

OPERATIONS EVALUATION

Protracted Relief and Recovery Operation 200735
Response to food security and nutrition needs of
population affected by natural disasters, and
resilience building of food insecure communities in
south-western, southern and south-eastern regions
of Madagascar: mid-term evaluation of WFP
Operations (January 2015 – June 2017)
Evaluation Report

January 2017

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Commissioned by the

WFP Office of Evaluation

Report number: OEV/2016/009



World Food Programme



Acknowledgements

The evaluation team would like to warmly thank all the persons who have contributed to the organization of this evaluation, in particular the WFP partners, beneficiaries and other stakeholders who have accepted to meet with the team and answer our questions. The team would particularly like to thank the WFP country office that has dedicated a great amount of time and energy in a particular moment due to the response to an emergency in the south of Madagascar, for the organization and the implementation of the evaluation.

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Operational Fact Sheet

OPERATION			
Type/Number/Title	Protracted Relief and Recovery Operation (PRRO) 200735. “Response to food security and nutrition needs of population affected by natural disasters and resilience building of food insecure communities of south-western, southern and south-eastern regions of Madagascar”		
Approval	22 December 2014		
Amendments	Budget Revision (BR) 1 approved in July 2015: inclusion of a blanket feeding programme for young children and Pregnant and Lactating Women (PLW), increase of the total number of beneficiaries from 426,000 to 449,000, increase of food requirement by 222 mt, increase of food and related costs by US\$ 382,821, increase of Direct Support Costs (DSC) by \$ 65,549, increase of Indirect Support Costs (ISC) by \$31,386, increase of total budget by \$479,756.		
Duration	<u>Initial:</u> 30 month (1 January 2015 – 30 June 2017)	<u>Revised:</u> N/A	
Planned beneficiaries	<u>Initial:</u> 426,000	<u>Revised:</u> 449,000	
Planned food requirements	<u>Initial:</u> In-kind food: 28,629 mt Cash and vouchers: US\$ 3,694,500	<u>Revised:</u> In-kind food: 28,851 mt Cash and vouchers: US\$ 3,694,500	
US\$ requirements	<u>Initial:</u> US\$ 29,622,671	<u>Revised:</u> US\$ 30,102,427	
OBJECTIVES AND ACTIVITIES			
	Strategic Objective	Operation specific objectives	Activities
Millennium Development Goals/ UNDAF UNDAF priorities 2 and 3	SO #1: Save lives and protect livelihoods in emergencies	<u>Outcome 1.1:</u> National institutions, regional bodies and the humanitarian community are able to prepare for assess and respond to emergencies	<ul style="list-style-type: none"> • Technical support in preparedness, early warning, food security monitoring and assessments, resilience and nutrition. • Support to community preparedness
		<u>Outcome 1.2:</u> Stabilised or reduced undernutrition among children 6-59 months and PLW	<ul style="list-style-type: none"> • MAM treatment for children 6-59 months and PLW • MAM prevention for children 6-23 months and PLW (added in BR1 for year 2015 only)
		<u>Outcome 1.3:</u> Stabilised or improved food consumption score over assistance period for targeted households and/or individuals	<ul style="list-style-type: none"> • General Food Distribution (GFD – in-kind or cash) • Food Assistance for Asset (FFA – in-kind or cash)
	SO #3: Reduce risk and enable people, communities and countries	<u>Outcome 3.1:</u> Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-	<ul style="list-style-type: none"> • Resilience/FFA

