



# **After Action Review (AAR)**

## **Thailand Country Office**

### **Response to COVID-19 Crisis**

**Final Report**

AAR event of 28<sup>th</sup> August 2020

Bangkok

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Version: 7 October 2020

## Executive Summary

This report presents the outcomes of the UNICEF Thailand Country Office After Action Review (AAR). The AAR was a one-day event involving around 40 UNICEF staff from Thailand Country Office (TCO) and East Asia and Pacific - Regional Office (EAP - RO), with colleagues from the RO supporting the event. The perspectives of external stakeholders (government, partner and UN representatives) were included through an online survey and a panel discussion session during the event.

The event was designed around the four standard AAR questions, plus additional evaluation focused questions, specifically on Relevance, Effectiveness, Equity, and internal and external Coherence, to bring some structure, rigour and an evaluative component to the exercise. Background material and the results of surveys and inputs made related to the AAR are made available to the readers as annexes to this document.

### Findings

**Relevance: the scale and nature of the UNICEF Thailand COVID-19 response was relevant and appropriate to a context of an upper income country where government capacity is strong and with reasonably well-developed health systems.** The Thailand Country Office (TCO), and its partners, had to significantly adjust their original plans as the context and associated needs changed; as the health risks were first exacerbated and subsequently brought under control and the negative economic impact began to be realised.

TCO managed to adapt its programming to meet needs through leveraging and maximise existing relationships to work in its normal “Upstream” approaches with the government in helping secure large-scale cash programmes for vulnerable groups. It also adapted to take on “Downstream” work to reach a wide range of institutions such as schools and Early Childhood Development Centres and direct support for migrant families. The targeting of Migrant worker families for support following a request from the government was consistently viewed by the TCO team and external stakeholders as very relevant to meeting the needs of a particularly vulnerable group hit hard by the economic impact of COVID-19.

**Effectiveness: performance against targets set out in March-April were largely successful, and UNICEF’s combination of “upstream” and “downstream” initiatives was effective.** In external advocacy the organisation became a conduit of information to partners and the government, and was able to use its leverage to press for change in areas identified by the office. Downstream initiatives were new to the office and carried out well through a range of partners.

The fact that the programme was designed, adapted and implemented in such an unusual and fluid emergency by a team that largely lacked any significant emergency experience was noteworthy. At the same time, the crisis brought a high workload and personal impact for TCO and partner staff. Aside from some consultancy support the team managed the programme within TCO pre-COVID-19 staff capacity. The team is clearly motivated to learn from this experience and use it to set a platform for increasing preparedness capacity for any further COVID-19 or other crises that may occur.

With respect to the broader organization, there were mixed views expressed on the timeliness, consistency and quality of support provided with some key issues identified for addressing.

**Equity: the emphasis on migrant worker families was consistently viewed as an essential contribution to meet the needs of a very vulnerable population.** Even though the migrant worker population and their contribution to the

economy are both sizable, these workers and their families fall outside government support packages made available for addressing COVID-19 impacts. Concerns remain, confirmed by external stakeholders, that there are remaining gaps in provision for marginalised groups that all stakeholders need to be mindful of filling.

**Coherence – internally (within TCO): systems and ways of working have been built up through this experience that would stand UNICEF in good stead** should further COVID-19 threats re-emerge in any significant manner, and/or other significant threats occur in future. A critical factor in achieving this was the strong cross-team working and cooperation established during the response.

**External Coherence (with the Government and other actors): “Upstream” priorities, more the norm for UNICEF Thailand, continued to be pursued and external informants confirmed the value of the organisation’s role** in providing technical expertise, analysis and critical moments of advocacy in influencing change. The scaling up for this emergency benefitted from productive existing partnerships with the Government and CSO partners.

## Recommendations

**Three recommendations were developed from the AAR and are summarised here.** The more detailed version of these recommendations are presented in section six and initial lessons learnt are presented in section five.

### 1. Capitalising on this experience to improve preparedness for future crises

UNICEF TCO should by the end of 2020 prepare for future crises affecting the country (including a COVID-19 second wave) through development of **emergency preparedness planning**<sup>1</sup> that will include: **scenario scoping; development of sample plans** against these scenarios; **establishing a standing capacity and support provisions within TCO** (staff and externals) for future emergencies; and **engaging partners in lesson learning** on the COVID-19 experience

### 2. Working “downstream” to reach the most vulnerable

UNICEF TCO should consider setting up an emergency network within Thailand (at its regional level) **to improve understanding, engage stakeholders and develop emergency response plans** to better reach vulnerable populations for COVID-19 and potential future crises. These networks are to be adapted to each region’s needs.

### 3. Managing RO and Headquarters requests and expectations

UNICEF HQ and the EAPRO - with the RO acting on behalf of the Country Office (CO) should **improve organizational coordination and priority setting** in emergencies through ensuring greater consistency, streamlining and coherence in approaches; ensuring global or regional initiatives take planned CO initiatives into account to avoid undermining these; clarification of data needs and uses within the organisation. UNICEF EAPRO should clarify what types of support can be offered beyond oversight roles, (consultation, guidance and other forms of support), and improve support to TCO to meet targets and programming gaps.

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<sup>1</sup> Regional Office suggests inclusion of a strong Disaster Risk Reduction component in the plans.

## List of Acronyms

AAR	After Action Review
ADAP	Adolescent Development and Participation
C4D	Communication for Development
CO	Country Office
COVID-19	Disease caused by the SARS-CoV-2 (2019-nCoV) coronavirus
CSO	Civil Society Organization
CSU	Common Service Unit
DDPM	Department of Disaster Prevention and Mitigation
EAPRO	East Asia and Pacific Regional Office
ECD	Early Childhood Development
GDP	Gross Domestic Product
ICT	Information Communication Technology
IDC	Immigration Detention Centre
LNCB	Leave No Child Behind
NESDC	National Economic and Social Development Council
MNEC	Mon National Education Committee
MNS	Mon National School
MoE	Ministry of Education
MYR	Mid-Year Review
HPM	Humanitarian Performance Monitoring
HQ	UNICEF Headquarters
LGBTQI	Lesbian, Gay, Bisexual, Transgender, Queer and Intersex persons
PPE	Personal Protective Equipment
PSFR	Private Sector Fund-Raising
PMR	Planning, Monitoring and Reporting
RCCE	Risk Communication and Community Engagement
RCO	UN Resident Coordinator's Office
RO	Regional Office
RTA	Real Time Assessment
SitReps	Situation Reports
SDG	Sustainable Development Goals
TCO	Thailand Country Office
THB	Thai Bhat
UN	United Nations
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
USD	United States Dollars
WASH	Water, Sanitation and Hygiene
WB	World Bank
WFP	World Food Programme
WHO	World Health Organisation

## Map of Thailand



Please note that text in orange colour within the document are direct quotes from participants of the AAR.

## 1. Introduction and Purpose

The After Action Review (AAR) took place roughly seven months after the COVID-19 crisis began to be felt in Thailand, with the first recorded case late January and the first death on 29<sup>th</sup> February. Between late March and early May recorded cases rose from around 1,000 to 3,000. Over the February-March period, measures to manage and contain the threat were put in place. These built up a set of controls as seen in most countries including restrictions on movement, flight bans, and lockdowns affecting all aspects of life. Major efforts have been undertaken in public health awareness raising, hygiene promotion, social distancing measures, and “track and trace” procedures. As at the end of July, measures were gradually becoming more relaxed within the country after almost two months of being free of recorded localized transmission and what has been regarded as a successful public health response by the country. Travel into the country remains heavily restricted at the time of writing along with strict quarantine requirements for any arrivals as the government maintains a cautious approach.

The After-Action Review is normally a quick reflective exercise for team-based learning during the early stages of a response, in order to improve results in the current project, and identify improvements that should be made for future responses. An After-Action Review enables the individuals involved to identify for themselves what happened, why it happened, what went well, what needs improvement and what lessons can be learned from the experience.

As part of a Mid-Year Review (MYR), the Thailand Country Office (TCO) initiated a discussion with the Regional Office (RO) on conducting an AAR to take the opportunity to reflect on the COVID-19 response (annex 1 presents the Concept Note). A decision was taken to add more evaluative dimensions to enhance credibility of the AAR. This included structuring core questions and the process around standard evaluation criteria (relevance, effectiveness, equity and coherence), bringing in external stakeholder views through an online survey, and including a special AAR session where senior representatives of government, partners and UN organisations took part in a panel discussion.

Following the MYR and AAR process, the TCO contributed to a wider global COVID-19 learning process, the Real Time Assessment. The country office survey was completed by the TCO and whilst this did not feed into the AAR process or report this is included (annex 11) as complementary document from the TCO perspective on the response.

## 2. Objectives and Key Questions

Typically, the AAR process and key questions are developed under 4 overarching questions<sup>2</sup>.

- *What did we intend (or plan) to do?*
- *What actually happened?*
- *What went well, and why?*
- *What can be improved (and why), and what should we change in coming period (and in future responses)?*

This AAR had an expanded scope, thus the primary objectives of the Thailand COVID-19 response AAR were adapted and stated below:

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<sup>2</sup> See for instance short processes from [UNICEF guidance](#); and [USAID](#)

- To assess the relevance, effectiveness, equity and coherence of UNICEF TCO's response to the COVID-19 crisis of 2020, from beginning of the year to August 2020;
- To engage the TCO in analysing the strengths and weaknesses of the response, focusing on key aspects that should be built on and what corrective actions should be taken;
- To provide actionable recommendations for UNICEF to feed into its planned programme response for the remainder of the year, which may possibly influence the office's 2021 work planning, advocacy and resource allocation;
- To contribute to UNICEF's wider organisational learning on COVID-19 responses

A small number of evaluation questions were developed under the overarching questions to help shape the process and key areas of enquiry and bring some evaluation structure to the discussions.

Table 1: Criteria plus Overarching and detailed line of inquiry for the AAR

Overarching questions	Criteria and detailed questions for the ARR
<ul style="list-style-type: none"> <li>• <i>What did we intend (or plan) to do?</i></li> </ul>	<p><b>Relevance</b></p> <ul style="list-style-type: none"> <li>• To what extent has UNICEF Thailand's COVID-19 response been appropriate to the needs of targeted beneficiary populations, and proved able to adapt to changing contexts and needs?</li> </ul> <p><b>Equity</b></p> <ul style="list-style-type: none"> <li>• Given the acknowledged disproportionate impact the crisis has had on the poorest and most vulnerable children, to what extent has UNICEF been able to identify, target and reach these groups?</li> </ul> <p><b>Internal Coherence</b></p> <ul style="list-style-type: none"> <li>• To what extent were UNICEF's COVID-19 interventions consistent between the various sections of the office</li> <li>• Where there any synergies established between interventions by various sections of the office</li> </ul> <p><b>External Coherence</b></p> <ul style="list-style-type: none"> <li>• To what extent were UNICEF's COVID-19 interventions consistent with government, UN and other actors' policies, priorities and interventions?</li> </ul>
<ul style="list-style-type: none"> <li>• <i>What actually happened?</i></li> </ul>	<p><b>Effectiveness</b></p> <ul style="list-style-type: none"> <li>• To what extent have the expected results been achieved in the UNICEF response, and what have been the factors that have enabled or hindered this?</li> </ul>
<ul style="list-style-type: none"> <li>• <i>What went well, and why?</i></li> </ul>	<p><b>Effectiveness</b></p> <ul style="list-style-type: none"> <li>• Are there particular areas where UNICEF has contributed particular added value to the national COVID-19 response?</li> </ul> <p><b>Equity</b></p> <ul style="list-style-type: none"> <li>• To what extent the UNICEF response met the needs of the poorest and most vulnerable children?</li> </ul>
<ul style="list-style-type: none"> <li>• <i>What can be improved (and why), and what should we change in coming period (and in future responses)?</i></li> </ul>	<p>To be established through the AAR sessions, and presented in the conclusions and recommendations sections of this document.</p>

**The methodology is detailed in annex 2.** With the questions established as set out above, a one-day event was designed, involving a large group of the Thailand office staff team. The process was designed to be as interactive and participatory as possible to encourage all participants to actively contribute to the reflections on the programme, findings and recommendations (annex 3 presents the AAR event agenda).



As with standard AARs, the process was focused on utility for the TCO team, concentrating on capturing success, strengths and weaknesses for immediate consideration, and for longer term learning and improvement for future preparedness. As noted in the Concept Note (annex 1), UNICEF is investing in a wide range of data collection and learning processes on the COVID-19 responses around the world and to feed into broader organisational learning and this Thailand AAR is one of the earliest initiatives in the EAP region.

### 3. Findings

As a brief introduction to the programme, a summary of achievements was compiled by the team. More details of the achievement can be found in the MYR Report.

In the next sub-sections, Findings are arranged under the standard evaluation criteria of *Relevance, Effectiveness, Equity* and *Coherence*. In each sub section the findings from the AAR event are summarised and analysed, and then perspectives from external informants (survey respondents and members of the panel) are detailed to assess the extent that external informants confirmed the findings / conclusions of the TCO team, and where views may have differed. There are also areas where external informants contributed additional views or detail to the findings.

Please note that some observations and findings often do not fit neatly and exclusively under the questions in a single criterion, and key points in one sub-section can relate to or build on others. Attempts have been made to keep repetition to a minimum through referencing to other sections as appropriate.

#### 3.1. Relevance

*To what extent has UNICEF Thailand's COVID-19 response been appropriate to the needs of targeted beneficiary populations, and proved able to adapt to changing contexts and needs?*

*"We thought that this was going to be like bird flu" [ie short lived and low impact].<sup>3</sup>*

**As COVID-19 transmission rates increased, and the complexity and longevity of the crisis grew, it became apparent that the original short-term, modest scale response would need to be scaled up, and would need to evolve.** This necessitated growing and diversifying the programme and applying greater degrees of flexibility to remain relevant to the changing needs of populations, particularly those where gaps in provision were emerging. As the concerns over health impact eased, there was increasing concern over the significant shock to poor families' incomes as lockdown measures came into place closing businesses, factories and reducing the tourist services industry to almost zero. Migrant workers fell outside government COVID-19 assistance being provided and the numbers affected were huge – at around 3.9 million representing over 10 per cent of the total labour force, and estimated to contribute between 4.3 to 6.6% of Thailand's GDP<sup>4</sup>. See below on specific support to migrant communities and under Equity sub section 4.3 for some further comments on targeting the needs of particularly vulnerable groups.

**The TCO team felt that the response was relevant to the needs of targeted populations and proved able to adapt as time went on and priorities evolved.** This view was reflected in feedback from external

<sup>3</sup> Please note text in orange color are direct quotes from participants of the AAR.

<sup>4</sup> <https://reliefweb.int/report/thailand/thailand-migration-report-2019-enth>

stakeholders (see below). Two overall points arose on Relevance – the ability of UNICEF TCO to adapt to a changing context and priorities, and the targeting of particular groups.

TCO managed to adapt its programming to both -

- Leverage and maximise existing relationships to work in its normal “Upstream” approaches with the government in for instance helping secure large-scale cash hand-outs for vulnerable groups. Direct support was provided to the Ministry of Health with procurement of COVID-19 test reagents
- Adapt to take on “Downstream” work to reach a wide range of institutions such as schools and Early Childhood Development (ECD) Centres with guidance and supplies for Safe School kits, and to secure and distribute Gifts in Kind for hygiene and COVID-19 prevention. It was noted that this included managing Gifts-in-Kind contributions (such as soap and hand sanitiser) for the first time by TCO. TCO staff had to learn quickly to get these agreements in place and supplies distributed, and notably at a time when such COVID-19 related supplies were in very short supply in the country *“It was like the wild west on the supply side”*.

**The targeting of Migrant worker families for support following a request from the government was consistently viewed by the TCO team and external stakeholders as very relevant to the needs arising from the context.** The request from the Ministry of Public Health was for UNICEF to target migrant households with Risk Communication and Community Engagement (RCCE) COVID-19 information as this was where the government felt that UN agencies and NGOs would be best placed to help. UNICEF set out to support 100,000 migrant beneficiaries through RCCE messaging and hygiene basics such as hand sanitiser supplies, reaching around 90,000<sup>5</sup> by mid-July (table 2). Nine NGO partners with geographic presence and migrant worker experience were involved in reaching these populations in 23 provinces. As the programme evolved, further work was undertaken by these partners in monitoring child protection risks given the increased risks caused by lock-downs, and provision of relief kits (food and non-food items) targeted at 5,000 of the most vulnerable migrant groups.

