figures also locate the increase in humanitarian health interventions in 2018 and 2019, and reveal that the general decrease in developmental health interventions is geographically widespread.

Figure 62. Distribution of the number of health and peace interventions by type of intervention, year and administrative area at level 1 (From 0=0% to 1=100%; ratios add up 1 for the three types of intervention in each area and year).

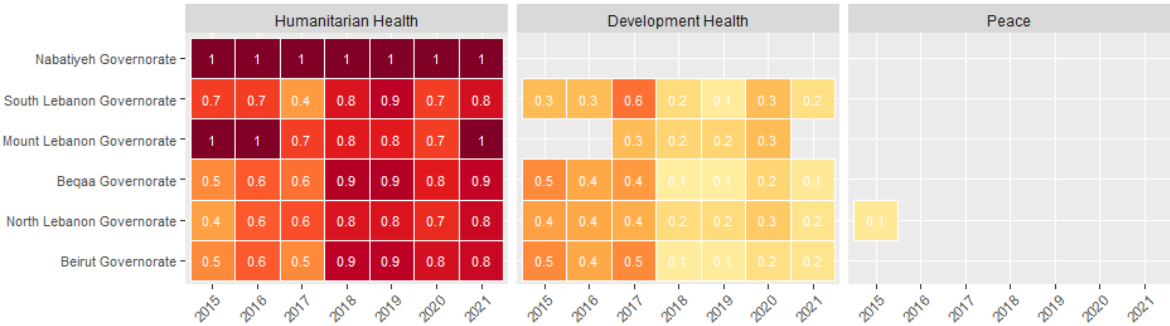
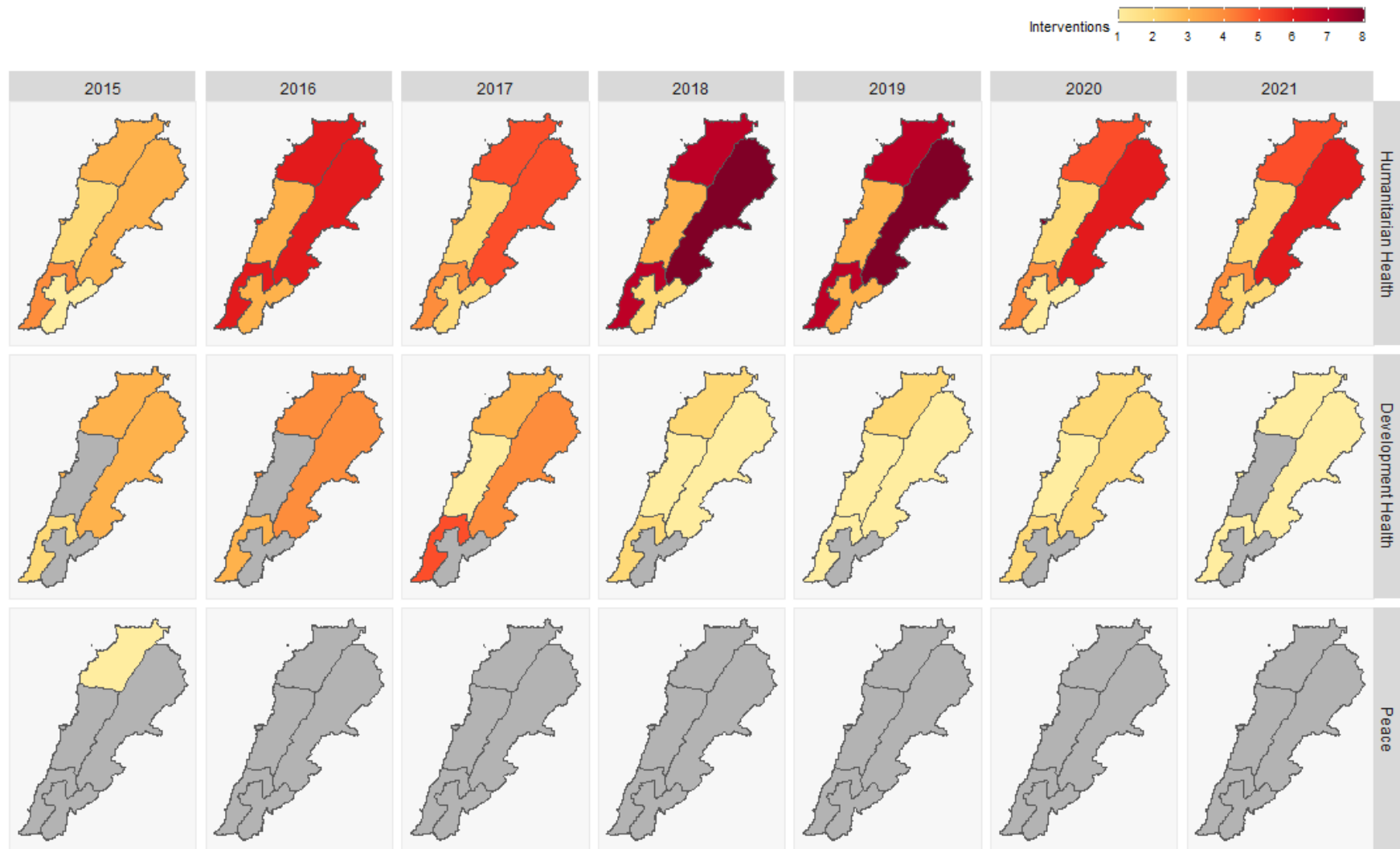


Figure 63. Number of Health and peace interventions by type of intervention and year at administrative level 1 in Lebanon



5.3.2. Coherence with other donors and multilateral institutions

This section analyses the spatial coherence between the number of health and peace interventions funded by Norway and those funded by other donors and multilateral institutions. These are depicted in Figure 64 where Norway's is represented by the colour of each administrative area at level one, and other donors are represented by the number in each administrative area at level one.

For the purposes of this analysis, the comparator donors considered include both other countries foreign aid and also multilateral donors. Precisely, Norway's disbursement is presented in comparison to that of Germany and the Netherlands and also AfDB, the EU, the World Bank, IOM, UNICEF, UNOCHA, WHO and UNDP.

The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad and the data for other countries and multilateral institutions from IATI (see subsection 2.2).

Table 24. Donors included on each donor's group for Lebanon (Source IATI).

IATI Code	Name	Group
44000	World Bank	World Bank
DE-1	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung (BMZ)	Germany
XI-IATI-EC_ECHO	Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)	EU
XI-IATI-EC_FPI	European Commission - Service for Foreign Policy Instruments	EU
XI-IATI-EC_NEAR	European Commission - DG Neighbourhood and Enlargement Negotiations	EU
XM-DAC-41114	United Nations Development Programme	UNDP
XM-DAC-41121	United Nations High Commissioner for Refugees (UNHCR)	UNHCR
XM-DAC-41122	UNICEF	UNICEF
XM-DAC-41127	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-DAC-47066	International Organization for Migration (IOM)	IOM
XM-DAC-5-7	Germany - Federal Foreign Office	Germany
XM-DAC-7	Ministry of Foreign Affairs of the Netherlands	Netherlands
XM-DAC-928	World Health Organization	WHO
XM-OCHA-CBPF	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-OCHA-CERF	UNOCHA - Central Emergency Response Fund (CERF)	UNOCHA

This aggregated analysis for all years and all interventions reveals that the geographical alignment to other donors is mixed. The concurrence with other donors is high in the East of the country, Beqaa Governorate. But whereas Norway seems also to be very present in the North, the interventions funded by comparator donors are very limited. Likewise, Norway is present in the south whereas other donors have minimal intervention. The opposite is true for Beirut²² and the Mount Lebanon governorate. These findings are too confirmed by the analysis over time in Figure 65, where these patterns do seem to be maintained across the years of analysis.

²² A large number of other donors' interventions are located in Lebanon's capital city (Beirut). This could be caused either due to some donors not specifying the exact locations or because these donors centralized the interventions within the capital and distribute them to other locations registering the intervention in the capital.

Figure 64. Spatial coherence between the combined number of health and peace interventions funded by Norway (represented by colour of each administrative area) and the combined number of health and peace interventions funded by other donors (represented by the number in each area) in Lebanon from 2015 to 2021.

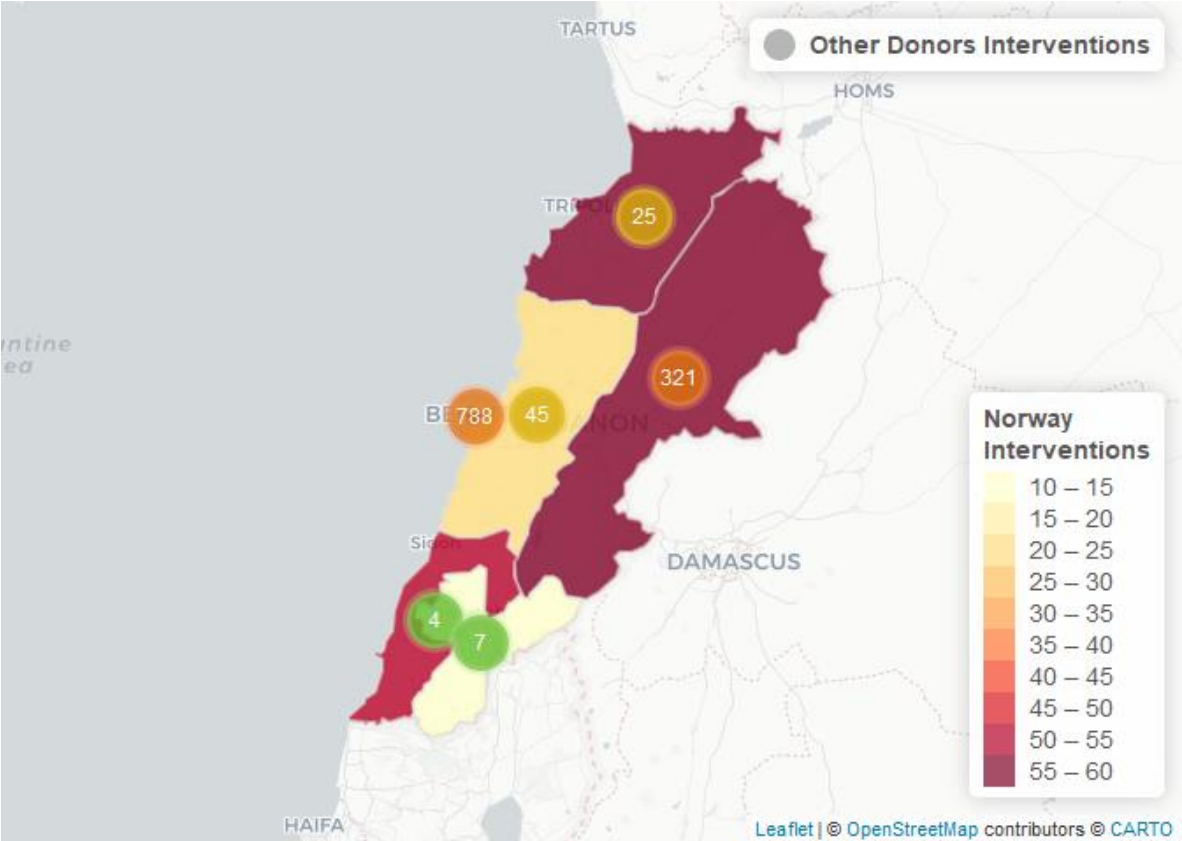


Figure 65. Spatial coherence between the number of health and peace interventions funded by Norway (colour of each administrative area) and other donors (bubble in each area).

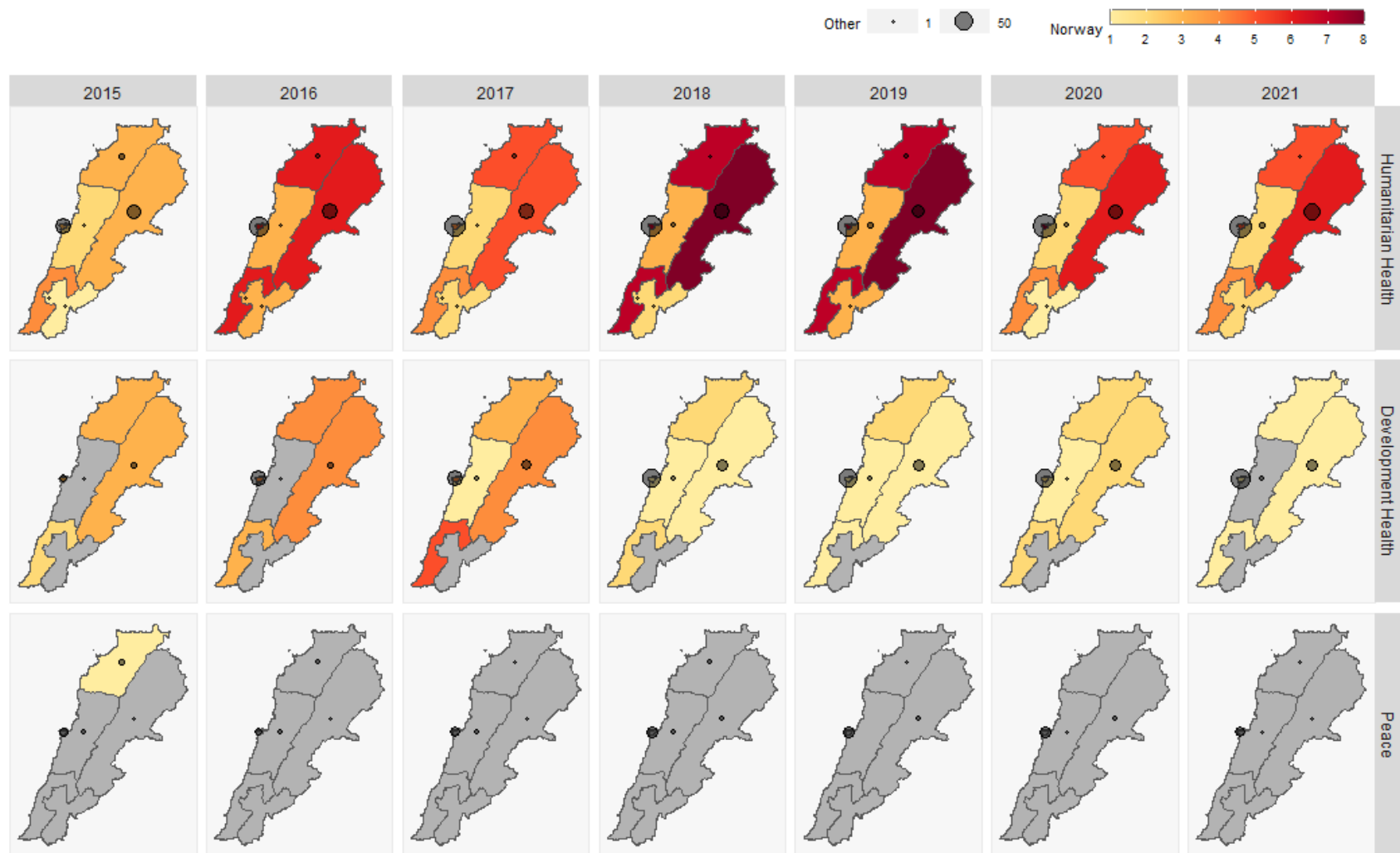


Figure 66. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor country.

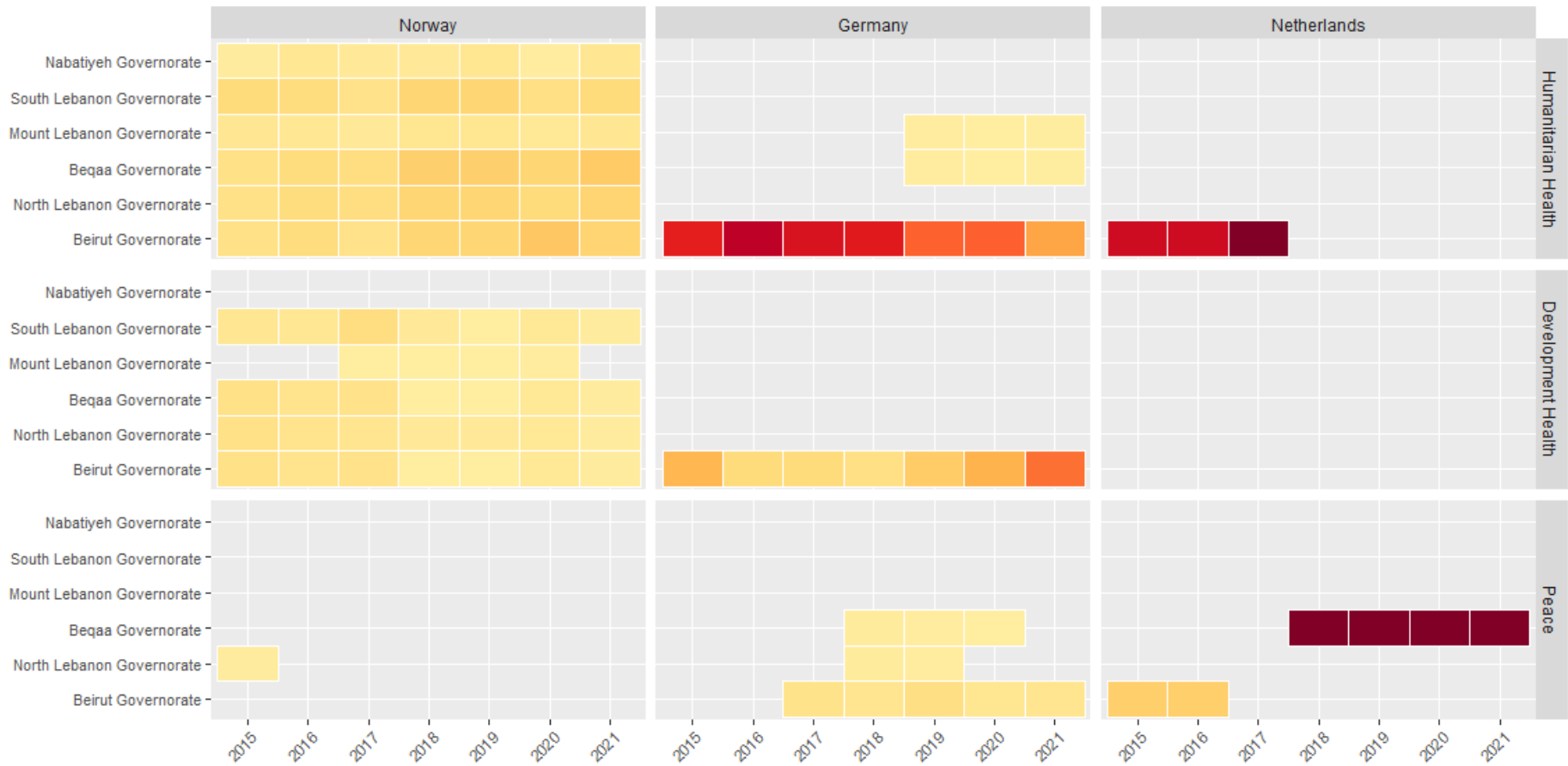


Figure 67. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor international institution.

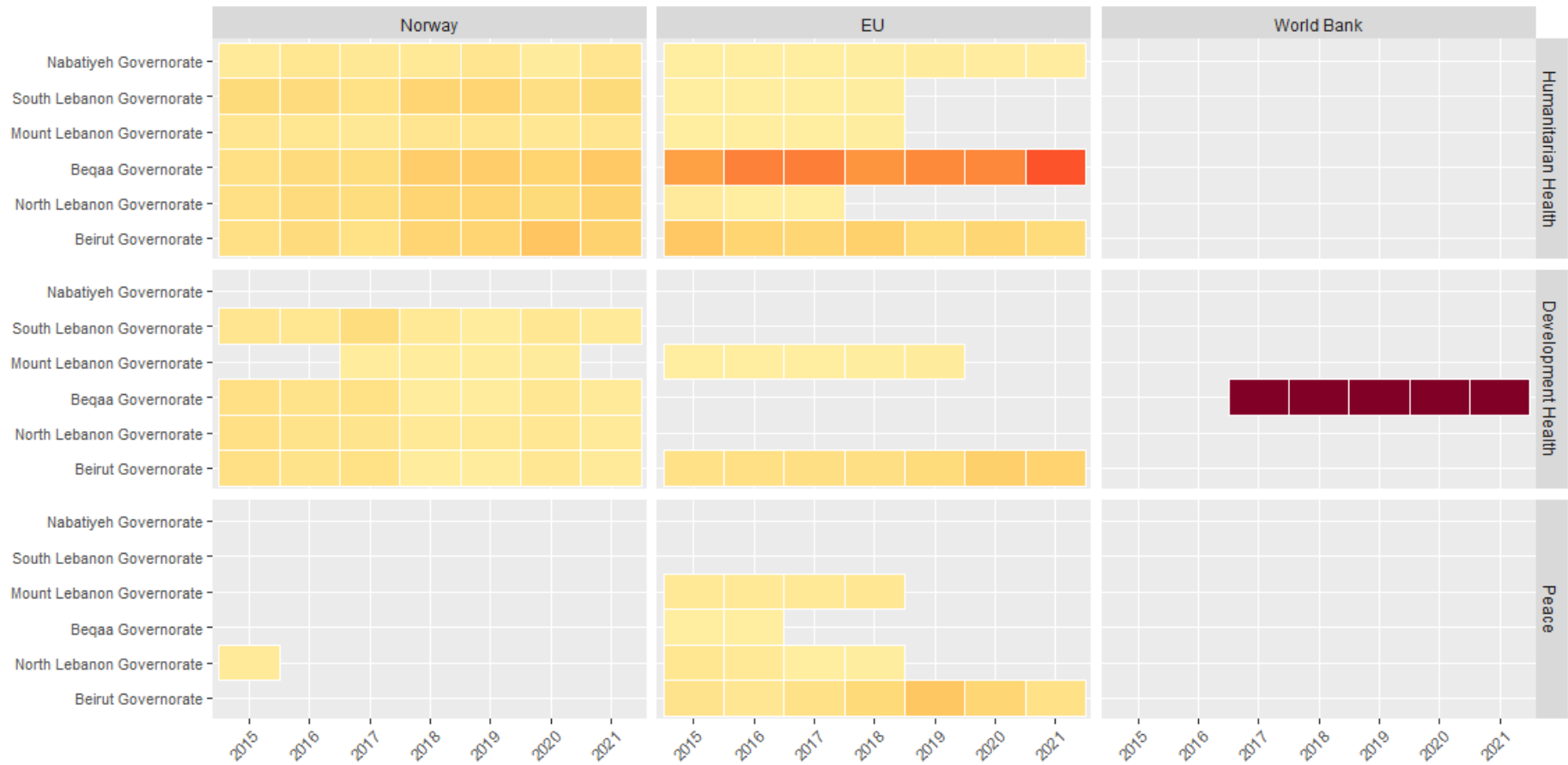
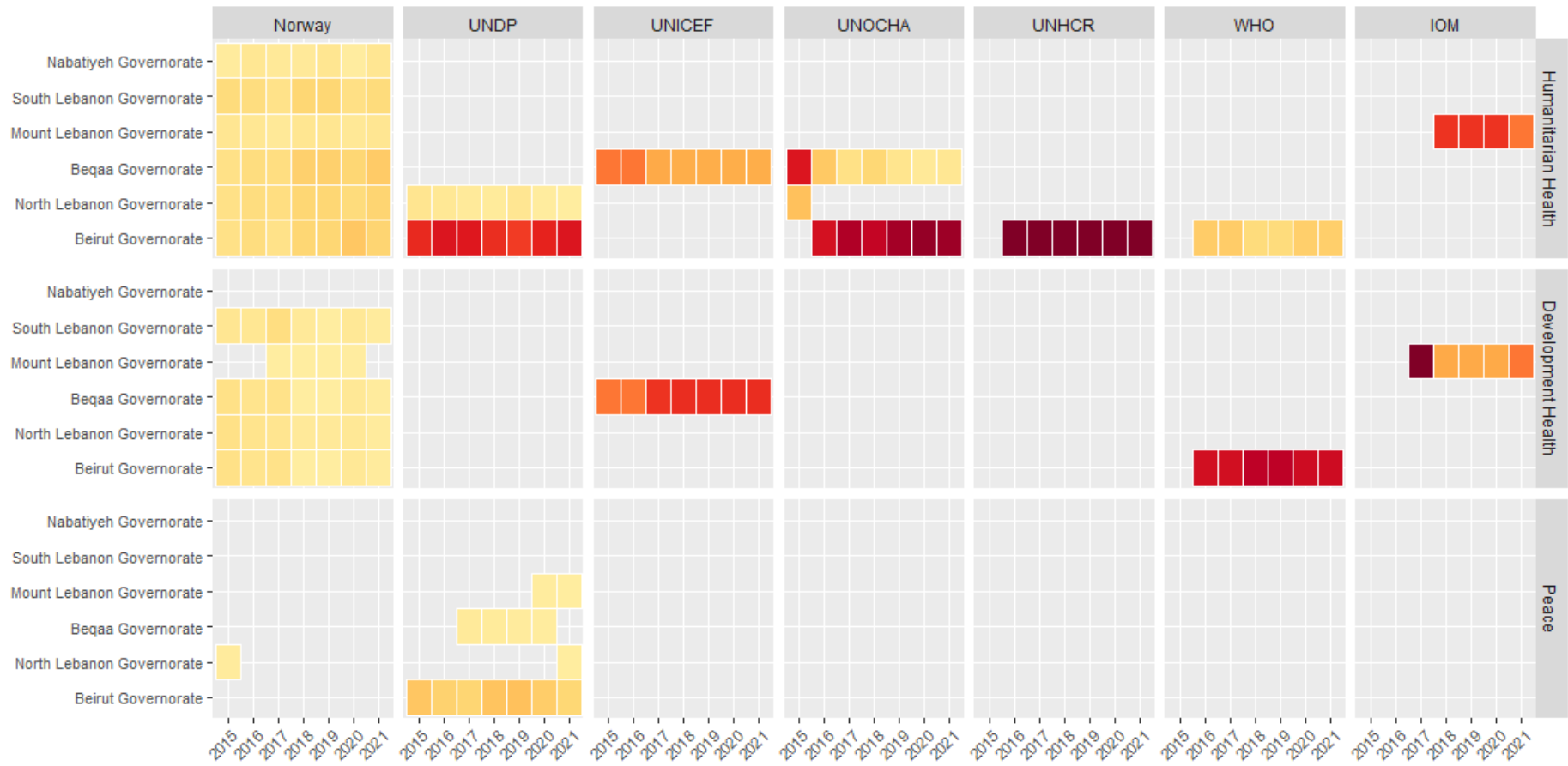


Figure 68. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor UN agency.



The spatial coherence with other donors at individual donor level is presented in Figure 66, Figure 67 and Figure 68. A clear conclusion from these figures is that Norwegian aid, in comparison to other donors, is the most extensive geographically, spreading among more administrative governorates. In that sense, it is most aligned with the EU, which also features a broad geographical coverage, particularly in humanitarian health.

5.3.3. Contextual coherence

This section considers contextual coherence between type of crises (natural disasters, armed conflicts and violence against civilians) and the number of health and peace interventions funded by Norway. As in the preceding section, for each administrative area the colour indicates the magnitude of Norway interventions, and the number refers to the number of ongoing crises over the period of analysis (2015-2021).

At this stage, the analysis considers all three types of interventions in combination, and their response to each crisis type, evidencing the clearest spatial contextual coherence of interventions with crises related to violence against civilians located in the north and east of the country, and armed conflicts in the East. For natural disasters, these ones analysed are so few and so geographically diverse that coherence patterns could not be clearly established.

Figure 69. Spatial contextual coherence with natural disasters (number of interventions and number of crisis).

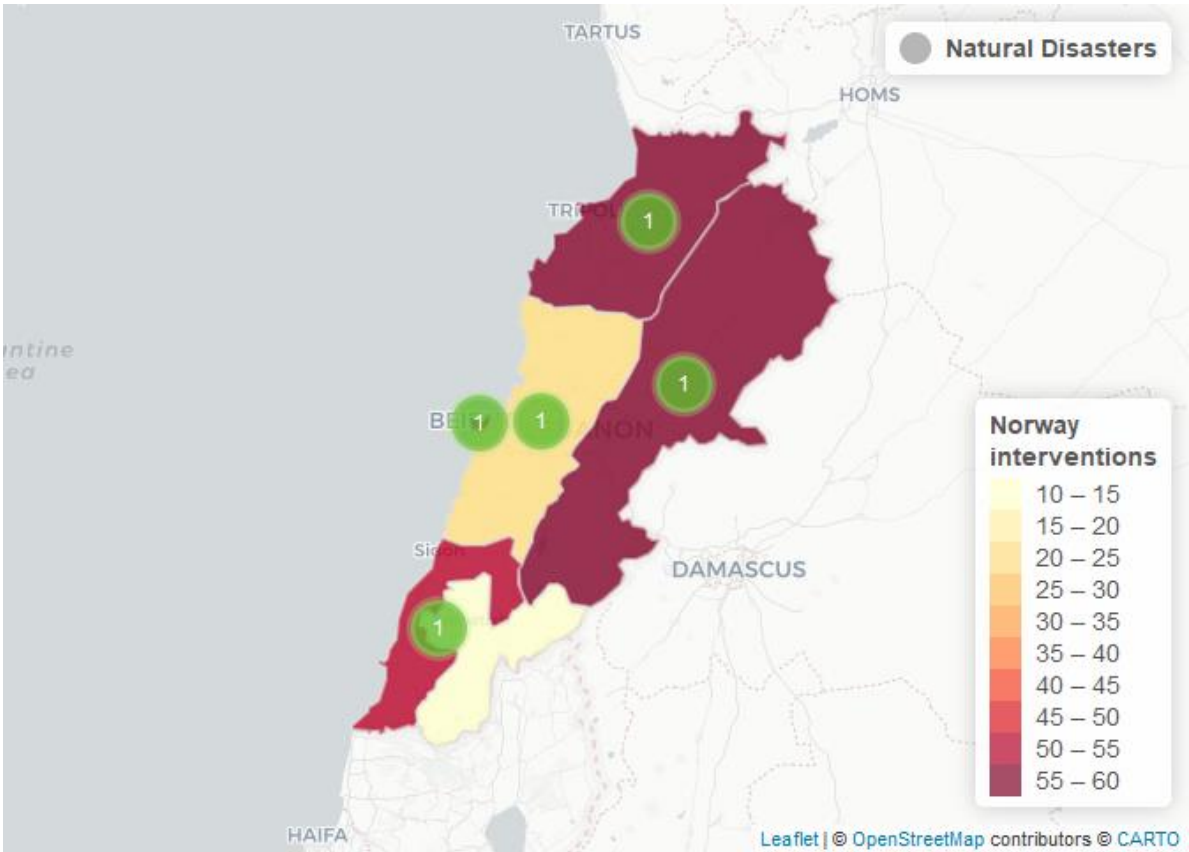


Figure 70. Spatial contextual coherence with armed conflicts (number of interventions and number of crisis).