to meet their own food and nutrition needs	insecure communities and households	
	<u>Outcome 3.2:</u> Risk reduction capacity of countries, communities and institutions strengthened	• Resilience/FFA
Cross-cutting results	<u>Gender:</u> Gender equality and empowerment improved	
	<u>Protection and accountability to affected populations:</u> WFP assistance delivered and utilized in safe, accountable and dignified conditions	
	<u>Partnership:</u> food assistance interventions coordinated and partnerships developed and maintained	
PARTNERS		
Government	Bureau National de Gestion des Risques et Catastrophes (BNGRC), Office National de la Nutrition (ONN), Comité National d'Evaluation de la Vulnérabilité (CNEV), Ministry of Agriculture, Ministry of Environment, Ministry of Population, Social Protection and Women promotion (MPSPWP)	
United Nations	United Nation Population Fund (UNFPA), Food and Agriculture Organization, International Fund for Agriculture Development	
NGOs	Croix Rouge Malagasy (CRM), Centre Betania Ankasina (CBA), Association d'Organisation Santé Secours (ASOS), Harmonisation des Actions pour un Développement Intégré (Hardi), Conseil de Développement d'Andohatapenaka (CDA), Sandratra, FITAMI, Havelontika, Kiomba, Lovasoa, Manao, Maison du Petit élevage (MPE), AIM, Lycée Technique Tuléar, Caritas Madagascar (CM), Sampan'Asa Fampanandrosoana (SAF), Association AIDER, Adventist Development and Relief Agency (ADRA), Hiara Hampanandroso (HH), Welthungerhilfe (WHH), Organe de Développement du Diocèse de Toamasina (ODDIT), Association Fihamy, Ampelamitraoka, Miaro, Multi Action pour le Développement Rural, (MADR), FITAHIA, Centre de Services Agricole (CSA), Mahafaly Mandroso (MM), Conseil Diocésain de Développement de Atsimo Andrefana(CDD), Tamafa, Tanora Vaovao Hitondra Fampanandrosoana (TVHF), Interaide, Action Contre la Faim (ACF), FIASA, FDC Tsihombe, AIDES, Association Tsimbina, LTP Alarobia, LTP Mahamasina	

RESOURCES (INPUTS)

Contribution received (by 15th November 2016): 45,111,031 USD

% against appeal: 149.9%¹

Top 5 donors:
 USA: 20,461,128
 UN CERF: 4,778,301
 UN common funds: 3,265,736
 Switzerland: 3,253,675
 Stock transfer: 2,964,020

Figure 1: Contribution received vs. needed

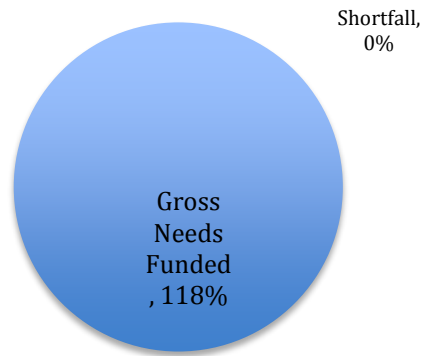
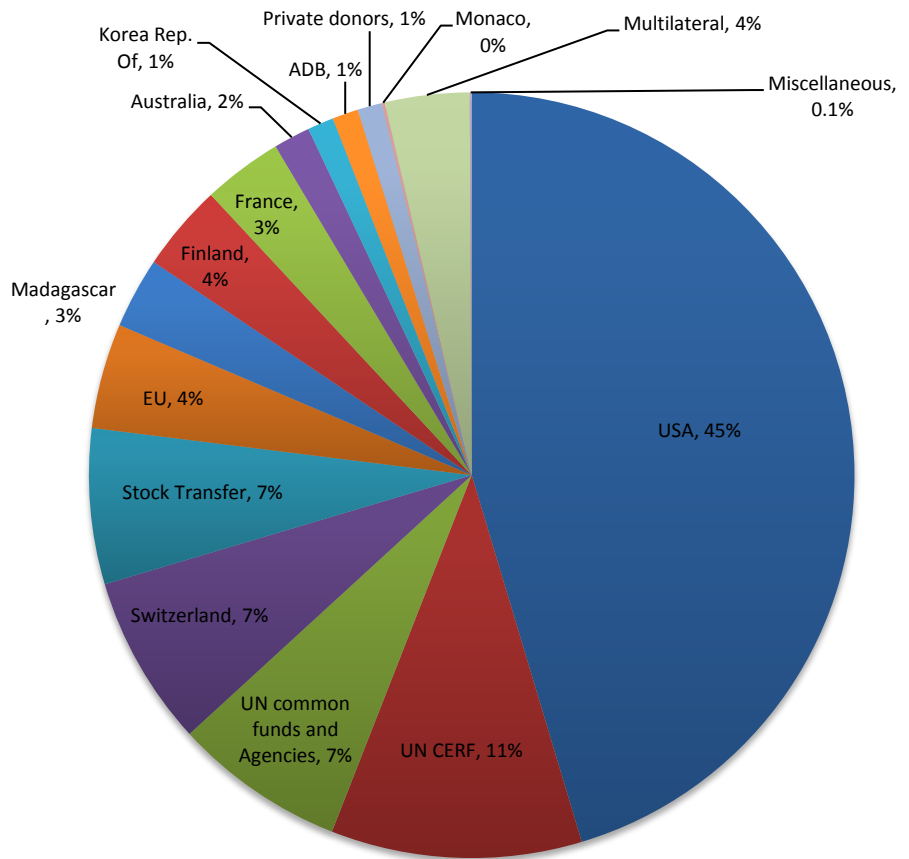