**Fundraising was successful in increasing available resources to expand the programme** from the original 120,000 USD to 1.45 million USD, with donor funds and public funds raised in-country.

**Communications and Communication for Development (C4D) functions adapted their priorities to assume leading roles** in contributions that were well suited to the country context. These teams worked in support of public health messaging, supporting fund-raising (4 million Thai Bhat (THB) raised through Love Delivery Fest), and in informing, influencing and advocating on meeting the needs of those harder hit by the economic impact. The teams produced and distributed social media (1.47 million engagements through Twitter and FaceBook) and traditional media with diverse content on parental tips from doctors on, mental health advice and “Back to school advice. This also included challenging and correcting misinformation being circulated in social media.

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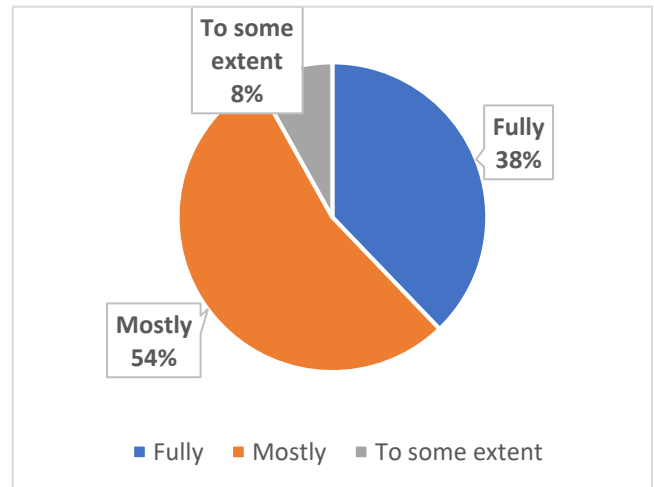
<sup>5</sup> This had risen to 134,000 by mid-September

External perspectives relating to Relevance

**Figure 1: Survey Q3 - To what extent do you feel that UNICEF Thailand’s COVID-19 response has been appropriate to needs of the children in Thailand?**

As can be seen from the Figure One, survey informants were very positive on the appropriateness of UNICEF’s response to the needs of children. In qualitative answers to this question informants noted:

- The comprehensive UNICEF assistance framework and technical support on key sectors (that covered all-age children) and essential communications was valued by respondents, along with the provision of education support and food sets
- The emphasis on filling a gap, namely the government not being able to respond to in meeting the needs of migrant children (see further comments under equity), was valued by the external respondents. Also noted of value was UNICEF’s promotion of the Top Up policy of 3,000 THB/head budget allocation within the cash transfer programme taken up by the government.<sup>6</sup>
- There were a small number of comments that noted delays in starting the COVID-19 response, the need to expand access to children, one respondent commended the efforts undertaken in UNICEF’s work in assessing the socio-economic impact of the crisis, but felt less clear on the degree the needs of all children were fully met (pls refer to UNICEF’s global Leave No Child Behind (LNCB) statements).



The **external Panellists** were also very positive on the overall relevance of UNICEF’s contribution to needs in the country, and citing the emphasis on reaching the most vulnerable, in particular UNICEF’s role with migrant families; targeting children and young people; helping partners develop a more cohesive and effective approach overall; and targeted advocacy. UNICEF’s role in social media outreach on RCCE messaging were also cited as valuable contributions. The external Panellists noted gaps they had observed in provision for certain groups relating to groups at risk of being left behind – see under Equity, sub-section 4.3, for their comments on these.

Following discussion point arose in the early AAR discussions: “Should UNICEF TCO have better addressed the “secondary effects” of the emergency – for example, the economic impact on the poorest children and their families?” It was not posed as a criticism of the UNICEF choices but a question with the benefit of current knowledge on the significant economic impact of the crisis. One would note that assumptions were made on a short timeframe for the COVID-19 crisis and that health threats were the dominant concern. These were reasonable assumptions to have made at that time. The question was not resolved in the AAR and remains an important consideration for plans going forward.

<sup>6</sup> Additional information on Thailand’s pre-Covid Child Support Grant can be found at [Thailand Child Support Grant Impact Evaluation](#),

The team recognised that in order for UNICEF to remain relevant going forward, planning and contingencies must take into account both the potential effects of a further (second wave) health crisis, and the potential impact of the social, educational and economic impact of COVID-19 associated prevention measures.

### 3.2. Effectiveness

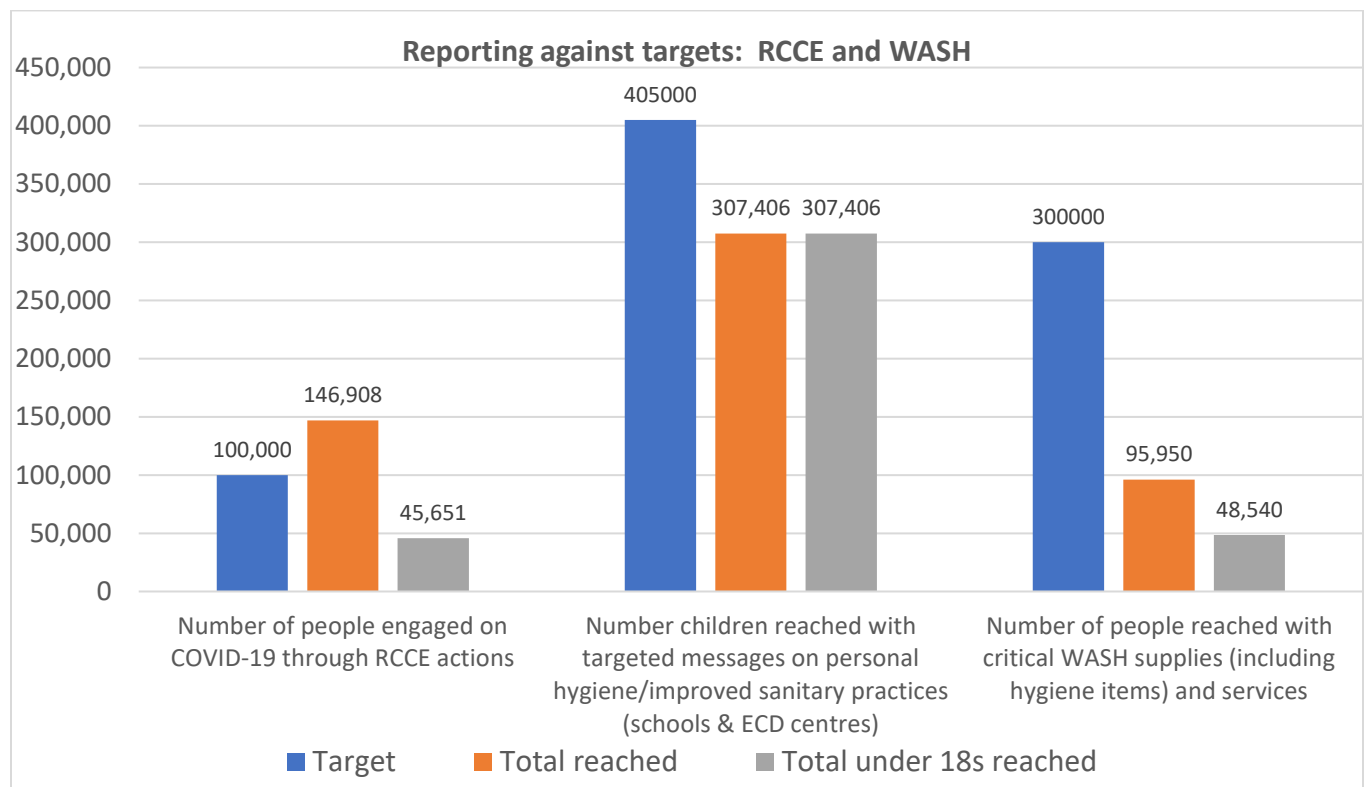
*To what extent have the expected results been achieved in the UNICEF response, and what have been the factors that have enabled or hindered this?*

*Are there particular areas where UNICEF has contributed particular added value to the national COVID-19 response?*

**Overall, the TCO team felt largely positive about the effectiveness of COVID-19 response.** The team noted that the request for assistance from the Department of Disease Control, Ministry Public Health on 25<sup>th</sup> February marked an important ‘starting point’ in the TCO response.

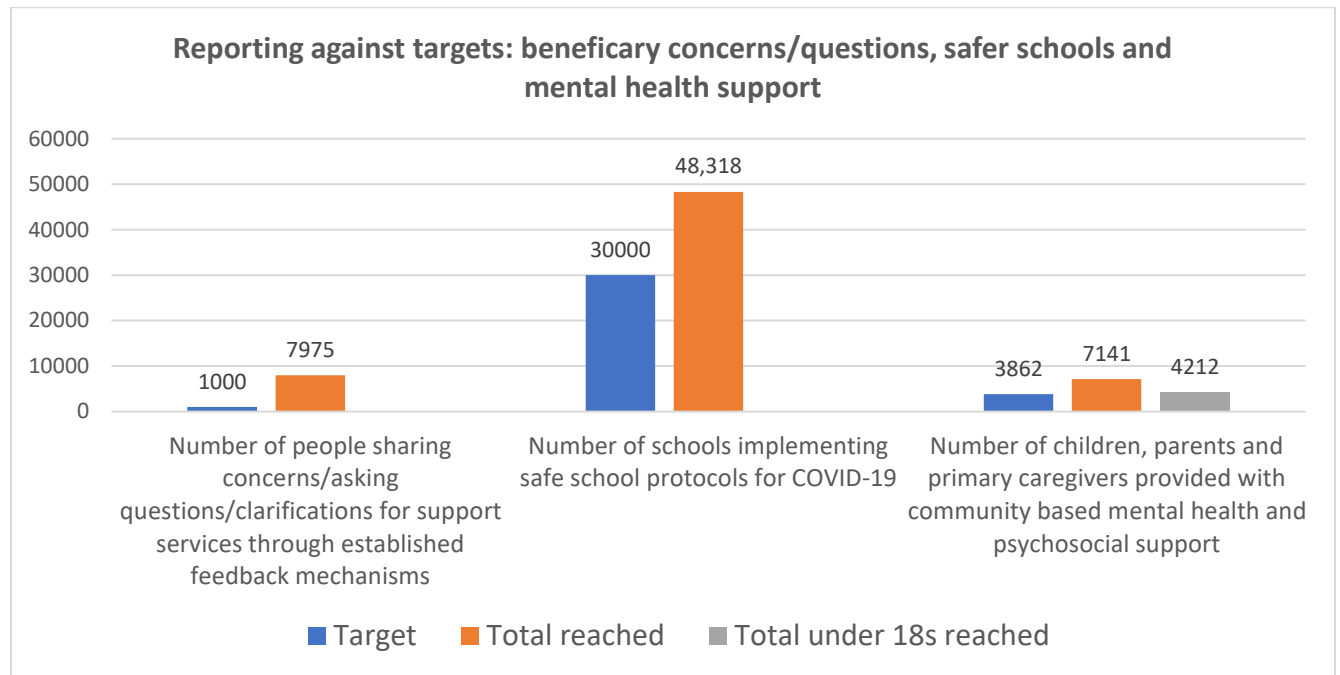
#### Performance against targets

Please see Annex 5 for a one-page table on results targets and progress as reported in Mid-September. The main targets are set out in the summary graphs below. Most of these targets were set around the March-April period.



These three targets aimed at reaching large numbers of beneficiaries. Two performed reasonably well with some 76% of target reached for targeted messages to children on hygiene and sanitary practices in

schools and ECD centres children, and the reported numbers of people engaged on RCCE actions achieving almost 150% of target. The WASH initiatives achieved only 32% of the target as the focus for efforts shifted to other areas.



The feedback mechanism had set a relatively modest target of 1,000 requests for information or support and this was greatly exceeded – perhaps related to the issue of confusion and misinformation that circulated on COVID-19. The initiative to help schools to adopt “safe school protocols” through guidance and advice exceeded the target, as did mental health support for children, parents and carers.

Reporting on a target of 3 million children supported with distance / home learning was phased out as Thai schools re-opened and monitoring of this indicator was stopped.

A figure of 45 million was set for the reach of RCCE COVID-19 prevention messaging. It is estimated that over 54 million were reached but the team are mindful that the usefulness of such figures is very limited, difficult to measure with any accuracy, or judge any contribution to behaviour change and potential outcomes for people.

**Summary of achievements:** the TCO team prepared a summary of key achievements for presentation in the AAR, which is set out in the Table Two below. Table Two provides a more nuanced assessment of UNICEF’s contributions under the target figures described above, and give a good summary of the nature of the UNICEF support in certain sectors. Important points to note in Table Two are: the prominence of RCCE and socio-economic initiatives; the combination of “upstream” and “downstream” work, and a creative range of media and communications initiatives that raised awareness and raised resources.

**Table 2: Summary of Achievements (as at end of July)**

**Public health**

- 89,675 migrants and urban poor population provided with information on COVID-19 through the RCCE activities
- Prevention measures in various institutions providing care to children strengthened through provision of critical hygiene and COVID-prevention supplies, guidance including in juvenile observation/ training centres, child and family shelters, gov't residential care facilities, and Immigration Detention Centre (IDC)
- Almost 2,500 schools and ECD centres received Safe School Kits
- Testing capacity of key government health institute supported with COVID testing reagents (5 million THB / 167,000 USD)

**Continuity / expansion of services to mitigate the impact**

- Advocacy and technical support leading to Top-Up to cash transfers (child support grant, disability grant and old age allowance) for 3 months at the value of 1,000 THB, reaching 8 million most vulnerable population and mobilizing 765 million USD
- A series of innovative data collection through phone surveys and online surveys, as well as co-leadership with UNDP in leading the joint UN assessment of the socio-economic impacts on children and women
- Worked with partners in influencing government cabinet agreement to commit 40 billion THB / 133 million USD of its COVID-19 budget for a new cash handout programme to help 13.14 million extremely vulnerable people affected by COVID-19 (this was separate to the Top Up cash transfers)
- Support the continuity of learning through adaption and operationalization of Safe School guidance and protocols and policy engagement initiated on role of digital technology. 38,000 schools received safe school guidance, teacher manuals while additional of 19,000 ECD centres received teacher manuals.
- Supported NGO partners' provision of psychosocial first-aid support, monitoring for child protection issues, relief kits (food and non-food) to migrant families most at risk
- Expansion of mental health support for adolescents through [lovecarestation.com](http://lovecarestation.com)

**Communications, awareness raising and fundraising**

- Produced more than 237 COVID-19-related social media content pieces with 41.8 million reaches and 1.47 million engagements on FaceBook and Twitter
- Media videos of doctors giving COVID-19 parent tips; photos and human-interest stories on COVID-19 impact on children and families; content on mental health for adolescents; "Back to School" content
- Support from corporates and individual donors: Love Delivery Fest: 4 million THB / 133,000 USD with 421,000 views

**The team reflected on some of the key actors underlying this progress:**

**Effective team working and agility on organising themselves within TCO** was named by almost every group when discussing key successes of the response. Effective team working / cross-sectoral approaches accounted for almost 1/3<sup>rd</sup> of the Menti Metre brainstorm choices on key successes. The team made specific note of:

- Shared goals and focus of the whole office
- The dual nature of the role of the Emergency Focal Point (also the Communication for Development – C4D Officer) led to a natural shift in the team
- Internal co-ordination being maintained by the regular convening of the COVID taskforce comprising members of sectional teams, this meeting informed regular SitReps

- In Adolescent Development & Participation (ADAP)/Social Policy/Child Protection a focus was placed on data collection (through surveys). The analysis of the data established baselines from which a basis was formed to launch assistance. This included a rapid assessment in the Southern Border Provinces where the situation was more severe. Adolescent Development and Participation (ADAP) assistance was planned and continuously adapted in line with the capacity of partners.
- Child Protection, Early Childhood Development, and Education produced guidance providing concrete assistance for families, schools, and care homes. The localization and adaptation had been a collaborative process with Ministry of Education and Ministry of Public Health in concert with UN agencies; WHO, UNESCO, and WFP including WB so the common set of safe school operation had been systematically adopted.
- Child Protection saw internal capacity building as a priority and the team undertook online training to ensure staff members were up to date on key issues.
- Communications began to initiate activities (streamlined to programmatic priorities) and coordinate RCCE rather than messaging confined to single manner and content. The team maintained an agile media stance – early messaging focused on remaining calm and relaying information filtered from HQ and the RO. From mid-March onwards the narrative changed as the programmatic response grew; information disseminated was more Thai focused and presented new and localized issues.
- The Private Sector Fund-Raising (PSFR) developed a Covid-19 package that resulted in several new partnerships including with Johnson & Johnson in Thailand and with Lazada and Grab. This was achieved despite many challenges encountered including donor retention, various demands from donors, managing contributions in kind, equipping outsourced support staff to allow them to continue to function and the termination of Face to Face fundraising and advocacy of TCO staff.
- The Planning Monitoring and Reporting (PMR) team maintained key functions regarding quality control, workload management while ensuring the clarification and dissemination of information regarding Humanitarian Performance Monitoring (HPM) guidelines.