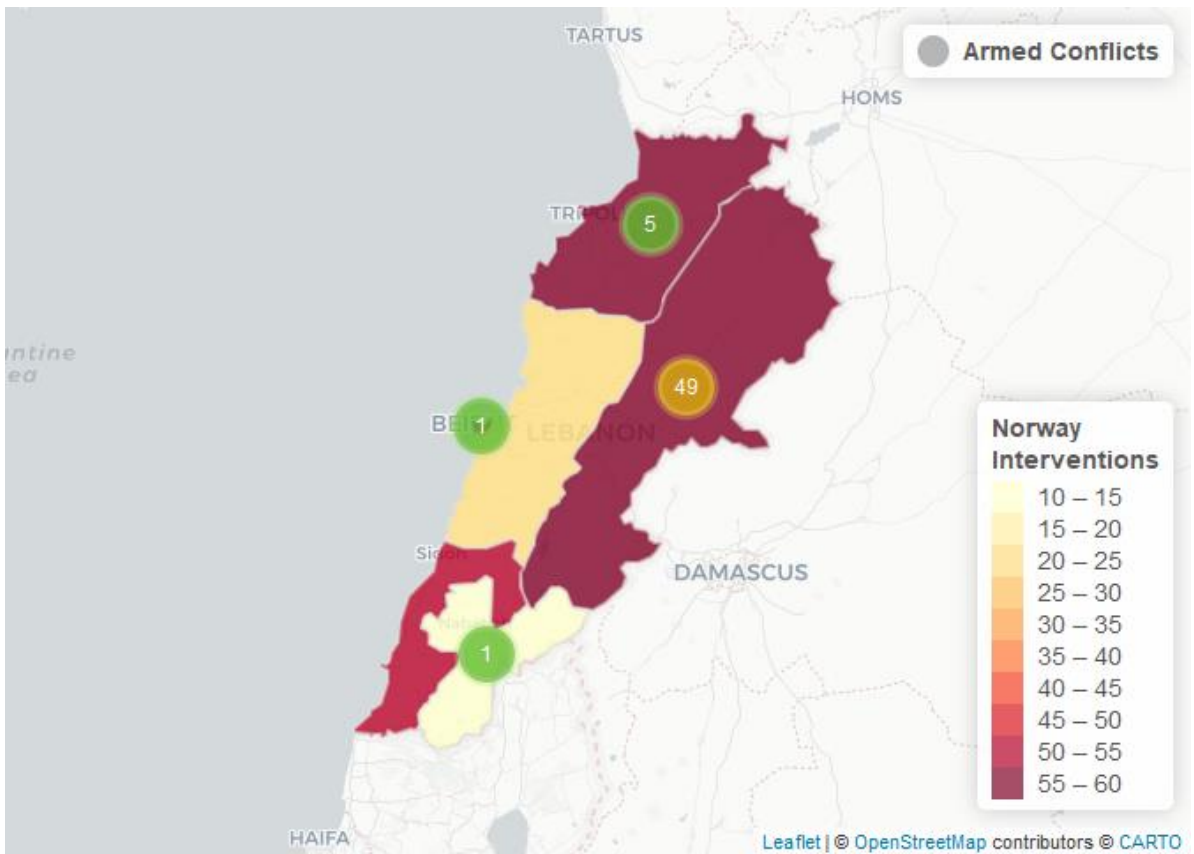
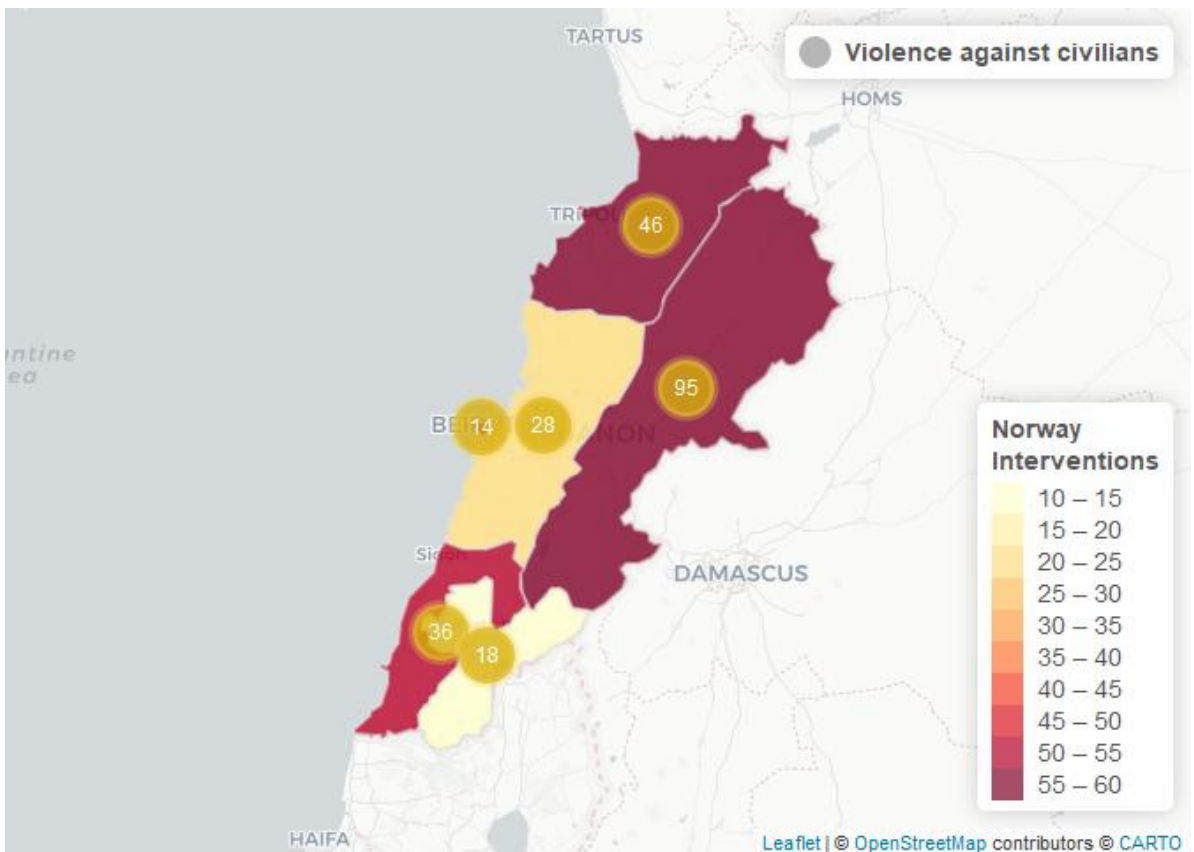


Figure 71. Spatial contextual coherence with violence against civilians (number of interventions and number of crisis).



Finally, the analysis delves into the details of this contextual coherence by year and type of intervention (Figure 72, Figure 73 and Figure 74) for natural disasters, armed conflicts and violence against civilians respectively). The first row in each figure presents the location of the corresponding type of crisis, meanwhile the number of interventions of each type is represented by the colour of the administrative area. Humanitarian health interventions are frequently implemented in the east of the country, in coherence with the location of armed conflicts and violence against civilians.

Figure 72. Spatial contextual coherence with natural disasters by year and type of intervention (number of interventions and number of crisis).

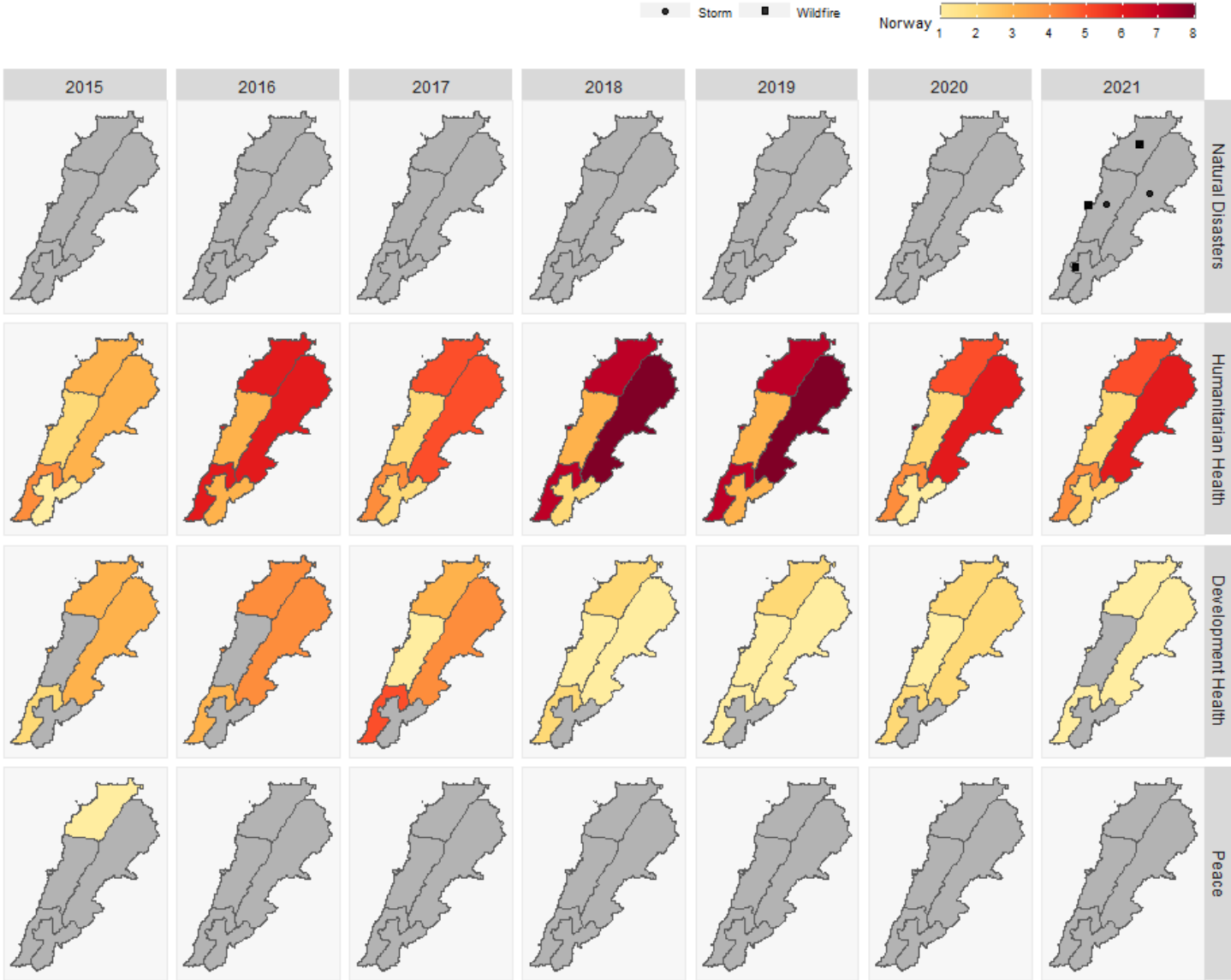


Figure 73. Spatial contextual coherence with armed conflicts by year and type of intervention (number of interventions and number of crisis).

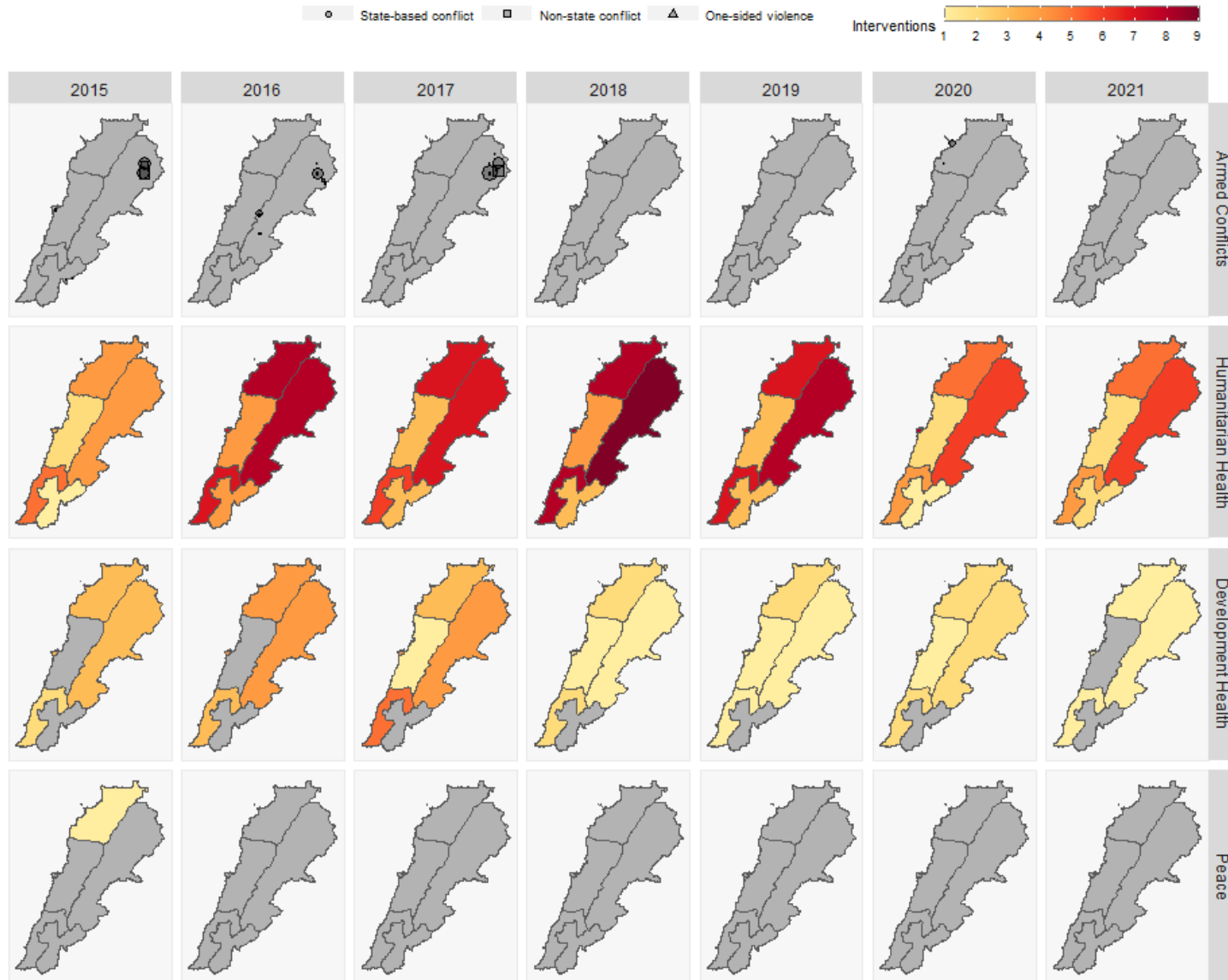
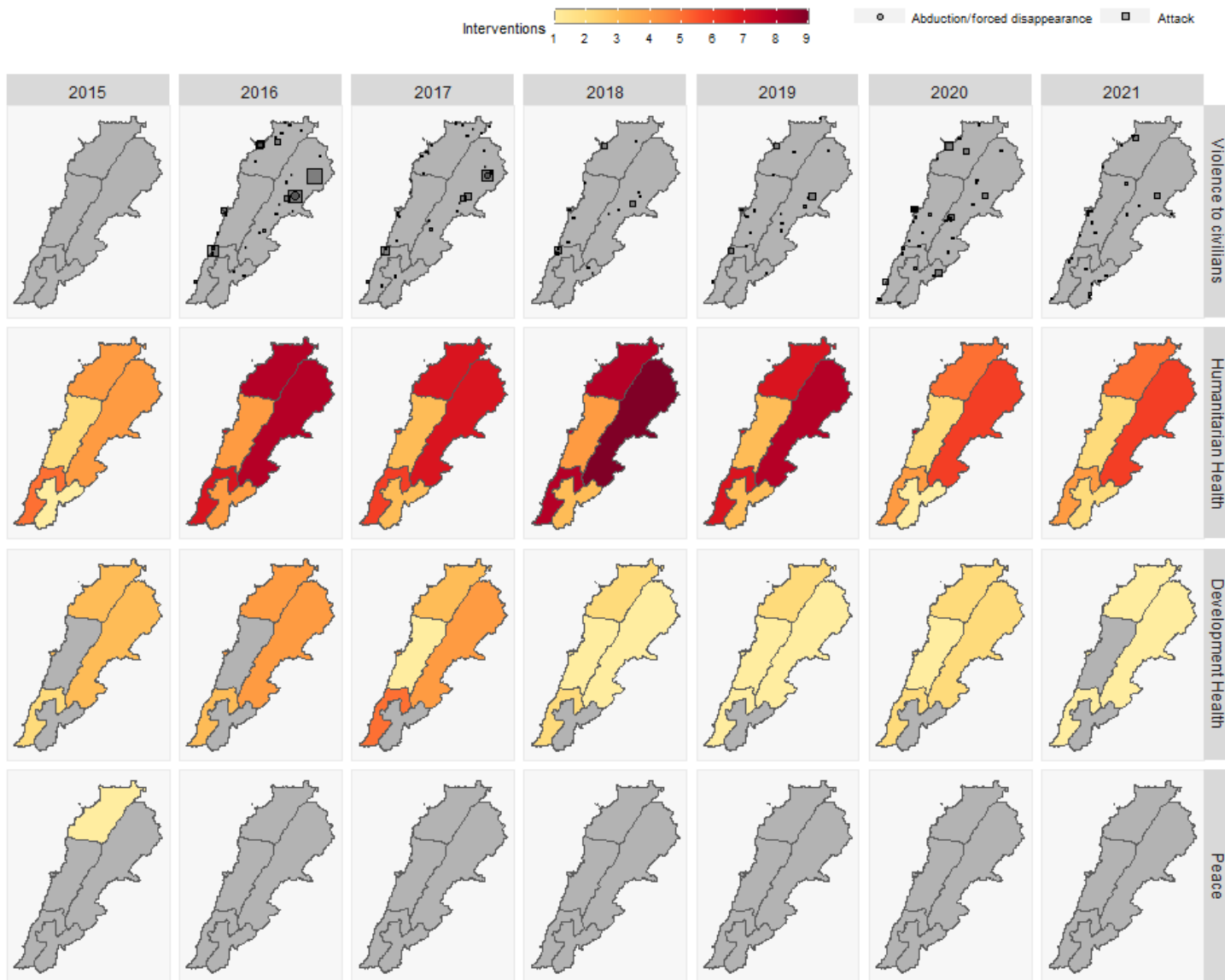


Figure 74. Spatial contextual coherence with violence against civilians by year and type of intervention (number of interventions and number of crisis).



6. Coherence analysis for Syria

6.1. Longitudinal coherence of HDP interventions at country level

The analysis of the coherence of the interventions supported by Norway in Syria has considered 221 interventions implemented in the period from 2015 to 2021, with a total disbursement of NOK 6,658.64 million. This section presents the main result of the coherence analysis.

6.1.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. In Syria *Humanitarian interventions* are unequivocally the largest by all standards and across all years, both in terms of number of interventions and total disbursement (Table 25 and Figure 75). They peaked at 1,137.62 million NOK in 2019. Development interventions, much smaller in number and value, decrease consistently over the period of analysis. Interestingly, peace interventions are few, and of a small and constant value across time. Average disbursements, which are similar for development and peace interventions, (Table 26) appear dwarfed in comparison to humanitarian average expenditure, which is approximately seven times their value.

Figure 75. Number of HDP interventions and total disbursement by type of intervention in Syria.

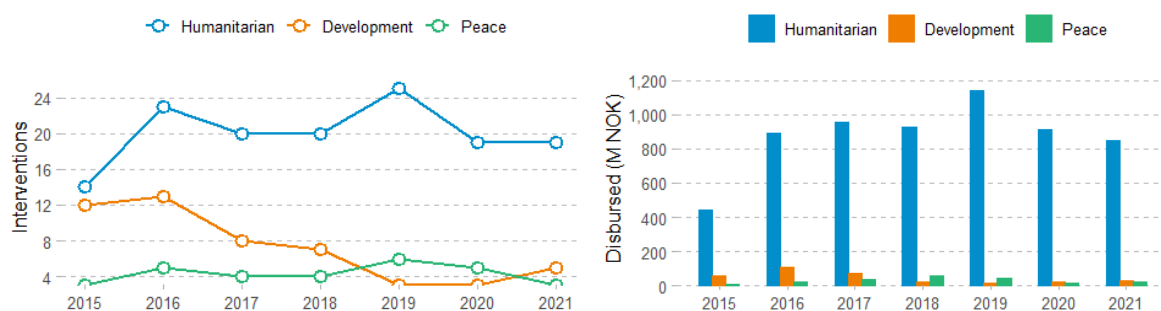


Table 25. HDP interventions supported by Norway in Syria.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian	Development	Peace	Total	Humanitarian	Development	Peace	Total
2015	14	12	3	29	446.40	60.77	9.62	516.80
2016	23	13	5	41	889.20	111.19	21.76	1,022.16
2017	20	8	4	32	958.57	74.22	38.76	1,071.56
2018	20	7	4	31	923.53	24.26	57.32	1,005.11
2019	25	3	6	34	1,137.62	14.44	42.57	1,194.62
2020	19	3	5	27	909.73	24.45	16.54	950.72
2021	19	5	3	27	848.92	28.15	20.60	897.67
Total	140	51	30	221	6,113.98	337.49	207.18	6,658.64

Table 26. Average disbursement (million NOK) per intervention, by type of HDP intervention and year in Syria.

Year	Average disbursement (million NOK)		
	Humanitarian	Development	Peace
2015	31.89	5.06	3.21
2016	38.66	8.55	4.35
2017	47.93	9.28	9.69
2018	46.18	3.47	14.33
2019	45.50	4.81	7.09
2020	47.88	8.15	3.31
2021	44.68	5.63	6.87
Total	43.67	6.62	6.91

The interventions financed by Norway in the 7 years included 41 agreement partners and 54 implementing institutions, which are listed in the Annexes (subsections 8.4 and 9.4, respectively). 86.1% of the interventions are implemented by the agreement partner (84.6% for humanitarian interventions, 86.7% for development and 93.8% for peace interventions). The sharp differences observed in terms of number and value of interventions do not carry to the analysis by agreement partner and implementing institutions. For humanitarian interventions, agreement partners and implementers constitute just over a third of the total over the period (34.1% for both cases). The same is true for development interventions at 31.7% and 31.8% of agreement partners and implementing institutions respectively. Exceptionally, these interventions have been agreed and implemented with partners that combined more than one theme. This was most often the case for humanitarian with development, and less often for developmental and peace or a combination of all three themes. No implementations were found that presented a combination of humanitarian and peace. Thus, a majority of partners and implementers operate exclusively within one domain, indicating a degree of specialisation among them. (Figure 76).

Figure 76. Percentage of agreement partners and Implementing institution participating each combination of types of HDP interventions in Syria.

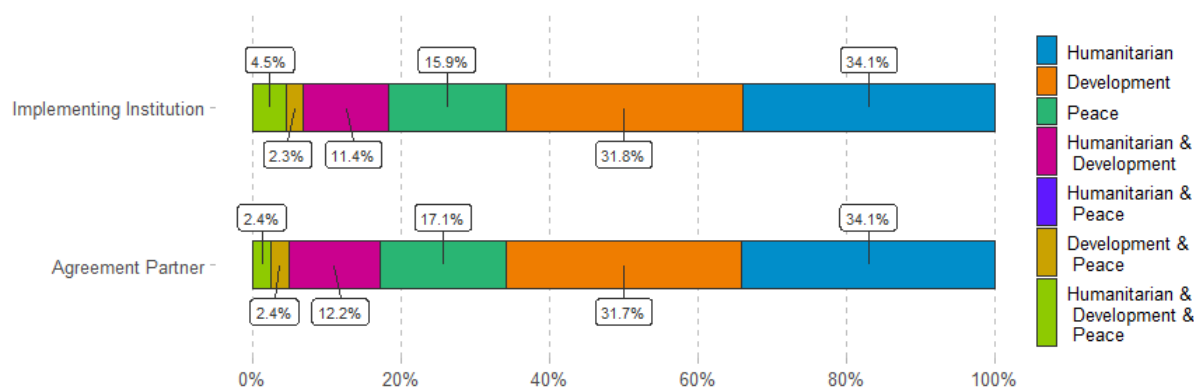
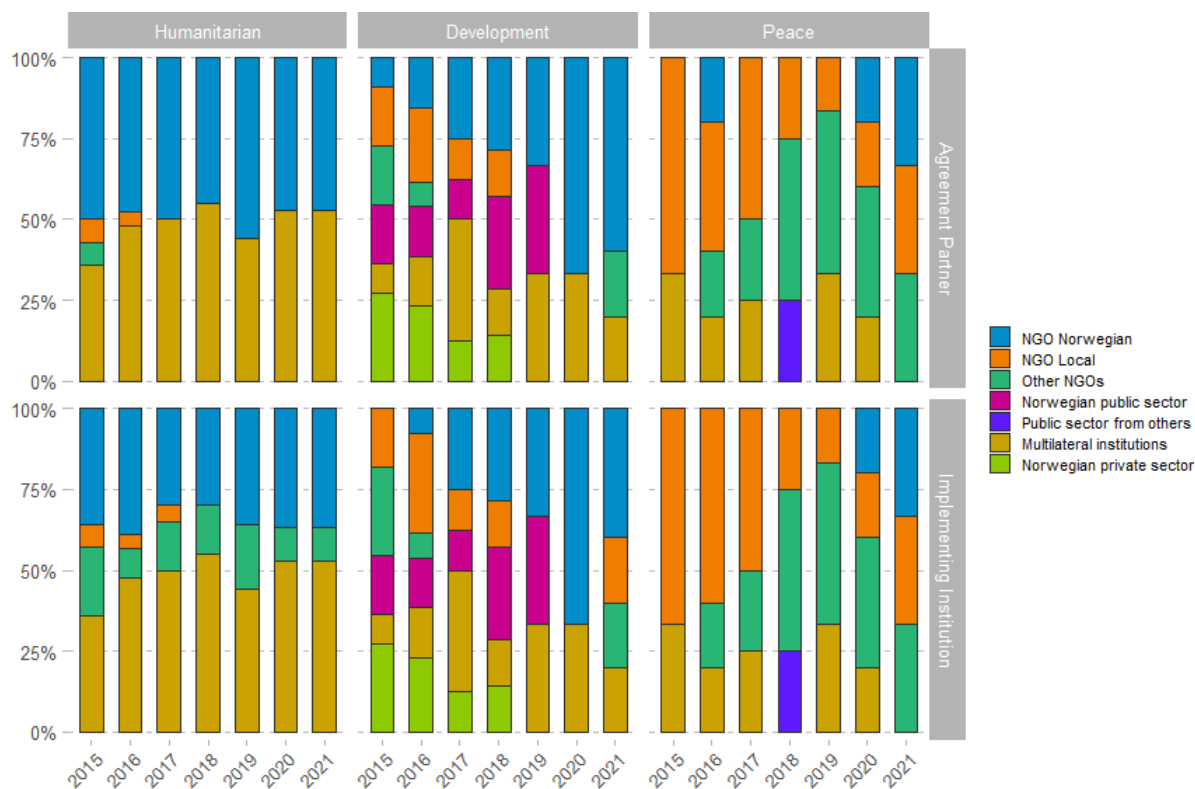


Figure 29 present a disaggregation of the information in Figure 76 in terms of year and type of individual agreement partners and implementing institutions. This figure shows that predominately, agreement partners and implementing institutions are mainly Norwegian NGOs in combination with multilaterals. There are some exceptions. Norwegian NGOs are rarer in peace interventions, which are channelled and implemented through NGOs (local and of other countries) and multilaterals. The Norwegian public and private sector appear relevant only in the case of development interventions.

Figure 77. Percentage of Agreement Partners and Implementing institutions per type of HDP intervention



6.1.2. Coherence with other donors

Figure 78 presents the longitudinal coherence of HDP interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, and the aggregation for all donors that have supported at least one HDP intervention in Syria according to CRS dataset (Table 20). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad, and data for other countries draws from the OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

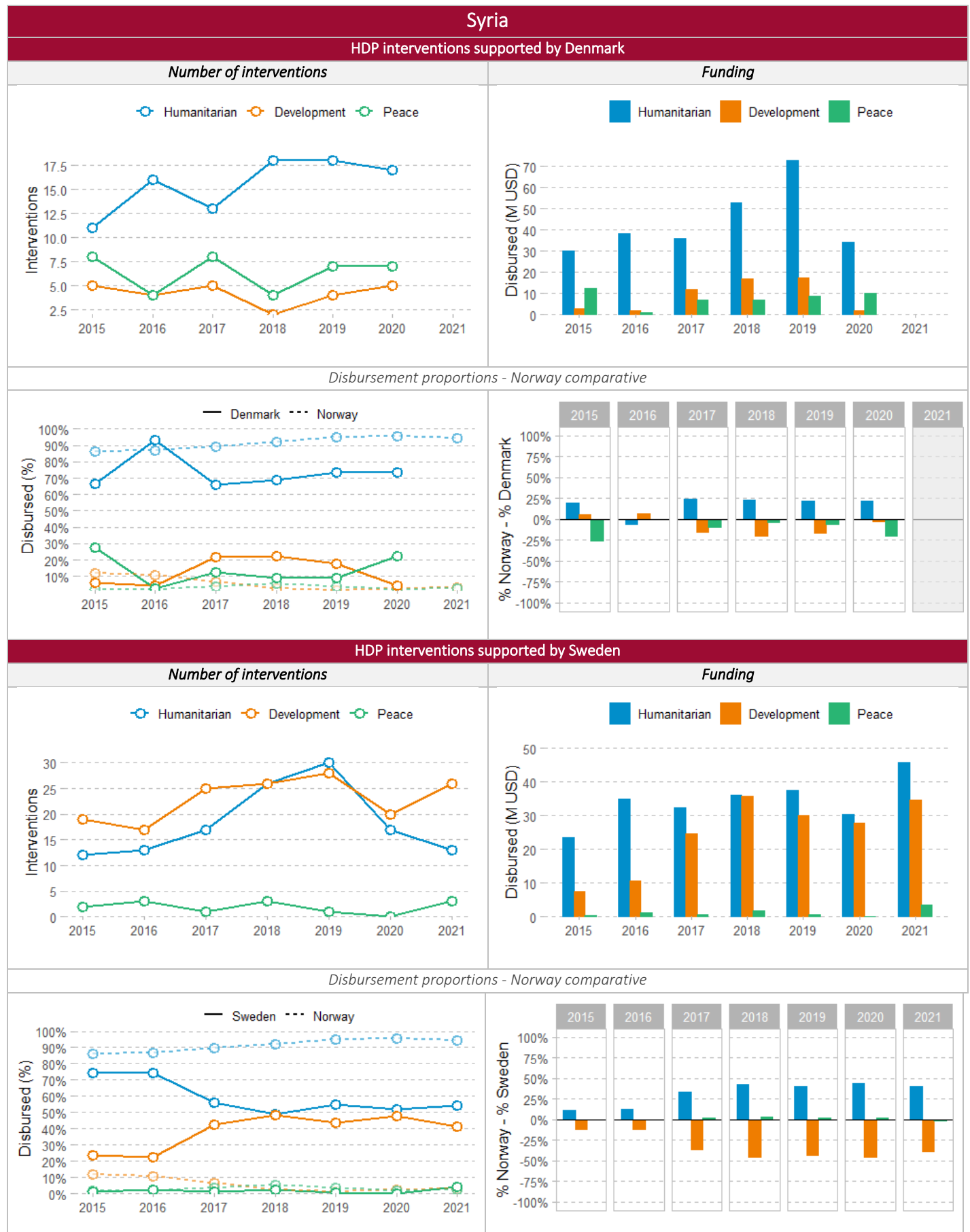
As shown in Figure 78, the coherence between HDP interventions in Norway and comparator countries is in general high. The overall predominance of humanitarian disbursement aligns with all other donors. Differences emerge in the comparison of the number of interventions and the comparative across each of the HDP themes. For example, the number and volume of Sweden development interventions are similar, and that sharp difference among them is not observed. In fact, Finland has more development interventions despite them being smaller in value when compared to humanitarian. Disbursement differences with

Germany, the US and worldwide are negligible. Norway's disbursement pattern is similar the aggregated disbursement pattern of all donors (last panel in Figure 78).