Figure 2: Operation's donors



¹ A second Budget Revision (BR2) was being prepared at the moment of the evaluation mission. It has been approved in November 2016 and therefore falls out of the scope of this evaluation. The modified budget in BR2 is US \$112,198,933. The percentage of received funds against appeal considering BR2 is .40,2%

OUTPUTS²

Figure 3: % of planned beneficiaries by component³

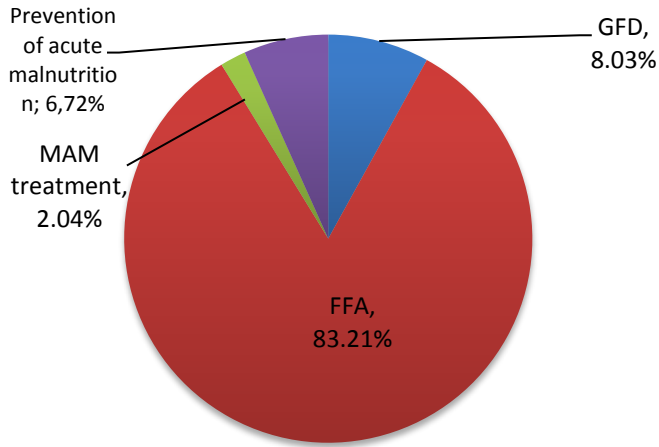


Figure 4: % of actual beneficiaries by component (2015)

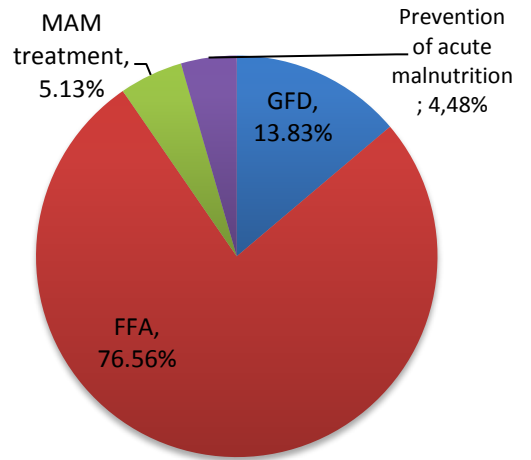
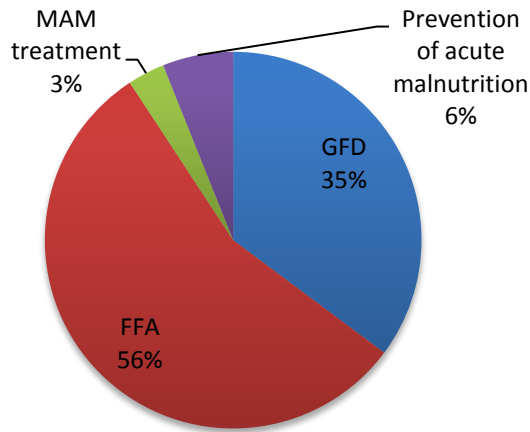


Figure 5: % of actual beneficiaries by component (2016 January to October)



² Source for all figures except for figure 8: Standard Project Report (SPR) 2015 for 2015; information provided by WFP Country Office for 2016.

³ As per BR 1.