The team noted that cross sectoral collaboration had worked well as in the emergency it was clear everyone had to focus on COVID-19. However, they also noted *“Now we are returning to normal we are finding it more difficult to have this joined up approach.”*

**In external advocacy UNICEF became both a conduit of information to partners and the government and used its leverage to press for change.** UNICEF used its leverage with government partners to focus minds on the severity of the crisis and the need for a concerted government response, which included:

- Discussions with the Ministry of Finance regarding the financial impact of the crisis and advocacy for mitigation measures
- Establishing a range of child protection guidelines and advocacy with government departments on protection of very vulnerable groups of children and young people (see section 4.3)
- Working with Equitable Education Fund so the safe school operation guidance could be published and distributed country wide.

### Some areas for improvements were noted.

- The new Request for Proposals to engage firms should include additional information detailing whether UNICEF could provide support in the case of early termination (if possible and feasible) should be part of recruitment of firms going forward, thereby addressing the lack of clarity on this issue. This was raised by the team as members of the local fund-raising teams engaged in face-to-face fund-raising were terminated as they could no longer do their jobs in lock-down.
- Establishing an adequate budget and identifying reliable sources for the procurement of supplies in an emergency could help alleviate the many challenges faced. These included shortages in the availability of PPE, a lack of feedback from vendors, circumventing export restrictions in place in China.
- Having emergency guidelines in place would speed up the dissemination of key information to staff in emergency situations.

**The crisis meant not just a challenging workload but brought a high workload and personal impact for everyone.** Aside from some consultancy support there was no significant additional capacity brought in to TCO. Requests for Zoom meetings at times occurred outside working hours. Concerns on workload featured quite highly on the “Menti metre brainstorming on weaknesses” with stress being identified by a small number of others.

The adoption of a dual role by a staff member to serve both as the Emergency Focal Point and the C4D lead contributed to positive team working as noted above. It was noted however that this brought challenges for the individual and prioritization, with RCCE & C4D both being prominent and important contributions to the response, and RCCE work possibly not benefiting from as much attention as it may have needed.

There was a sense of pride however in the agility of the team to reorganise and re-prioritise work internally, switch emphasis of team and individual tasking, bring in effective cross-sectoral working, and adapt to remote working. The team questioned whether this would be sustainable if the crisis period went on longer (or a second wave occurred).

For the HR team there was a peak in March as realisation hit that the impact of COVID was not going to be short lived and working remotely would continue. HR had to respond to increased needs to deal with duty of care (including medevac requests coming to the TCO/RO Common Services, establishing guidelines in consultation with WHO) and a rising number of queries and support needed by staff.

**There were mixed views expressed on the timeliness and quality of support from the broader organisation** (regional office and headquarters). On the positive side the team noted excellent support for communications, advocacy, RCCE and fundraising and further development of “How to Tips”, documentation of weekly content and news updates as these have made a positive impact on the TCO COVID-19 response. L3 procedures enabled simplified processes which helped improve response times.

The areas for improvement noted multiple fund-raising initiatives that were poorly coordinated globally. The initial stages of the crisis were marked by some confusion due to multiple sets of guidelines being circulated globally and in the region. Participants noted a time lag in essential guidance in the early stages *“it felt that there was a 2 or 3 week delay on guidance becoming available compared to when we needed*



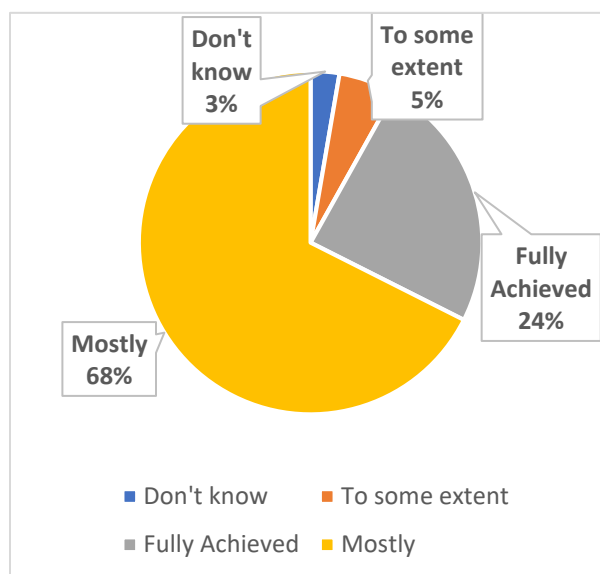
it”<sup>7</sup>, and then guidance was not always correct and/or would change frequently. There was a need to ensure that global or regional initiatives do not undermine or distract from planned CO initiatives, including in major campaigns and fund-raising drives. Another area of improvement noted by the team was in the poorly managed and confusing HPMindicator guidance from HQ.

### External perspectives relating to Effectiveness

**Figure 2: Survey Q4 - To what extent do you think that the positive results for children have been achieved due to UNICEF’s COVID-19 response?**

92% of survey informants felt that UNICEF had mostly or fully achieved positive results for children. Qualitative comments included:

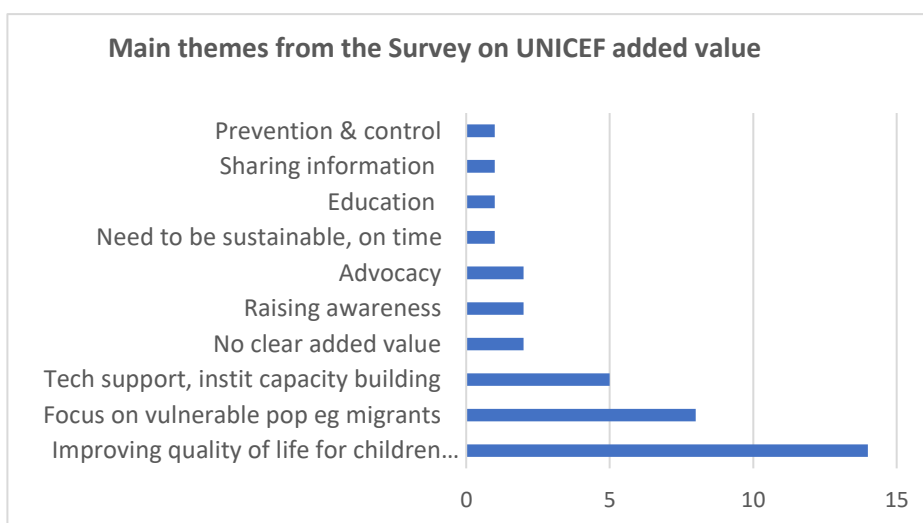
- Prevention messaging & awareness raising was clear and effective, utilizing a variety of media channels, suitable for young audiences
- Socio-economic impact study was valued
- Some barriers remaining on reaching some populations of the most at-risk children, but specific acknowledgment of contributions to the 3 vulnerable southern provinces
- Delayed procedures noted as presenting challenges for partners to deliver on time



**Figure 3: Survey Q5 - Are there particular areas where you think that UNICEF has contributed particular added value in the national COVID-19 response? If Yes, please specify (Responses grouped by theme)**

The top choice of informants came from comments under “improving quality of life for children and their families”. Whilst a very broad grouping, this covers a range of comments on UNICEF’s efforts to promote attention on core commitments to children as a key aspect of distinctive value-addition to COVID-19 responses.

As noted under the Relevance section, the focus on Migrants was



<sup>7</sup> To a certain extent EAP would logically have felt this more acutely than other regions as the first affected, and the time needed for UNICEF globally to recognise the unprecedented scale Covid-19 was assuming worldwide, and build up strategies, plans, and support

consistently seen as valuable and relevant, and related interventions are chosen as one of the top value-adding aspects of the UNICEF response by survey informants.

**Areas for improvement noted by survey informants’ qualitative comments included:**

Relevance and tailored-to-the-needs solutions:

- More attention to identifying and determining needs. Quote: “a need to research the needs of the target population more on what they really need”

Procurement – administrative processes

- Lack of flexibility in the funding allocated: discrepancy between needed allocations in the field and UNICEF guidelines for the use of funding.

Responsiveness

- Response would have improved if the “relief kits project” had started since the beginning of the outbreak
- Response should be faster to meet the need of vulnerable population.

Communications and outreach

- May need to adjust on how to communicate with children via online media, e.g. language and visualization
- Widely share tools, media and knowledge
- Informants asked for further guidance and information to be made available by UNICEF in areas such as child-focused nutrition, playing, exercise and oral health, along with user-friendly guidance on the Convention on Child Rights and other related documents for decision-makers.

Networking – partnering

- Understand an overall picture of how UNICEF working with networks and learn from case study and target populations regarding roles of UNICEF in Thailand
- Expand network for working in the southern border provinces.

The **external Panel** contributed views on the effectiveness of the UNICEF response. USAID welcomed UNICEF’s role in meeting the needs of migrant children and families and the key role played on the dissemination of prevention and protection handbooks in schools and to local communities, providing crucial information to children and their parents, along with findings of the recent Youth survey, which covered economic and mental health issues. These were helping to raise awareness of the effects of COVID-19 on children and young people children.

UNICEF’s work in data gathering efforts and provision of information and analysis on the effects of the crisis was noted by panellists. One partner stated that such work on mental health issues specifically were very useful, citing that 70% of children reaching out for advice were girls, and walk in visits are still rising as anxiety over the continued loss of incomes and the shrinking job markets continues. The stresses caused by economic hardship remain a challenge in the days ahead.

UNICEF TCO media outreach and infographics providing information on how children and youth could care for themselves was very useful for the target groups in the community.

Some suggestions included improving how to complete the ‘feedback loop’ to allow all children and young people to reach us [Government, UN, Implementing Partners] with requests for assistance and be able to contribute their ideas. Ensuring access to technology for children and young people was also emphasised

as access remains unequal. Consideration should be given as to how we can together help ensure that young people are given a voice.

One panellist felt that further advocacy is needed on the issue of children at risk of dropping out of school. Most panellist comments on suggested improvements focused on meeting the needs of vulnerable groups that are in danger of neglect. These are noted under sub section 4.3, Equity.

The full notes from the external panel session is presented as Annex 7.

### 3.3. Equity

*Given the acknowledged disproportionate impact the crisis has had on the poorest and most vulnerable children, to what extent has UNICEF been able to identify, target and reach these groups?*

*To what extent the UNICEF response met the needs of the poorest and most vulnerable children?*

**The most tangible and widely appreciated aspect of UNICEF’s Equity commitment was in the focus on migrant children and their families.** As noted under Relevance this intervention was valued and viewed as much needed support for a large and vulnerable population by the TCO team and confirmed by external informants and panellists.

The TCO team felt that UNICEF succeeded in anticipating child-focused equity issues and played a leading role in the UN Country Team (UNCT) in-country. The team noted that UNICEF headquarters played the same role on the global stage in promoting the rights of children and reminding stakeholders of particular vulnerabilities and responsibilities aimed at ensuring no-one was left behind.

The team noted a range of equity-related initiatives led by the Child Protection section, especially in response to the needs of children in particularly vulnerable situations outside a family setting. These included:

- Producing guidance on:
  - Public and private residential care institutions operations during COVID-19 with the Department of Children and Youth
  - The treatment of children in immigration detention with Department of Children and Youth and the Immigration Bureau
  - Juvenile observation and training centres during COVID-19 with the Ministry of Justice
- Advocating for the release of children from juvenile observation and training centres to protect them from COVID-19, although this was unsuccessful
- Contributed to list of dos and don’ts for law enforcement during COVID-19 with UNODC and UN Women, coordinated by the RO.

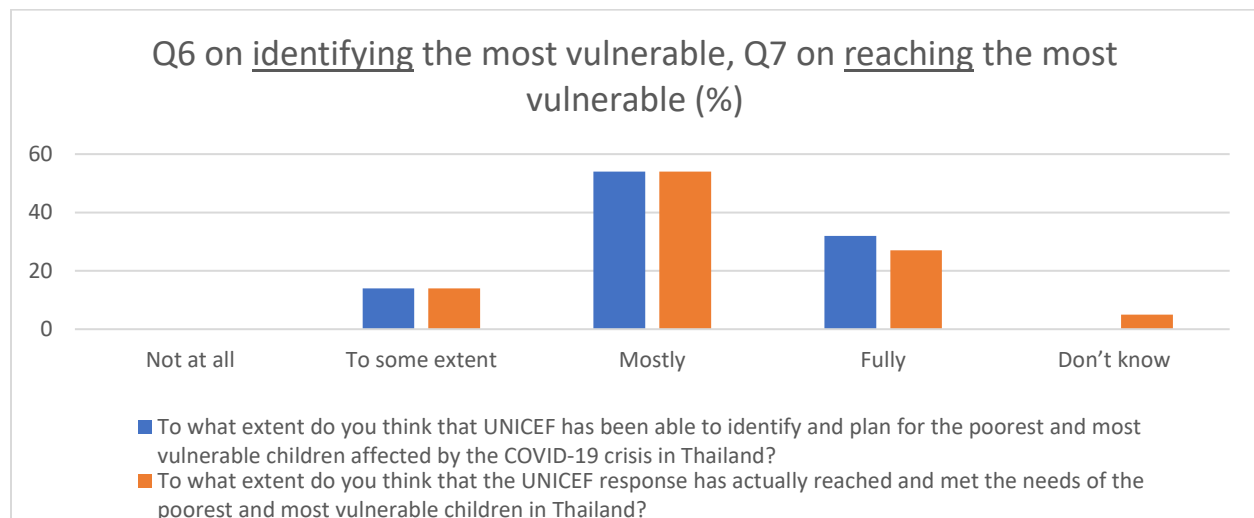
UNICEF also provided Tablets to 20 Juvenile Training Centers where juveniles were detained. This was initiated to help around 3,500 adolescents to maintain contact with their family and ease anxieties during lock down situation. Almost 6,000 children and youth were reached with provision of infrared thermometers, disposable gloves, and disinfectant distributed to 77 juvenile observation centers and 20 juvenile training centers under the Department of Juvenile Observation and Protection.

Concerns were expressed by the team that work on certain equity-focused cross sectoral areas (gender, disability) was planned but not delivered as these areas were not as effectively mainstreamed in the response as it should have been. It was not established how mainstreaming could have been improved in the TCO response.

### External perspectives relating to Equity

In the **survey**, the second highest added value contribution by UNICEF named by informants was the targeting of migrant children and their families (see section 4.2, Q5 survey responses). There were two further questions asked in the survey to get feedback on how well UNICEF has identified the most vulnerable, and the extent to which the UNICEF response has actually met the needs of these populations. The findings are helpful to assess side by side, as presented in Figure Four below.

**Figure 4: Survey Q6 - To what extent do you think that UNICEF has been able to identify and plan for the poorest and most vulnerable children affected by the COVID-19 crisis in Thailand? Q7- To what extent do you think that the UNICEF response has actually reached and met the needs of the poorest and most vulnerable children in Thailand?**



**Overall, the responses to the two questions were positive.** No informants chose “not at all” responses. 5% stated that they did not know how well needs had been met, whereas no-one chose that option for the identification of and planning for the needs of the most vulnerable. Also, whilst 32% chose “fully” on identification of the most vulnerable, slightly less (27%) chose “fully” for success in actually meeting those needs. Whilst these are small percentage differences, within a small sample, it does suggest there is slightly less awareness amongst these stakeholders on the extent that the needs of the most vulnerable have been met.