Table 27. Donors of at least one HDP intervention implemented in Syria, 2015 - 2021 (Source: CRS).

All donors			
Arcadia Fund	Food and Agriculture Organisation	Korea	Slovenia
Arcus Foundation	France	Kuwait	Spain
Australia	Germany	La Caixa Banking Foundation	Sweden
Austria	Global Alliance for Vaccines and Immunization	Latvia	Swedish Postcode Lottery
Belgium	Global Fund	Laudes Foundation	Switzerland
Bernard van Leer Foundation	Greece	LEGO Foundation	Türkiye
Bill & Melinda Gates Foundation	Green Climate Fund	Lithuania	UNDP
Bulgaria	H&M Foundation	Luxembourg	UNFPA
Canada	Hungary	Malta	UNHCR
Carnegie Corporation of New York	Iceland	Netherlands	UNICEF
Central Emergency Response Fund	IFAD	New Zealand	United Arab Emirates
Conrad N. Hilton Foundation	International Atomic Energy Agency	Norway	United Kingdom
Croatia	International Labour Organisation	Oak Foundation	United States
Cyprus	Ireland	OPEC Fund for International Development	UNRWA
Czech Republic	Islamic Development Bank	Poland	WFP
Denmark	Israel	Portugal	World Diabetes Foundation
Dutch Postcode Lottery	Italy	Qatar	World Health Organisation
Estonia	Japan	Romania	
EU Institutions	John D. & Catherine T. MacArthur Foundation	Saudi Arabia	
Finland	Kazakhstan	Slovak Republic	

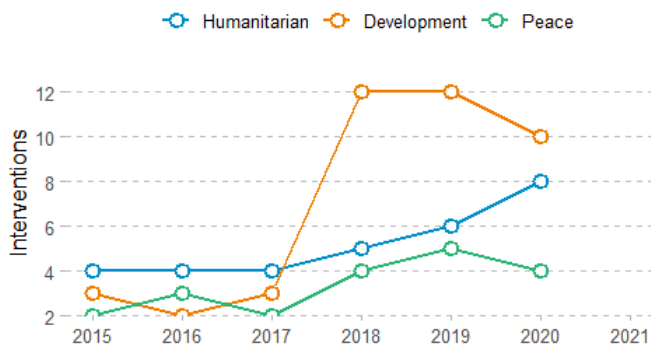
Figure 78. Longitudinal analysis of HDP coherence with other donors in Syria.



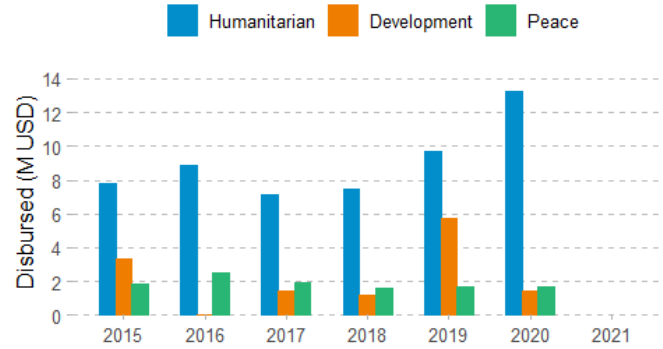
Syria

HDP interventions supported by Finland

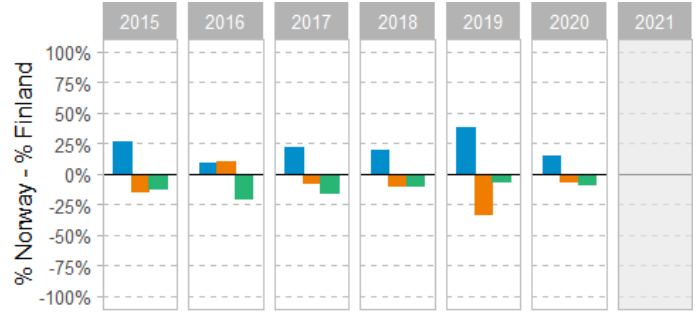
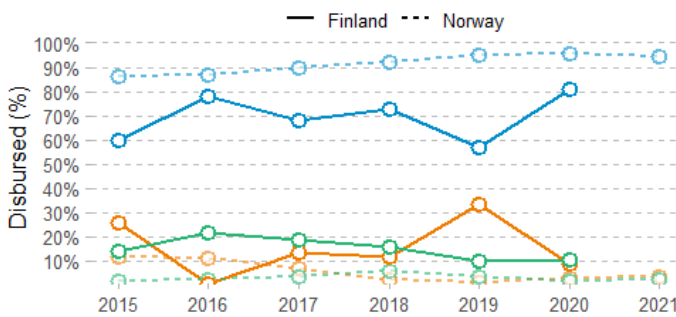
Number of interventions



Funding

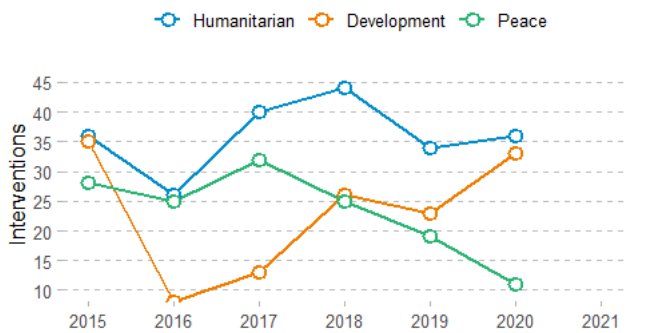


Disbursement proportions - Norway comparative

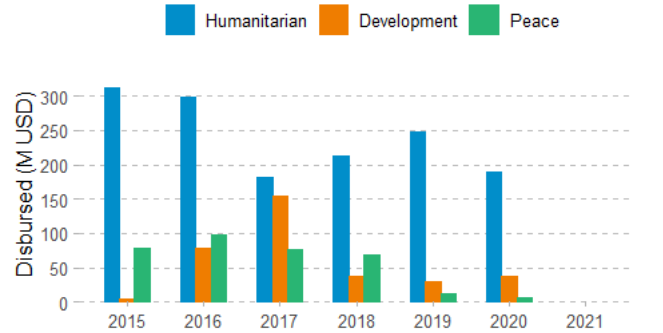


HDP interventions supported by United Kingdom

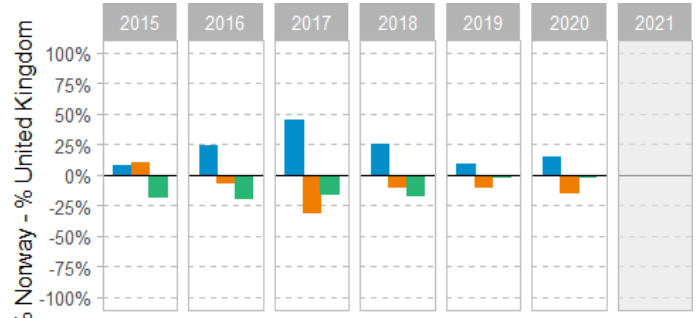
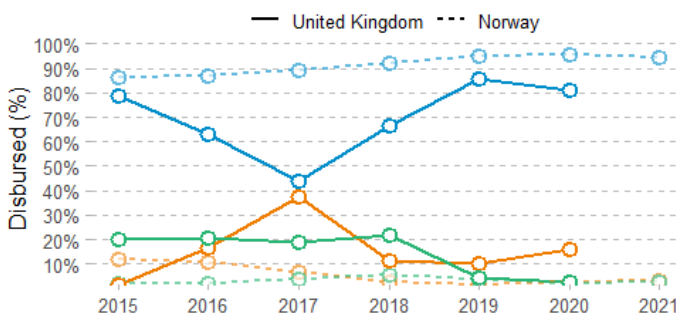
Number of interventions



Funding



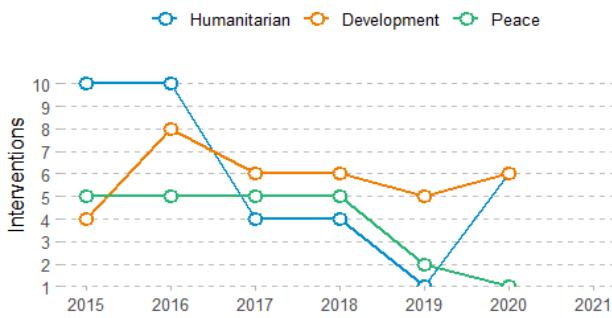
Disbursement proportions - Norway comparative



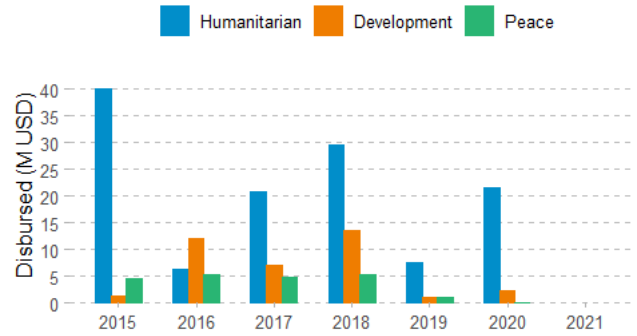
Syria

HDP interventions supported by Netherlands

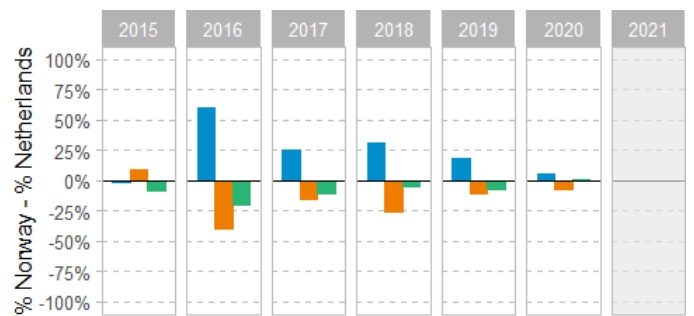
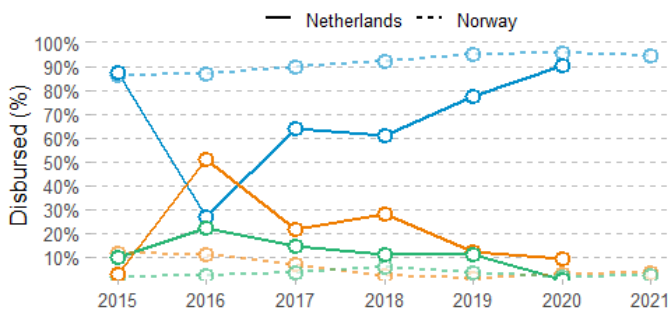
Number of interventions



Funding

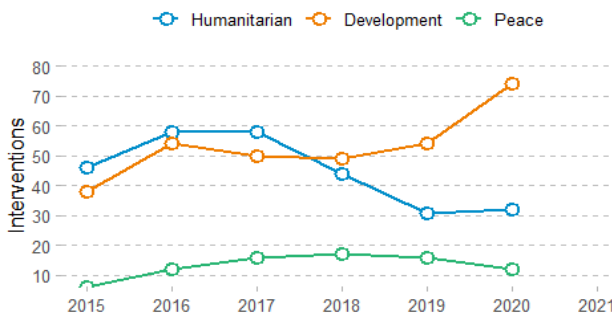


Disbursement proportions - Norway comparative

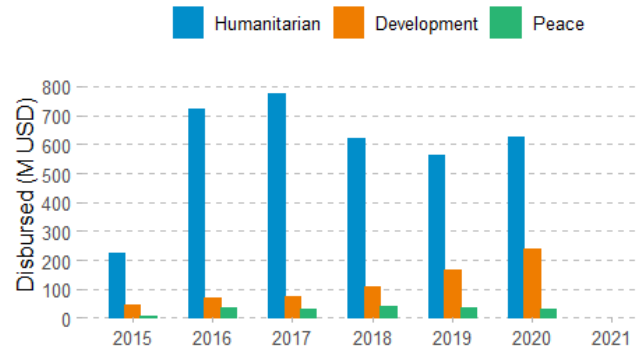


HDP interventions supported by Germany

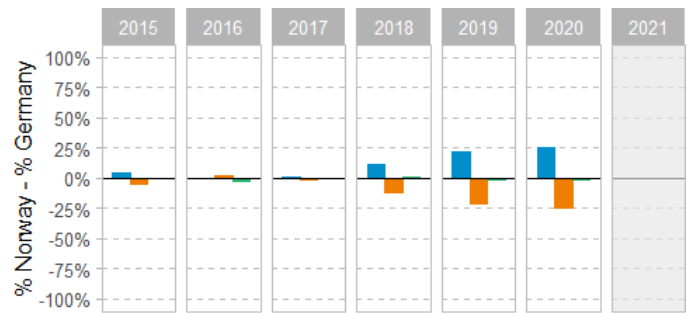
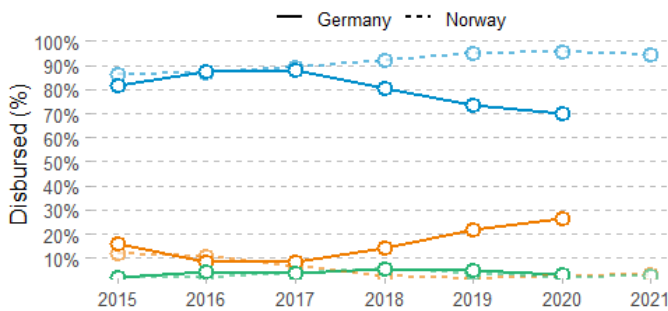
Number of interventions



Funding

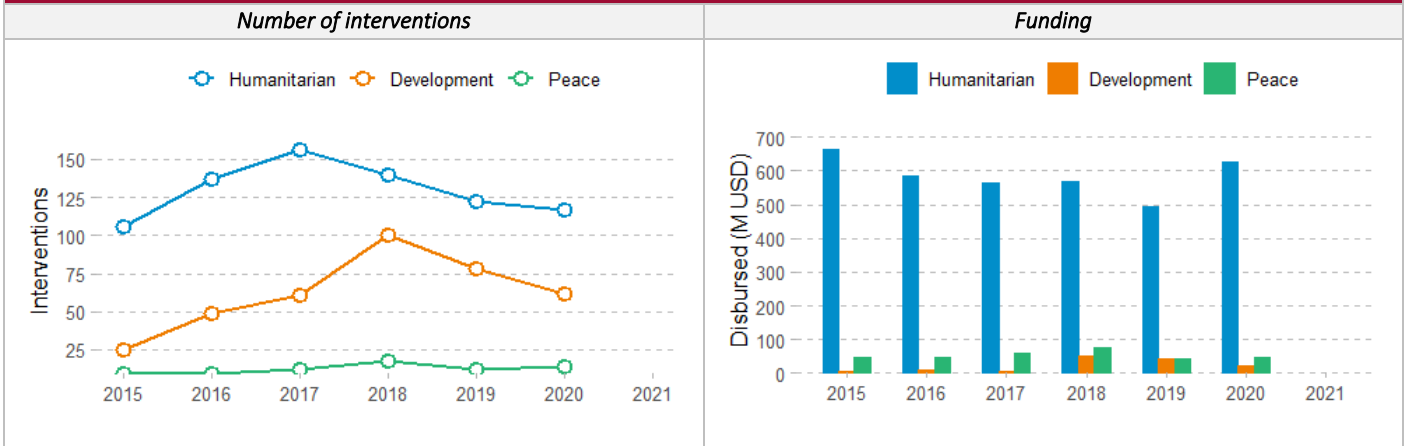


Disbursement proportions - Norway comparative

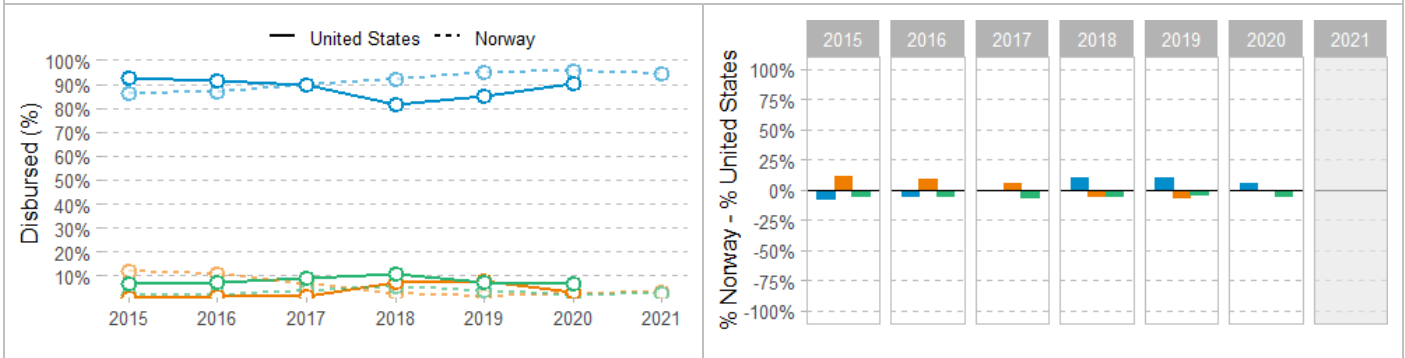


Syria

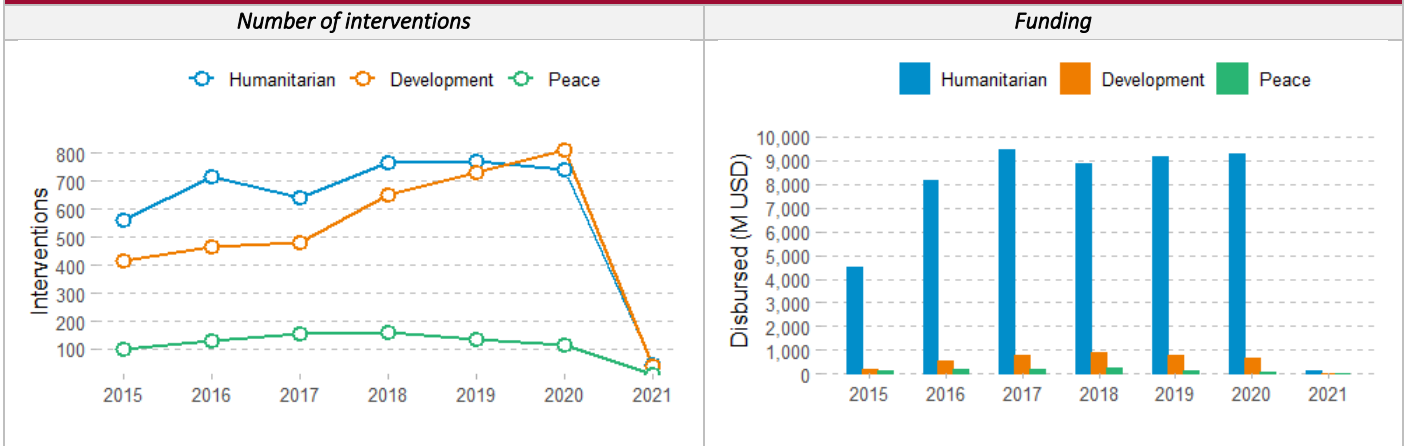
HDP interventions supported by United States



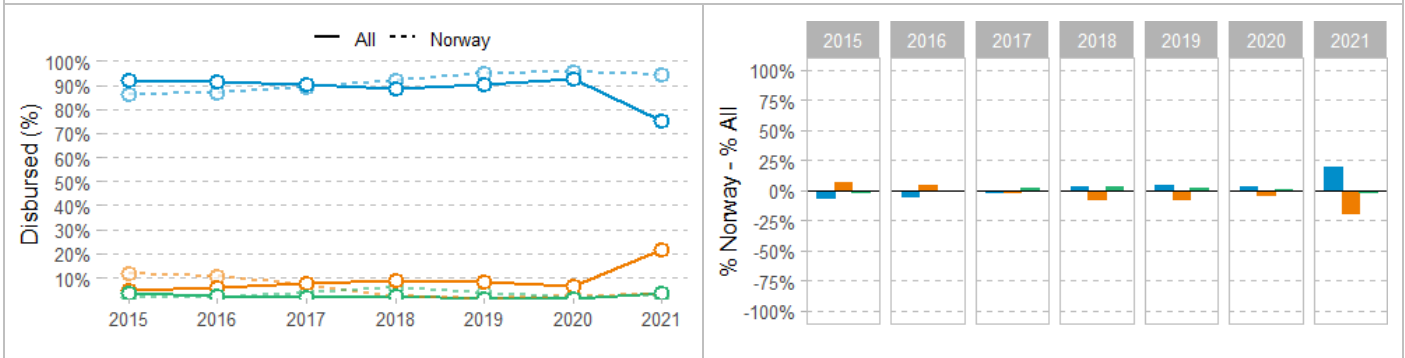
Disbursement proportions - Norway comparative



Aggregated HDP interventions supported by all donors.



Disbursement proportions - Norway comparative

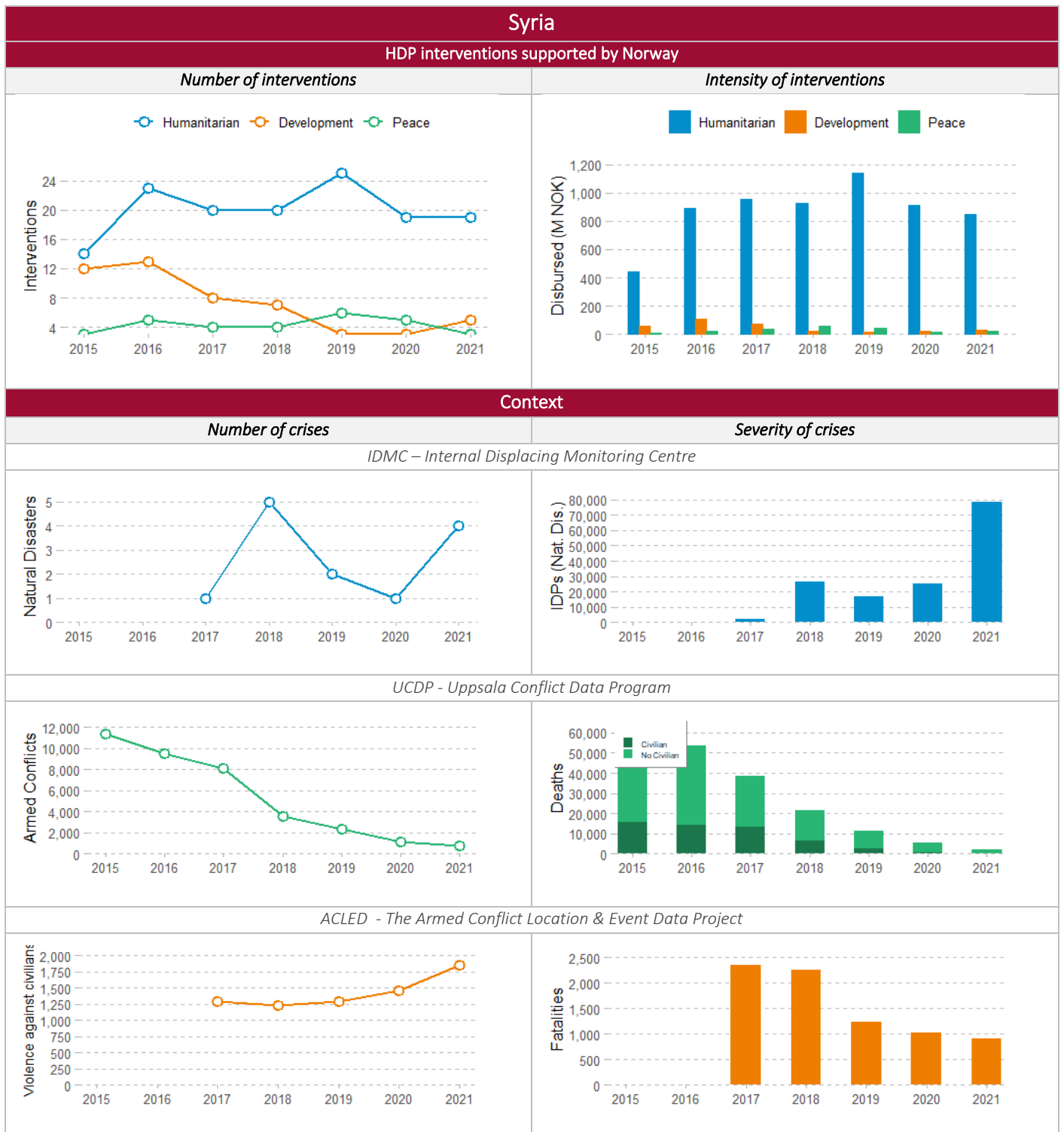


6.1.3. Contextual coherence

This section discusses the change over time (2015-2021) of each intervention type in comparison to selected crises over that period, including natural disasters, armed conflicts and violence against civilians. For the purposes of this analysis, the intensity of the interventions is measured in million NOK disbursed, and the severity of the crises is calculated in a tailored manner for each crisis type: IDPs in the case of natural disasters (as presented in the– Internal Displacing Monitoring Centre), number of deaths for armed conflicts (as available in Uppsala Conflict Data Program), and fatalities for violence against civilians (as per the Armed Conflict Location & Event Data Project) (see subsection 2.2).

Figure 79 evidence decreasing armed conflicts of decreasing severity over this time. Conversely, it also shows increased violence against civilians of decreasing severity. The country suffered severe natural crises in 2018 and specially in 2021. From 2015 to 2021, the dominant type of aid is humanitarian interventions which increased over the period. Therefore, the steady increase in humanitarian interventions cannot be explained alone by the type and severity of crises here analysed, which predominately decrease over time.

Figure 79. Longitudinal analysis of HDP contextual coherence in Syria.



6.2. Longitudinal coherence of health and peace interventions at country level

For this section, the analysis focuses on the coherence of peace interventions with specific subsets of humanitarian and development ones, namely, those focused on Health. In this case, the coherence analysis of health and peace interventions supported by Norway in Syria has considered 148 interventions implemented between 2015 and 2021, with a total disbursement of NOK 5,282.42 million.

6.2.1. Coherence among types of intervention

The coherence analysis draws on indicators selected to measure their magnitude according to the *total number of interventions* and their *disbursement*. As shown in Figure 80, Table 28 and Table 29, humanitarian health interventions remain the most frequent, and the differences in development health and peace are more marked. In fact, humanitarian health interventions account for the almost the totality of the disbursement when compared to developmental health and peace interventions.

Figure 80. Number of health and peace interventions and total disbursement (million NOK) by type of intervention in Syria.

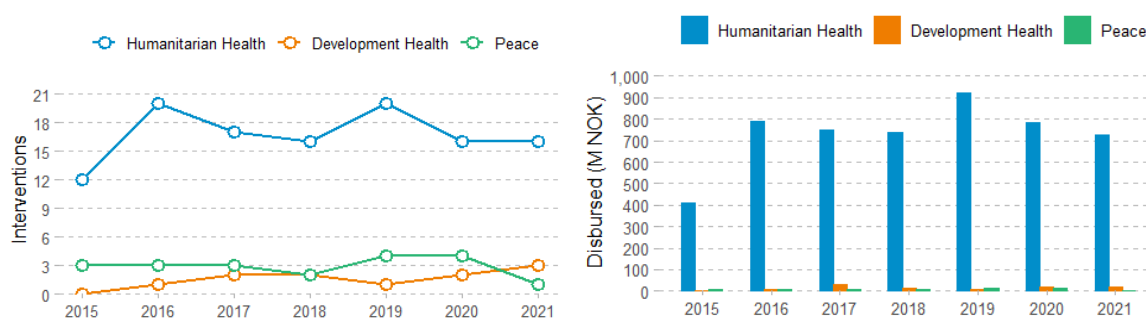


Table 28. Health and peace interventions supported by Norway in Syria.

Year	Number of interventions				Disbursement (million NOK)			
	Humanitarian Health	Development Health	Peace	Total	Humanitarian Health	Development Health	Peace	Total
2015	12	0	3	15	410.40	0.00	9.62	420.03
2016	20	1	3	24	789.20	10.00	7.36	806.57
2017	17	2	3	22	752.37	32.00	8.76	793.14
2018	16	2	2	20	737.09	14.60	7.32	759.01
2019	20	1	4	25	919.94	9.00	11.57	940.51
2020	16	2	4	22	781.33	19.45	12.54	813.32
2021	16	3	1	20	726.10	21.15	2.60	749.85
Total	117	11	20	148	5,116.44	106.20	59.78	5,282.42

Table 29. Average disbursement (million NOK) by type of health and peace intervention and year in Syria.

Year	Average disbursement (million NOK)		
	Humanitarian Health	Development Health	Peace
2015	34.20	0.00	3.21
2016	39.46	10.00	2.46
2017	44.26	16.00	2.92
2018	46.07	7.30	3.66
2019	46.00	9.00	2.89
2020	48.83	9.72	3.14
2021	45.38	7.05	2.60
Total	43.73	9.65	2.99

The interventions financed by Norway in the 7 years counted with 23 agreement partners and 29 implementing institutions²³. 85.7% of the interventions are implemented by the agreement partner (84.2% for humanitarian interventions, 87.5% for development and 100% for peace interventions). A 56.5% of the agreement partners participated only in humanitarian health interventions and 21.7% of the agreement partners were involved in peace interventions only. In terms of implementation partners, again a majority were exclusive to humanitarian health interventions (60%), which were occasionally combined with developmental health (16%). Peace implementing institutions accounted for 20% of all implementation partners, and a minority (4%) where in the developmental health space. This would indicate that developmental implementing partners are carrying out activities with agreement partners in categories different than peace (Figure 81).

Figure 81. Percentage of agreement partners and implementing institutions participating each combination of types of health and peace interventions in Syria.