Figure 6: Planned and actual beneficiaries by component (2015)

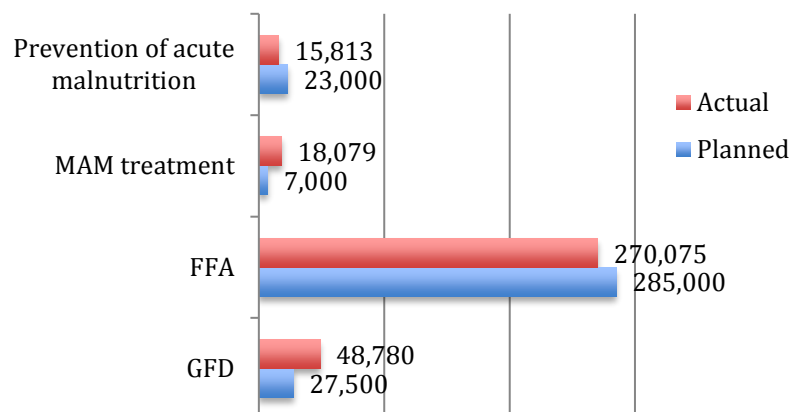


Figure 7: Planned and actual beneficiaries by component (2016 January to October)

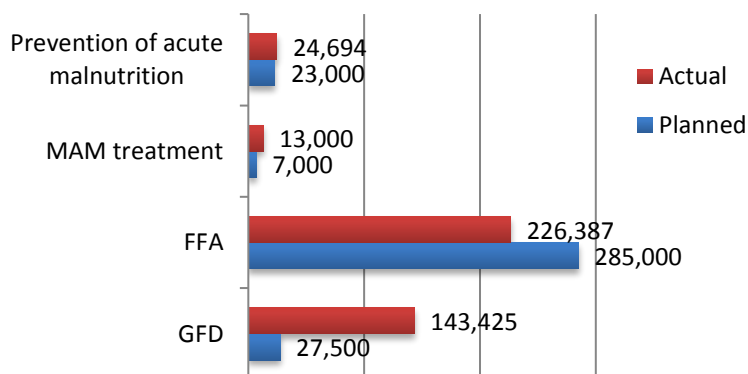
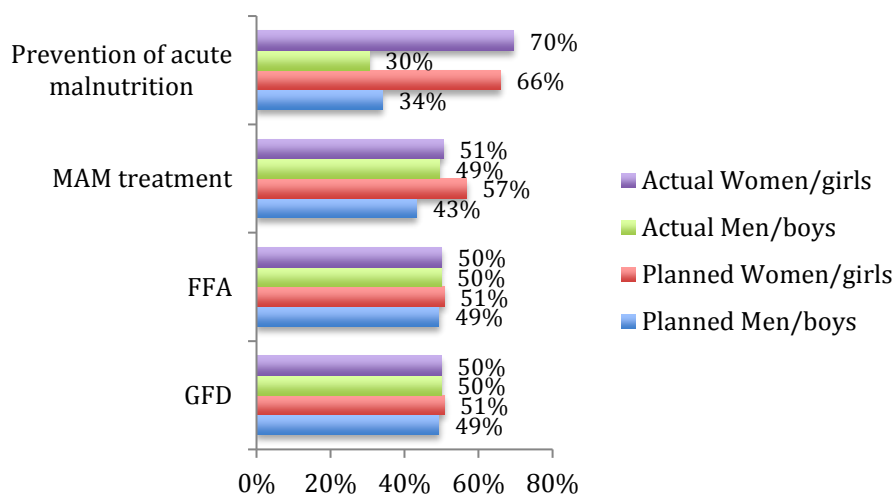


Figure 8: % of women/girls versus men/boys by component, planned and actual (2015)⁴



⁴ Not available for 2016.

Figure 9: Nutrition planned and actual beneficiaries by type of beneficiaries (2015)