Qualitative comments made in the survey noted attempts to communicate on nutrition and domestic violence during the lock-down. Some key factors were noted by informants on how UNICEF was well placed to identify vulnerable groups such as favourable policy provision to promote the rights of children,

organisational reach throughout Thailand, and volunteer *I am UNICEF* networks. One informant felt that the UNICEF emergency response was a little slow getting started up but speculated that this may have been due to the government reacting quickly to the crisis and maybe a case of UNICEF waiting to see what gaps in meeting needs emerged to determine its programming.

The **external panel** participants suggested groups within Thailand that UNICEF should consider for increased attention in order to meet the needs of the most vulnerable populations:

- Southern border provinces as these have suffered severe lock-down conditions and have been relatively neglected in overall responses so far (also brought up by survey informants)
- Children with disabilities – *“some disabilities are well acknowledged but other areas of special needs remain under the radar and gaps exist in service provision”*
- Children in high risk situations such as refugee camps, *“services there [refugee camps] are extremely vulnerable in the case of a second wave of COVID-19”*, continuing concerns on children in detention centres and alternative care facilities despite the UNICEF contributions noted above
- Mental health needs: of young females – 70% of children reaching out for assistance from Childline were girls – and LGBTQI adolescents
- Remote communities outside “mainstream” society and not eligible for government cash hand-outs such as the *Moken* “Sea Gypsies”<sup>8</sup>

### 3.4. Coherence

**Internally:** *To what extent were UNICEF’s COVID-19 interventions consistent between the various sections of the office?*

*Where there any synergies established between interventions by various sections of the office?*

**Externally:** *To what extent were UNICEF’s COVID-19 interventions consistent with government, UN and other actors’ policies, priorities and interventions?*

#### Internal coherence

**There was a strong positive expression by the team on internal coherence (see also comments in 4.2 effectiveness),** and there were frequent mentions of the following factors that contributed to this.

- Establishing shared clear objectives for support to vulnerable children and their families across the TCO sections
- Breaking down the siloes between teams and working across sectors worked well with a clear focus on COVID-19. Staff did note however that now that the situation is returning to something more “normal” they are finding it difficult to maintain this joined up approach
- An effective information sharing and co-ordination mechanism (COVID-19 Task Force) was put into place – but this should have included PSFR and Common Service Unit (CSU) functions

<sup>8</sup> A semi nomadic ethnic group living in the southern provinces, with hunter-gatherer livelihoods heavily based on the sea. Their way of life is increasingly under threat, and their unsettled legal status leave them vulnerable and outside government assistance

- Creating the Front of Office function
- Maintaining effectiveness, efficiency and team agility kept productivity and outputs high, and responsive to changes
- Utilisation of ICT allowed for effective remote meetings and communication

**Some areas for improvement were noted, and these relate to the Effectiveness question presented in sub section 3.2. These included:**

- The establishment of a cross-team mechanism to identify the ‘value-added’ of Private Sector engagement would improve future response and ensure a quicker pivot for fundraising
- A shortage of pre-agreed upon coordination mechanisms and response plans in place meant that it took a long time to move towards a ‘whole of office’ response
- Having emergency guidelines in place would speed up the dissemination of key information to staff in emergency situations
- The new Request for Proposal process (detailing if and how UNICEF could provide support in the case of termination) should be part of recruitment contracts going forward to address the lack of clarity on this issue
- In order for staff to effectively manage the demands of the crisis and remote working modalities, IT equipment, platform, infrastructure and support, along with knowledge and skills required to use these needs to be tested regularly

**Some further reflection is needed on the role of the RO and of HQ** in future emergency responses – see other comments in Effectiveness, section 3.2. Whilst certain types of support were welcomed, the TCO and staff spoke of an experience that was overloaded with meetings and a diverse (and occasionally contradictory) range of requests and proposals from the wider organisation that did not always complement TCO priorities.

### External coherence

**The UNICEF scaling up for this emergency benefitted from productive existing partnerships** with the Government and CSO partners, and the team felt that the experience had further strengthened these relationships.

Areas for improvement included working with Government and CSO partners that are – like UNICEF TCO – not used to working “downstream” and this impacted on the ability of the response to target the most vulnerable groups. There were some weaknesses noted in partner emergency readiness – although this was unclear as to whether this was a lack of general emergency readiness or was more specific to the challenges of COVID-19.

The team did note that they felt that the time, effort and resources needed to undertake interagency collaboration (within the UN family and with the Red Cross) did not match the value added gained from these interactions. It was felt that Government responsiveness was slow at times as normal procedures were used and not adapted to COVID-19.

### External perspectives relating to external Coherence

A lack of collective UN responses was noted in the panel discussion. However, it was felt that efforts went beyond sectoral responses and several examples were offered on positive collaboration and

complementarity of UNICEF’s contributions to those of the government, UN and others. Positive example included:

- The development of the Socio-Economic Impact assessment (UNDP/UNICEF collaboration with the National Economic and Social Development Council (NESDC)), with further collaboration with several other agencies and with the Resident Coordinator’s Office (RCO) in particular
- UNICEF’s ability to *“amplify reliable and technically sound messaging from the WHO and the Ministry of Public Health in local communities”*
- The effective coordination of RCCE with the government and the Thai Red Cross
- UNDP cited the ‘piggybacking’ of UN agencies on each other’s programmes to enable UNCT to remain relevant collectively and not just as single agencies
- The youth segment, where the mandate of UNDP and UNICEF overlap, focused on gathering data to enable better-informed interventions with young people; improved data allowed us to define, refine and re-adjust interventions
- The Generation Unlimited initiative was seen as an example of a concrete intervention in the southern border provinces, an area with its own issues and social and cultural dimension.
- The White paper on social protection was seen as an “immense contribution on the part of UNICEF”, and had a profound impact at highest level in Thailand. Government “stimulus packages developed to mitigate the impact of COVID-19 owe their efficacy at least in part to this initiative.”

UNDP reminded the group that further collaborative working was essential to safeguard Sustainable Development Goals (SDG) progress in Thailand and help “build back better” to recover from the COVID-19 impact.

## 4. Conclusions

The scale and nature of the UNICEF Thailand COVID-19 response was relevant and appropriate to a context of an upper income country where government capacity is strong. Thankfully the health impact of COVID-19 in the country was kept under control. However, the TCO, and its partners, had to significantly adjust their original plans as the context and associated needs changed as the health risks came under control and the negative economic impact began to be realised. The fact that the response was carried out in such an unusual and fluid emergency by an existing team that largely lacked any significant emergency experience was noteworthy. The team was able to “get out of normal comfort zones” to focus on designing and resourcing the emerging programme and create a coherent team response. This has come at some cost in workload and fatigue for those involved.

Logical and appropriate choices were made by UNICEF on the contributions the organisation made in the crisis. The choices played to available sectoral skills, established presence and influence with government and other stakeholders, and benefitted from an existing network of partners along with some newly developed partner relationships. Including, a greater emphasis on “downstream” working as the situation required it, something new for the present TCO team. The emphasis on migrant worker families was consistently viewed as an essential contribution to meet the needs of a very vulnerable population, but concerns remain on how well the needs of many other vulnerable groups are being met by current efforts. “Upstream” priorities, more the norm for UNICEF Thailand, continued to be pursued and external

informants confirmed the value of the organisation’s role in providing technical expertise, analysis and advocacy at critical moments to influence change.

Some systems and ways of working are now in place should further COVID-19 threats re-emerge in any significant way, and/or other significant health threats occur in future. These can be built on, along with improvements suggested in the AAR, to give the TCO a strong platform for future response.

## 5. Key Learning Points

### Adapting to the challenge

- The TCO team was able to scale up an effective response and adapt as needs grew and changed. This was due to critically important factors noted in this report including a strong sense of direction being set, strong team cohesion, shared purpose and working across previous siloes. Bear in mind for many of the team this was “learning on the job” in a highly unusual emergency, and what has been established within TCO should provide a strong platform for building future responses as needed. It came at some personal cost to individuals. If the crisis resumed or fresh demand or further programme growth occurred, attention should be paid to provision of additional capacity for the office proportionate to the scale of the crisis and tailored to roles needing to be filled.

### Relationships and partnerships

- In programming, advocacy, and raising funds and support, the strength of existing relationships matter a great deal to form a strong starting point. In this case the close working relationship with the government led to decisions on supporting the migrant community, and UNICEF’s credibility gave it a “seat at the table” in influencing government policy and intervention packages for populations hit hard by the crisis. The partner base had the experience on working with child rights and Migrants issues; they had a wide geographic spread in the provinces to reach them – which facilitated an adapted and modified strategic and tactical implementation. The relationships and partnerships were a great asset that facilitated the adapted ([reimagined](#)) programme implementation.

### Health and socio-economic demands

- There was some reflection along the lines of “should we have anticipated the huge negative socio-economic impact sooner, and done more to mitigate its impact?” As noted in the report, given the information available in those first few months, the assumptions made by UNICEF were reasonable (namely: this would be a crisis above all needing large scale RCCE public health responses, plus the belief that the period of lockdown and restrictions on normal life would be short). One would assume that this conversation has been taken up in many countries by government, UN and other stakeholders involved in trying to address these challenges. There are several UNICEF COVID-19 learning processes being initiated across the world (including countries where the health threats did *not* recede reasonably quickly and countries were struggling with both health and economic impacts).



UNICEF may plan for global sharing of experience and perhaps more tangible conclusions drawn from different contexts that could inform future responses.

### Meeting the needs of the most vulnerable

- For UNICEF, being able to state with confidence that it is successfully reaching the most vulnerable in its programming can be difficult. There are challenges of disaggregation and establishing discrete added value for particular groups within large targeted populations. In this case the opportunity to target migrants provided a more tangible focus than is often the case, and gave a meaning and purpose to equity-focused efforts.

### And some practical challenges

- The additional time needed to assess, design, set up and monitor programmes with COVID-19 restrictions in place should not be underestimated.
- The broad range of RCCE initiatives and support to migrants and schools certainly had a wide reach. However, without more intensive research it is very challenging to draw any conclusions about the effectiveness of initiatives and gather evidence of contributions towards outcomes. This is particularly with measures in place that still restrict the ability of staff to monitor progress and spend time with stakeholders and beneficiaries. As restrictions hopefully ease in the coming period, it would be valuable to conduct some retrospective monitoring as opportunities allow to find out more on perceptions of added value of UNICEF supported initiatives.
- A small point but worth noting: a few inputs from externals tended to suggest that partners were not always fully aware of the broader UNICEF programme, but only saw the part of the programme that they were directly involved in. In future it may be helpful to ensure more regular updates for the partner networks so they can get a more accurate picture of the whole programme.

## 6. Recommendations

The following recommendations were formulated during the AAR by TCO participants.

1. **Capitalising on this experience to improve preparedness for future crises:** UNICEF TCO should by the end of 2020 prepare for future crises affecting the country (including a COVID-19 second wave) through development of **emergency preparedness planning** that will include:
  - **Scenario scoping:** consideration of different scenarios (continuing pandemic, new crises), and mapping TCO readiness.
  - **Develop sample plans:** against scenarios create sample short and longer term goals and priority setting that would be suitable for programme, operations (finance, supply, administration, Human Resources and IT), communications (goals set for first week, two months and more flexible longer term goal and timeline), along with resources and partnerships. Include regular assessment of effectiveness and efficiency.

- **Establishing a standing capacity:**
    - Forming of an internal emergency team, identifying staffing development needs and conduct training with the TCO team to develop knowledge and capacity. Identify what roles would need additional capacity in certain situations and scenarios.
    - Consider development of long-term agreements with NGO partners, along with talent rosters for service providers that could be called on in emergencies (translators, logistics etc)
  - **Establishing emergency support provisions**
    - Development of UNICEF emergency communications materials – branding, hashtags etc
    - Assess IT readiness to enable staff to cope with responses entailing high stress or remote working including: equipment and devices; client and service providers; helpdesk
    - Developing cash transfer and In-Kind guidelines for support to migrant worker families
    - Incorporating corporate partnership and fund-raising potential and strategies within emergency contingency plans
    - Improve information management and sharing through a single “Go to” folder on the system where plans and activities are captured, updated by focal points and including resources such as documents, photo, video, and development of a common communications platform and training on how to use this
  - **Consider engaging with partners** in conducting a Country National Lessons Learned event to gain external perspectives on the COVID-19 response experience from government; partners; sister UN and private sector actors. The voices of young people should be included in the process. Identify collectively what capacity gaps became apparent in the response and the most feasible and productive ways to jointly address these gaps in future
2. **Working “downstream” to reach the most vulnerable:** UNICEF TCO should
- Set up an emergency network regionally <sup>9</sup>within Thailand to improve understanding and reach to vulnerable populations and develop planning for future COVID-19 and other crises consisting of
    - Local actors including government (Department of Disaster Prevention and Mitigation (DDPM), Line ministries); NGOs; local health facilities; health volunteer networks, disaster risk reduction entities
  - Develop emergency preparedness and response plan for TCO which will identify suitable networks, assess capacity, develop guidance and manuals to support capacity improvements, and conduct simulation exercises.
3. **Managing RO and HQ requests and expectations:** UNICEF HQ and the EAP RO (with the RO acting on behalf of COs) should improve organizational coordination and priority setting in emergencies through:
- Ensuring greater consistency and coherent approaches stemming from HQ/RO. This should include efficient, clear communication to COs to clarify HQ and regional priorities

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<sup>9</sup> Regionally == Six regions of Thailand (Northern, Northeastern, Western, Central, Eastern and Southern).

- Ensuring any global or regional initiatives are taking account of planned CO initiatives, including in major campaigns and fund-raising drives to avoid undermining these
- Ensuring steps are taken to streamline requests (including requests for information) from outside the CO
- Ensure guidance is correct and making efforts not to change guidance unless there is good reason to do so. For example, clarify organisational guidance on baby formula
- Clarify use and impact of data requested to be captured by CO teams; namely what are the indicators and their values used for within the organisation
- UNICEF EAPRO should clarify what types of support can be offered beyond oversight roles, for instance in consultation, provision of guidance and other forms of support, and improve support to COs to meet targets and programming gaps.

This AAR will form a part of the Real Time Assessment (RTA) of COVID-19 response of EAPRO. It will be annexed to the Regional RTA report.

### **For additional information:**

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## Annex 1: Concept Note

### After Action Review: Thailand Country programme response to the COVID-19 crisis

#### 1. Introduction

It has been roughly six months since the COVID-19 crisis began to be felt in Thailand, with initial cases being reported in March. At the same time, measures to manage and contain the threat were put in place. These built up a set of restrictions as seen in most countries including restrictions on movement, flight bans, and lockdowns affecting all aspects of life. Major efforts have been undertaken in public health awareness raising, hygiene promotion, social distancing measures, and “track and trace” procedures. As at the end of July, measures are gradually becoming more relaxed within the country after almost two months of being free of recorded localized transmission and what has been regarded as a successful public health response by the country. Travel into the country remains heavily restricted at this time as the government maintains a cautious approach.

The After-Action Review (AAR) is a quick reflective exercise for team-based learning during a project or ongoing initiative, in order to improve results in the current project. An after-action review (AAR) enables the individuals involved to learn for themselves what happens, why it happened, what went well, what needs improvement and what lessons can be learned from the experience.

As part of a Mid-Year Review (MYR), the Thailand Country Office (TCO) initiated a discussion with the Regional Office (RO) on conducting an After-Action Review (AAR) to provide an opportunity for the team to reflect on progress and learn from this experience in order to note successes and identify areas needing improvement for the future. This concept note sets out the proposed rationale and plan for an AAR for TCO and RO stakeholder consideration and feedback.<sup>10</sup>

#### 2. Objectives and Key Questions

##### AAR Objectives

Typically, the AAR process and key questions are developed under 4 main headline questions<sup>11</sup>.