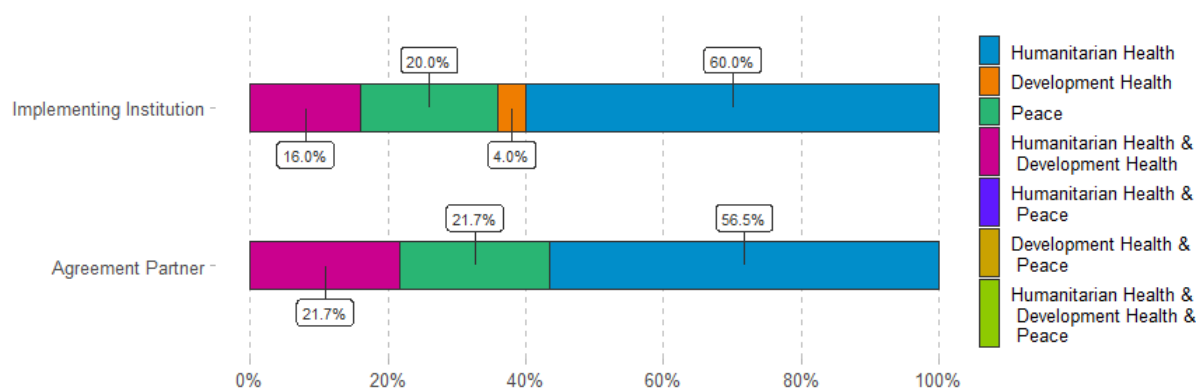
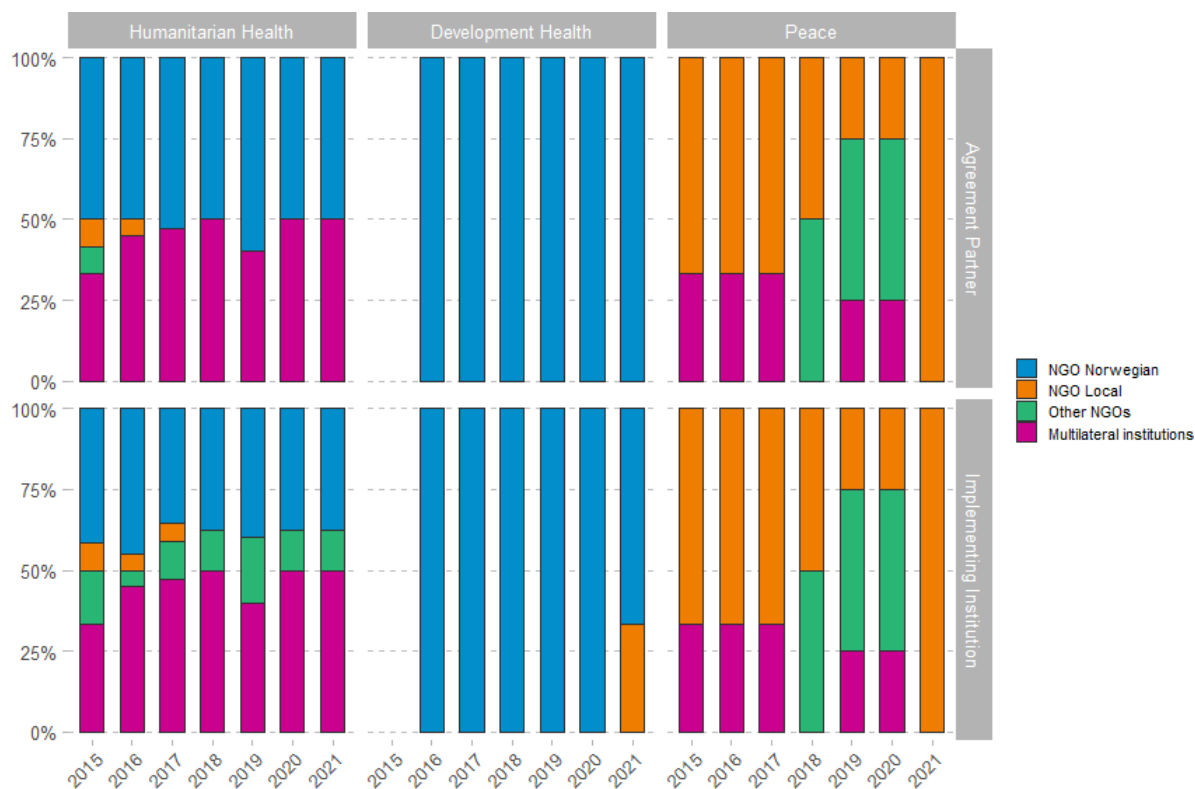


Figure 82 show that agreement partners and implementers for these development health interventions were exclusively Norwegian NGOs. In the case of humanitarian health interventions, the distribution appears shared between Norwegian NGOs and multilateral institutions, for both agreements and implementing partners. In this case, a minority of implementers (around 10%) are international NGOs. Peace interventions exhibit a different pattern. In this case local NGOs are favoured as agreement and implementing partners, with a smaller presence of multilaterals and NGOs either international or of other countries.

²³ Exclusion Policy: Due to security reasons, no further details can be provided.

Figure 82. Percentage of Agreement Partner and Implementing institution per type of health and peace intervention



6.2.2. Coherence with other donors

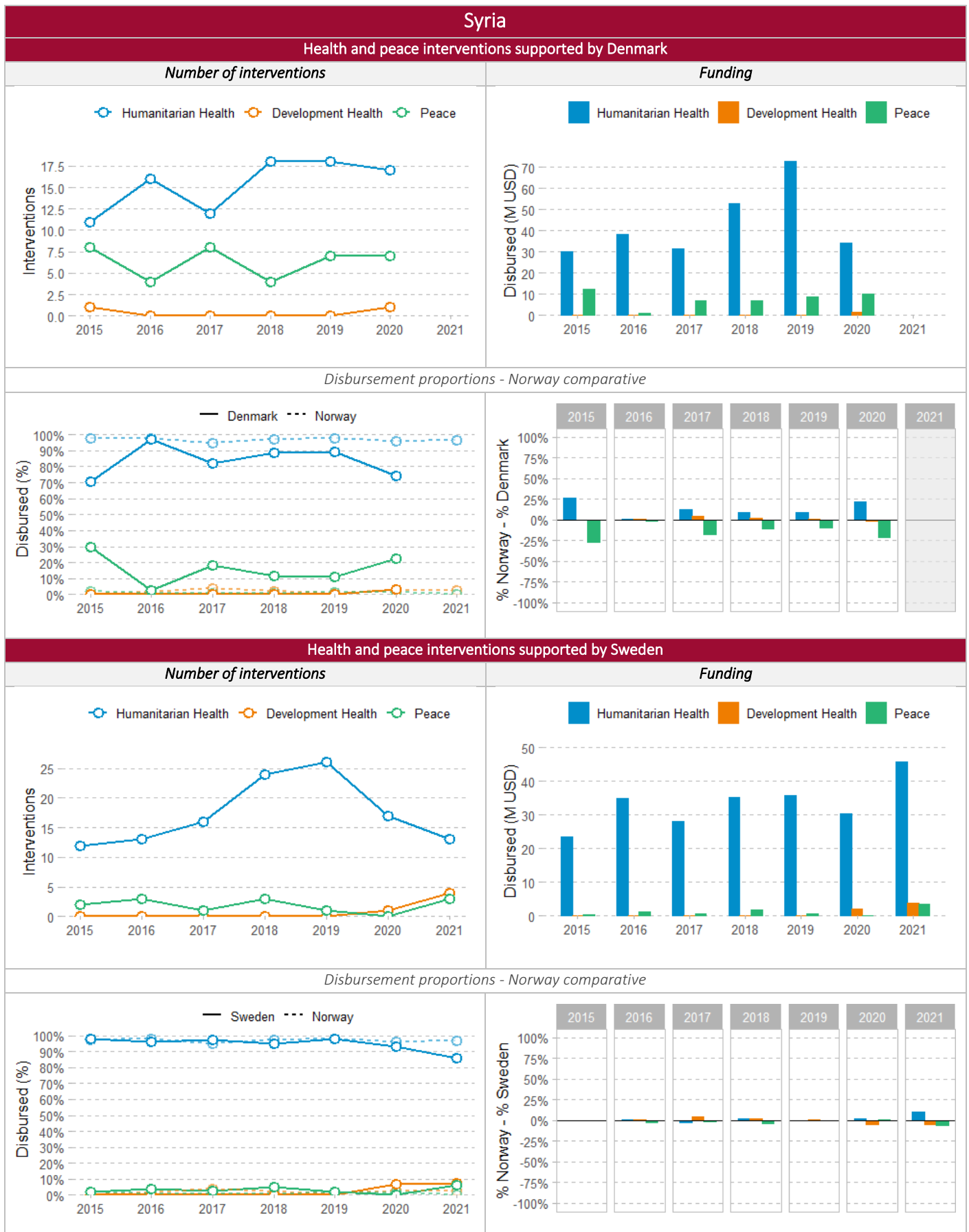
Figure 83 presents the longitudinal coherence of health and peace interventions supported by Norway and other seven countries (Denmark, Sweden, Finland, United Kingdom, the Netherlands, Germany, the United States, ssss and the aggregation for all donors that have supported at least one health and peace intervention in Syria according to CRS dataset (Table 30). The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad and the data for other countries from OECD CRS (see subsection 2.2). It must be highlighted that information for 2021 seems to be lacking for most of the countries. For each of these seven countries, the figure presents the number of interventions and the disbursed amount per year and type of intervention (two first graphs in the figure). Note that the scale of these two graphs is different for each country depending on the total number of interventions and disbursement of the corresponding country. For the sake of comparability, the third and fourth graphs for each country presents normalised values and show the distribution of the total disbursement in Norway and the country in each year, as well as the differences between these shares in both countries in these cases where the information is available (i.e., if for one year, there is at least one record of an intervention supported by a country). When one of the two shares is not available, the figure is represented with a grey background.

As shown in Figure 83, the predominance of disbursements towards humanitarian help is in line with that of all other countries in comparison. The comparison of normalised expenditures also offers striking similarities for most countries, and particularly with the aggregated expenditure of all donors in Table 30). The only notable recurring differences occur in selected years with Finland and the UK, where some deviations can be observed between the proportions spent in humanitarian health and peace interventions.

Table 30. Donors of at least one health and peace intervention implemented in Syria, 2015 - 2021 (Source: CRS).

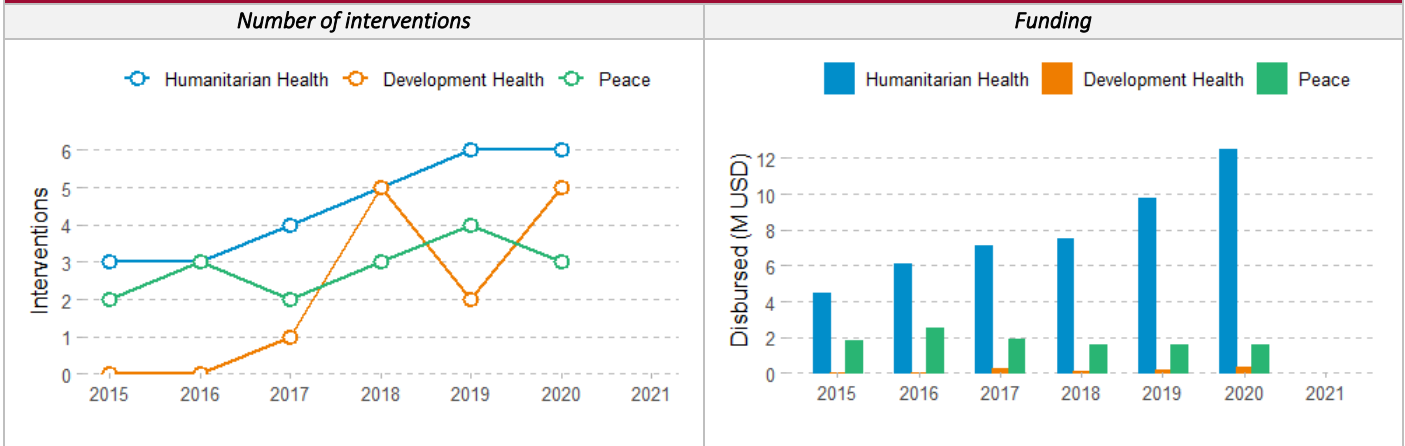
All donors			
Australia	France	Laudes Foundation	Sweden
Austria	Germany	Lithuania	Switzerland
Belgium	Global Alliance for Vaccines and Immunization	Luxembourg	Türkiye
Bernard van Leer Foundation	Global Fund	Netherlands	UNDP
Bill & Melinda Gates Foundation	Greece	New Zealand	UNFPA
Canada	H&M Foundation	Norway	UNHCR
Carnegie Corporation of New York	Hungary	OPEC Fund for International Development	UNICEF
Central Emergency Response Fund	Iceland	Poland	United Arab Emirates
Conrad N. Hilton Foundation	Ireland	Portugal	United Kingdom
Croatia	Italy	Qatar	United States
Czech Republic	Japan	Romania	UNRWA
Denmark	Kazakhstan	Saudi Arabia	WFP
Estonia	Korea	Slovak Republic	World Diabetes Foundation
EU Institutions	Kuwait	Slovenia	World Health Organisation
Finland	Latvia	Spain	

Figure 83. Longitudinal analysis of health and peace coherence with other donors in Syria.

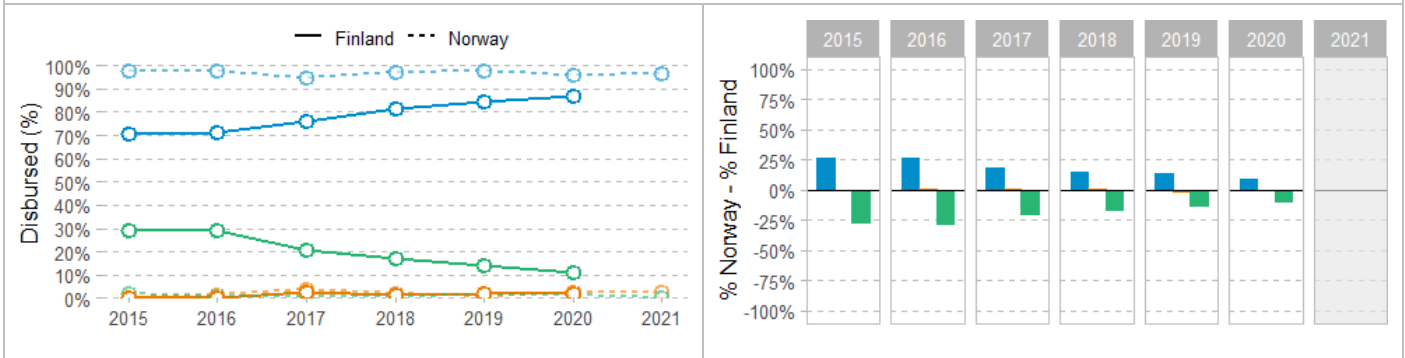


Syria

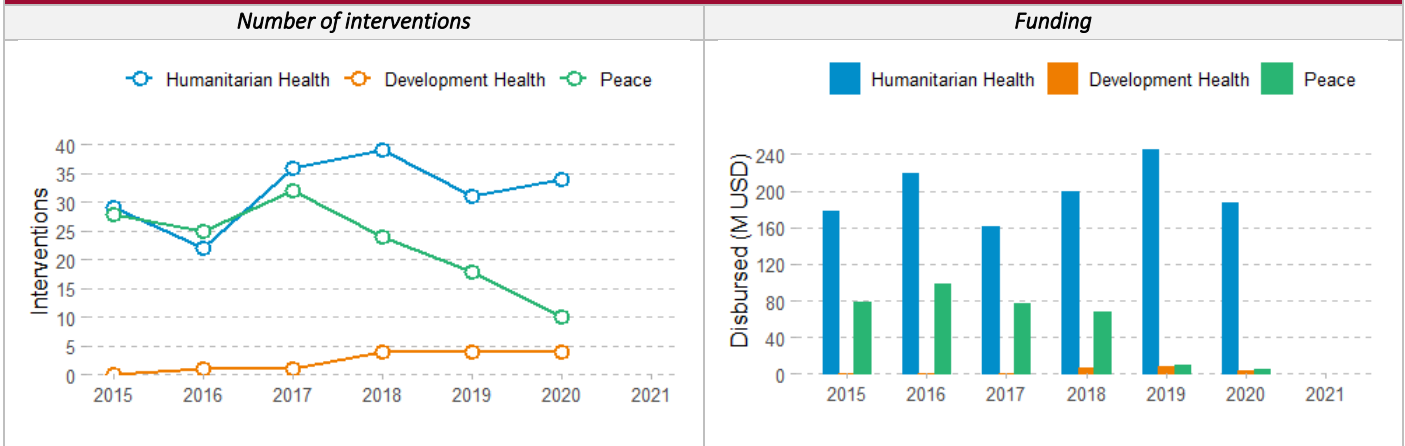
Health and peace interventions supported by Finland



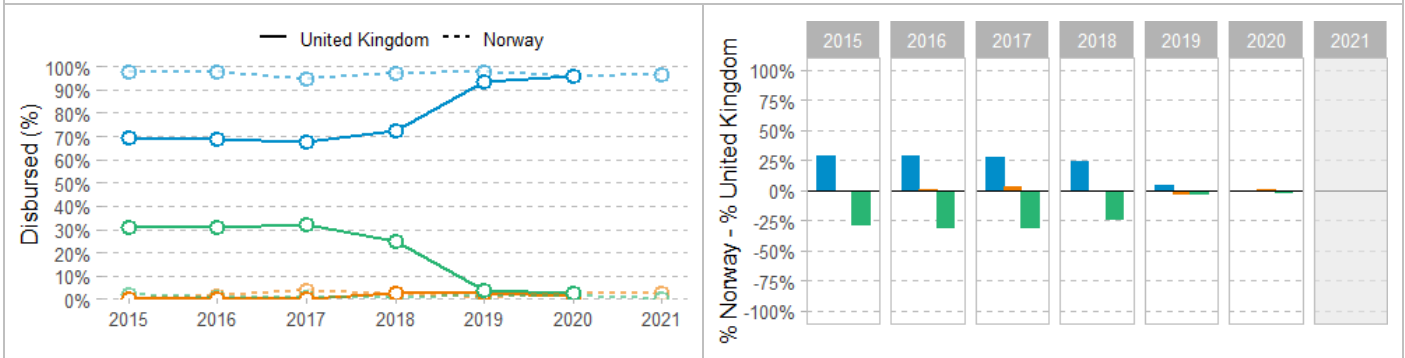
Disbursement proportions - Norway comparative



Health and peace interventions supported by United Kingdom

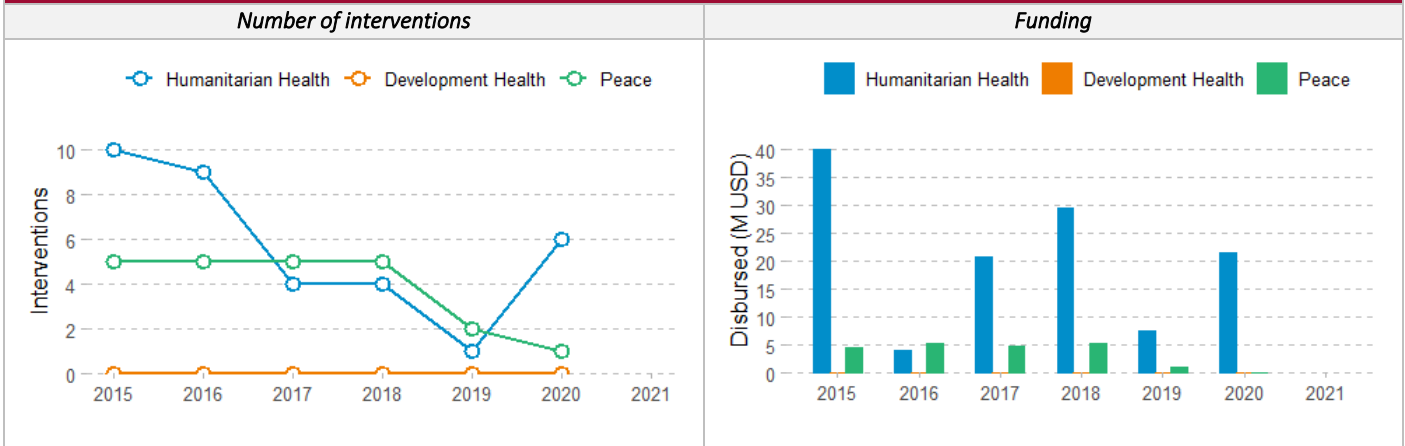


Disbursement proportions - Norway comparative

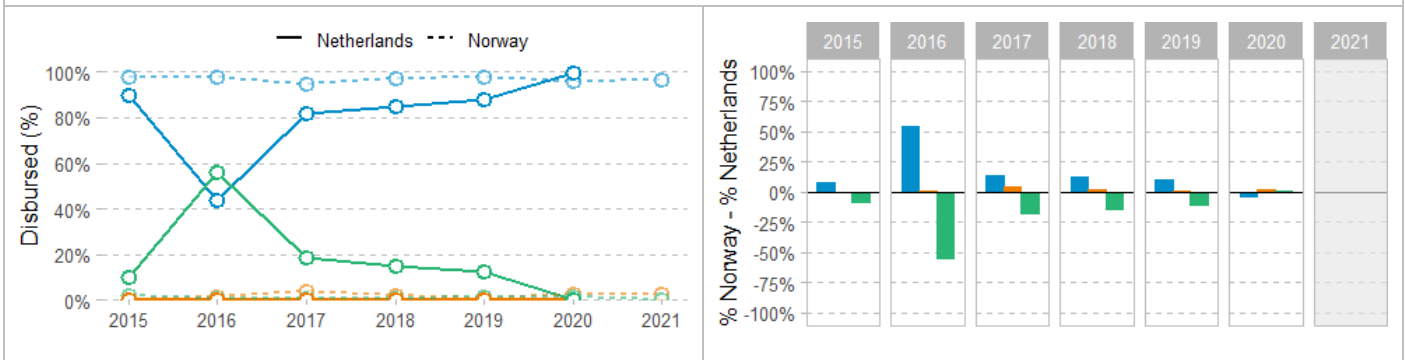


Syria

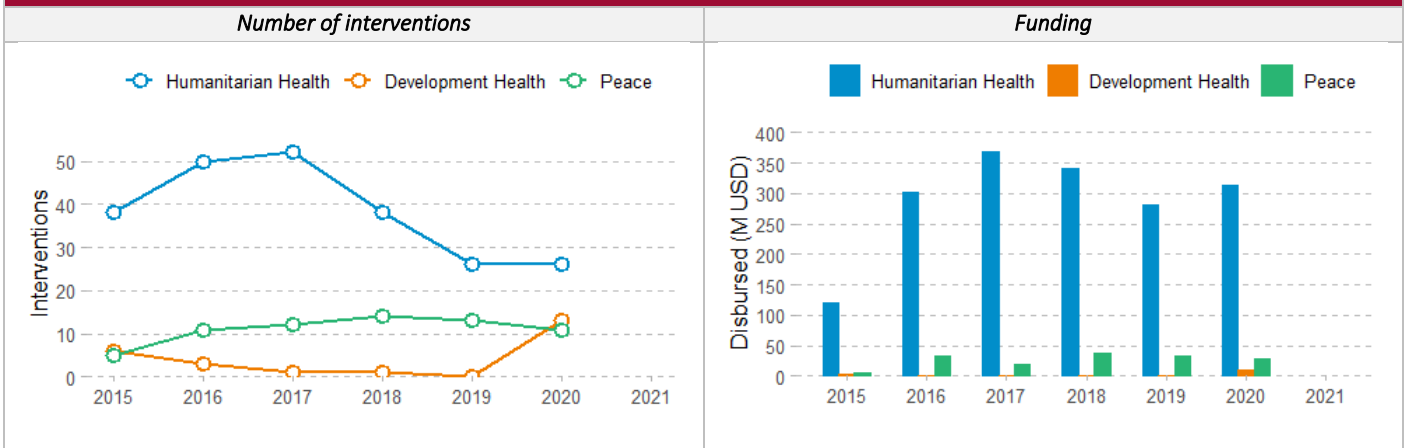
Health and peace interventions supported by Netherlands



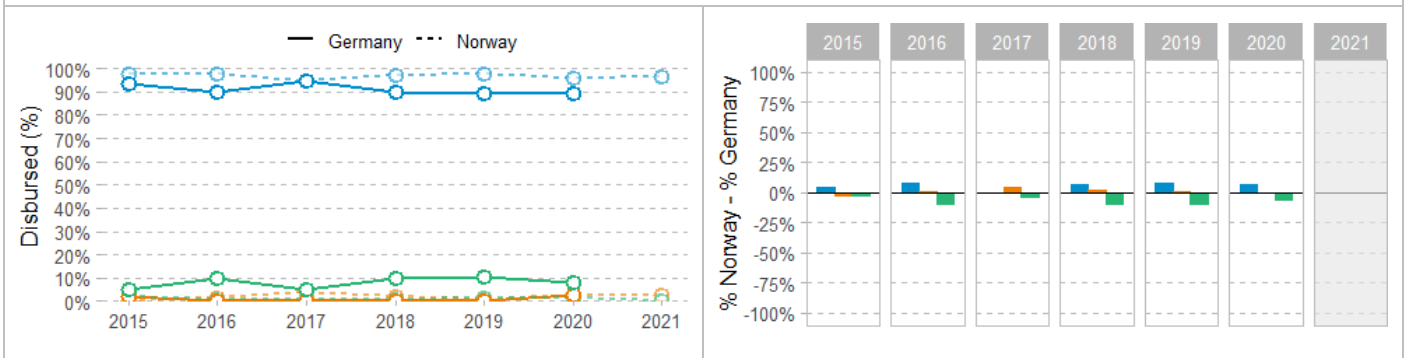
Disbursement proportions - Norway comparative



Health and peace interventions supported by Germany

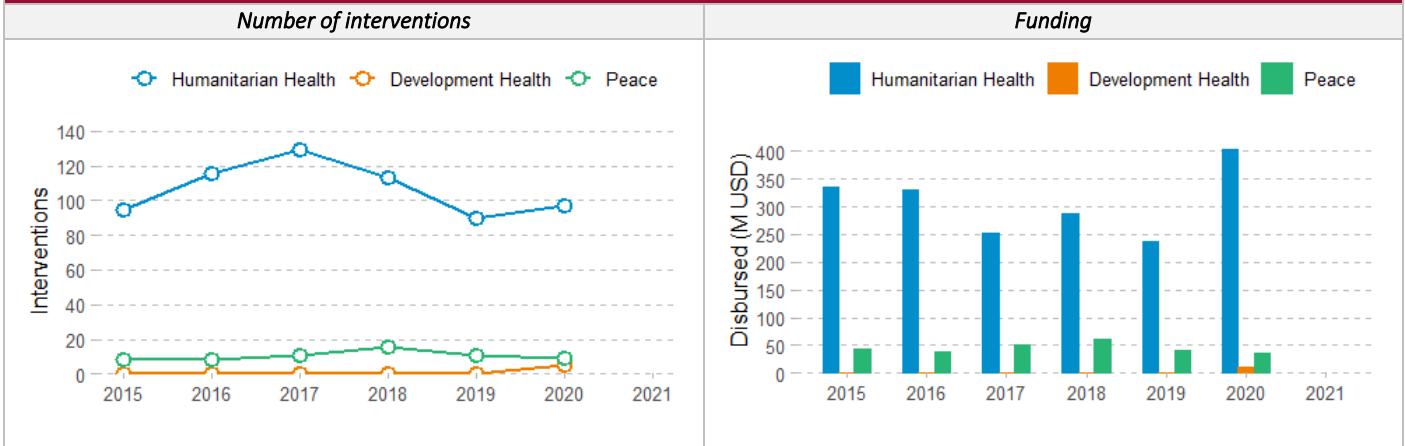


Disbursement proportions - Norway comparative

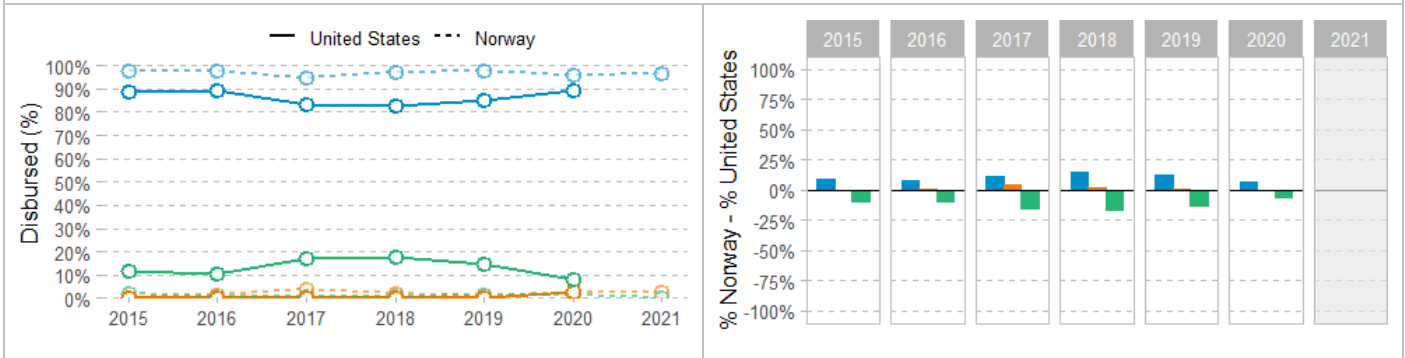


Syria

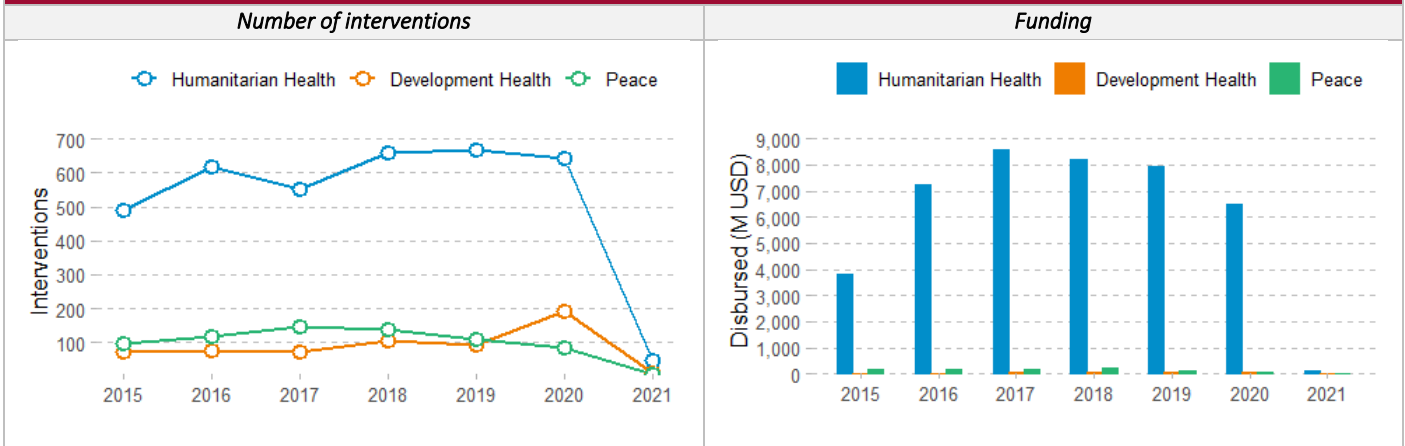
Health and peace interventions supported by United States



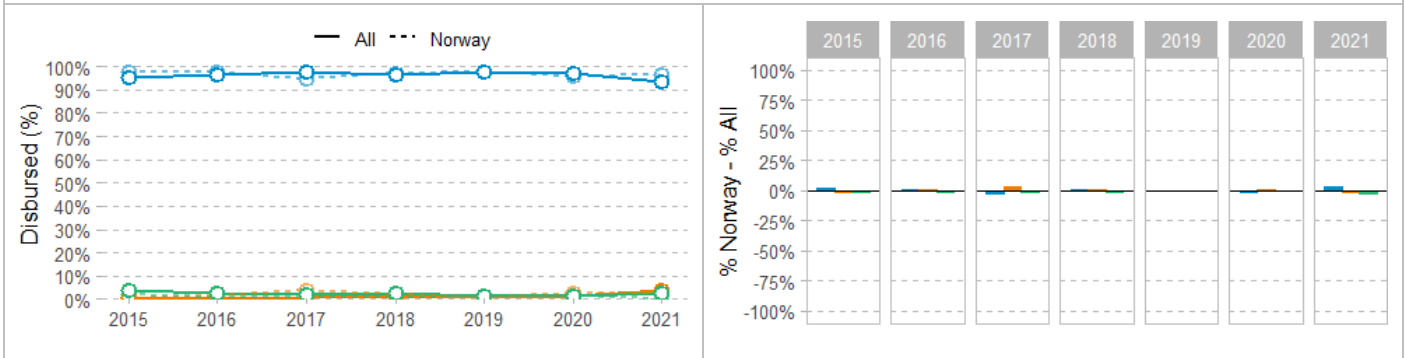
Disbursement proportions - Norway comparative



Aggregated health and peace interventions supported by all donors



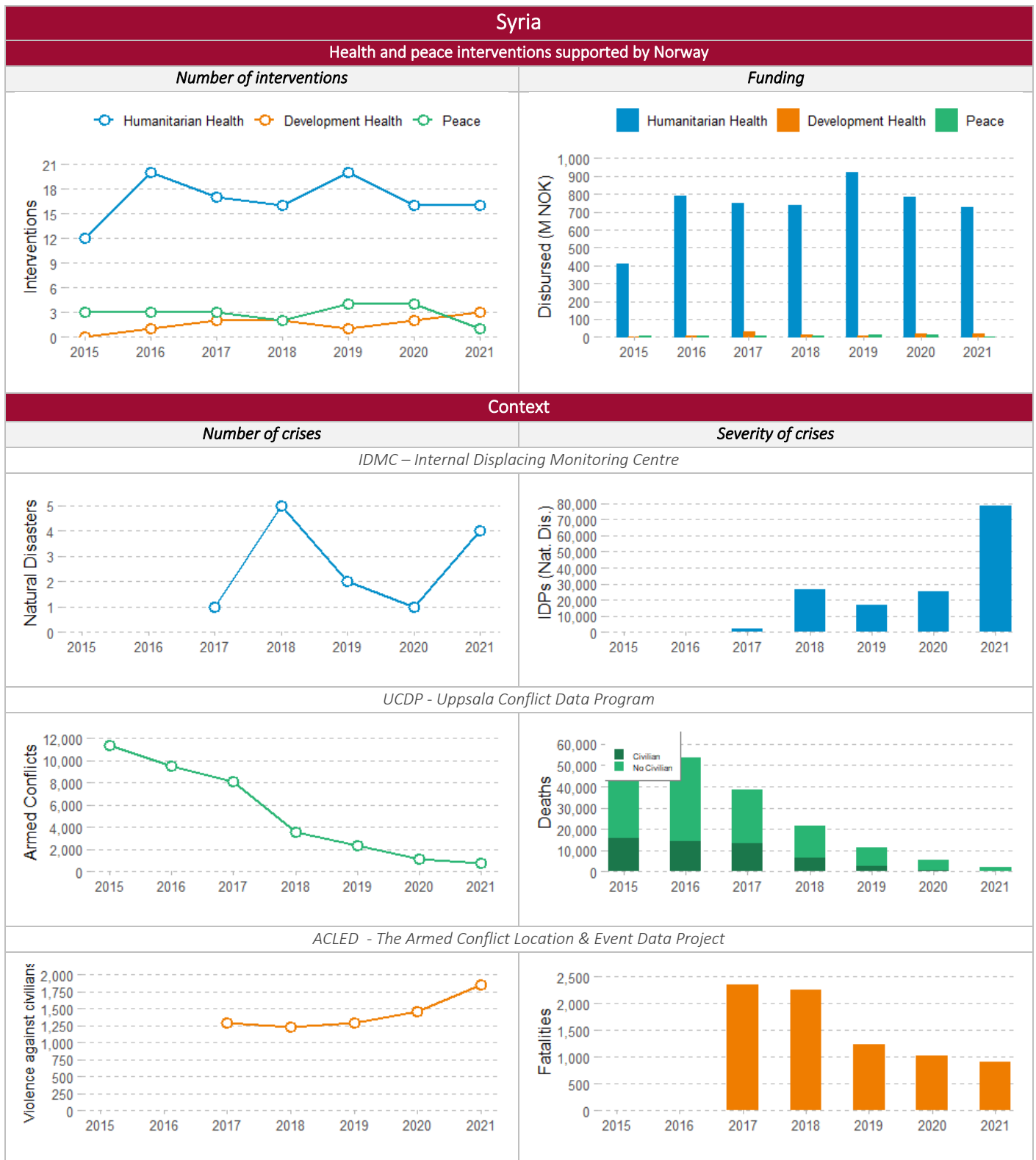
Disbursement proportions - Norway comparative



6.2.3. Contextual coherence

The analysis in this section is in line to that presented in the previous contextual coherence analysis, in consideration of HDP themes alone. The humanitarian health expenditure is in this case more prominent than when the themes were generally considered, but again its changes over time, namely a generally increasing trend with a sharp increase between 2015 and 2016, do not appear to be explain by the nature and severity of the crises analysed. Armed conflicts and violence against civilians do in fact decrease over this period. And the severity of natural disasters appears to increase in the later analysis years, at the time the humanitarian health expenditure slightly decreases. Thus, contextual coherence does not appear to be evident.

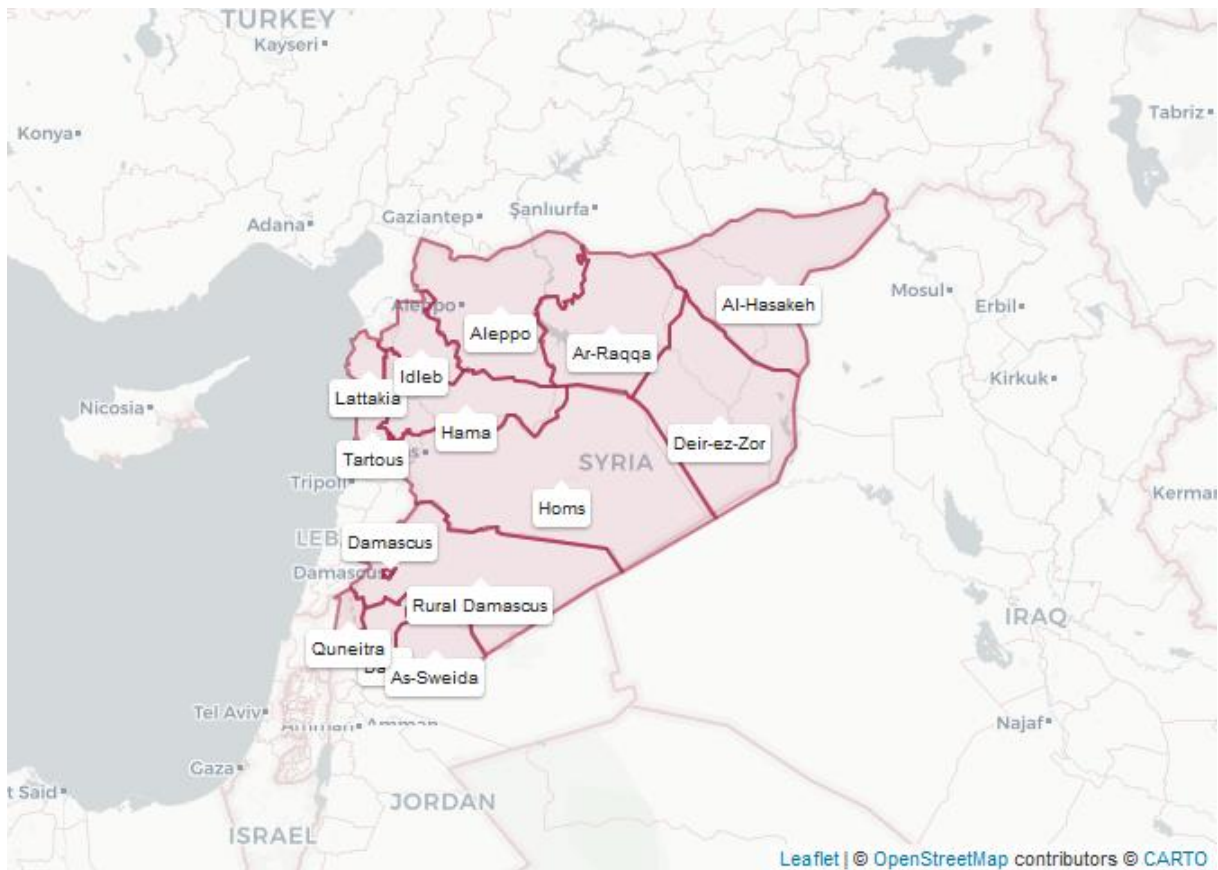
Figure 84. Longitudinal analysis of health and peace contextual coherence in Syria.



6.3. Spatial coherence of health and peace interventions at sub-national level

This subsection presents the results of the spatial coherence analysis interventions supported by Norway in Syria according to their geographical presence, on the basis of geo-located data. It considers administrative areas at level 1 (ADM1), as per Department of Evaluation’s database, the unit of analysis. These boundaries are described in Figure 85. Out of the 148 interventions included in the dataset provided by the Department of Evaluation, 68 are geo-located to an administrative area level 1. These are considered for the spatial analysis.

Figure 85. Administrative areas at level 1 in Syria (ADM 1 - Source: geoBoundaries).



6.3.1. Spatial coherence among types of intervention

Norway humanitarian health assistance to Syria is reaching all regions in the country. Humanitarian health interventions are widely spread across the country (at administrative level 1), with a majority of regions having constant presence over time. The dataset does not include geo-located peace interventions (Figure 86 and Figure 87).

Figure 86. Distribution of the number of health and peace interventions by type of intervention, year and administrative area at level 1 (From 0=0% to 1=100%; ratios add up 1 for the three types of intervention in each area and year).

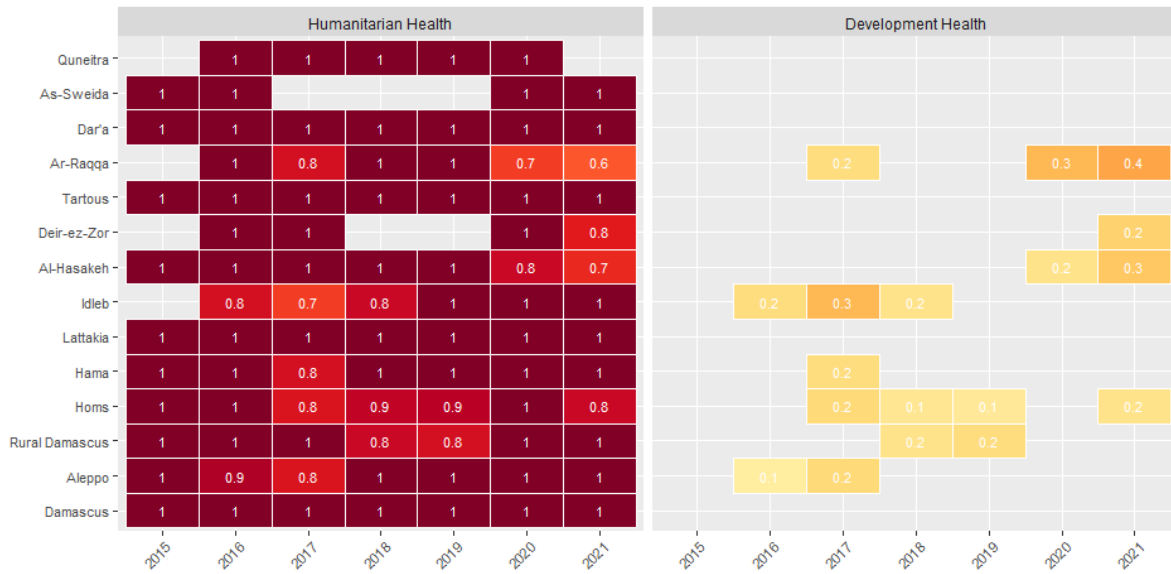
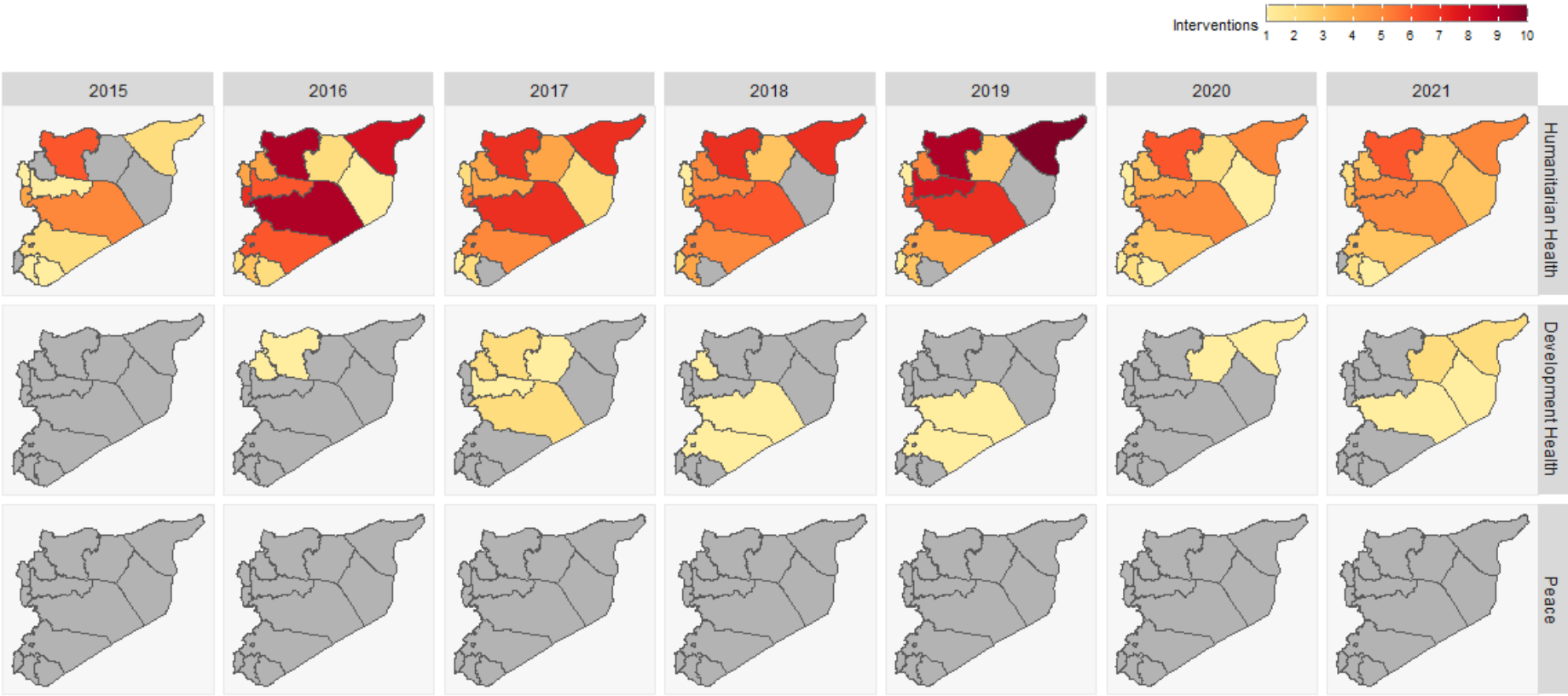


Figure 87. Number of health and peace interventions by type of intervention and year at administrative level 1 in Syria.



6.3.2. Coherence with other donors and multilateral institutions

This section analyses the spatial coherence between the number of health and peace interventions funded by Norway and those funded by other donors and multilateral institutions. These are depicted in Figure 88 where Norway's interventions are represented by the colour of each administrative area at level one, and other donors are represented by the number in each administrative area at level one.

For the purposes of this analysis, the comparator donors considered include both other countries foreign aid and also multilateral donors. Precisely, Norway's disbursement is presented in comparison to that of Germany and the Netherlands, and also the EU, the World Bank, UNICEF, UNOCHA, WHO, UNDP, and UNCHR.

The information for Norway has been obtained from the dataset provided by the Department for Evaluation at Norad and the data for other countries and multilateral institutions from IATI (see subsection 2.2).

Table 31. Donors included on each donor's group for Syria (Source IATI).

IATI Code	Name	Group
47122	Gavi, The Vaccine Alliance	Gavi
DE-1	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung (BMZ)	Germany
XI-IATI-EC_ECHO	Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)	EU
XI-IATI-EC_FPI	European Commission - Service for Foreign Policy Instruments	EU
XI-IATI-EC_NEAR	European Commission - DG Neighbourhood and Enlargement Negotiations	EU
XM-DAC-41114	United Nations Development Programme	UNDP
XM-DAC-41121	United Nations High Commissioner for Refugees (UNHCR)	UNHCR
XM-DAC-41122	UNICEF	UNICEF
XM-DAC-41127	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-DAC-5-7	Germany - Federal Foreign Office	Germany
XM-DAC-7	Ministry of Foreign Affairs of the Netherlands	Netherlands
XM-DAC-928	World Health Organization	WHO
XM-OCHA-CBPF	United Nations Office for the Coordination of Humanitarian Affairs	UNOCHA
XM-OCHA-CERF	UNOCHA - Central Emergency Response Fund (CERF)	UNOCHA

The analysis presents two clear results. First, spatial coherence is high in Homs, Aleppo and Al-Hassakeh, where Norway and all other countries implement a large number of humanitarian health interventions. Secondly, other donors appear to be significantly involved in Damascus²⁴ and Rural Damascus, where Norway's presence is much lower.

The disaggregation of this information by year and type of intervention confirms that this is the case for both humanitarian health and development health, for all the years analysed (Figure 17).

²⁴ A large number of other donors' interventions are located in Syria's capital city (Damascus). This could be caused either due to some donors not specifying the exact locations or because these donors centralized the interventions within the capital and distribute them to other locations registering the intervention in the capital.

Figure 88. Spatial coherence between the combined number of health and peace interventions funded by Norway (represented by colour of each administrative area) and the combined number of health and peace interventions funded by other donors (represented by the number in each area) in Syria from 2015 to 2021.

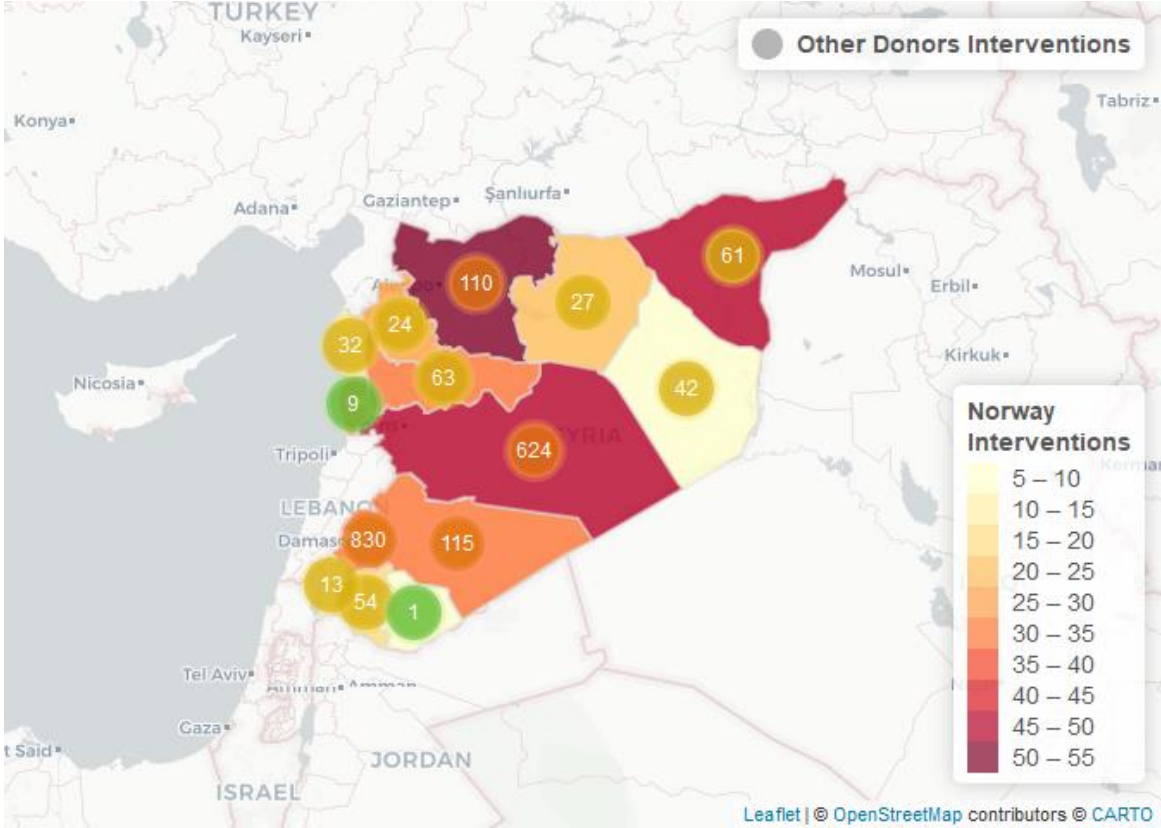


Figure 89. Spatial coherence between the number of health and peace interventions funded by Norway (colour of each administrative area) and other donors (bubble in each area) by year and type of intervention.

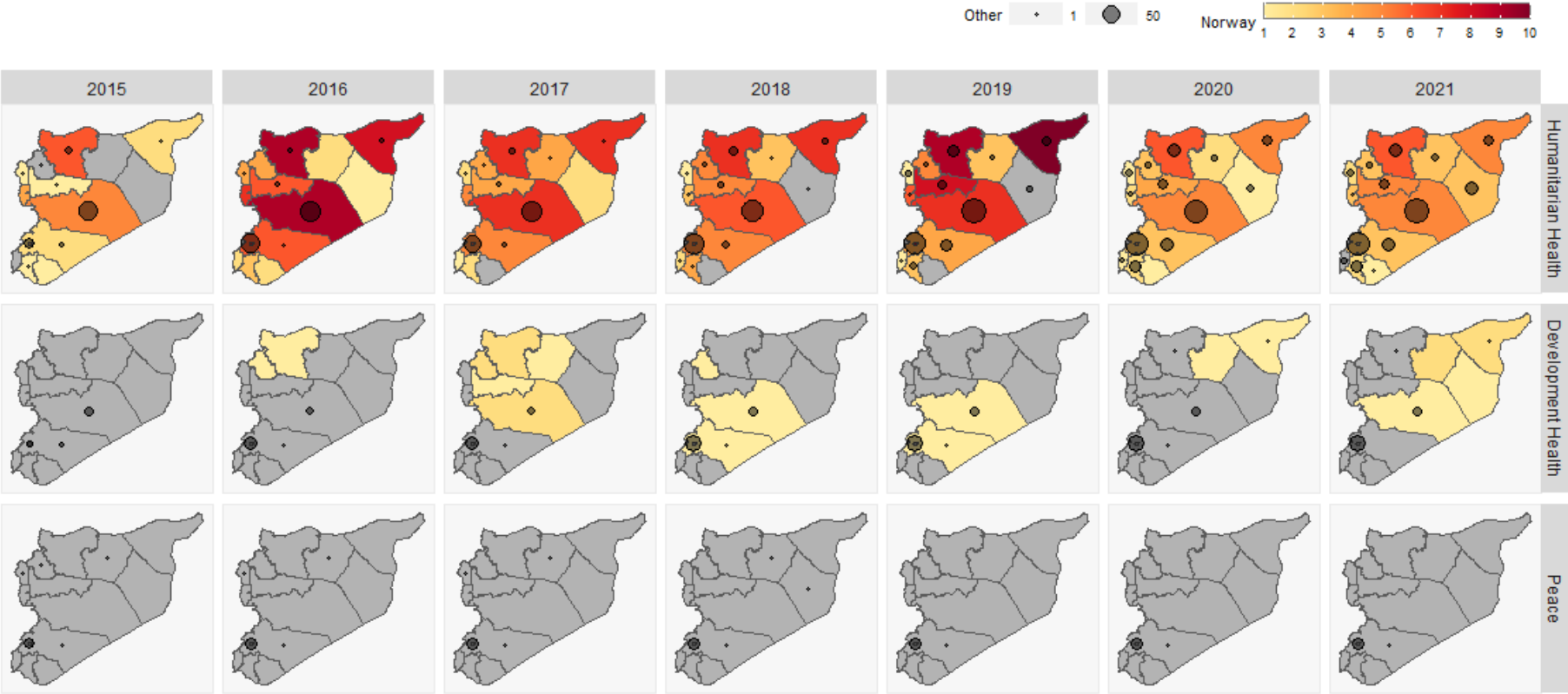


Figure 90. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor country.

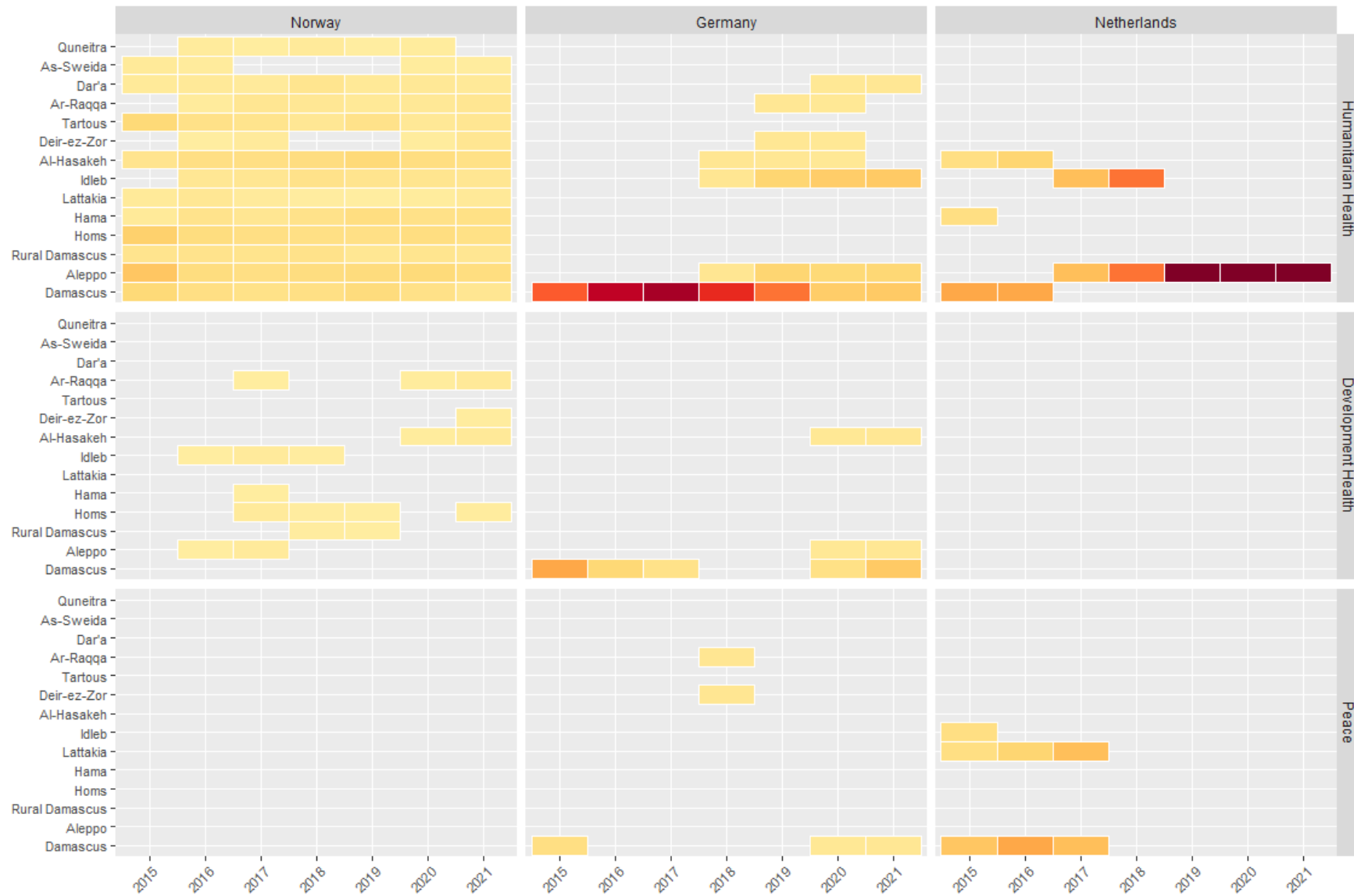


Figure 91. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor international institution.

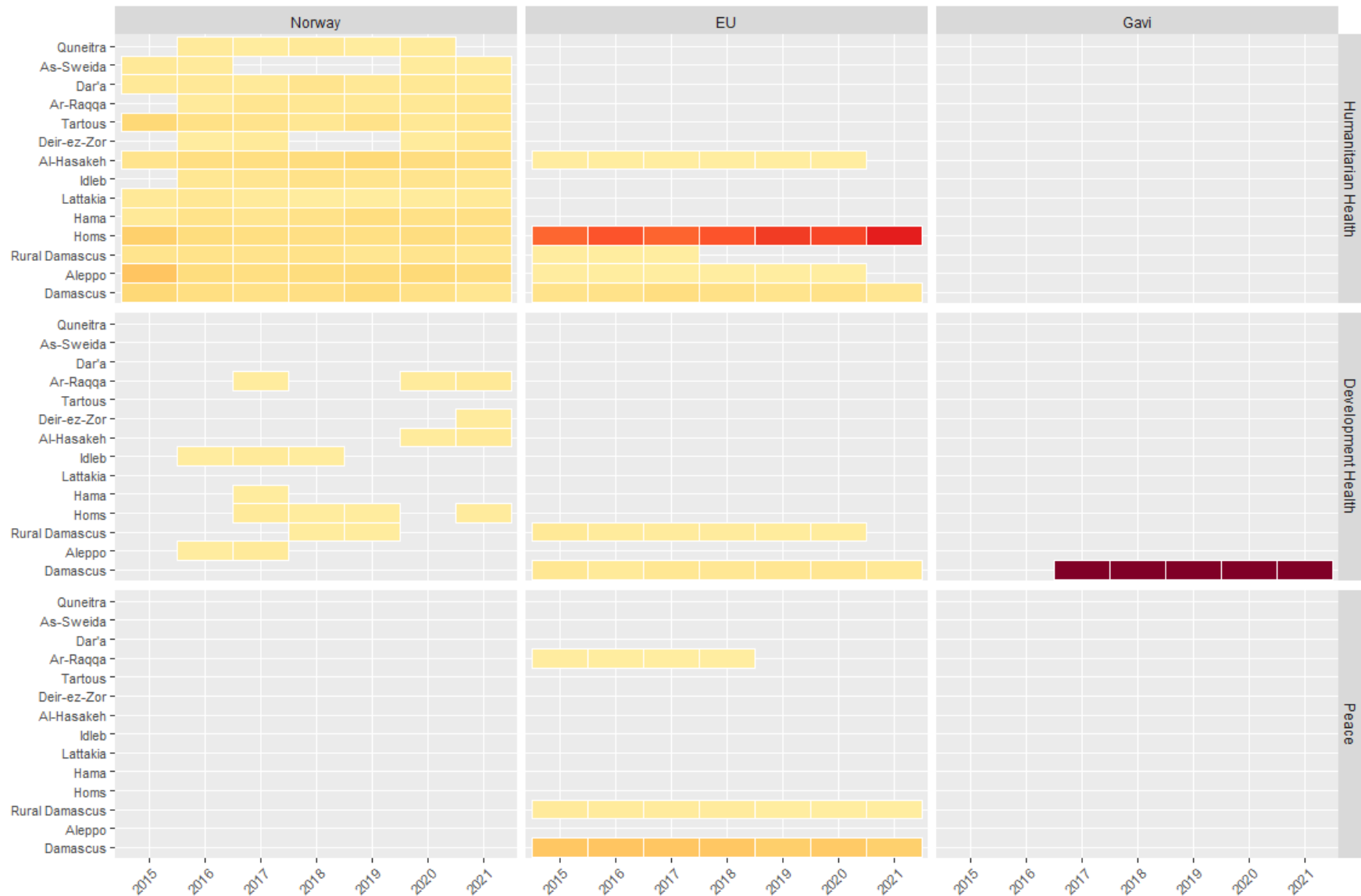
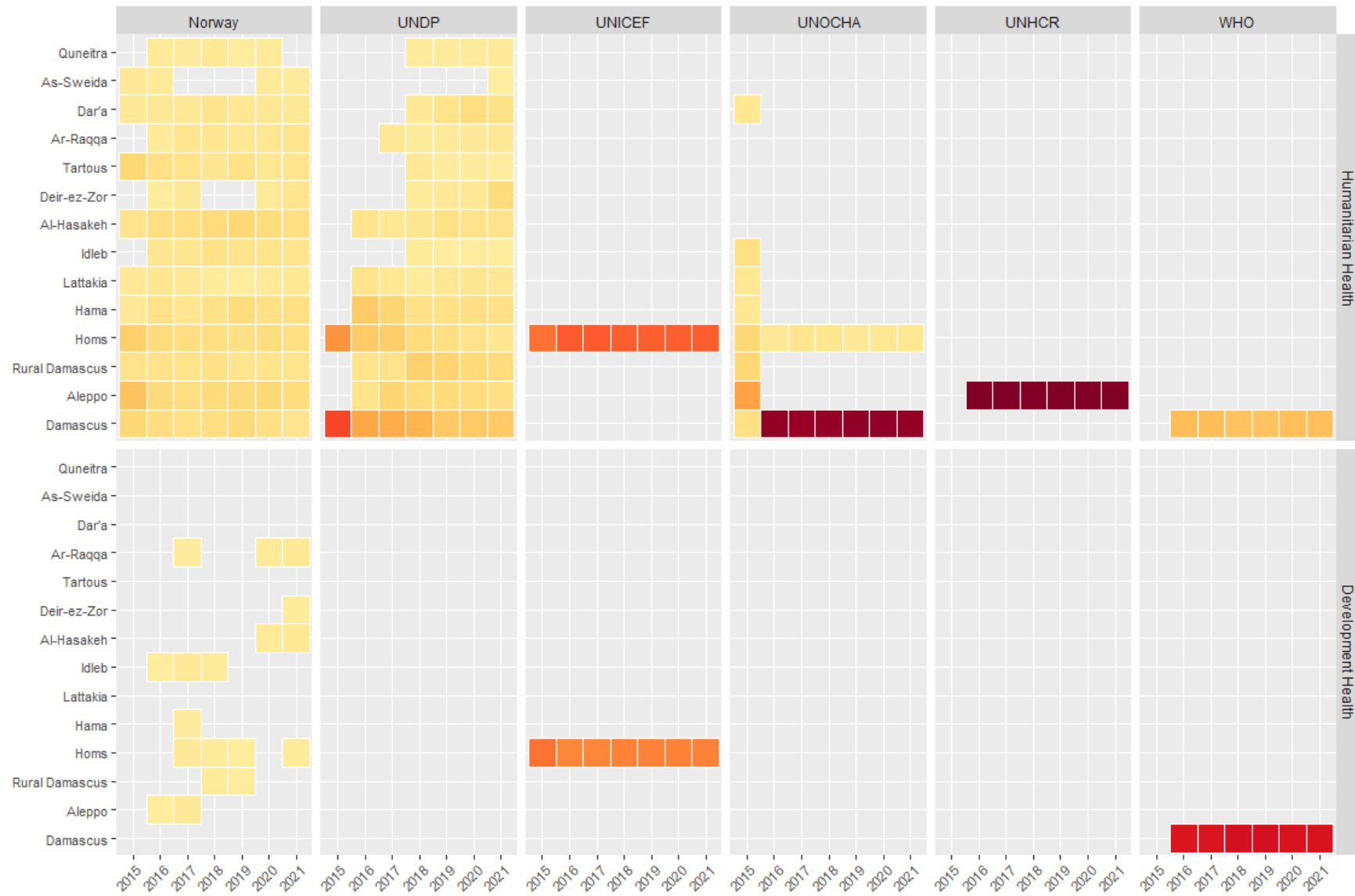


Figure 92. Spatial coherence between the number of health and peace interventions funded by Norway and other donors by year, type of intervention and donor UN agency.