- *What did we intend (or plan) to do?*
- *What actually happened?*
- *What went well, and why?*
- *What can be improved (and why), and what should we change in coming period (and in future responses)?*

The primary objectives of the AAR are:

- To assess the relevance, effectiveness, equity and coherence of UNICEF TCO’s response to the COVID-19 crisis of 2020, from beginning of the year to present period;
- To engage the TCO in analysing the strengths and weaknesses of the response, focusing on key aspects that should be built on and what corrective actions should be taken;
- To provide actionable recommendations for UNICEF to feed into its planned programme response for the remainder of the year, which may possibly influence the office’s work planning, advocacy and resource allocation;
- To contribute to UNICEF’s wider organisational learning on COVID-19 responses.

<sup>10</sup> There is an opportunity for using this experience to test out the process and explore options with other COs options for running AARs or similar events in EAP to meet generate evidence and insight at a reasonably early point in the response, and to contribute to wider organisational learning on UNICEF Covid-19 responses.

<sup>11</sup> See for instance shorter processes from [UNICEF guidance](#); and [USAID](#); and more comprehensive guide with different processes from [WHO](#)

Some initial questions are suggested below, and these should be refined, prioritised as appropriate to the country context, and finalised in discussions with the country team. As a general rule the number of questions should be kept small to ensure an AAR process that is timely and rapid.

Table One: Criteria plus Overarching and detailed line of inquiry for the AAR

AAR overarching questions	Criteria and detailed questions for the ARR
<i>What did we intend (or plan) to do?</i>	<p><b>Relevance</b></p> <ul style="list-style-type: none"> <li>To what extent has UNICEF Thailand’s COVID-19 response been appropriate to the needs of targeted beneficiary populations, and proved able to adapt to changing contexts and needs?</li> </ul> <p><b>Equity</b></p> <ul style="list-style-type: none"> <li>Given the acknowledged disproportionate impact the crisis has had on the poorest and most vulnerable children, to what extent has UNICEF been able to identify, target and reach these groups?</li> </ul> <p><b>Internal Coherence</b></p> <ul style="list-style-type: none"> <li>To what extent were UNICEF’s COVID-19 interventions consistent between the various sections of the office</li> <li>Where there any synergies established between interventions by various sections of the office</li> </ul> <p><b>External Coherence</b></p> <ul style="list-style-type: none"> <li>To what extent were UNICEF’s COVID-19 interventions consistent with government, UN and other actors’ policies, priorities and interventions?</li> </ul>
<i>What actually happened?</i>	<p><b>Effectiveness</b></p> <ul style="list-style-type: none"> <li>To what extent have the expected results been achieved in the UNICEF response, and what have been the factors that have enabled or hindered this?</li> </ul>
<i>What went well, and why?</i>	<p><b>Effectiveness</b></p> <ul style="list-style-type: none"> <li>Are there particular areas where UNICEF has contributed particular added value to the national COVID-19 response?</li> </ul> <p><b>Equity</b></p> <ul style="list-style-type: none"> <li>To what extent the UNICEF response met the needs of the poorest and most vulnerable children?</li> </ul>
<i>What can be improved (and why), and what should we change in coming period (and in future responses)?</i>	AAR Recommendations

The recommendations are to be co-created with the participants.

### 3. Approach and Methods

The AAR is proposed to be carried out over the course of a day-long event, with a largely qualitative approach. There is an option for the meeting to be staged over two half days (not too far apart) if workload and other commitments mean that it is problematic to get participants freed up for a full day. The process will be designed to be interactive and participatory to encourage all participants to actively contribute to the reflections on the programme, findings and recommendations.

The initial sessions will focus on setting the scene, reflecting back on what the TCO programme intentions were and using an interactive exercise to construct a timeline to capture key events, decisions, and actions taken.

Reflections on performance, particularly through group responses would then focus on the key questions outlined in the previous section and asking participants for their analysis. The facilitator will mainstream questions, analysis and findings on Child Rights, gender equality and children with disabilities throughout the AAR process and report writing. Conclusions would then be reached, and recommendations developed for consideration by the management team. Please see the annex for a draft outline of the process and approaches to be used. The intention would be that the report would be drafted within one week of the event, and the TCO team have a one-week turnaround period for submitting comments and the report finalized within the third week.

Preparation by the participants will be kept light (see section 7). Data and insights from reports and other documents will be brought into the discussions where appropriate and possible, but the emphasis will be on drawing out the learning and perspectives from participants' experience. This methodology emphasizes a "tacit" learning experience that relies on individuals' reflections rather than documentation. In order to provide some independent facilitation from outside the TCO, it is proposed that the Multi-Country Evaluation Specialist and the RO Evaluation section will take up the facilitation role.

### **Participants**

This is an internal exercise driven by UNICEF Thailand Country Office and the TCO is the primary stakeholder. This team may be joined by selected representatives from EAP RO Emergencies and Evaluation sections who have worked closely with the country team and can bring wider perspectives from the region. There should be a balance of background and gender within the group, senior and junior staff. The TCO has also built in inviting a small number of external stakeholders (government, implementing partner, other UN representatives) for a particular session to gain some external perspectives on the UNICEF contributions.

## **4. Deliverables**

1. Design and implementation of the one-day AAR
2. Answers to questions presented in Table One prepared by each TCO section, sent to the facilitators two days before the AAR, using format provided as Annex Two. The answers can be in bullet point format.
3. AAR report of maximum 15 pages including an executive summary and excluding any annexes. Note that the intention is that the report would be drafted within one week of the event, and the TCO team have a one-week turnaround period and finalized within the timeframe indicated previously in this note.

## **4. Timing**

The AAR is expected to be designed and agreed within the first week of August and staged in the last week of August.<sup>12</sup>

## **5. Support, Facilitation and report writing**

### **Planning group**

2-3 members of the TCO team should be available to join a Planning Group. Their tasks would be to work with the facilitators to refine the design and process; ensure TCO kept updated and prepared for the process; assist with collecting relevant data and documents and preparing visuals. A note taker should be identified from the team, or alternatively from TCO.

### **Report writing**

The facilitators would be responsible for report writing, with the TCO responsible for comments on the draft.

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<sup>12</sup> There are options for discussion with the TCO on setting up a presentation through webinar for other UNICEF COs by the TCO and facilitators to help share learning on the Thailand experience.

## 6. Practicalities: preparation, equipment and resources

**For participants: any preparation for this should remain light given current high workloads**

- Main preparation for all participants: it is recommended that participants spend 1-2 hours reviewing and thinking through key moments and learning points from their involvement in / observations of the response, and quickly review relevant documents to refresh their thinking on UNICEF's COVID-19 response work within the context of Thailand. Participants should feel free to bring along key documents that may be useful to refer to. (Material and insight developed by other actors is also welcome)
- Each UNICEF section will be tasked with responding to key questions set above, to the best of their ability. The participants will further reflect during the group work on the paper and provide feedback as required.

It is assumed that whilst most participants will be able to meet within the room there will be a need to observe social distancing, and some participants will be joining via Zoom.

## Annex 2: Methodology

Preparation by the participants was kept light. Data and insights from the Mid-Year process and COVID-19 plans and reporting were presented, but the main emphasis was on drawing out the learning and perspectives from participants' experience. This emphasised the "tacit" learning experience that relies on individuals' reflections rather than documentation. The process was facilitated by staff and consultants independent from the TCO. The methods used were as follows and designed to build a stepped process to create a collective recall of the response to date; consider what was achieved set against original and evolving plans; consult on strengths and weaknesses of the response and underlying reasons for this; check and compare the perspectives from external stakeholders; and draw conclusions and recommendations.

1. **What did we set out to do? Presentation.** This built on the Mid-Year review discussions (took place the previous day) and was presented by the TCO COVID-19 Response Team Coordinator. This detailed the evolution of the crisis, and the initial assumptions, plans, strategies and budgets adopted by TCO. The presentation then detailed how things changed (as COVID-19 transmission rates and the nature, complexity and longevity of the crisis grew), and the need to respond at greater scale and over a more prolonged period. The presentation also covered the growth and key changes of emphasis in the programme, partnerships, and how ways of working changed (including adoption of remote working for the whole office and partners)
2. **What actually happened, (and starting the discussion on what implications arise)? Timeline exercise.** The full group worked to note and post key moments from the response onto a large timeline wall chart – creating a collective recall of the response to date. Developments externally (outside UNICEF Thailand) and internally were noted, changes in context, evolution of needs, decisions made, and broader organisational initiatives and drivers. This was followed by a facilitated discussion on the key moments and the significance of these. This further explored *what did we set out to do?* and helped the group recall what actually happened
3. **Identifying the key successes and weaknesses of the response.** A brief **Menti Metre** exercise was conducted to get an initial brainstorm of views on successes and weaknesses from participants. **Groups** were then formed mixing participants from different TCO teams to discuss key findings in more detail. Groups presented back to the plenary and a facilitated discussion took place to assess these issues, and identifying critical factors underlying these, enablers and barriers to the response
4. **Consultation with external actors.** Two key inputs were built into the process to learn from the views and insight of government, partners, and others that had worked closely with the TCO on the COVID-19 response.
  - a. **Findings from an Online Survey (annex 4). Presentation and discussion on survey findings.** This was largely a quantitative survey to enable quick capture of stakeholder views on key areas with some open-ended qualitative questions included. Around 45 Survey Monkey requests were sent to partner representatives and government officials and 38 responses were secured. Respondents were assured of confidentiality and no attribution of remarks to individuals would be made in the survey analysis. Ten questions were included and focused on the *relevance/appropriateness* of the UNICEF response; the extent that positive results for children were achieved; perspectives on



UNICEF's added value (*effectiveness*); how well the poorest and most vulnerable were identified and actually reached with support (*equity*); and finishing with open ended questions on overall strengths and weaknesses of the UNICEF contributions

- b. **Perspectives from senior representatives from government departments, UNDP, USAID and partners (annex 5).** A one-hour virtual session (participants joined via Zoom) took place, chaired by the TCO Representative. Four key questions (consistent with the survey and key areas of enquiry on *relevance, effectiveness, equity and coherence*) had been sent to this group on advance and individuals gave their perspectives on UNICEF's performance so far, and gave their recommendations on what UNICEF should focus on in the coming period
5. **Final session crafting draft recommendations.** Key areas were suggested for consideration for recommendations by the facilitation team and participants self-selected into these groups to develop draft recommendations stemming from the discussions and conclusions from the day (section 7)

The Representative gave his closing remarks and thoughts on key takeaways to close the meeting.

Finally, a short Survey Monkey questionnaire was sent to participants to gather feedback on how well the event had been designed, managed and met its objectives (annex 7).

As the team worked through findings and considered external perspectives during the AAR event, some recurrent themes emerged particular to this crisis. These are worth noting briefly here as these factors had a significant influence on how UNICEF and partners understood and responded to the crisis.

- **The East Asia and Pacific (EAP) region was the first to be impacted by COVID-19** and there was uncertainty as to how this would impact in EAP countries. For the UNICEF TCO (along with other EAP countries), this meant that they were ahead of the emerging overall organisational strategies, support and guidance, and moving into a second phase when others were preparing for their first
- **There was a generally felt initial belief that a relatively brief period of interventions and lock-down would be sufficient to control the threat** and plans were made accordingly with a relatively modest programme envisaged and resourced. This was followed by a gradual realization that lock-down measures would last much longer, and the context started to take on characteristics that were more like a protracted crisis
- Related to this, it was frequently mentioned that there was **“the risks of the disease itself”** understandably dominated initial planning, programme commitments and resources. Then, the **“impact on livelihoods”** started causing increasing concern, with the severe socio-economic impact being felt increasingly across the country and in all levels of society, but with the poorest and most vulnerable suffering most

## Annex 3: Agenda

Start Time	Session / Presenter / Facilitator	Purpose & Method
8.30	<b>Introductions and welcome by Country Representative</b>  Objectives for the day -- Ground rules, important points to keep in mind during the day  Please remember throughout the day: Reflections should include not only UNICEF programming but also leadership in clusters, influencing and advocacy  <b>Facilitator: Ivan RO</b>	Setting out the purpose and process for the AAR
8.45	<b>What did we set out to do?</b> Presented by <b>Dep Rep and TCO Emergency Focal Point</b>  A brief reminder of the initial plan, and how approaches / strategies changed over time  <b>Facilitator: Koorosh RO</b>	Presentation: Impact of COVID-19 pandemic on the programme strategy / approaches
9.15	<b>What actually happened and when?</b> Capturing the key moments of the COVID-19 crisis and the UNICEF response  <b>Group work</b> - Constructing the timeline for the response March – current day: both external and internal (to UNICEF Thailand CO)  <b>Facilitator: Andreas RO</b>	Whole group wall exercise. Individual contributions to construct a timeline of events.
10.30	Quick coffee break	
10.45	What aspects stand out as <b>key successes</b> and where were the <b>weaknesses?</b> (to be used for next session)  <b>Plenary: Dep Rep chairs</b> <b>Facilitator Ivan RO</b>	Menti meter Drawing out the underlying strengths and weaknesses
11.00	<b>How did UNICEF Thailand perform in its COVID-19 response?</b>  <b>Group work</b> on areas that went well, and those that did not, taking into consideration the MYR presentations section prepared. <b>What were the reasons for successes</b> and areas needing improvement, enablers and barriers?  Report back on key findings – discussions on confirmation, validation and cross critique  <b>Facilitator Ivan RO</b>	Consideration of the results sought, and an honest reflection on performance against planned results: highlights of successes, positive impact, challenges, bottlenecks and how to improve our performance
12.30	Lunch	Planning group and facilitators look at emergent themes and key learning points and group these to take to the afternoon
13.30	External Survey results <ul style="list-style-type: none"> <li>• Relevance, Effectiveness, Equity, Coherence, etc.</li> </ul>	Considering inputs from the survey distributed

	<p>Presented by Oscar Facilitator Koorosh RO</p>	
14.00	<p><b>How did UNICEF Thailand perform in its COVID-19 response?</b> Chaired by the Representative</p> <p>Discussion with external partners on areas of collaboration and engagement, and reflections on UNICEF’s programme response moving forward.</p>	<p>Approximately 5 external partners to be invited via zoom to share reflections against key questions</p>
15.10	<p><b>Crafting recommendations</b> Arrange groups on 5-6 emergent key themes</p> <p>Development of recommendations in order to build on strengths or address weakness now and/or over the coming period:</p> <p><b>Facilitator: Ivan</b></p>	<p>Menti metre to start the session</p> <p>Groups to draft recommendations</p>
15.45	Coffee break	
16.00	<p><b>Conclusions and key takeaways</b> Team’s reflections on recommendations <b>Koorosh:</b> Next steps including feed into other processes. Closing remarks from the Representative</p>	<p>Discussion and wrap up Where do we go from here? What findings are possible to act on now and in future? Finalising the AAR</p>

Simple rapid assessment of the AAR will be requested from the participants.