The spatial coherence with other donors by donor and year is presented in Figure 90, Figure 91 and Figure 92. A clear conclusion from these figures is that Norwegian help is very focused on humanitarian interventions, covering very administrative areas trough time. The sustained and widespread humanitarian health assistance that Norway is providing to Syria is not common among comparator donors which operate in selected locations (often Damascus and Rural Damascus). The most notable similarity is to be found with UNDP, which also operates on a sustained manner across all areas. It is not possible to establish coherence in terms of development health.

6.3.3. Contextual coherence

This section considers contextual coherence between type of crises (natural disasters, armed conflicts and violence against civilians) and the number of health and peace interventions funded by Norway. As in the preceding section, for each administrative area the colour indicates the magnitude of Norway interventions, and the number refers to the number of ongoing crises over the period of analysis (2015-2021).

At this stage, the analysis considers all three types of interventions in combination, and their response to each type of crisis, this analysis shows a high coherence level between interventions and crises, particularly when considering armed conflicts and violence against civilians (Figure 93, Figure 94 and Figure 95).

Contextual coherence between aggregated Norwegian interventions and with natural disasters is vague, mainly as a consequence of the reduced number and variability in the location of natural disasters. Contextual coherence is more evident in the case of interventions with armed conflict and violence against civilians, all of them mainly located in Aleppo, Homs and Al-Hassakeh.

Figure 93. Spatial contextual coherence with natural disasters (number of interventions and number of crisis).

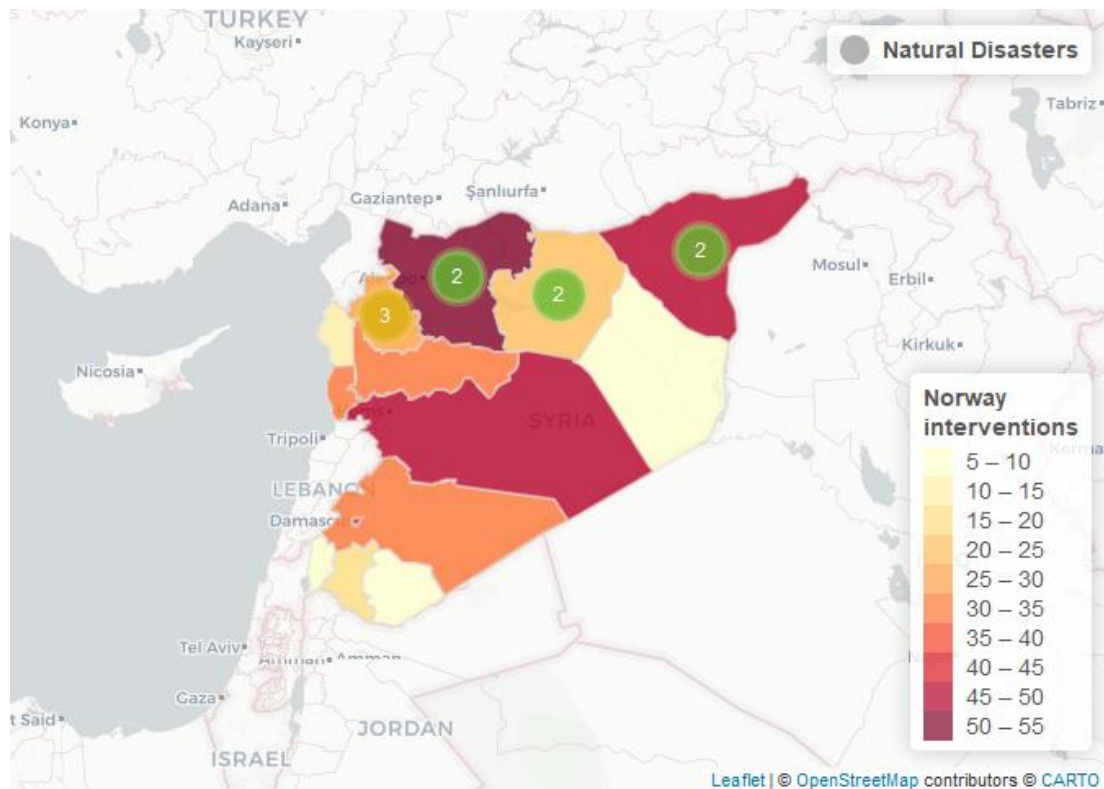


Figure 94. Spatial contextual coherence with armed conflicts (number of interventions and number of crisis).

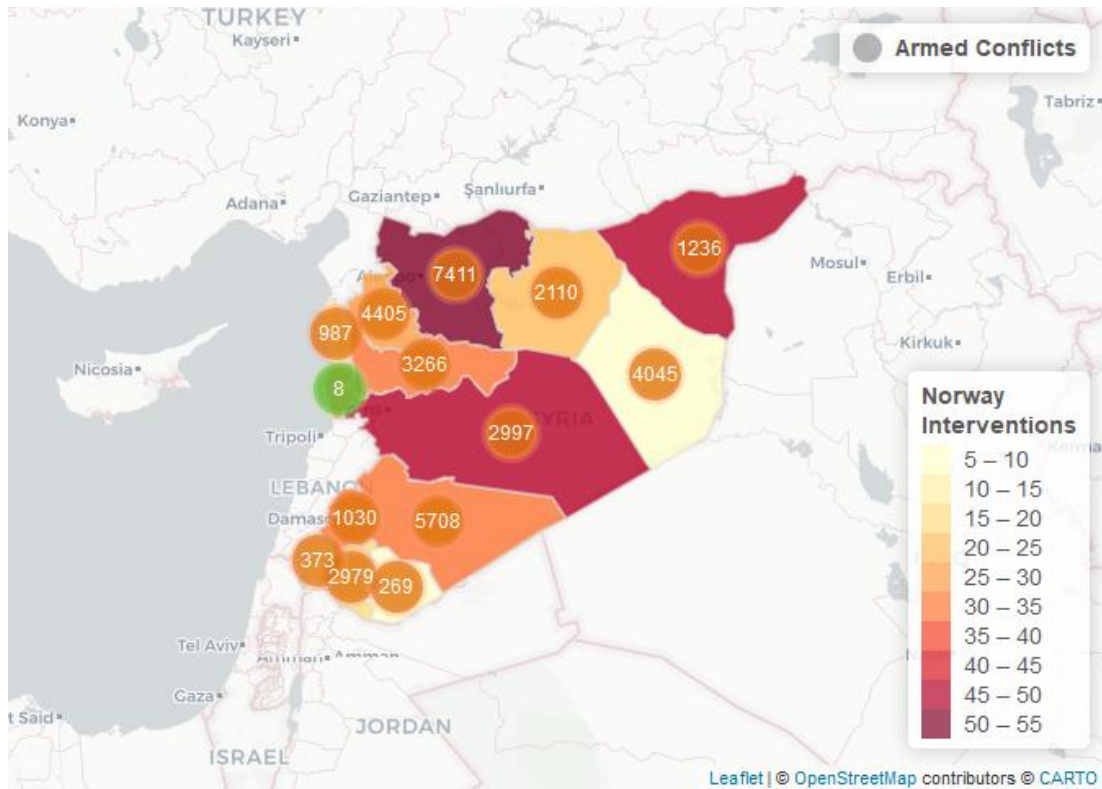
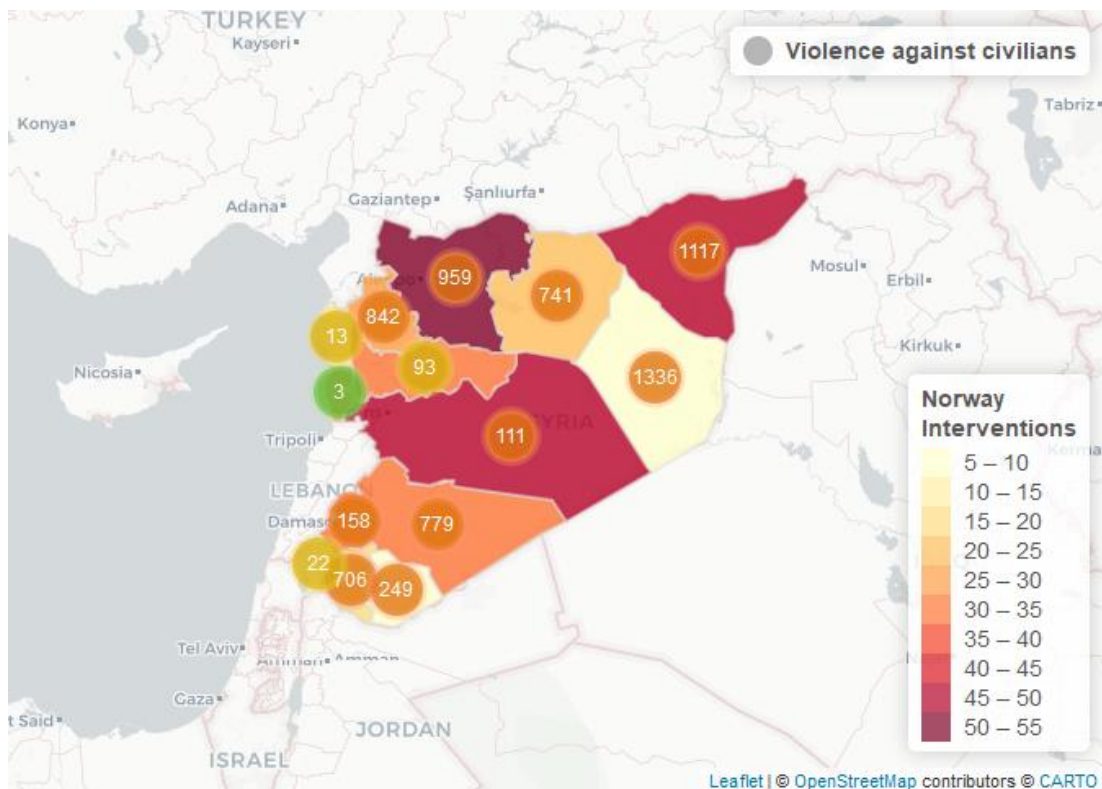


Figure 95. Spatial contextual coherence with violence against civilians (number of interventions and number of crisis).



A disaggregation of the contextual coherence analyses per year and type of intervention is presented in Figure 96, Figure 97, and Figure 98 or natural disasters, armed conflicts and violence against civilians respectively. The first row in each figure presents the location of the corresponding type of crisis, meanwhile the number of interventions of each type is represented by the colour of the administrative area. These figures show a decrease of armed conflicts since 2017, although violence against civilians seems to keep almost constant (note that there is no information about violence against civilians before 2017). Consequently, there is an increase of presence of development health interventions. For the years 2019 and 2021, when the armed conflicts reach its minimum value, it is observed a spread of humanitarian health interventions among all Syria.

Figure 96. Spatial contextual coherence with natural disasters by year and type of intervention (number of interventions and number of crisis).

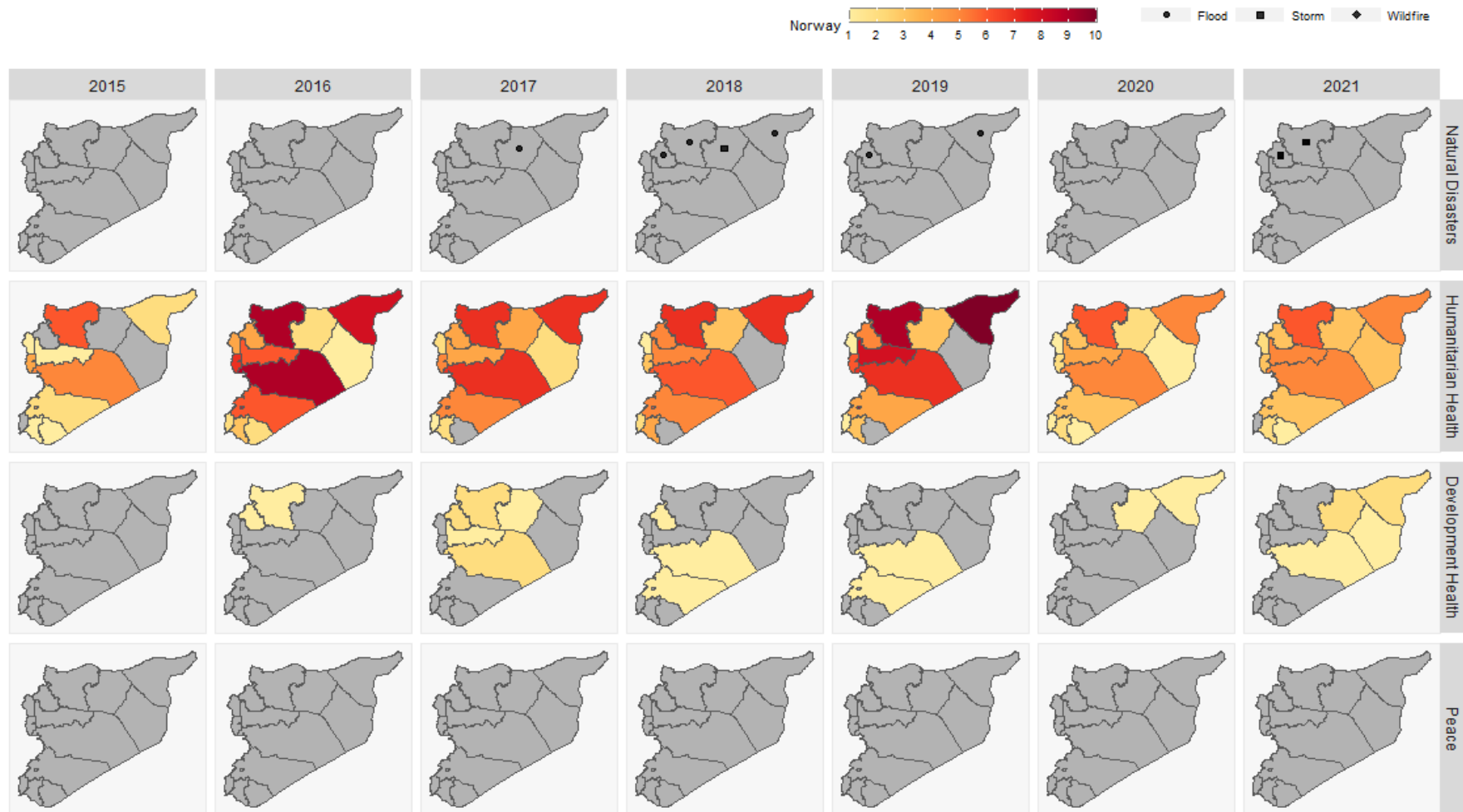


Figure 97. Spatial contextual coherence with armed conflicts by year and type of intervention (number of interventions and number of crisis).

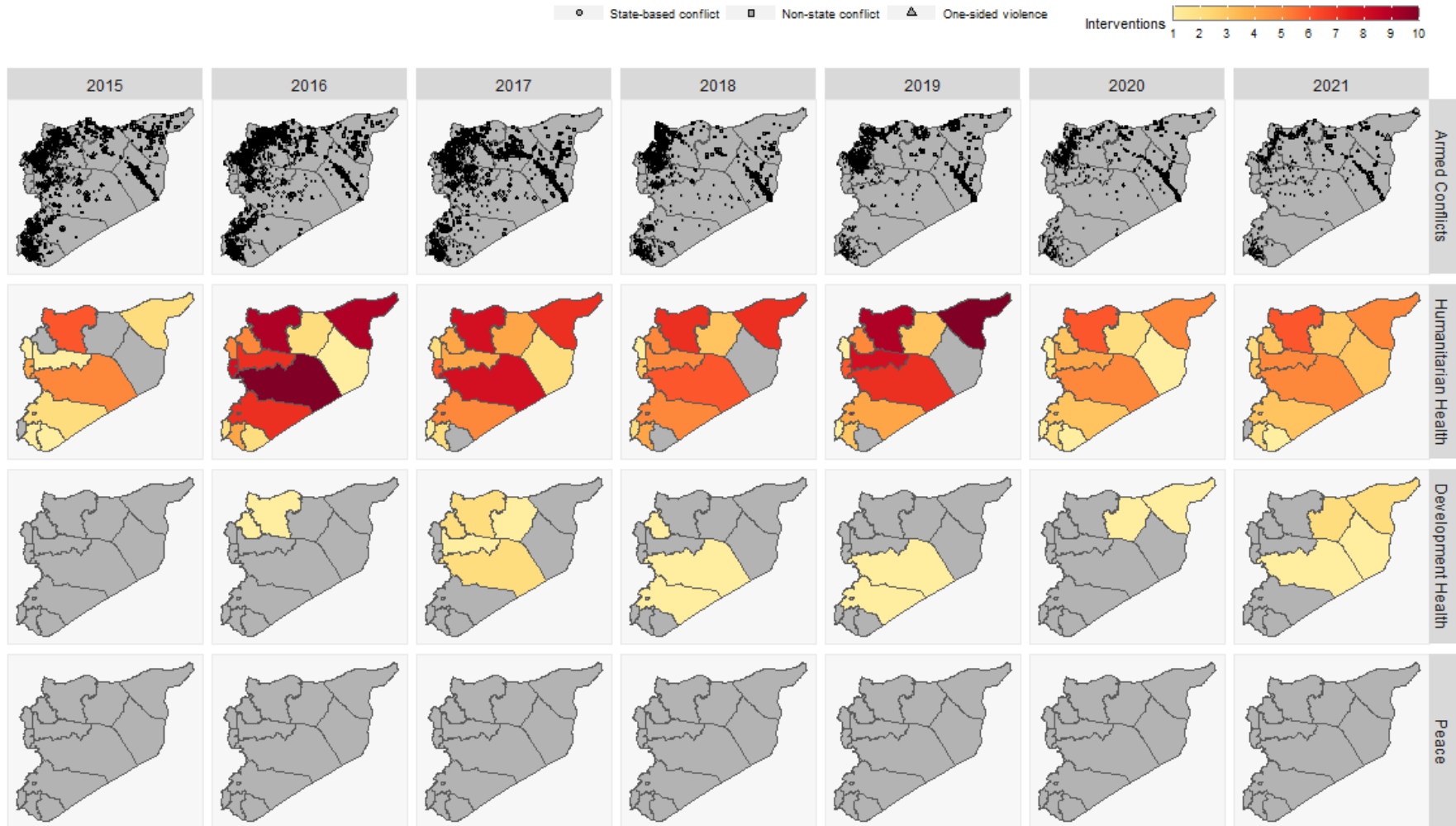
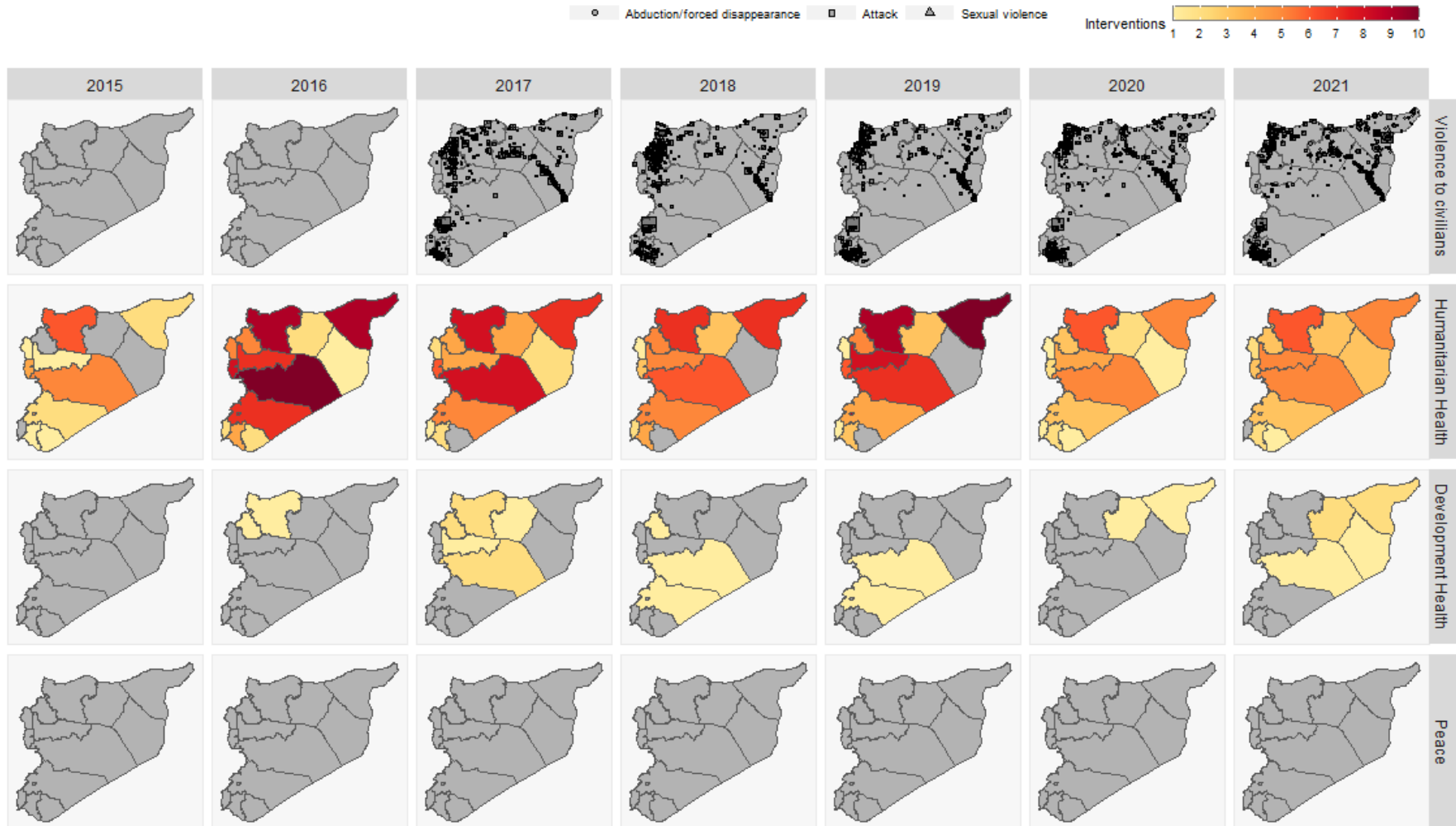


Figure 98. Spatial contextual coherence with violence against civilians by year and type of intervention (number of interventions and number of crisis).



7. Annex 1: Terms of Reference

Geospatial country analysis, - Norwegian humanitarian aid, development cooperation and peace efforts

TERMS OF REFERENCE

1. Background

The Humanitarian, Development and Peace (HDP) nexus

After the World humanitarian summit in 2016, the Humanitarian, Development and Peace (HDP) nexus has been a term high on the agenda in international development cooperation. The term is linked to debates concerning the persistent divide between humanitarian and development programmes. This divide is characterised by operational, organisational and financial differences between humanitarian and development sector. Recent research and policy documents suggest that better collaboration, coherence and complementarity between these sectors may enhance the quality of the aid to crisis-affected populations and increase their resilience.¹

Humanitarian assistance, development aid and peace efforts are all needed at the same time to reduce needs, risk and vulnerability². OECD DAC countries including Norway have explicitly outlined specific positions and ways of working to enhance the coherence of their humanitarian, development and peace efforts.³ Coherence between these interventions⁴ supports the prevention of crises. It helps to better meet immediate humanitarian needs of the most vulnerable (the realm of humanitarian aid) while also addressing the longer-term drivers of vulnerability and root causes of crises coming under the development aid and peace umbrellas.

Evaluation of the interaction between Norwegian humanitarian aid, development cooperation and peace efforts

The Department for Evaluation in Norad is governed under a separate mandate⁵ from the ministries of Foreign Affairs and Climate and Environment, whereby the Department is tasked with planning, initiating, and carrying out of independent evaluations of activities financed by the Norwegian aid budget, which totalled about 40 billion NOK in 2021.

The Department for Evaluation has a mandate to initiate and perform independent evaluations of development cooperation. Other policy areas will be included in evaluations carried out by the

¹ See e.g. UN Secretary-General's High-Level Panel on Internal Displacement (2021), "Shining a Light on Internal Displacement: A Vision for the Future"; Center on International Cooperation (CIC), "The Triple Nexus in Practice: Toward a New Way of Working in Protracted and Repeated Crises" (New York: Center on International Cooperation, 2019); OECD (2019) DAC Recommendations on the Humanitarian Development Peace Nexus; OECD (2017). Humanitarian Development Coherence. World Humanitarian Summit. Putting Policy into Practice; Redvers, L. and B. Parker (2020). 'Searching for the nexus: Give peace a chance'. The New Humanitarian. 13 May 2020; United Nations and World Bank (2018). Pathways for Peace: Inclusive Approaches to Preventing Violent Conflict. Washington, DC: World Bank.

² IASC (Inter-Agency Standing Committee) (2020). Exploring the Peace within the Humanitarian-Development-Peace Nexus (HDPN). Issue paper. IASC Results Group 4 on Humanitarian-Development Collaboration.

³ OECD (2022), pp.22-23.

⁴ 'Intervention' in this context is used interchangeably with 'project'.

⁵ Available here (in Norwegian): <https://www.norad.no/globalassets/filer-2015/evaluating/evalueringsinstruks-januar-2022.pdf>

Department for Evaluation to the extent they are relevant to development cooperation and always from a Norwegian development aid policy perspective.

The Department for Evaluation has started an evaluation of the interaction between Norwegian humanitarian aid, development cooperation and peace efforts. The main purpose of the evaluation is to contribute to learning through the provision of knowledge on the interlinkages between Norwegian humanitarian, development and peace efforts. The objectives of the evaluation are:

1. To assess to what extent Norway's HDP efforts have been coherent at country level to prevent, respond to, and recover from humanitarian crises.
2. To formulate lessons on how Norway can coherently link HDP interventions to reduce people's needs, risks and vulnerabilities.

In the evaluation coherence is understood as the compatibility of humanitarian, development and peace interventions with other humanitarian, development and peace interventions in a given country. Coherence can be broken further down into two sub-types of coherence: policy coherence, understood as coherence between interventions and the overall policy level or normative commitment; and implementation coherence, which pivots around the relation between interventions. On the latter, the relational dimension of HDP interventions points at yet another distinction: the spatial (i.e. to what extent interventions are co-located or geographically dispersed) and longitudinal (temporal) one (i.e. to what extent they occurred at the same time, before or after each other). Furthermore, these time and spatial dimensions of interventions are to be seen in relation to the time and spatial dimensions of a given crisis – i.e. where in the country and when the given crisis hit and its evolution.

Thematically, the evaluation will take a broader HDP perspective but delve deeper into one sector (health, including sexual and gender-based violence as a health issue), for practical reasons (Norwegian development aid data is not geocoded by default) but also for greater analytical granularity and useful insights. Findings from this sectoral analysis are likely to reflect more than this sector, though.

Geographically, the evaluation will focus on the following four countries:

- *The Democratic Republic of the Congo (DRC)*: The DRC suffers one of the most complex and prolonged humanitarian crises in the world⁶. At the end of 2021, there were more than 5.5 million internally displaced people in the DRC, the third highest figure in the world. The north-east of the country has been continuously experienced intercommunal tensions and conflicts, with a sharp increase in targeted attacks on displacement camps since November 2021⁷. Between 2015 and 2021, NOK 1.6 billion in Norwegian earmarked development aid funds were disbursed to DRC, 64.7% channeled through Norwegian non-governmental organisations and 28.9% through multilateral organisations⁸.
- *Ethiopia*: The turmoil that started in 2018 with reforms that shook the fragile ethnic-based federalism gave way to an internal war in Tigray and neighboring regions in November 2020⁹. In 2021, the conflict in the north was compounded by instability and violence in several other regions and a drought – leaving almost 4.2 million people internally displaced¹⁰. Between 2015 and 2021, NOK 4.0 billion in Norwegian earmarked

⁶ OCHA (2021). République démocratique du Congo: Aperçu des besoins humanitaires 2022. December 2021.

⁷ NRC (2022). The world's most neglected displacement crises in 2021.

⁸ Norad, Norwegian development aid. Statistics and results.

⁹ Protection Cluster Ethiopia. Protection Analysis Update June 2022.