## Annex 4: Timeline



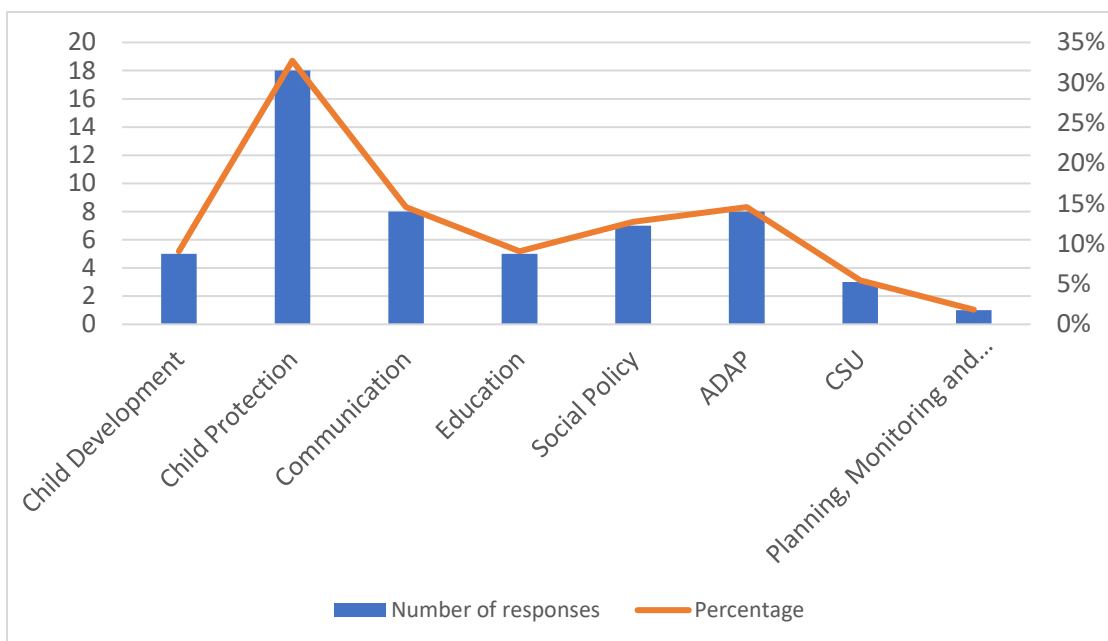
## Annex 5: Humanitarian Performance Monitoring as of 9<sup>th</sup> September

Humanitarian Performance Monitoring - HPM														
		Total Reached	People <18 years			People >= 18 years (or number of schools or HH, as per indicator 13 and 17)			Refugees/immigrants/IDPs/returnees*	People with disabilities*				
			Total	Male	Female	Total	Male	Female						
RCCE	Number of people reached on COVID-19 through messaging on prevention and access to services	45,000,000	54,349,248	157,787	0	0	0	0	0	0	0	0		
	Number of people engaged on COVID-19 through RCCE actions	100,000	146,908	45,651	17,244	18,917	101,257	26,575	35,842	134,111				
	Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	1,000	7,975	0	0	0	120	0	0	0	0	0		
	Number of children reached with targeted messages and information on COVID-19 on personal hygiene and improved sanitary practices (specific to schools and ECD centres)	405,000*	307,406	307,406	154,810	152,596	n/a	n/a	n/a	n/a	n/a	n/a		
Critical Supply & Logistics	Number of people reached with critical WASH supplies (including hygiene items) and services	300,000	95,950	48,540	0	0	34,792	0	0	32,076	0	0		
Addressing socio-economic impacts (Education, Child Protection, Social Protection and ECD)	Indicator	Target	Total	Pre-primary		Primary		Secondary		Tertiary and skills training				
	Number of schools implementing safe school protocols (COVID-19 prevention and control)	30000*	48,318	18,814		20,588		8,487		429			No change in the update	
	Indicator	Target	Total	Boys	Girls	Boys	Girls	Boys	Girls	Male	Female	Refugees/immig./IDP/returnees.	People with disabilities*	
	Number of children supported with distance/home-based learning	3000000*	0	0	0	0	0	0	0	0	0	0	0	The schools in Thailand opened as planned so the initiative to directly support distance learning was no longer relevant – hence we do not report or intend to report on this indicator any longer.
	Indicator	Target	Total	People <18 years			People >= 18 years (or number of schools or HH, as per			Refugees/immig./IDPs/returnees*		People with disabilities*		
	Number of children, parents and primary caregivers provided with community based mental health and psychosocial support	3862**	7,141	4,212	3,358	296	1,618	0	0	0	0	0	n/a	Additional 373 children received counselling, referral on mental health /sexual and reproductive health. No disaggregation available.
	Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse		0	0	0	0	0	0	0	0	0	0	n/a	No update available at this point but we are working with partners to draw the baseline, target and hopefully to report in the next round.
	Indicator	Target	Total	UNICEF Personnel			Partner's Personnel							
	Number of UNICEF personnel and partners that have completed training on GBV risk mitigation and referrals for survivors	80	40	16	6	10	24	0	0	0	0	n/a	n/a	
	Indicator	Target	Total	Women headed		HH of		HH having people				People with Disabilities		
Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs	12,000,000	8,000,000	n/a		0		1300000		n/a		1,330,529		No change in the update	

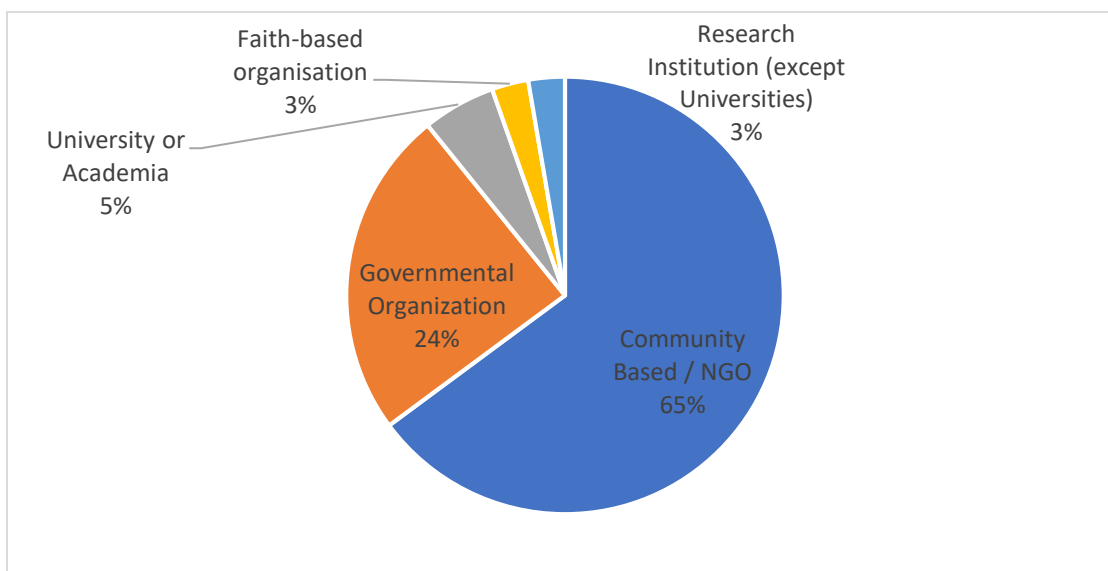
## Annex 6: Partner online survey response

Around 45 online Survey Monkey requests were sent to UNICEF partners and government officials and 37 responses were completed (82% return rate). This annex details the responses to the questions in the survey.

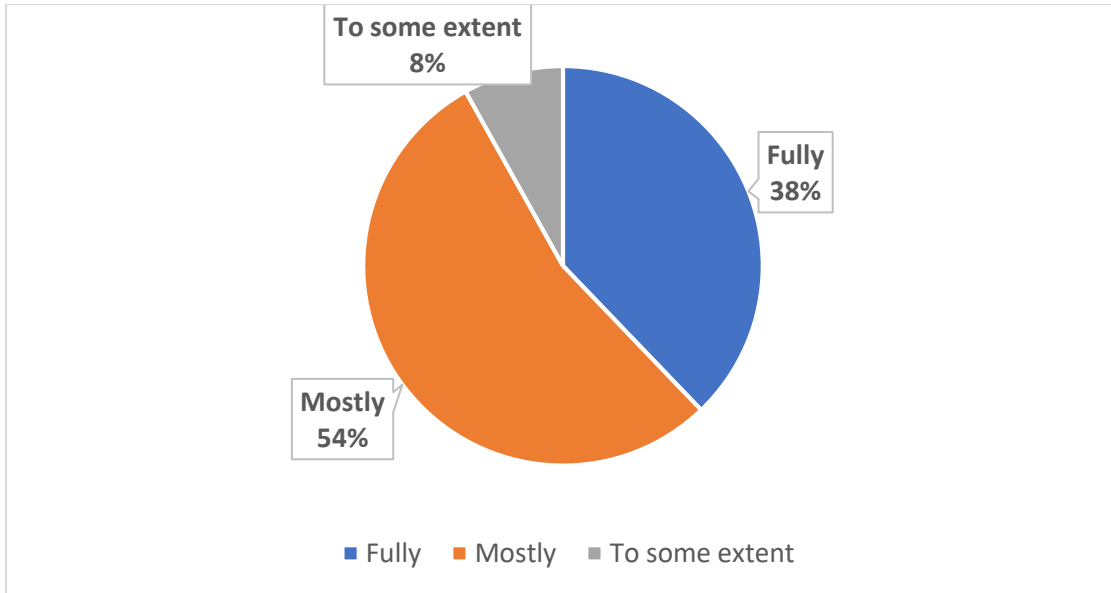
**Q1. Please indicate which section/s of UNICEF Thailand Country Office you have worked with in 2020. Please select all relevant sections**



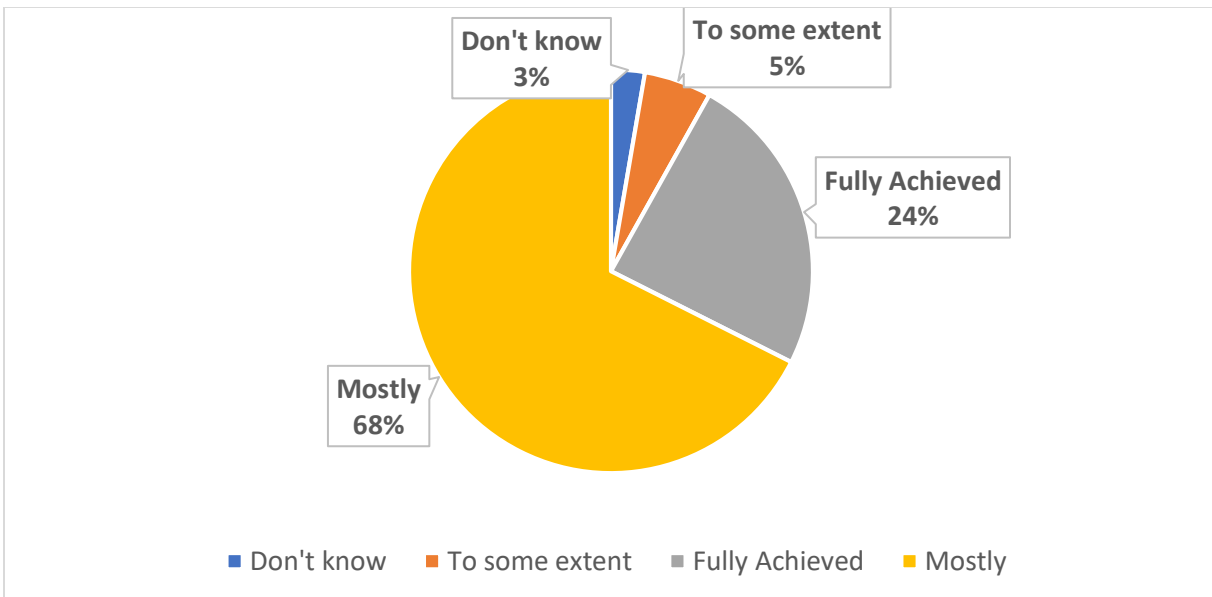
**Q2: Please indicate which kind of organization you work for**



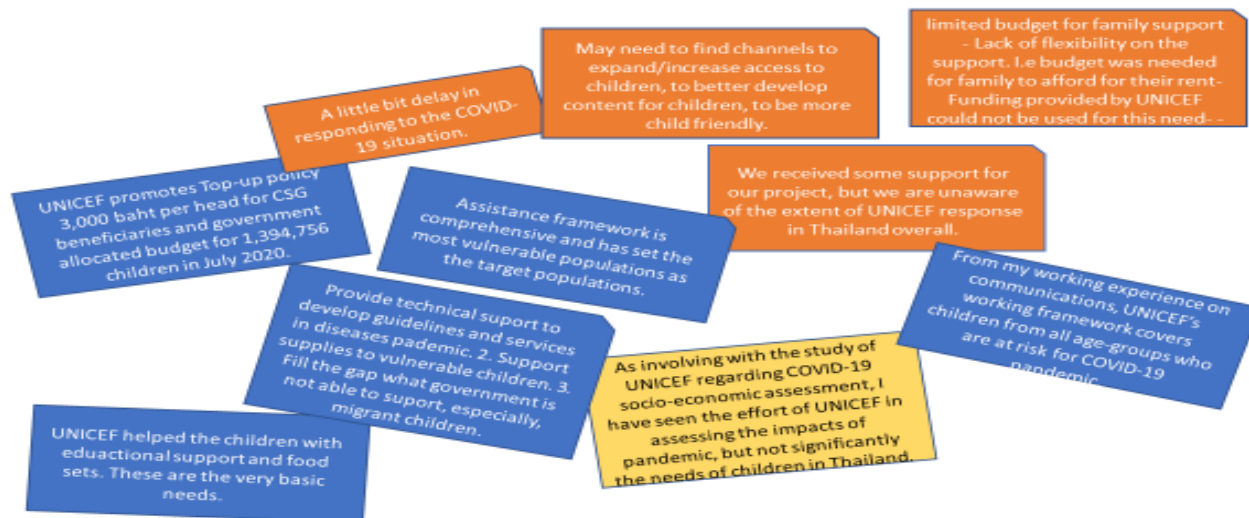
**Q3: To what extent do you feel that UNICEF Thailand’s COVID-19 response has been appropriate to needs of the children in Thailand?**



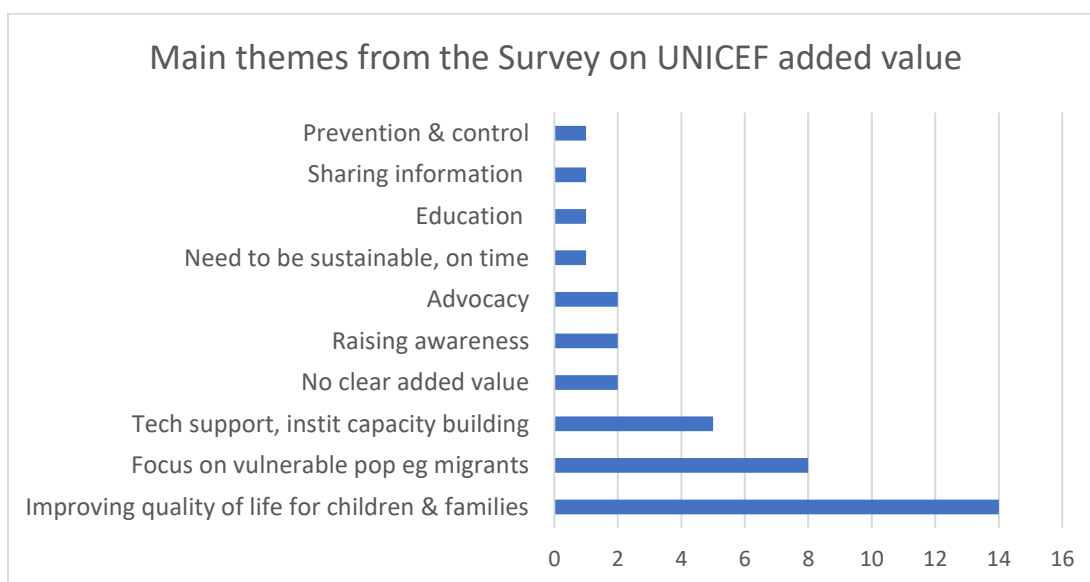
**Q4: To what extent do you think that the positive results for children have been achieved due to UNICEF’s COVID-19 response?**



**Q5: Are there particular areas where you think that UNICEF has contributed particular added value in the national COVID-19 response? If Yes, please specify which areas and what value you think UNICEF added.**

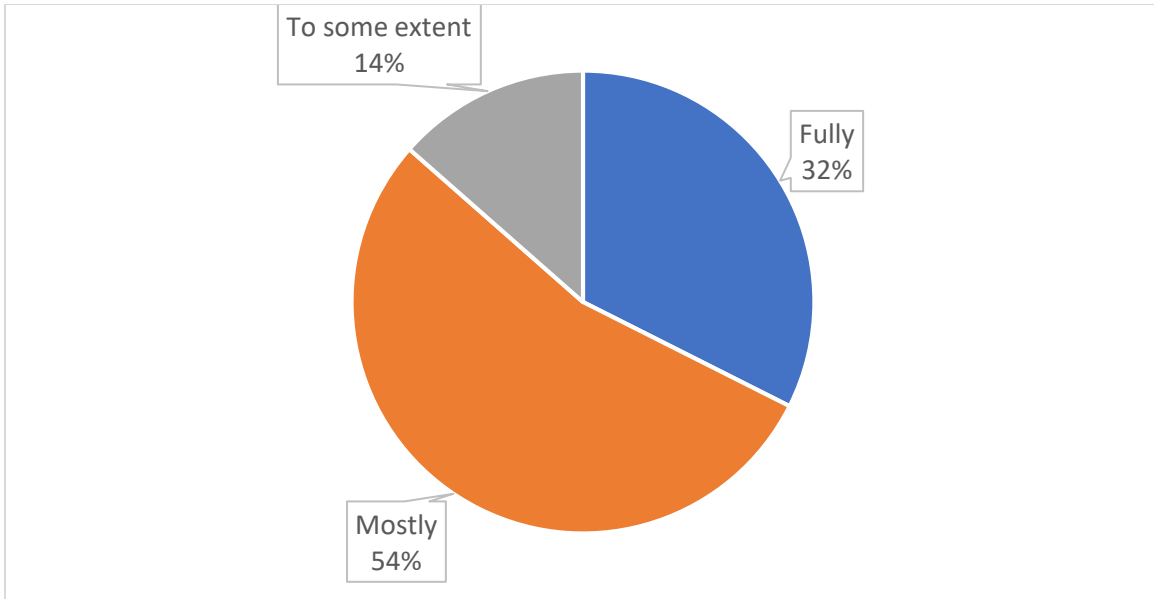


**Q5 Responses grouped by theme**

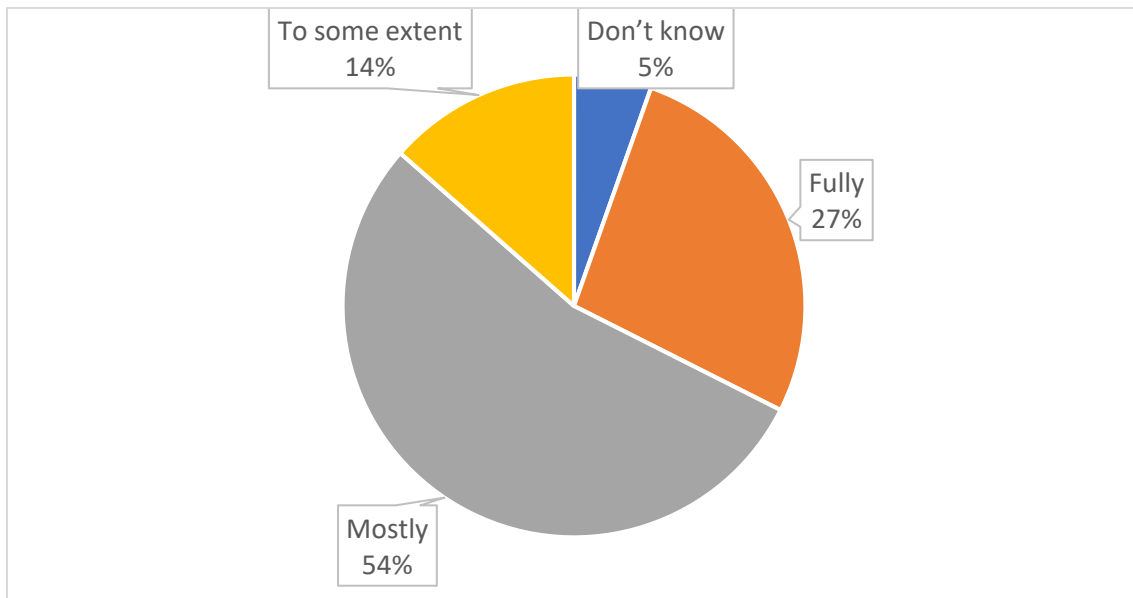




**Q6: To what extent do you think that UNICEF has been able to identify and plan for the poorest and most vulnerable children affected by the COVID-19 crisis in Thailand?**



**Q7: To what extent do you think that the UNICEF response has actually reached and met the needs of the poorest and most vulnerable children in Thailand?**



**Q8. (a) Is there a strength or added value that you feel UNICEF should build on in the coming months to meet the needs of children most affected by COVID-19 in Thailand?**

**Main ideas:**

- Technical capacity
- Leadership, convoking/convening capacity
- Access to knowledge, international standards, information, data
- Building networks - strengthen efficient collaboration
- Field work with local partners and follow-up
- Continue support for migrant families
- Advocacy - policy development, raising awareness with government officials and relevant stakeholders
- Communicate UNICEF work and results

**Q8. (b) Is there a particular weakness in UNICEF's work or approaches that it should address in order to better meet the needs of children most affected by COVID-19 in Thailand? (Main responses)**

**Main ideas:**

Relevance and tailored-to-the-needs solutions: *“Need to research the need of the target population more on what they really need”*

Procurement – administrative processes

- *Some of criteria list is confusing, ex. the type of milk*
- *Would have been better responded if a life-saving package project had started since the beginning of the outbreak.*
- *Lack of flexibility in the funding allocated: discrepancy between needs in the field and UNICEF guidelines for the use of funding*

Responsiveness

- *Would have been better responded if a life-saving package project had started since the beginning of the outbreak.*
- *Response should be faster to meet the need of vulnerable population*

**Communications – outreach**

- *May need to adjust on how to communicate with children via online media, e.g. language and visualization.*
- *Widely share tools, media and knowledge*
- *In depth understanding of UNICEF Staffs in CRC and other documents relating in children's right*
- *There is not so much information in UNICEF's website such as Nutrition, Playing, Exercises for children and Oral health.*

**Networking – partnering**

- *Understand an overall picture of how UNICEF working with networks and learn from case study and target populations regarding roles of UNICEF in Thailand*
- *Expand network for working for working in the southern border provinces*

## Annex 7: External panel perspectives

### TCO AAR Panellists

1. Mr. Ilya Smirnoff, Executive Director of Child Line Foundation
2. Mr. Theerasak Pengyim, the Vice President of Child and Youth Council of Thailand (CYCT)
3. Ms. Walla Ruenchaiwong, Director of Students' activities development, focal person on COVID-19 (OBEC)
4. Ms. Thantida Wongprasong, Director, Partnership, Innovation and Scholarship Office, EEF
5. Renaud Meyer, Country Representative, UNDP-Thailand
6. Dan Schar, VMD/Senior Regional Emerging Infectious Diseases Advisor, USAID Asia Development Mission

### Opening remarks:

The Rep explained that the aim of the AAR was to learn from how COVID-19 disrupted the lives of children in Thailand and from how UNICEF TCO responded. He appealed to the panel members to be candid and transparent in their interventions to enable the TCO to learn from the experience of partners in connecting and collaborating with the TCO, what worked well and what not so well.

**Question 1: From your perspective and what you know, to what extent do you feel the UNICEF COVID-19 response was consistent with the Royal Thai Government approach and response and with that of other partners?**

### Observations:

*Dan Schar, USAID*

- The TCO team made outstanding efforts in programming COVID-19 support to children across Thailand over the past six months and worked in a responsive and communicative way.
- In the core areas of strengthening health systems and mitigating the social and economic impact (incl. risk mitigation and prevention), the TCO focused on the following key priorities:
  - In their work reaching the most vulnerable children primary education facilities, the TCO was effective at targeting vulnerable provinces to distribute supply kits and used creative means to work with vulnerable children and young people including empowering youth leaders. By providing access to accurate information UNICEF TCO fostered strong community engagement and increased local capacity by engaging with parents and caregivers
  - Work on Risk communication focused on peer outreach, an area of particular strength for the TCO. The team worked to amplify reliable and technically sound messaging from the WHO and the MoPH in local communities.
  - Another strength of the TCO approach was in effective coordination of RCCE with the RTG and the Thai Red Cross
- UNICEF TCO also engaged with high risk communities and those in vulnerable settings such as Migrant factory workers.

*Walla Ruenchaiwong, OBEC*

- UNICEF TCO was instrumental in providing age appropriate information on COVID-19 to Thai children and young people, sharing knowledge across Thai society.

*Renaud Meyer UNDP*

- UNDP Thailand hopes to maintain the proactive and effective cooperation with the TCO that was developed over the past six months. ‘Piggybacking’ on each other’s programmes enables the UN in Thailand to remain relevant as a UNCT and not just as single agencies
- Collaboration in three main areas shows how when agencies join forces, they can have a bigger and better impact:
  - Work on the Socio-economic impact assessment (in collaboration with the NESDC) demonstrated the synergies and complementarity of partners we bring together
  - The youth segment, where the mandate of UNDP and UNICEF overlap, focused on gathering data to enable better-informed interventions with young people; improved data allowed us to define, refine and re-adjust interventions
  - The Generation Unlimited initiative is an example of a concrete intervention in the southern border provinces, an area with its own issues and social and cultural dimension.
- The White paper on social protection, an immense contribution on the part of UNICEF, had a profound impact at highest level in Thailand; RTG stimulus packages developed to mitigate the impact of COVID-19 owe their efficacy at least in part to this initiative
- Consideration must be given to how UNDP and UNICEF can continue in joint efforts to safeguard results achieved against the SDGs in Thailand, to assist Thailand in defining a ‘new normal’ and to build back better in addressing the profound social effects of the COVID-19 crisis
- We must consider the risks that result from the increased reliance on digitisation that the COVID-19 crisis has triggered; inequalities between those who have connectivity and those who do not may be amplified: for example in the case of remote communities like Sea Gypsies who were unable to access RTG cash handouts due to a lack of connectivity, or the inequitable access to remote learning in different communities nationwide

**Question 2: From your perspective, was the TCO effective in our COVID-19 programming and outputs? Did we choose the right issues and the right partners to leverage change for children?**

*Thantida Wongprasong, EEF*

- UNICEF played a leading role in the dissemination of prevention and protection handbooks in schools and to local communities, providing crucial information to children and their parents
- The findings of the recent Youth survey, which covered the economic situation and mental health issues, created awareness of the nature of the effect of the COVID-19 crisis on children and young people children and enabled the EEF to innovate its approach
- In the medium- and longer-term consideration must be given to how we can expand the education system to become more responsive and how to deal with a loss of earnings in this sector.

*Ilya Smirnoff, Childline*

- The response of the RTG to the COVID-19 crisis varied greatly in different parts of the administration; there is not one model of approach. Ministerial level response was consistent, and rights based. Law enforcement agencies within the Justice system or child shelters operated based on control, rather than prioritising social protection
- Children and young people in detention and children’s homes have not been adequately served; further analysis is needed on how to reach these vulnerable groups in the future
- UNICEF data gathering efforts on mental health issues were useful to the work of Childline. During the COVID-19 crisis, 70% of children reaching out were girls and walk ins are still rising as anxiety over the continued loss of incomes and the shrinking job markets continues. The stresses caused by economic hardship remain a challenge in the days ahead.
- We look forward to continuing our collaboration with UNICEF.

*Theerasak Pengyim, CYCT*

- Our work was very fragmented during the COVID-19 crisis and our collaboration with UNICEF allowed us to develop a more cohesive and effective approach
- Information and analysis from the data gathered in the survey of children and youth (which was organised together with CYCT) help distil CYCT thinking and focus the approach of the organisation. Advocacy messages have been refined and consideration is being given to how best to continue fruitful cooperation with UNICEF and the UNFPA
- UNICEF TCO media outreach and infographics providing information on how children and youth could care for themselves was very useful for the target groups in the community.

**Question 3: What elements of response would you have wished us to have undertaken in past response or do you consider could be newly introduced or be done differently going forward, for example in the case of a second wave?**

*Theerasak Pengyim, CYCT*

- The CYCT would like to continue work on the UNV programme 'I am UNICEF' which has helped children in the network to sharpen their messaging and advocacy in an impressive manner

*Renauld Meyer, UNDP*

- UNICEF TCO could consider extending its response to the most vulnerable communities such as children with disabilities; some disabilities are well acknowledged but other areas of special need remain under the radar and gaps exist in terms of service provision
- Further programmatic detailed discussion at UNCT level is needed on assistance to ethnic minorities in rural or isolated communities; specific interventions are needed
- Collaboration on mental health issues (where the mandates of UNDP and UNICEF converge) for vulnerable groups such as LGBTQI adolescents and young people is an area we could collaborate on further.

*Thantida Wongprasong, EEF*

- EEF appreciates the technical support provided by UNICEF and welcomes the evaluation of the CSG. Further consideration is needed on how to develop a system-based approach that could better reduce inequality
- Further advocacy is needed on the issue of children at risk of dropping out of school; EEF looks forward to continued cooperation on these issues.

*Ilya Smirnoff, Childline*

- Some thought should be given as to how to complete the 'feedback loop' to allow all children and young people to reach us with requests for assistance as well as their ideas
- Ensuring access to technology for children and young people will facilitate this empowerment but access remains unequal. Consideration should be given as to how we can strategically facilitate giving them a voice while protecting them online, as well as how we can become more responsive to their requests.
- UNICEF could consider increasing engagement and advocacy in relation to children in detention centres and alternative care facilities; all access to these centres was denied during the COVID-19 crisis, leaving vulnerable children with no possibilities of communication with their families or means of visitation. The right to communication is an important right to also consider.

*Dan Schar, USAID*

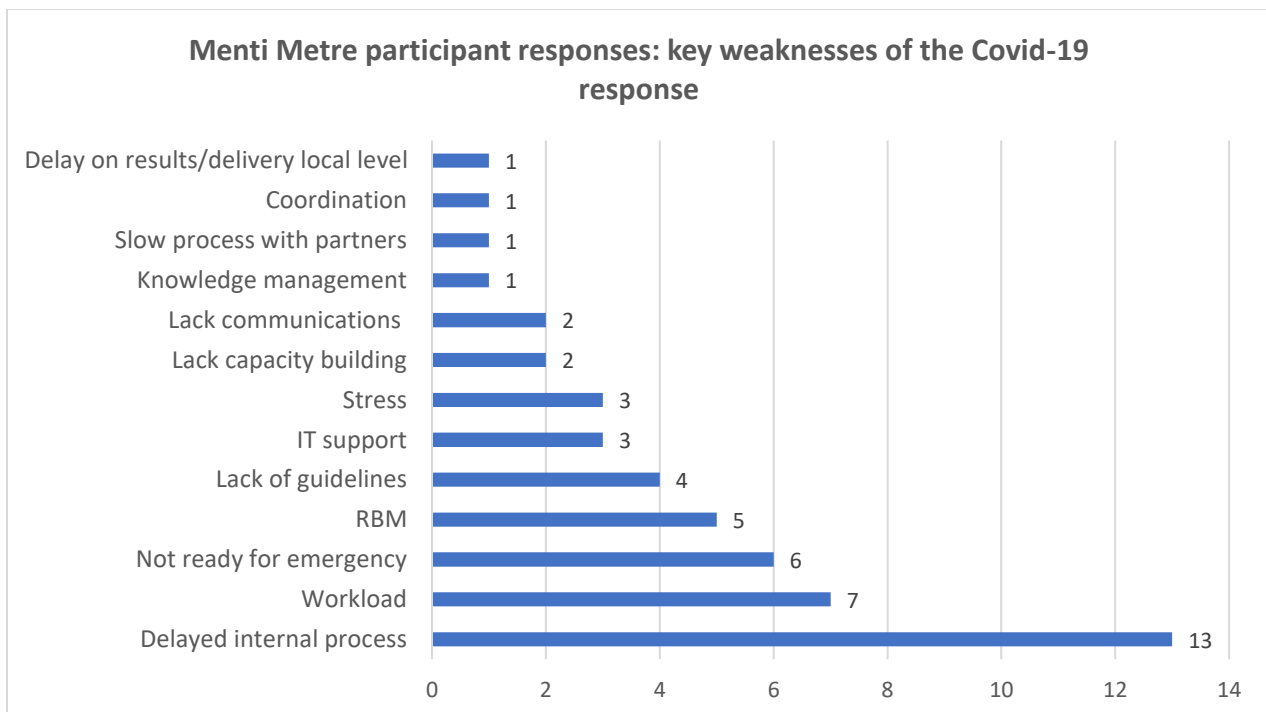
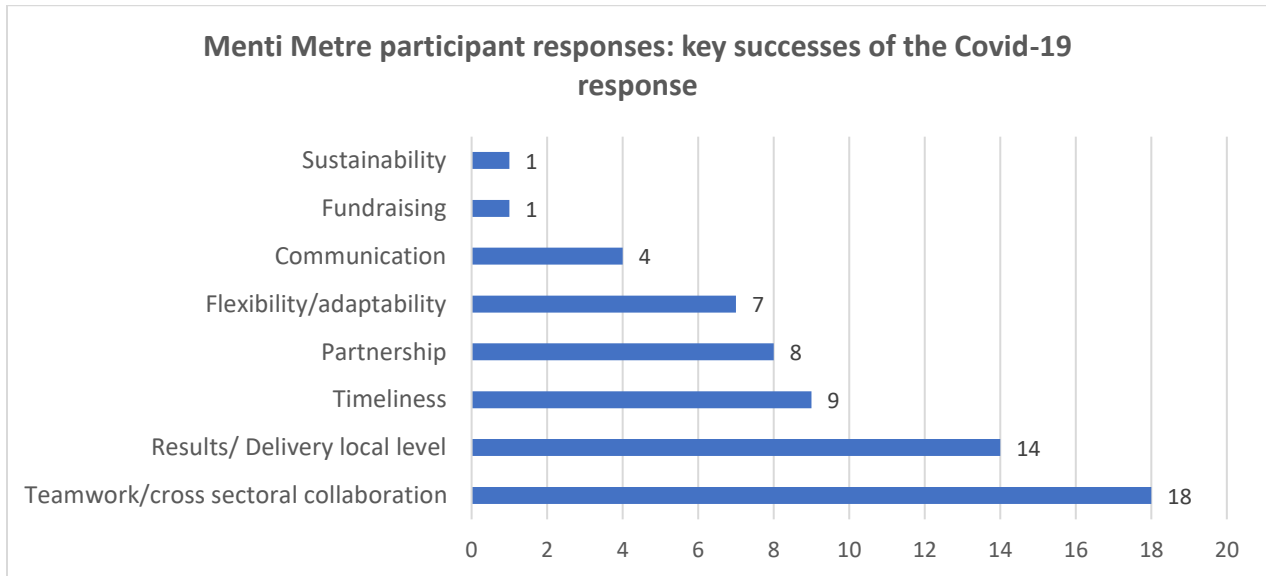
- Responding to the needs of vulnerable children in refugee camps remains an issue of concern to USAID. Communities in these settings have access to little help, and vulnerable refugee children face difficulties accessing basic services. These populations remain exquisitely vulnerable in the case of a second wave.