¹⁰ NRC (2022). The world's most neglected displacement crises in 2021.

development aid funds were disbursed to Ethiopia. 34.8 % channelled through Norwegian non-governmental organisations, 29.5% through multilateral organisations and 22.4% through public sector in the recipient country¹¹.

- Lebanon: The situation in the country in the past years has been portrayed as a multi-layered crisis offsetting development gains and with acute humanitarian consequences. It is estimated that 2.5 million people are in need¹². Between 2015 and 2021, NOK 3.3 billion in Norwegian earmarked development aid funds were disbursed to Lebanon, 52.2% channelled through multilateral organisations and 39.6% through Norwegian non-governmental organisations¹³.
- Syria: Syria continues to be a complex humanitarian and protection emergency characterized by over ten years of ongoing hostilities and their long-term consequences¹⁴. It was estimated that over 13.4 million people were in need of humanitarian assistance inside Syria in 2021, including 6.7 million internally displaced people¹⁵. Between 2015 and 2021, NOK 6.6 billion in Norwegian earmarked development aid funds were disbursed to Syria, half of them channelled through multilateral organisations and 46.7% through Norwegian non-governmental organisations¹⁶.

The evaluation questions will be responded to in an evaluation report that builds on the following two phases: 1) A geospatial country analysis (Phase 1 of the evaluation), focusing on implementation coherence and further described below. 2) Implementation and policy coherence analysis (Phase 2 of the evaluation), which will build on the findings from the geospatial analysis and complement them with inter alia context-specific expert and practitioners' assessments, addressing both implementation and policy coherence. This tender covers phase I of the evaluation – geospatial country analysis.

2. Purpose, objective and scope of the geospatial country analysis

The purpose of the geospatial country analysis is to ground the above-referred evaluation by providing the necessary overview of humanitarian, development and peace interventions funded by Norwegian aid in the four selected countries.

The main objective of the analysis is to map out those interventions and assess the level of implementation coherence along the following dimensions:

- Spatial and longitudinal distribution of humanitarian, development and peace interventions receiving Norwegian earmarked development aid *relative to each other*.
- Spatial and longitudinal distribution of humanitarian, development and peace interventions receiving Norwegian earmarked development aid *relative to crisis dynamics and needs*.
- Spatial and longitudinal distribution of humanitarian, development and peace interventions receiving Norwegian earmarked development aid *relative to other interventions*.¹⁷
- Norwegian partners implementing humanitarian, development and peace interventions – i.e. between types of interventions they implement, their locations and changes over time.

¹¹ Norad, Norwegian development aid. Statistics and results.

¹² OCHA (2022). Increasing Humanitarian Needs in Lebanon. April 2022.

¹³ Norad, Norwegian development aid. Statistics and results.

¹⁴ OCHA (2022). 2022 Humanitarian Needs Overview: Syrian Arab Republic. February 2022.

¹⁵ OCHA (2021). 2021 Humanitarian Needs Overview: Syrian Arab Republic. March 2021.

¹⁶ Norad, Norwegian development aid. Statistics and results.

¹⁷ Interventions funded either by other OECD DAC countries or by Norway through multilateral aid.

This analysis will contribute to the evaluation covering the period 2016 – 2021. The geospatial country analysis, however, will work with a slightly expanded time horizon, from 2015 – 2021. This is to make sure the geospatial country analysis can trace back in the dataset ex ante preparedness and HDP adaptation for crises occurring in early 2016.

While the analysis will consider the overall trends in humanitarian, development and peace interventions receiving Norwegian earmarked development aid, the thematic focus of the analysis will be on the health sector, including sexual and gender-based violence as a health issue.

The deliverable from this study will not be published on its own but form a starting point for the analysis in the next phase, and be included as an annex to the final evaluation report.

3. Analysis questions

The geospatial country analysis will address the following questions:

1. To what extent are the relevant interventions targeting the same subnational regions/populations (spatial coherence) within the same timeframe (longitudinal coherence)?
2. To what extent (and eventually how) do humanitarian, development and peace interventions receiving Norwegian earmarked development aid combine (if at all) to respond to contextual changes (i.e. crisis dynamics and needs) in each country?
3. To what extent (and eventually how) do humanitarian, development and peace interventions receiving Norwegian earmarked development aid funds correlate with those funded by other actors (e.g. other OECD DAC countries) or by Norway through multilateral aid?
4. To what extent do partners receiving funding support from Norway and implementing humanitarian interventions also implement development and/or peace interventions in the same country and geographic areas at the sub-national level? Is there any correlation (and if yes, how) between type of partner and contextual changes (i.e. crisis dynamics and needs)?

4. Approach and methodology

The analysis will rely on both internal data sources on Norwegian aid and external data sources on aid and crisis- or conflict-specific indicators.

- **Internal data sources on Norwegian aid:** a dataset will be created building on [Norwegian aid statistical data](#), with additional variables of interest for the geospatial analysis (location and project start, for example) extracted from unstructured data from project documents retrieved from the archives. The Department for Evaluation will assemble a first, beta version of the dataset, to be handed over to the contractor.

The beta version of the dataset in Excel format will include approx. 3,800 entries pre-data cleaning. The dataset contains 45 variables (see Annex I)¹⁸. In addition, about 30-35% of them (the sub-set of health sector specific projects and narrowly defined peace projects) will include location variables (textual information, with various degree of disaggregation by administrative division levels).

¹⁸ The terms and categories used in the Norwegian aid statistics conform to the reporting standards of the OECD. For more details on Norwegian aid statistics and these variables, see Norad (2022). Statistical Classification Manual.

The contractor will be responsible for ensuring that the dataset is fit for purpose, by e.g. cleaning the data, including handling duplicates and missing values; geoparsing, using locations as textual information in the dataset to create geolocated points representing these locations; and data transformation and data reduction.

- **External data sources on aid and crisis- or conflict-specific indicators:** To answer the above-described analysis questions, the contractor will work with a limited number of publicly available external data sources on aid provided by other actors and contextual conditions related to crisis and conflict intensity.

To assess external coherence, it will be necessary to pair data on interventions funded by Norway and their location with data on interventions funded by other donors and their locations. The latter can possibly be addressed through data from International Aid Transparency Initiative (IATI), AidData or similar provider given that the aid data is already geolocated. There might also be country-specific data repositories of interest that can be found in the OECD's DAC website.

The mapping and analysis will consider how Norwegian interventions respond to contextual changes. Crisis intensity and geographic distribution is a dimension of analytical interest. This can be measured by resorting to political violence data, sexual violence data and/or casualties from armed conflicts. The Armed Conflict Location & Event Data Project (ACLED) and Uppsala Conflict Data Program (UCDP) provide both open, geocoded data on this dimension. Another crisis intensity proxy might be the number and location of internally displaced people (IDPs), provided primarily by IOM's Data Tracking Matrix dataset. Health data could also be explored and sourced from, for example, the Demographic and Health Surveys (DHS) Program to identify areas of vulnerability and changes over time. Similarly, the contractor might want to consider poverty levels, to determine if aid is reaching the furthest behind - and if so, if it is 'just' humanitarian assistance or also development and peace aid.

The contractor will consider the data ecosystem and select the most reliable and appropriate datasets to carry out this part of the analysis.

The analysis will tackle both longitudinal and spatial coherence, operating with an elastic definition of what constitute a humanitarian, development or peace intervention: from a broad definition suitable to carry out trend analyses at a national level to narrow definitions equalling humanitarian and development with health-specific interventions and peace to one particular OECD CRS purpose code. A staged analysis structured in the following manner is proposed:

1. **An analysis of longitudinal coherence of humanitarian, development and peace interventions at the aggregate, country level (not geolocated analysis):**
 - I. Overview of interventions. Trends and correlations relative to each other – i.e. the degree to which humanitarian, development and peace interventions move in coordination with one another over time.
 - II. Overview of interventions. Trends and correlations relative to context.
 - Context: measures and proxies (as longitudinal data) in Country X
 - Context: timeline. Turning points, crises.
 - III. Overview of partners per type of intervention («humanitarian», «development» and «peace», see point iv) and type of partner (i.e. Annex I, variables 4 "agreement partner", and 6 "implementing partner").

- IV. For this part of the analysis, it is suggested to define the categories «humanitarian», «development» and «peace» using OECD CRS sector codes in the following manner:
- Humanitarian:
 - 720 Emergency response
 - 730 Reconstruction Relief & Rehabilitation
 - 740 Disaster Prevention & Preparedness
 - Development:
 - All codes except 152, 720, 730 and 740
 - Peace:
 - 152 Conflict, Peace & Security
2. **An analysis of longitudinal coherence of humanitarian and development interventions within the health sector and peace interventions at the aggregate, country level (not geolocated analysis)**
- I. Overview of health sector and peace interventions (Norway). Trends and correlations relative to each other.
- II. Overview of health sector and peace interventions by other donors. Trends and correlations relative to Norway.
- III. Overview of health sector and peace interventions (Norway and other donors). Trends and correlations relative to context.
- Context: measures and proxies (as longitudinal data) in Country X
 - Context: timeline. Turning points, crises.
- IV. For this part of the analysis, it is suggested to define the categories «humanitarian» and «development» within the health sector and «peace» using OECD CRS sector codes in the following manner¹⁹:
- Humanitarian:
 - 720 Emergency response (sub-codes 72010, 72011, 72050)
 - 730 Reconstruction Relief & Rehabilitation
 - 740 Disaster Prevention & Preparedness
 - Development:
 - 120 Health
 - 121 Health, General (sub-codes 12110, 12181, 12182, 12191)
 - 122 Basic Health (sub-codes 12220, 12230, 12240, 12250, 12261, 12262, 12263, 12264, 12281)
 - 123 Non-communicable diseases (NCDs) (sub-codes 12310, 12320, 12330, 12340, 12350, 12382)
 - 130 Population Policies/Programmes & Reproductive Health (sub-codes 13010, 13020, 13030, 13040, 13081)
 - 15180 Ending violence against women and girls²⁰
 - 16050 Multisector aid for basic social services.
 - Peace:
 - 152 Conflict, Peace & Security (sub-code 15220)
3. **An analysis of longitudinal and spatial coherence of humanitarian and development interventions within the health sector and peace interventions at the sub-national level (geolocated analysis).** A similar analysis as in stage 2 above, with the necessary adaptations to use the geolocated analysis at the sub-national level to its full potential. For this part of the analysis, it is suggested to to define the categories «humanitarian» and «development» within the health sector and «peace» using OECD CRS sector codes as in stage 2, with one modification related to “peace”:

¹⁹ Some of the OECD CRS codes herein used to define the health sector might, to some extent, cover also non-health related interventions given how the codes are being defined by the OECD and used.

²⁰ This code covers health-oriented interventions such as those designed to stop practicing female genital mutilation/cutting (FGM/C) and provision of services including psychosocial counselling and health care.

- Humanitarian:
 - 720 Emergency response (sub-codes 72010, 72011, 72050)
 - 730 Reconstruction Relief & Rehabilitation
 - 740 Disaster Prevention & Preparedness
- Development:
 - 120 Health
 - 121 Health, General (sub-codes 12110, 12181, 12182, 12191)
 - 122 Basic Health (sub-codes 12220, 12230, 12240, 12250, 12261, 12262, 12263, 12264, 12281)
 - 123 Non-communicable diseases (NCDs) (sub-codes 12310, 12320, 12330, 12340, 12350, 12382)
 - 130 Population Policies/Programmes & Reproductive Health (sub-codes 13010, 13020, 13030, 13040, 13081)
 - 15180 Ending violence against women and girls
 - 16050 Multisector aid for basic social services.
- Peace: 152 Conflict, Peace & Security (sub-code 15220)

The contractor may suggest adjustments to the approach outlined above (including, for example, statistical measures of consistency in the use of OECD CRS sector codes over time), if well justified and within the purpose and objectives of the analysis as described in sections 2 and 3.

The contractor will follow rigorous research practices, documenting technical and methodological choices and research steps and recording any code scripts used for statistical analysis to facilitate reproducibility and replicability. When inconsistencies and discrepancies in the data arise, those should be duly communicated to the Department for Evaluation and disclosed in the report as necessary.

5. Organisation of the assignment

The geospatial country analysis will be managed by the Department for Evaluation in Norad²¹. The contractor will report to the Department for Evaluation through the team leader. The contractor will keep in regular contact with the Department for Evaluation throughout the process, to discuss progress - including any problems that may jeopardize the assignment - make adjustments to the research design when required and shed light on actions to be taken to guarantee the high quality of the deliverables. Such regular communication will be especially important in the early stages of the assignment, to iron out the details of the approach.

The contractor should maintain the highest degree of integrity and honesty. It is expected from the contractor to consider the potential direct and indirect negative effects tied to the research process and deliverables, and formulate strategies to mitigate those.

Quality assurance shall be provided by the institution delivering the services prior to submission of all deliverables.

All decisions concerning the interpretation of these Terms of Reference, and all deliverables are subject to approval by the Department for Evaluation.

²¹ For more information, see <https://www.norad.no/en/evaluation>

6. Deliverables

1. An **inception report** with detailed description of the methodological approach (including the operationalisation of key concepts/metrics) of maximum 6,000 words (approx. 12 pages) excluding figures, graphs and annexes. The inception report will also lay out challenges, risks and limitations and possible strategies to mitigate those, and provide an outline of the report's structure. The inception report needs to be approved by the Department for Evaluation before proceeding further.
2. A **draft analysis report** of maximum 17,500 words (approximately 35 pages) excluding figures, graphs and annexes. Supplementary summary statistics, dynamic or static visuals, data files / datasets and source code / scripts are to be submitted together with the draft analysis report.
3. A **final analysis report** of the same maximum length as the draft report. Data files / Datasets and source code / scripts are to be submitted, along with supplementary dynamic visuals (if any) and other visuals included in the report, as separate, high-resolution files.

All reports shall be written in English in an informative, clear and concise manner in accordance with the Department for Evaluation's guidelines²² and shall be submitted in electronic form (searchable format).

²² <https://www.norad.no/en/front/evaluation/about-evaluation-department/evaluation-guidelines/>

Annex I – Variables in the dataset

1	Agreement number
2	Responsible unit
3	Agreement title
4	Agreement partner
5	Group of Agreement Partner
6	Implementing Institution_Impl Inst
7	Group of Impl Inst
8	Agreement Period
9	Agreement signed
10	Description of agreement
11	DAC Main sector (code+name)
12	DAC Sub sector (code+name)
13	Target area
14	Recipient country
15	Country group NO
16	Main Region
17	Form of assistance
18	Type of assistance
19	Type of agreement
20	PM - Environment
21	PM - Climate change adaptation
22	PM - Reproductive, maternal, newborn and child health
23	PM - Research and experimental development
24	PM - Disaster Risk Reduction
25	PM - Inclusion and empowerment of persons with disabilities
26	PM - Gender equality
27	PM - Democracy and Inclusive Governance
28	PM - Bio-diversity
29	PM - Desertification
30	PM - Climate change mitigation
31	FA - Covid-19
32	SDG focus
33	SDG main target
34	Extending agency
35	Income category
36	Program category (code+name)
37	Chapter (code+name)
38	Post (code+name)
39	Year
40	Disbursed (NOK)
41	Disbursed (1000 NOK)
42	Disbursed (mill NOK)
43	Disbursed (mrd NOK)
44	Disbursed (1000 \$)
45	Disbursed (mill \$)

8. Annex 2: Agreement Partners

8.1. Agreement partners: The Democratic Republic of Congo

Agreement partner	Humanitarian	Development	Peace
American Bar Association		x	
BT Signaal AS		x	
CARE Norge	x	x	
Caritas Norge	x	x	
Digni		x	x
DSB - Direktoratet for samfunnssikkerhet og beredskap	x		
EIA - Environmental Investigation Agency		x	
FAO - Food and Agricultural Organization of the United Nations	x	x	
FFC - Fonds pour les Femmes Congolaises		x	
Flyktninghjelpen	x	x	x
Geneva Call			x
Global Witness		x	
HiA - Hope in Action			x
ICRAF - World Agroforestry Centre		x	
IDI - INTOSAI Development Initiative		x	
IIASA - International Institute of Applied Systems Analysis		x	
Integrity Action		x	
IOM - International Organisation for Migration		x	
JOIN good forces (tidl. CRN - Christian Relief Network)	x	x	
KD - Kunnskapsdepartementet		x	
Kirkens Nødhjelp	x	x	x
Leger uten grenser Norge		x	
MPTF Office - Multi-Partner Trust Fund Office	x		x
Norges Røde Kors	x		
Norsk Folkehjelp			x
OHCHR – UN High Commissioner for Human Rights		x	
Redd Barna Norge	x	x	
Regnskogfondet		x	
RFUK - Rainforest Foundation UK		x	
RRI - Rights and Resources Initiative		x	
SOFEPAI - Solidarité Féminine pour la Paix et le Développement Intégral		x	
UiB - Senter for Internasjonal Helse		x	
UiB - Universitetet i Bergen		x	
UiO - NORDEM, Norsk Ressursbank for demokrati og menneskerettigheter			x
UN-REDD - United Nations Reducing Emissions from Deforestation and Forest Degradation		x	
UN Women		x	
UNAIDS - UN Programme on HIV/AIDS		x	
UNDP - UN Development Programme	x	x	x
UNHCR - UN Office of the UN High Commissioner for Refugees	x		
UNICEF - United Nations Children's Fund	x	x	
UNOCHA - UN Office of Co-ordination of Humanitarian Affairs	x		
Verra (prev. Verified Carbon Standard)		x	
WCS - Wildlife Conservation Society		x	
WFP - World Food Programme	x	x	
WHO - World Health Organization	x		
WWF - World Wildlife Fund		x	
WWF Norge		x	

8.2. Agreement partners: Ethiopia

Agreement partner	Humanitarian	Development	Peace
ABN - African Biodiversity Network		x	
ActionAid International		x	
Addis Ababa University		x	
ADRA-Norge		x	
AHRI - Armauer Hansen Research Institute		x	
AIESEC - local office		x	
Alliance Microfinance AS		x	
ATA - Agricultural Transformation Agency		x	
Atlas-alliansen		x	
Bahir Dar University		x	
BBC Media Action		x	
Biome Services PLC		x	
BMZ - German Federal Ministry for Economic Cooperation and Development		x	
BUFDIR - Barne-, ungdoms- og familiedirektoratet		x	
Case Medical Centre		x	
Change Com AS		x	
Danish Ministry of Foreign Affairs		x	
DCG - Drylands Coordination Group, Norway (Tørrelands-koordineringsgruppen)		x	
DFID - Department for International Development		x	
Digni		x	
DIHR - Danish Institute for Human Rights		x	
EDRI - Ethiopian Development Research Institute		x	
Ethiopia Ministry of Agriculture and Rural Development		x	
Ethiopia Ministry of Education		x	
Ethiopia Ministry of Finance and Economic Development		x	
Ethiopia Ministry of Science and Higher Education		x	
Farm Africa		x	
Flyktninghjelpen	x	x	
FOKUS - Forum for Women and Development		x	
GGGI - Global Green Growth Institute		x	
GrowthAfrica Foundation		x	
Haukeland Universitetssykehus		x	
Hawassa University		x	
HI - Humanity and Inclusion (former Handicap International)		x	
Hopital de Mibilizi		x	
Hydro Lab Pvt. Ltd.		x	
IBA - Independent Business Accelerator		x	
IBRD - International Bank for Reconstruction and Development		x	
ICRAF - World Agroforestry Centre		x	
IFC - International Finance Corporation		x	
ILPI - International Law and Policy Institute		x	
IOM - International Organisation for Migration		x	
Irish Aid		x	
JD - Justis- og beredskapsdepartementet		x	
Jimma University		x	
KD - Kunnskapsdepartementet		x	
KDA - K-Rep Development Agency		x	
Kirkens Nødhjelp	x	x	x
KrF - Kristelig Folkeparti		x	
Kulturdepartementet		x	
LO - Landsorganisasjonen i Norge		x	
LWF - The Lutheran World Federation		x	
Mekelle University (ETH)		x	
NAWOU - National Association of Women Organisations in Uganda		x	
NFG - Norwegian Forestry Group		x	
NfYD - Network for Youth Development		x	
NKSS - Norges kristelige student- og skoleungdomslag		x	

Agreement partner	Humanitarian	Development	Peace
NMBU - Norges miljø- og biovitenskapelige universitet (tidl UMB/NLH)		x	
Nordic Clinic AS		x	
Norges Røde Kors	x		
Norsk Folkehjelp		x	
Norwegian Church Aid - local office		x	
NTNU - Norges teknisk-naturvitenskapelige universitet		x	
OHCHR – UN High Commissioner for Human Rights		x	
Penda Manufacturing PLC		x	
PfC - Partnership for change		x	
PFE - Prison Fellowship Ethiopia		x	
Redd Barna Norge	x	x	
Reflectil Holding AS		x	
Right to Play		x	
Send a Cow		x	
SIU - Senter for internasjonalisering av utdanning		x	
Sørlandet Sykehus HF		x	
SSB - Statistisk Sentralbyrå		x	
St. Catherine's Medical Group		x	
Stiftelsen Seed Forum Norway		x	
Sunlabob		x	
Sykehuset i Vestfold HF		x	
TechnoServe		x	
The Governance Group AS		x	
Uganda Wildlife Authority		x	
UiA - Universitetet i Agder		x	
UiB - Universitetet i Bergen		x	
UiO - Universitetet i Oslo		x	
UiS - Universitetet i Stavanger		x	
UiT - Universitetet i Tromsø - Norges arktiske universitet		x	
UN Women		x	
UNDP - UN Development Programme		x	
UNDPPA - UN Department of Political and Peacebuilding Affairs		x	
UNFPA - UN Population Fund		x	
UNHCR - UN Office of the UN High Commissioner for Refugees	x		
UNICEF - United Nations Children's Fund	x	x	
UNIQUE forestry and land use GmbH		x	
UNOCHA - UN Office of Co-ordination of Humanitarian Affairs	x		
UNV - UN Volunteers		x	
USN - Universitetet i Sørøst-Norge		x	
Utviklingsfondet		x	
WFP - World Food Programme	x		
WHO - World Health Organization		x	
Woord en Daad		x	
World Bank		x	
WRI - World Resources Institute		x	

8.3. Agreement partners: Lebanon

Agreement partner	Humanitarian	Development	Peace
AIF - Arab Image Foundation		x	
Atlas-alliansen		x	
AUF - Arbeidernes Ungdomsfylking		x	
Beirut and Beyond - international music festival		x	
Berghof Foundation		x	
Biladi		x	
Centre Libanais d Etude et de Recherche			x
CLDH - Lebanese Center for Human Rights		x	
CSI - Common Space Initiative			x
DCAF - Geneva Centre for Security Sector Governance		x	
DFID - Department for International Development	x		
DSB - Direktoratet for samfunnsikkerhet og beredskap	x		
ESCWA - Economic and Social Commission for Western Asia		x	
FAO - Food and Agricultural Organization of the United Nations		x	
Flyktninghjelpen	x		
Fraternity Association for Social and Educational Work		x	
Frontiers, Ruwad Association		x	
HAI - Heartland Alliance International		x	
HCA - Human Call Association		x	
IBRD - International Bank for Reconstruction and Development		x	
ICPO - Interpol		x	
ILO - International Labour Organisation		x	
IUCN - International Union for the Conservation of Nature		x	
KAFA		x	
Kirkens Nødhjelp	x		
KrFU - Kristelig Folkepartis Ungdom		x	
LAU - Lebanese American University		x	
LCPS - Lebanese Center for Policy Studies		x	
Lebanese Institute for Democracy and Human Rights		x	
Lebanon Ministry of Foreign Affairs and Emigrants		x	
Legal Agenda		x	
Mada Association		x	
MAG - Mines advisory group, Britain			x
MAPs - Multi Aid Programs		x	
Maqamat Theatre Dance		x	
Marsa Sexual Health Center	x		
Metropolis Cinema		x	
Mosaic		x	
MSSCF - Maarouf Saad Social and Cultural foundation	x		
Nabaa			x
Nashet Association		x	
NISCVT - National Institution of Social Care & Vocational Training	x		
Norges Røde Kors	x	x	
Norsk Folkehjelp	x	x	x
Norwac - Norwegian Aid Committee	x	x	
Norwegian People's Aid - local office	x		
NRGI - Natural Resource Governance Institute		x	
Olje- og energidepartementet		x	
PHRO - Palestinian Human Rights Organization		x	
PWYP - Publish What You Pay		x	
Redd Barna Norge	x	x	
Restart Center for Rehabilitation of Victims of Violence and Torture	x		
Right to Play		x	x
Safadi Foundation		x	
Samir Kassir Foundation		x	
ShareQ		x	
Tatwir Center for Media and Information		x	
The Royal Institute of International Affairs (Chatham House)		x	
UN-HABITAT - United Nations Human Settlements Programme	x		
UN Women		x	

Agreement partner	Humanitarian	Development	Peace
UNDP - UN Development Programme		x	x
UNESCO - UN Educational, Scientific and Cultural Organisation		x	
UNFPA - UN Population Fund		x	
UNHCR - UN Office of the UN High Commissioner for Refugees	x	x	
UNICEF - United Nations Children's Fund	x	x	
UNODC - United Nations Office on Drugs and Crime		x	
UNRWA - UN Relief and Works Agency	x		
UNSCO - UN Special Coordinator for the Occupied Territories		x	
WFP - World Food Programme	x	x	
WHO - World Health Organization	x		
World Bank		x	
WPA - Women's Programs Association		x	
ZAKIRA		x	

8.4. Agreement partners: Syria

Agreement.partner	Humanitarian	Development	Peace
Bara Alowais Consultations Jasem Alowais		x	
Birgit Undem		x	
CARE Norge	x		
Commission for Justice and Accountability		x	
Creuna AS		x	
Crisis Action	x		
CSI - Common Space Initiative			x
ESCWA - Economic and Social Commission for Western Asia			x
FAO - Food and Agricultural Organization of the United Nations	x		
FDCD - Forum for Development, Culture & Dialogue			x
Flyktninghjelpen	x		
Heinrich Böll Foundation		x	
Images de L'Orient		x	
Kirkens Nødhjelp	x	x	
Kluge Advokatfirma DA		x	
MAG - Mines advisory group, Britain			x
Medvind Eventbyrå AS		x	
MPTF Office - Multi-Partner Trust Fund Office	x		
Norges Røde Kors	x	x	
Norsk Folkehjelp	x	x	x
Norwac - Norwegian Aid Committee	x	x	
Norwegian People's Aid - local office	x		
NTNU - Norges teknisk-naturvitenskapelige universitet		x	
OPCW - Organisation for the Prohibition of Chemical Weapons			x
Redd Barna Norge	x	x	
Samir Kassir Foundation		x	
The Royal Institute of International Affairs (Chatham House)			x
UiO - Universitetet i Oslo		x	
UN-HABITAT - United Nations Human Settlements Programme	x		
UN Women		x	
UNDP - UN Development Programme	x		
UNFPA - UN Population Fund	x		
UNHCR - UN Office of the UN High Commissioner for Refugees	x		
UNICEF - United Nations Children's Fund	x	x	
UNOCHA - UN Office of Co-ordination of Humanitarian Affairs	x		
UNRWA - UN Relief and Works Agency	x		
US Department of State			x
WCC - World Council of Churches		x	x
WFP - World Food Programme	x		
WHO - World Health Organization	x		
World Vision		x	

9. Annex 3: Implementing institutions

9.1. Implementing institutions: The Democratic Republic of Congo

Impl.Inst	Humanitarian	Development	Peace
ACAD - Arab Centre for Development		x	
ACAD - Christian Action for Aid and Development		x	x
AFEM - Association des Femmes des Médias - Sud Kivu		x	
Africapacity		x	
American Bar Association		x	
ASPLC - Action Sociale pour la Promotion des Laises pour Compte		x	
BEST - Bureau d'Etudes Scientifique et Technique		x	
BT Signaal AS		x	
CAGDFT - Support Center for the Sustainable Management of Tropical Forests		x	
CARE International		x	
Care International - local office		x	
CARE Norge	x	x	
Caritas - local partner		x	
Caritas International		x	
Caritas Norge	x	x	
CBCN - Communauté Baptiste du Congo Nord		x	
CEDEN - Cercle pour la Défense de l'Environnement		x	
CEPAC - Communauté des Eglises de Pentecote en Afrique Centrale		x	
Communaute Baptiste du Congo		x	
CREF network		x	
DGPA - Dynamics of the Indigenous Peoples		x	
DSB - Direktoratet for samfunnssikkerhet og beredskap	x		
EIA - Environmental Investigation Agency		x	
ERND Institute		x	
ETN - Equipe d'Education et d'Encadrement des Traumatistes de Nyiragongo		x	
FAO - Food and Agricultural Organization of the United Nations	x	x	
FFC - Fonds pour les Femmes Congolaises		x	
FLAG - Field Legality Advisory Group		x	
Flyktninghjelpen	x	x	x
Fondation Panzi		x	
GASHE - Le Groupe d'Action pour Sauver l'Homme et son Environnement		x	
Geneva Call			x
Global Witness		x	
HEAL Africa		x	
HiA - Hope in Action	x	x	x
ICRAF - World Agroforestry Centre		x	
ICRC - International Committee of the Red Cross	x		
IDI - INTOSAI Development Initiative		x	
IIASA - International Institute of Applied Systems Analysis		x	
Integrity Action		x	
Interfaith for Advocacy and Peace Building Network (DRC)		x	
Interfaith Nord-Kivu		x	
IOM - International Organisation for Migration		x	
JOIN good forces (tidl. CRN - Christian Relief Network)		x	
Journal Le Souverain		x	
Kirkens Nødhjelp	x		
Leger uten grenser Norge		x	
Levain des Femmes du Sud Kivu		x	
MMT - Mbou Mon Tour		x	
MONUSCO - UN Organization Stabilization Mission in the Democratic Republic of the Congo			x
MPTF Office - Multi-Partner Trust Fund Office			x
Norges Røde Kors	x		

Impl.Inst	Humanitarian	Development	Peace
Norsk Folkehjelp			x
Norwegian Church Aid - local office		x	x
OHCHR – UN High Commissioner for Human Rights		x	
Redd Barna Norge	x		
Regnskogfondet		x	
RFUK - Rainforest Foundation UK		x	
RRI - Rights and Resources Initiative		x	
RRN - Natural Resources Network		x	
Salvation Army - local office		x	
Save the Children International	x	x	
SOFEPAI - Solidarité Féminine pour la Paix et le Développement Intégral		x	
SPFA - Solidarité pour la Promotion des Femme Autochtones		x	
Statens lånekasse for utdanning		x	
UiB - Senter for Internasjonal Helse		x	
UiO - NORDEM, Norsk Ressursbank for demokrati og menneskerettigheter			x
UN-REDD - United Nations Reducing Emissions from Deforestation and Forest Degradation		x	
UN Women		x	
UNAIDS - UN Programme on HIV/AIDS		x	
UNDP - UN Development Programme	x	x	x
UNHCR - UN Office of the UN High Commissioner for Refugees	x		
UNICEF - United Nations Children's Fund	x	x	
UNIKIN - Université de Kinshasa		x	
UNOCHA - UN Office of Co-ordination of Humanitarian Affairs	x		
Verra (prev. Verified Carbon Standard)		x	
WCS - Wildlife Conservation Society		x	
WFP - World Food Programme	x	x	
WHO - World Health Organization	x		
WWF - local office		x	
WWF - World Wildlife Fund		x	
WWF Norge		x	

9.2. Implementing institutions: Ethiopia

Implementing institutions	Humanitarian	Development	Peace
AASTU - Addis Ababa Science and Technology University		x	
ActionAid - local office		x	
ADAA - African Development Aid Association		x	
Addis Ababa University		x	
ADRA - local office		x	
ADRA International - Adventist Development Relief Agency		x	
AHRI - Armauer Hansen Research Institute		x	
AIESEC - local office		x	
AISDA - Action for Integrated Sustainable Development Association		x	
Alliance Microfinance AS		x	
Amhara Region Education Bureau		x	
APDA - Afar Pastoralist Development Association		x	
Arba Minch University		x	
ASDA - Association for Sustainable Development Alternative		x	
ATA - Agricultural Transformation Agency		x	
Bahir Dar University		x	
BBC Media Action		x	
Bible Society - local office		x	
Biome Services PLC		x	
BUFDIR - Barne-, ungdoms- og familiedirektoratet		x	
Case Medical Centre		x	
CETU - Conferderation of Ethiopian Trade Unions		x	
Change Com AS		x	
CIMMYT - International Maize and Wheat Improvement Center		x	
DCG - Drylands Coordination Group, Norway (Tørrelandskoordineringsgruppen)		x	
Debre Markos University		x	
DFID - Department for International Development		x	
Dilla University		x	
DOT - Digital Opportunity Trust - local office		x	
ECC - Ethiopian Catholic Church		x	
ECFE - Evangelical Churches Fellowship of Ethiopia		x	
EDRI - Ethiopian Development Research Institute		x	
EECMY - Ethiopian Evangelical Church Mekane Yesus		x	
EHRC - Ethiopian Human Rights Commission		x	
EIFCWMCOTU - Ethiopian Industrial Federation of Construction, Wood, Metal, Cement, and Other Trade Unions		x	
EMDA - Ethiopian Muslims Development Agency		x	
EMRDA - Ethiopian Muslims Relief and Development Association		x	
EOC-DICAC - Ethiopian Orthodox Church Development and Inter-Church Aid Commission		x	
EOSA - Ethio-Organic Seed Action		x	
Ethiopia Ministry of Agriculture and Rural Development		x	
Ethiopia Ministry of Education		x	
Ethiopia Ministry of Environment and Forest		x	
Ethiopia Ministry of Finance and Economic Development		x	
Ethiopia Ministry of Health		x	
Ethiopia Ministry of Science and Higher Education		x	
Ethiopia Ministry of Water Resources		x	
Ethiopia Ministry of Women, Children and Youth Affairs		x	
Ethiopian Orthodox Church		x	
EWNRA - Ethio-Wetlands and Natural Resources Association		x	
Farm Africa		x	
Flyktninghjelpen	x	x	
GGGI - Global Green Growth Institute		x	
GIZ - Deutsche Gesellschaft für Internationale Zusammenarbeit		x	
GrowthAfrica Foundation		x	

Implementing institutions	Humanitarian	Development	Peace
Haramaya University		x	
Harvest Church of God		x	
Haukeland Universitetssykehus		x	
Hawassa University		x	
HELVETAS Swiss Intercooperation		x	
HI - Humanity and Inclusion (former Handicap International)		x	
Hiwot, Ethiopia		x	
Hope for Justice - local office		x	
Hopital de Mibilizi		x	
Hydro Lab Pvt. Ltd.		x	
IBA - Independent Business Accelerator		x	
ICRAF - World Agroforestry Centre		x	
ICRC - International Committee of the Red Cross	x		
iDE - International Development Enterprises		x	
IFC - International Finance Corporation		x	
ILPI - International Law and Policy Institute		x	
Inter-religious Council of Ethiopia		x	
IOM - International Organisation for Migration		x	
Irish Aid		x	
ISD - Institute for Sustainable Development		x	
JFA-PFE - Justice For All – Prison Fellowship Ethiopia		x	
Jimma University		x	
KDA - K-Rep Development Agency		x	
Kirkens Nødhjelp	x	x	x
KMG Ethiopia		x	
KrF - Kristelig Folkeparti		x	
Kulturdepartementet		x	
LCO - Love for Children Organization		x	
Mekelle University (ETH)		x	
MELCA - Movement for Ecological Learning and Community Action		x	
Mental Helse Ungdom		x	
MSD - Mahibere Hiwot for Social Development		x	
NAWOU - National Association of Women Organisations in Uganda		x	
NBI - ENTRO - Nile Basin Initiative - Eastern Nile Technical Regional Office		x	
NFG - Norwegian Forestry Group		x	
NfyD - Network for Youth Development		x	
NKSS - Norges kristelige student- og skoleungdomslag		x	
NLM - Norwegian Lutheran Mission - Local Office		x	
NMBU - Norges miljø- og biovitenskapelige universitet (tidl UMB/NLH)		x	
Nordic Clinic AS		x	
Norwegian Church Aid - local office		x	x
OHCHR – UN High Commissioner for Human Rights		x	
ORDA - Organization for Rehabilitation and Development in Amhara		x	
Organization for Social Services for AIDS		x	
OWDA - Ogaden Welfare and Development Association		x	
OWDA - Organization for Welfare and Development in Action		x	
PADET - Professional Alliance for Development		x	
PARD - Partners to Rural Development		x	
Penda Manufacturing PLC		x	
PfC - Partnership for change		x	
PFE - Prison Fellowship Ethiopia		x	
PWO - Pastoralist Welfare Organization		x	
Redd Barna Norge	x	x	
Reflectil Holding AS		x	
REST - Relief Society of Tigray		x	
Right to Play		x	
Save the Children - local office		x	
Send a Cow		x	
SIL - local office		x	

Implementing institutions	Humanitarian	Development	Peace
Sørlandet Sykehus HF		x	
SOS Children's Villages of Ethiopia		x	
SOS Sahel		x	
SSB - Statistisk Sentralbyrå		x	
SSD - Support for Sustainable Development		x	
St. Catherine's Medical Group		x	
Statens lånekasse for utdanning		x	
Stiftelsen Seed Forum Norway		x	
Sunlabob		x	
Sykehuset i Vestfold HF		x	
TechnoServe		x	
The Governance Group AS		x	
TYRHAAA - Tamra Youth Reproductive Health Anti-AIDS Association		x	
UBS - The United Bible Societies - local office		x	
UDI - Utlendingsdirektoratet		x	
Uganda Wildlife Authority		x	
UiB - Universitetet i Bergen		x	
UN Women		x	
UNDP - UN Development Programme		x	
UNDPPA - UN Department of Political and Peacebuilding Affairs		x	
UNFPA - UN Population Fund		x	
UNHCR - UN Office of the UN High Commissioner for Refugees	x		
UNICEF - United Nations Children's Fund	x	x	
UNIQUE forestry and land use GmbH		x	
UNOCHA - UN Office of Co-ordination of Humanitarian Affairs	x		
UNV - UN Volunteers		x	
UoG - University of Gondar		x	
Utviklingsfondet		x	
VSO - Voluntary Service Overseas		x	
WFP - World Food Programme	x		
WHAE - Women's Health Association of Ethiopia		x	
WHO - World Health Organization		x	
Wollega University		x	
Woord en Daad		x	
World Bank		x	
WRI - World Resources Institute		x	
WSA - Women Support Association		x	

9.3. Implementing institutions: Lebanon

Implementing institutions	Humanitarian	Development	Peace
AIF - Arab Image Foundation		x	
AUF - Arbeidernes Ungdomsfylking		x	
Beirut and Beyond - international music festival		x	
Berghof Foundation		x	
Biladi		x	
BRIC - Beirut Research and Innovation Center			x
CLDH - Lebanese Center for Human Rights		x	
CSI - Common Space Initiative			x
DCAF - Geneva Centre for Security Sector Governance		x	
DSB - Direktoratet for samfunnssikkerhet og beredskap	x		
ESCWA - Economic and Social Commission for Western Asia		x	
FAO - Food and Agricultural Organization of the United Nations		x	
Flyktninghjelpen	x		
Fraternity Association for Social and Educational Work		x	
Frontiers, Ruwad Association		x	
HAI - Heartland Alliance International		x	
HCA - Human Call Association		x	
IBRD - International Bank for Reconstruction and Development		x	
ICPO - Interpol		x	
ICRC - International Committee of the Red Cross	x		
IFRC/ICRC - International Federation of Red Cross and Red Crescent Societies	x	x	
ILO - International Labour Organisation		x	
IUCN - International Union for the Conservation of Nature		x	
KAFA		x	
Kirkens Nødhjelp	x		
KrFU - Kristelig Folkepartis Ungdom		x	
LAU - Lebanese American University		x	
LCPS - Lebanese Center for Policy Studies		x	
Lebanese Institute for Democracy and Human Rights		x	
Lebanon Ministry of Education & Higher Education		x	
Lebanon Ministry of Foreign Affairs and Emigrants		x	
Legal Agenda		x	
Mada Association		x	
MAG - Mines advisory group, Britain			x
MAPs - Multi Aid Programs		x	
Maqamat Theatre Dance		x	
Marsa Sexual Health Center	x		
Metropolis Cinema		x	
Mosaic		x	
MSSCF - Maarouf Saad Social and Cultural foundation	x		
Nabaa		x	x
Nashet Association		x	
National Red Cross/Red Crescent Society	x	x	
NHF - Norges Handikapforbund		x	
NISCVT - National Institution of Social Care & Vocational Training	x		
Norges Røde Kors	x	x	
Norsk Folkehjelp	x	x	x
Norwac - Norwegian Aid Committee	x	x	
Norwegian People's Aid - local office	x		
NRGI - Natural Resource Governance Institute		x	
Olje- og energidepartementet		x	
PHRO - Palestinian Human Rights Organization		x	
Public Aid Organization		x	
PWYP - Publish What You Pay		x	
Redd Barna Norge	x		
Restart Center for Rehabilitation of Victims of Violence and Torture	x		
Right to Play		x	x
Safadi Foundation		x	
Samir Kassir Foundation		x	

Implementing institutions	Humanitarian	Development	Peace
Save the Children - local office		x	
Save the Children International	x		
ShareQ		x	
Tatwir Center for Media and Information		x	
The Royal Institute of International Affairs (Chatham House)		x	
UN-HABITAT - United Nations Human Settlements Programme	x		
UN Women		x	
UNDP - UN Development Programme		x	x
UNESCO - UN Educational, Scientific and Cultural Organisation		x	
UNFPA - UN Population Fund		x	
UNHCR - UN Office of the UN High Commissioner for Refugees	x	x	
UNICEF - United Nations Children's Fund	x	x	
UNODC - United Nations Office on Drugs and Crime		x	
UNRWA - UN Relief and Works Agency	x		
UNSCO - UN Special Coordinator for the Occupied Territories		x	
WFP - World Food Programme	x	x	
WHO - World Health Organization	x		
WPA - Women's Programs Association		x	
ZAKIRA		x	

9.4. Implementing institutions: Syria

Implementing institution	Humanitarian	Development	Peace
Bara Alowais Consultations Jasem Alowais		x	
Birgit Udem		x	
CARE International	x		
CARE Norge	x		
Commission for Justice and Accountability		x	
Creuna AS		x	
Crisis Action	x		
CSI - Common Space Initiative			x
ESCWA - Economic and Social Commission for Western Asia			x
FAO - Food and Agricultural Organization of the United Nations	x		
FDCD - Forum for Development, Culture & Dialogue			x
Flyktninghjelpen	x		
Heinrich Böll Foundation		x	
ICRC - International Committee of the Red Cross	x		
Images de L'Orient		x	
Kirkens Nødhjelp	x	x	
Kluge Advokatfirma DA		x	
MAG - Mines advisory group, Britain			x
Medvind Eventbyrå AS		x	
National Red Cross/Red Crescent Society		x	
Norges Røde Kors	x		
Norsk Folkehjelp	x	x	x
Norwac - Norwegian Aid Committee	x	x	
Norwegian People's Aid - local office	x	x	x
NTNU - Norges teknisk-naturvitenskapelige universitet		x	
OPCW - Organisation for the Prohibition of Chemical Weapons			x
Redd Barna Norge	x	x	
Samir Kassir Foundation		x	
Save the Children International	x	x	
The Royal Institute of International Affairs (Chatham House)			x
UiO - Universitetet i Oslo		x	
UN-HABITAT - United Nations Human Settlements Programme	x		
UN Women		x	
UNDP - UN Development Programme	x		
UNFPA - UN Population Fund	x		
UNHCR - UN Office of the UN High Commissioner for Refugees	x		
UNICEF - United Nations Children's Fund	x	x	
UNOCHA - UN Office of Co-ordination of Humanitarian Affairs	x		

Implementing institution	Humanitarian	Development	Peace
UNRWA - UN Relief and Works Agency	x		
US Department of State			x
WCC - World Council of Churches		x	x
WFP - World Food Programme	x		
WHO - World Health Organization	x		
World Vision		x	

10. Annex 4: Group of Agreement partners and Implementing institutions

10.1. Group of Agreement partners and Implementing institutions: The Democratic Republic of Congo

10.1.1. HDP interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian	Development	Peace	Humanitarian	Development	Peace
NGO Norwegian	2015	5.0%	33.3%	28.6%	37.5%	18.5%	28.6%
	2016	57.1%	41.7%	33.3%	35.7%	25.0%	33.3%
	2017	5.0%	33.3%	5.0%	28.6%	18.5%	5.0%
	2018	52.9%	19.4%	33.3%	47.6%	6.5%	33.3%
	2019	58.8%	24.0%	33.3%	52.9%	8.0%	33.3%
	2020	62.5%	32.3%	33.3%	37.5%	12.9%	33.3%
	2021	66.7%	26.9%	33.3%	58.3%	15.4%	33.3%
NGO Local	2015	37.5%	4.7%	28.6%	5.0%	55.6%	42.9%
	2016	21.4%	29.2%		35.7%	45.8%	
	2017	7.1%	25.9%		14.3%	4.7%	
	2018	11.8%	35.5%		11.8%	48.4%	
	2019	11.8%	28.0%		11.8%	4.0%	
	2020	12.5%	22.6%		12.5%	38.8%	
	2021		23.8%	33.3%		3.8%	33.3%
NGO International	2016				7.1%		
	2017				14.3%		
	2018		3.2%		11.8%	3.2%	
	2019		4.0%		11.8%	4.0%	
	2020		6.5%		25.0%	6.5%	
	2021		7.7%		8.3%	11.5%	
NGO Other donor countries	2015			14.3%			14.3%
	2016			33.3%			33.3%
	2017			5.0%			5.0%
	2018		9.7%	33.3%		9.7%	33.3%
	2019		8.0%	33.3%		8.0%	33.3%
	2020		6.5%	33.3%		6.5%	33.3%
	2021		3.8%	33.3%		3.8%	33.3%
Norwegian public sector	2020	6.3%	3.2%		6.3%	3.2%	
	2021	8.3%	3.8%		8.3%	3.8%	
Public sector other donor countries	2018	5.9%					
	2019	5.9%					
Private sector in developing countries	2017		3.7%			3.7%	
Public-private partnerships	2018		3.2%			3.2%	
	2019		4.0%			4.0%	
	2020		3.2%			3.2%	
Multilateral institutions	2015	12.5%	22.2%	28.6%	12.5%	18.5%	14.3%
	2016	21.4%	25.0%	33.3%	21.4%	25.0%	33.3%
	2017	42.9%	33.3%		42.9%	33.3%	
	2018	29.4%	22.6%	33.3%	29.4%	22.6%	33.3%
	2019	23.5%	28.0%	33.3%	23.5%	28.0%	33.3%
	2020	18.8%	22.6%	33.3%	18.8%	22.6%	33.3%
	2021	25.0%	3.8%		25.0%	26.9%	
Governments/Ministries in developing countries	2015		3.7%			7.5%	
	2016		4.2%			4.2%	
	2017		3.7%			3.7%	
	2018		6.5%			6.5%	
	2019		4.0%			8.0%	
	2020		3.2%			6.5%	
2021		3.8%			7.7%		

10.1.2. Health and peace interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian	Development	Peace	Humanitarian	Development	Peace
NGO Norwegian	2015	57.1%	83.3%		28.6%	33.3%	
	2016	100.0%	66.7%		100.0%	16.7%	
	2017	60.0%	80.0%	33.3%	40.0%	20.0%	
	2018	70.0%	100.0%		60.0%	12.5%	
	2019	55.6%	100.0%		44.4%	11.1%	
	2020	50.0%	100.0%	50.0%	37.5%		
	2021	50.0%	100.0%		37.5%		
NGO Local	2015				14.3%	50.0%	
	2016		16.7%			66.7%	
	2017		20.0%			80.0%	33.3%
	2018					87.5%	
	2019					88.9%	
	2020					100.0%	50.0%
	2021			50.0%		100.0%	50.0%
NGO International	2015				14.3%		
	2017				20.0%		
	2018				10.0%		
	2019				11.1%		
	2020				12.5%		
	2021				12.5%		
NGO Other donor countries	2016		16.7%			16.7%	
NGO Other donor countries	2017			33.3%			33.3%
Norwegian public sector	2019	11.1%			11.1%		
Multilateral institutions	2015	42.9%	16.7%	100.0%	42.9%	16.7%	100.0%
	2017	40.0%		33.3%	40.0%		33.3%
	2018	30.0%		100.0%	30.0%		100.0%
	2019	33.3%		100.0%	33.3%		100.0%
	2020	50.0%		50.0%	50.0%		50.0%
	2021	50.0%		50.0%	50.0%		50.0%

10.2. Group of Agreement partners and Implementing institutions: Ethiopia

10.2.1. HDP interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian	Development	Peace	Humanitarian	Development	Peace
NGO Norwegian	2015	33.3%	58.8%		33.3%	11.4%	
	2016	50.0%	64.3%	100.0%	33.3%	5.8%	
	2017	66.7%	64.3%	100.0%	66.7%	9.8%	
	2018	100.0%	68.4%	100.0%	100.0%	5.7%	
	2019	100.0%	64.3%		100.0%	8.6%	
	2020	50.0%	67.8%		25.0%	8.4%	
	2021	55.6%	62.4%	100.0%	44.4%	8.4%	100.0%
NGO Local	2015		7.0%			50.9%	
	2016		4.7%			54.2%	100.0%
	2017		3.6%			51.8%	100.0%
	2018		3.8%			61.4%	100.0%
	2019		3.5%			55.0%	
	2020		2.1%			56.6%	
	2021		1.7%			53.9%	
NGO International	2015					0.9%	
	2016					3.3%	
	2017		0.9%			3.6%	
	2018		1.9%			2.5%	
	2019		2.8%			3.6%	
	2020		4.2%			25.0%	6.3%
	2021		2.8%			11.1%	4.5%
	2015		1.8%			1.8%	

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian	Development	Peace	Humanitarian	Development	Peace
NGO Other donor countries	2016		0.8%			1.7%	
	2017		0.9%			1.8%	
	2018		1.3%			1.9%	
	2019		1.4%			2.1%	
	2020		2.1%			2.8%	
	2021		3.9%			2.2%	
Norwegian public sector	2015		6.1%			5.3%	
	2016		5.4%			5.8%	
	2017		3.6%			3.6%	
	2018		1.3%			1.3%	
	2019		3.5%			3.6%	
	2020		3.5%			3.5%	
Public sector in developing countries	2015		8.8%			12.3%	
	2016		7.8%			10.0%	
	2017		8.9%			10.7%	
	2018		5.1%			6.3%	
	2019		6.3%			7.9%	
	2020		5.6%			7.0%	
Public sector other donor countries	2015		0.9%			0.9%	
	2018		1.9%			1.9%	
	2019		2.1%			2.1%	
	2020		2.8%			2.1%	
	2021		1.7%			1.1%	
	Multilateral institutions	2015	66.7%	8.8%		66.7%	7.0%
2016		50.0%	8.5%		66.7%	8.3%	
2017		33.3%	8.0%		33.3%	7.1%	
2018			7.6%			5.7%	
2019			7.0%			5.7%	
2020		50.0%	7.7%		50.0%	6.3%	
Norwegian private sector	2015		0.9%			0.9%	
	2016		1.6%			1.7%	
	2017		0.9%			0.9%	
	2018		1.9%			1.9%	
	2019		2.1%			2.1%	
	2020		0.7%			0.7%	
Private sector in developing countries	2015		2.6%			2.6%	
	2016		3.9%			4.2%	
	2017		5.4%			5.4%	
	2018		3.8%			3.8%	
	2019		2.8%			2.9%	
	2021		0.6%			0.6%	
Private sector in other donor countries	2016		0.8%			0.8%	
Governments/Ministries in developing countries	2015		4.4%			6.1%	
	2016		2.3%			4.2%	
	2017		3.6%			5.4%	
	2018		3.2%			7.6%	
	2019		4.2%			6.4%	
	2020		3.5%			6.3%	
	2021		1.7%			3.4%	

10.2.2. Health and peace interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian Health	Development Health	Peace	Humanitarian Health	Development Health	Peace
NGO Norwegian	2015		31.3%				
	2016	50.0%	58.6%	100.0%	50.0%	3.4%	
	2017	50.0%	62.5%	100.0%	50.0%	4.2%	
	2018	100.0%	71.4%	100.0%	100.0%	3.6%	
	2019	100.0%	74.1%		100.0%	8.3%	
	2020	50.0%	82.6%		25.0%	8.7%	
	2021	71.4%	87.0%	100.0%	57.1%	8.7%	100.0%
NGO Local	2015		6.3%			31.3%	
	2016		3.4%			55.2%	100.0%
	2017		4.2%			58.3%	100.0%
	2018		3.6%			64.3%	100.0%
	2019		3.7%			62.5%	
	2020		4.3%			73.9%	
	2021		4.3%			78.3%	
NGO International	2020				25.0%		
	2021				14.3%		
Norwegian public sector	2015		25.0%			25.0%	
	2016		13.8%			13.8%	
	2017		4.2%			4.2%	
Public sector in developing countries	2015		6.3%			6.3%	
	2016		3.4%			3.4%	
	2017		4.2%			4.2%	
Multilateral institutions	2015	100.0%	12.5%		100.0%	12.5%	
	2016	50.0%	6.9%		50.0%	6.9%	
	2017	50.0%	8.3%		50.0%	8.3%	
	2018		7.1%			7.1%	
	2019		7.4%			8.3%	
	2020	50.0%	13.0%		50.0%	13.0%	
	2021	28.6%	8.7%		28.6%	8.7%	
Norwegian private sector	2018		3.6%			3.6%	
	2019		3.7%			4.2%	
Private sector in developing countries	2015		18.8%			18.8%	
	2016		13.8%			13.8%	
	2017		16.7%			16.7%	
	2018		14.3%			14.3%	
	2019		11.1%			12.5%	
Governments/Ministries in developing countries	2015					6.3%	
	2016					3.4%	
	2017					4.2%	
	2018					7.1%	
	2019					4.2%	
	2020					4.3%	
	2021					4.3%	

10.3. Group of Agreement partners and Implementing institutions: Lebanon

10.3.1. HDP interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian	Development	Peace	Humanitarian	Development	Peace
NGO Norwegian	2015	50.0%	33.3%	28.6%	37.5%	18.5%	28.6%
	2016	57.1%	41.7%	33.3%	35.7%	25.0%	33.3%
	2017	50.0%	33.3%	50.0%	28.6%	18.5%	50.0%
	2018	52.9%	19.4%	33.3%	47.1%	6.5%	33.3%
	2019	58.8%	24.0%	33.3%	52.9%	8.0%	33.3%
	2020	62.5%	32.3%	33.3%	37.5%	12.9%	33.3%
	2021	66.7%	26.9%	33.3%	58.3%	15.4%	33.3%
NGO Local	2015	37.5%	40.7%	28.6%	50.0%	55.6%	42.9%
	2016	21.4%	29.2%		35.7%	45.8%	
	2017	7.1%	25.9%		14.3%	40.7%	
	2018	11.8%	35.5%		11.8%	48.4%	
	2019	11.8%	28.0%		11.8%	40.0%	
	2020	12.5%	22.6%		12.5%	38.7%	
	2021		23.1%	33.3%		30.8%	33.3%
NGO International	2016				7.1%		
	2017				14.3%		
	2018		3.2%		11.8%	3.2%	
	2019		4.0%		11.8%	4.0%	
	2020		6.5%		25.0%	6.5%	
	2021		7.7%		8.3%	11.5%	
NGO Other donor countries	2015			14.3%			14.3%
	2016			33.3%			33.3%
	2017			50.0%			50.0%
	2018		9.7%	33.3%		9.7%	33.3%
	2019		8.0%	33.3%		8.0%	33.3%
	2020		6.5%	33.3%		6.5%	33.3%
	2021		3.8%	33.3%		3.8%	33.3%
Norwegian public sector	2020	6.3%	3.2%		6.3%	3.2%	
	2021	8.3%	3.8%		8.3%	3.8%	
Public sector other donor countries	2018	5.9%					
	2019	5.9%					
Multilateral institutions	2015	12.5%	22.2%	28.6%	12.5%	18.5%	14.3%
	2016	21.4%	25.0%	33.3%	21.4%	25.0%	33.3%
	2017	42.9%	33.3%		42.9%	33.3%	
	2018	29.4%	22.6%	33.3%	29.4%	22.6%	33.3%
	2019	23.5%	28.0%	33.3%	23.5%	28.0%	33.3%
	2020	18.8%	22.6%	33.3%	18.8%	22.6%	33.3%
	2021	25.0%	30.8%		25.0%	26.9%	
Private sector in developing countries	2017		3.7%			3.7%	
Governments/Ministries in developing countries	2015		3.7%			7.4%	
	2016		4.2%			4.2%	
	2017		3.7%			3.7%	
	2018		6.5%			6.5%	
	2019		4.0%			8.0%	
	2020		3.2%			6.5%	
	2021		3.8%			7.7%	
Public-private partnerships	2018		3.2%			3.2%	
	2019		4.0%			4.0%	
	2020		3.2%			3.2%	

10.3.2. Health and peace interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian Health	Development Health	Peace	Humanitarian Health	Development Health	Peace
NGO Norwegian	2015	50.0%	100.0%	20.0%	37.5%	100.0%	20.0%
	2016	53.8%	80.0%		38.5%	80.0%	
	2017	50.0%	66.7%		40.0%	50.0%	
	2018	57.1%	16.7%		57.1%		
	2019	57.1%	25.0%		64.3%		
	2020	61.5%	50.0%		38.5%	16.7%	
	2021	70.0%	20.0%		60.0%	20.0%	
NGO Local	2015	37.5%		40.0%	50.0%		60.0%
	2016	23.1%			38.5%		
	2017	10.0%	16.7%		20.0%	33.3%	
	2018	14.3%	33.3%		14.3%	50.0%	
	2019	14.3%	25.0%		14.3%	50.0%	
	2020	15.4%			15.4%	33.3%	
	2021			100.0%			100.0%
NGO International	2018				7.1%		
	2020				23.1%		
	2021				10.0%	20.0%	
NGO Other donor countries	2018		16.7%			16.7%	
	2019		25.0%			25.0%	
	2020		16.7%			16.7%	
	2021		20.0%			20.0%	
Norwegian public sector	2020	7.7%			7.7%		
	2021	10.0%			10.0%		
Public sector other donor countries	2018	7.1%					
	2019	7.1%					
Multilateral institutions	2015	12.5%		40.0%	12.5%		20.0%
	2016	23.1%	20.0%	100.0%	23.1%	20.0%	100.0%
	2017	40.0%	16.7%		40.0%	16.7%	
	2018	21.4%	33.3%		21.4%	33.3%	
	2019	21.4%	25.0%		21.4%	25.0%	
	2020	15.4%	33.3%		15.4%	33.3%	
	2021	20.0%	60.0%		20.0%	40.0%	

10.4. Group of Agreement partners and Implementing institutions: Syria

10.4.1. HDP interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian	Development	Peace	Humanitarian	Development	Peace
NGO Norwegian	2015	50.0%	9.1%		35.7%		
	2016	47.8%	15.4%	20.0%	39.1%	7.7%	
	2017	50.0%	25.0%		30.0%	25.0%	
	2018	45.0%	28.6%		30.0%	28.6%	
	2019	56.0%	33.3%		36.0%	33.3%	
	2020	47.4%	66.7%	20.0%	36.8%	66.7%	20.0%
	2021	47.4%	60.0%	33.3%	36.8%	40.0%	33.3%
NGO Local	2015	7.1%	18.2%	66.7%	7.1%	18.2%	66.7%
	2016	4.3%	23.1%	40.0%	4.3%	30.8%	60.0%
	2017		12.5%	50.0%	5.0%	12.5%	50.0%
	2018		14.3%	25.0%		14.3%	25.0%
	2019			16.7%			16.7%
	2020			20.0%			20.0%
	2021			33.3%		20.0%	33.3%
NGO International	2015	7.1%	18.2%		21.4%	27.3%	
	2016		7.7%		8.7%	7.7%	
	2017				15.0%		
	2018				15.0%		
	2019			16.7%	20.0%		16.7%
	2020			20.0%	10.5%		20.0%
	2021		20.0%		10.5%	20.0%	
NGO Other donor countries	2016			20.0%			20.0%
	2017			25.0%			25.0%
	2018			50.0%			50.0%
	2019			33.3%			33.3%
	2020			20.0%			20.0%
	2021			33.3%			33.3%
Norwegian public sector	2015		18.2%			18.2%	
	2016		15.4%			15.4%	
	2017		12.5%			12.5%	
	2018		28.6%			28.6%	
	2019		33.3%			33.3%	
Public sector other donor countries	2018			25.0%			25.0%
Multilateral institutions	2015	35.7%	9.1%	33.3%	35.7%	9.1%	33.3%
	2016	47.8%	15.4%	20.0%	47.8%	15.4%	20.0%
	2017	50.0%	37.5%	25.0%	50.0%	37.5%	25.0%
	2018	55.0%	14.3%		55.0%	14.3%	
	2019	44.0%	33.3%	33.3%	44.0%	33.3%	33.3%
	2020	52.6%	33.3%	20.0%	52.6%	33.3%	20.0%
	2021	52.6%	20.0%		52.6%	20.0%	
Norwegian private sector	2015		27.3%			27.3%	
	2016		23.1%			23.1%	
	2017		12.5%			12.5%	
	2018		14.3%			14.3%	

10.4.2. Health and peace interventions

Group	Year	Agreement Partner			Implementing Institution		
		Humanitarian Health	Development Health	Peace	Humanitarian Health	Development Health	Peace
NGO Norwegian	2015	50.0%			41.7%		
	2016	50.0%	100.0%		45.0%	100.0%	
	2017	52.9%	100.0%		35.3%	100.0%	
	2018	50.0%	100.0%		37.5%	100.0%	
	2019	60.0%	100.0%		40.0%	100.0%	
	2020	50.0%	100.0%		37.5%	100.0%	
	2021	50.0%	100.0%		37.5%	66.7%	
NGO Local	2015	8.3%		66.7%	8.3%		66.7%
	2016	5.0%		66.7%	5.0%		66.7%
	2017			66.7%	5.9%		66.7%
	2018			50.0%			50.0%
	2019			25.0%			25.0%
	2020			25.0%			25.0%
	2021			100.0%		33.3%	100.0%
NGO International	2015	8.3%			16.7%		
	2016				5.0%		
	2017				11.8%		
	2018				12.5%		
	2019			25.0%	20.0%		25.0%
	2020			25.0%	12.5%		25.0%
	2021				12.5%		
NGO Other donor countries	2018			50.0%			50.0%
	2019			25.0%			25.0%
	2020			25.0%			25.0%
Multilateral institutions	2015	33.3%		33.3%	33.3%		33.3%
	2016	45.0%		33.3%	45.0%		33.3%
	2017	47.1%		33.3%	47.1%		33.3%
	2018	50.0%			50.0%		
	2019	40.0%		25.0%	40.0%		25.0%
	2020	50.0%		25.0%	50.0%		25.0%
	2021	50.0%			50.0%		

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