Observations from UNICEF participants:

- UNICEF TCO should and will be more proactive in its engagement with UNHCR on the issue of children and young people in refugee camps
- UNICEF TCO will endeavour, in collaboration with UNDP, to focus on helping children with disabilities based on data collected from recipients of the disability grant.

## Annex 8: Menti Metre feedback on successes and weaknesses

A menti metre exercise was used at the beginning of this session to enable a quick brainstorm of issues from participants. The points





## Annex 9: Participant List

### UNICEF staff

No	Office	Role	Name
1	Thailand Country Office	Representative	Thomas Davin
2		Deputy Representative	Roshni Basu
3		Incoming Dep Representative	Severine Leonardi
4		Programme Co	Nateetong Tantideeravit
5		Programme Co	Tongchanok Sonsawangphol
6		PME Notetaker	Miriam Ryan
7		Multi-Country Evaluation Specialist	Oscar Ernesto Huertas Diaz
8		Chief, Child Protection	Gary Risser
9		Child Protection Officer	Fadel Hayeeyama
10		Child Protection Officer	Parinya Boonridrerthaikul
11		CP Programme assistant	Keuakul Purananda
12		Education/ECD	Aarti Saihjee
13		Education/ECD	Rangsun Wiboonuppatum
14		Education/ECD	Poungkram Wiriyabhanichya
15		PME	Shohrat Orazov
16		PME	Thanatporn Rawanghet
17		PME	Raviprapa Srisartsanarat
18		PME	Anoop Singh Gurung
19		Comm	Napat Phisanbut
20		Comm	Iman Morooka
21		Comm	Raksit Waropas
22		Comm	Mark Sirapob Ruckthongsuk
23		Comm	Kongdej Keesukpan
24		Partnership	Eric Arndt
25		Partnership	Chanita Park-Art
27		PSFR	Dawn Gosling
28		Individual giving	Kajorn Veerapong
29		Individual giving	Nucharat Duangchinda
30		Adolescent Dev & Participation	<b>Kutti</b> parambil Beena
31		Adolescent Dev & Participation	Sirirath Chunnasart
32		Adolescent Dev & Participation	Jomkwan Kwanyuen
33		Social Policy	Tomoo Okubo
34		Social Policy	Siriporn Arunsangsuree
35		Social Policy	Kontee Nuchsuwan
36		Social Policy	Chayanit Wangdee
37		Regional Office	Evaluation Advisor
38	Evaluation Consultant		Ivan Scott

39		Evaluation Officer	Hiroaki Yagami
40		Emergency Specialist	Andreas Wuestenberg
41	<b>Combined Services Unit</b>	Senior Supply Associate	Orapan Srimanatham
42		HR Officer	Orala Julmanichoti

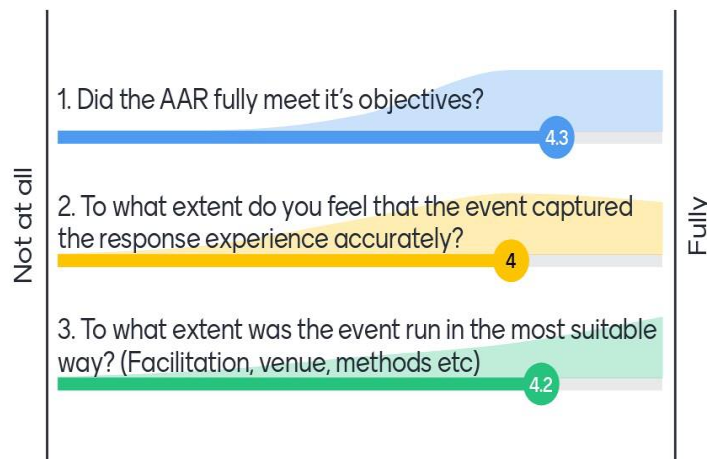
**External participants: joined via Zoom for afternoon session**

No	Organisation	Role	Name
1	Child Line Foundation	Executive Director	Mr. Ilya Smirnoff
2	Child and Youth Council of Thailand (CYCT)	Vice President	Mr. Theerasak Pengyim
3	Students' activities development, the focal person on COVID19 response (OBEC)	Director	Ms. Walla Ruenchaiwong
4	Partnership, Innovation and Scholarship Office, EEF	Director	Ms. Thantida Wongprasong
5	UNDP-Thailand	Country Representative	Mr Renaud Meyer
6	USAID Regional Development Mission - Asia	Senior Regional Emerging Infectious Diseases Advisor	Mr Dan Schar

**Annex 10: Participant event evaluation feedback**

Participants provided feedback on menti metre after the event.

## Scales (1 to 5)



## What were the aspects of today's event that you found most useful?

Good reflection	THANK YOU!	Recommendation
Revising the response process, weaknesses, strenghts	Very engaging	Evaluation summary and partners' feedback
group work on what worked / not work	The environment was not very unable. Too cold	Good combination of participants which resulted to the inclusion of feedback/response of all relevant aspects in all areas
Reflection on what happened during March - June	Interactive	

## What could be improved on today's event?

Time a bit too long	NA	NA
Sometimes the facilitation was confused and interrupting the flow of conversation.	Rotating the groups (world cafe)	We should focus more on clear results - were they impactful??
Closing time for the location in center should be no more than 4pm due to traffic	More time, Rotate group work for one can discuss more than 1 topic	More time
The timeline wall exercise could be better improved by having the external data in place first - at least the big milestones- to jog the memory and frame the discussion	More time given for discussion	

## Annex 11: UNICEF COVID-19 response Real-Time Assessment: survey response from Thailand CO

**Started:** Wednesday, September 23, 2020 1:35:17 PM

**Last Modified:** Wednesday, September 23, 2020 3:11:11 PM

### Q1

### Thailand

Please select the UNICEF Country Office responding to this survey

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### Q2

Please select, from the following list, the most significant ways in which the UNICEF Country Office adapted its work during the COVID-19 crisis: [please select all that apply]

- a. Scaling up programmes and/or supplies to reach larger numbers of affected people incl. most vulnerable groups,
- c. Working in new geographical areas,
- d. Scaling down pre-COVID-19 programme delivery / pausing (pre-existing) 2020 objectives,
- e. Increasing the use of local solutions (e.g. procurement, supplies, consultants, local partners),
- g. Pre-positioning /procurement of supplies either for COVID-19 response or for predictable seasonal disasters and/or for regular programmes,
- i. Scaling up the use of digital platforms for remote programming and monitoring

<p><b>Q3</b></p> <p>Please select, from the following list, all the external factors that drove these Country Office adaptations [Please only select the responses that are relevant to your Country Office]:</p>	<p>a. The need to increase coverage/outreach of programming and delivery to focus on the COVID-19 response,</p> <p>b. Increased security and access limitations directly or indirectly related to national COVID-19 prevention/mitigation mechanisms,</p> <p>c. The need to address the evolving needs of populations, incl. vulnerable groups</p>
<p><b>Q4</b></p> <p>What types of local solutions were adopted by the Country Office in response to COVID-19? [please select all those that apply]</p>	<p>a. New Programme Cooperation Agreements (PCAs)/Small Scale Funding Agreements (SSFAs) with national CSOs</p> <p>,</p> <p>b. Local procurement/supplies</p>
<p><b>Q5</b></p> <p>Overall, on a scale of 1 to 10 (where 1=low and 10=high), how do you rate the degree of adaptivity of the Country Office in responding to the evolving operating context?</p>	<p>8</p>
<p><b>Q6</b></p> <p>What do you think are the key internal barriers to the Country Offices's ability to adapt to the changing context?</p> <p>Some procedures took time, and contributed to the delay in response</p>	
<p><b>Q7</b></p> <p>On a scale of 1 to 10 (where 1=low and 10=high), to what extent did the targets set by UNICEF in the COVID-19 response plans reflect the needs of COVID-19 affected population?</p>	<p>9</p>
<p><b>Q8</b></p> <p>In what ways have the targets originally set by UNICEF in the COVID-19 response plans been adapted over time, and why?</p> <p>The target population became more clear after the discussion with government on their gaps. (i.e. the need to target migrant population). Also the area of mental health support for young people, and economic support for vulnerable families became more crucial as the pandemic intensified.</p>	

**Q9** **2**

On a scale of 1 to 10 [where 1=low and 10=high], to what extent did the Country Office's pre-existing preparedness and contingency planning effectively inform and support the response to COVID-19?

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**Q10** **8**

On a scale of 1 to 10 [where 1=low and 10=high], how confident is the UNICEF Country Office that it has been targeting the most vulnerable and excluded populations in its response to COVID-19?

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**Q11**

On a scale of 1 to 10 [where 1=low and 10=high], to what extent have the following Country Office interventions in response to COVID-19 reached the intended beneficiaries [please select N/A where not applicable to your country context]:

- |   |            |
|---|------------|
| a. Basic services                                     | <b>N/A</b> |
| b. Risk communication and community engagement (RCCE) | <b>9</b>   |
| c. Supplies   | <b>8</b>   |
| d. Cash assistance/social protection                  | <b>8</b>   |
| e. Training   | <b>N/A</b> |
| f. Other  | <b>N/A</b> |
- 

**Q12**

Which services in your country were negatively affected by COVID-19? [Please select all those that apply]:

- a. Health,**
  - b. Education,**
  - e. Child Protection,**
  - f. Social Protection**
- 

**Q13**

Can you briefly describe one UNICEF-supported intervention that was successful in protecting the delivery of services?

As a result of sustained effort by UNICEF and its partners, the government agreed to spend almost 40 billion Thai Bhat of its COVID budget to top-up the existing cash transfer programme for the 13.14 million extremely vulnerable people, including 1.6 million poor children who were receiving child support grant and 120,000 disabled children.

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**Q14**

Can you briefly describe one UNICEF-supported intervention that was not successful in protecting the delivery of services and faced severe bottlenecks?

UNICEF works closely with Ministry of Social Development and Human Security to develop guidelines for COVID-19 prevention in child protection facilities such as child and women shelters. However, during the height of the pandemic, the CP services in many areas have been more difficult to access by children in need. (for example, the shelters don't want to take in new cases because of fear of infection). UNICEF continues to discuss with the government on this.

**Q15**

7

On a scale of 1 to 10 [where 1=low and 10=high], how timely has the overall COVID-19 response in the country been so far?

**Q16**

What factors explain most the timeliness of the response? [please select the most significant from the following list]:

- a. The Government's recognition of the epidemic as an emergency, and urgent need to provide support,
- b. L3 SSOPs and the simplification of procedures (that enabled the Country Office to come up with e.g. new partners/redesign of current IPs, procurement of supplies, etc.)

**Q17**

What factors hindered most the timeliness of the response? [please select the most significant from the following list]:

- a. Lockdown/lack of access,
- c. Late delivery of supplies

**Q18**

What means has the Country Office used to ensure that it is targeting and reaching the most vulnerable and excluded populations, given increased access challenges? [please select all that apply]

- b. Advocacy with Government/other actors on addressing gaps in provision for particular populations,
- c. Increasing coordination and data sharing and use across sectors /partners,
- e. Commissioning additional multi-agency, multi sectoral analytical work,
- d. Supporting monitoring and assessments,

Other (please specify):

Works with CSOs who already have networks and reach to the most vulnerable populations

**Q19**

**Yes**

Has the UNICEF Country Office verified that the standard UNICEF or IP mechanisms for monitoring and verification of implementation (e.g. field visits, third-party monitoring, etc.) have taken place as planned in the COVID-19 context?

**Q20**

**Yes,**

Has the UNICEF Country Office verified that the standard UNICEF or IP mechanisms for ensuring distribution of supplies have taken place as planned in the COVID-19 context?

Please provide additional details:  
through partners' report, phone calls, photos, etc.

**Q21**

What means is the UNICEF Country Office using to ensure quality of services and supplies, even where substantially increased coverage has taken place?

Monitoring visits by staff (when possible), monthly reporting, strengthening M&E capacity of partners

**Q22**

To enhance programming for children and their communities, what should the UNICEF Country Office do ....?

More of? Please elaborate

**Support on socio-economic situation, either through advocacy for government schemes, or direct distribution of cash/relief supplies**

Less of? Please elaborate

**Support the country's testing capacity**

Differently? Please elaborate

**Better way to encourage cross-ministry coordination (e.g. between Ministry of Education and Health, or Health and social development)**

Are there possible new areas worth focusing on? Please elaborate

**Communication on Covid vaccine**

**Q23**

Contexts and vulnerabilities may have changed in the short/medium term due to COVID-19. What action(s) can the Country Office take to adjust plans and implementation in line with any new vulnerability analysis and the commitment to Leave No Child Behind?

Continue to focus on addressing the needs of the poorest Thai and Migrant children and families, analyse their access to government's assistance and programme



**Q24**

What have been some of the successes and opportunities that emerged during the response? How can the Country Office build on these successes and opportunities?

UNICEF was quite successful in using digital platform to reach and engage with wider audience, and will continue to engage with these supporters.

UNICEF also partners with other UN and government agencies in conducting several important pieces of research or survey that highlight the impact of COVID-19 on children and young people. Thailand CO will continue to use these to advocacy with the government for stronger support to these vulnerable groups.

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**Q25**

What have been the key barriers and challenges that the Country Office has faced? What actions can the Country Office take to mitigate these elements moving forward?

UNICEF Thailand has relatively small operation on the ground (downstream), and a large part of our work is mid and upstream. Therefore, it require some additional effort to set up the new partnership with CSOs who are on the ground.

Some of the procedures also took a long time. Discussion in the office is ongoing on how this can be shortened.

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**Q26**

Please leave any further comment or information (including links to key documents) you may want to share here

<https://www.unicef.org/thailand/press-releases/thailand-takes-another-leap-towards-universal-child-support-grant>

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<https://www.unicef.org/thailand/stories/reaching-out-migrant-communities>