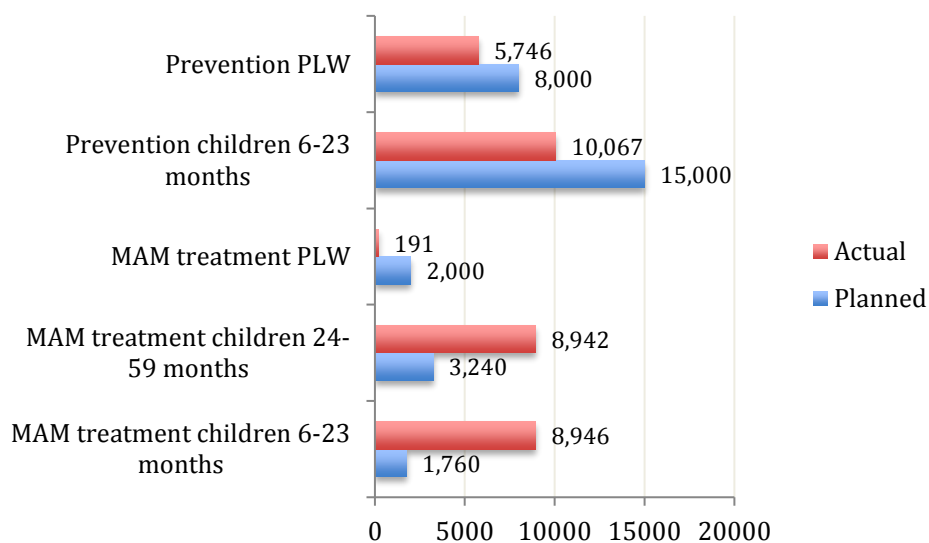


Figure 10: Nutrition planned and actual beneficiaries by type of beneficiaries (2016 January to October)

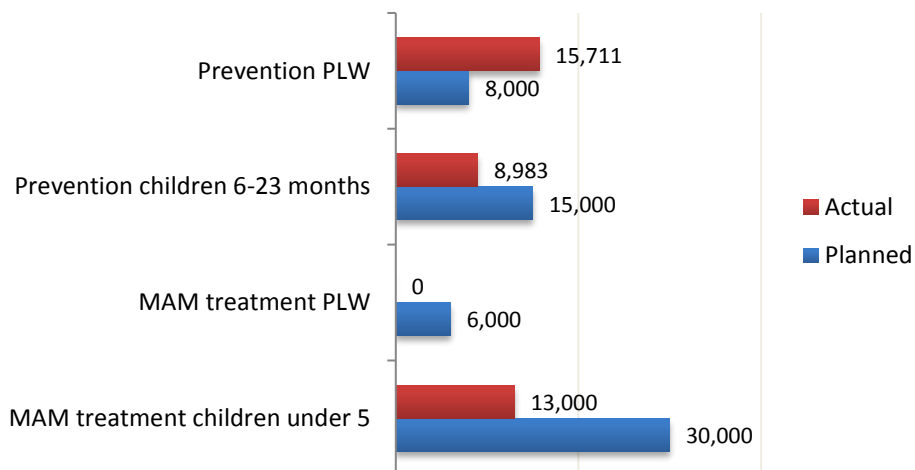


Figure 11: Planned vs. actual food distributed by component – 2015 (MT)⁵

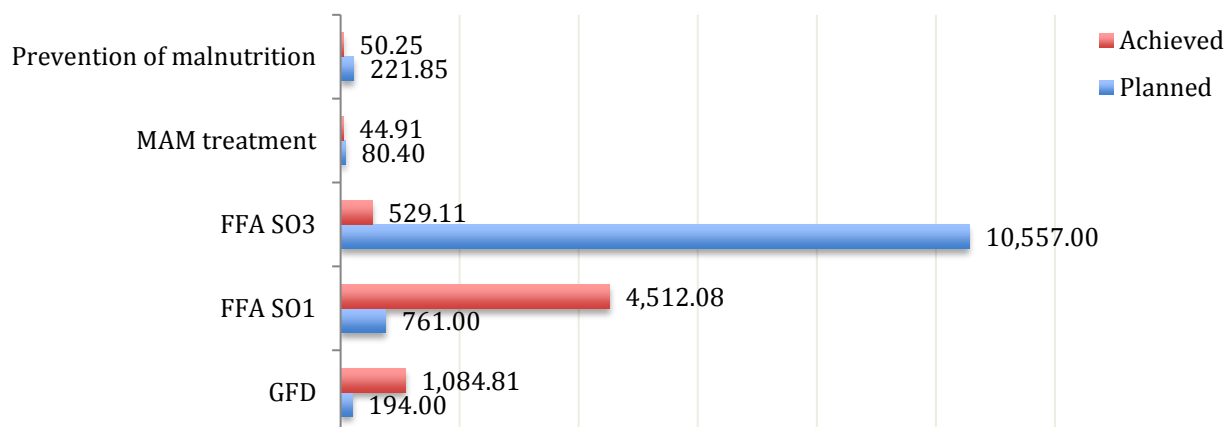
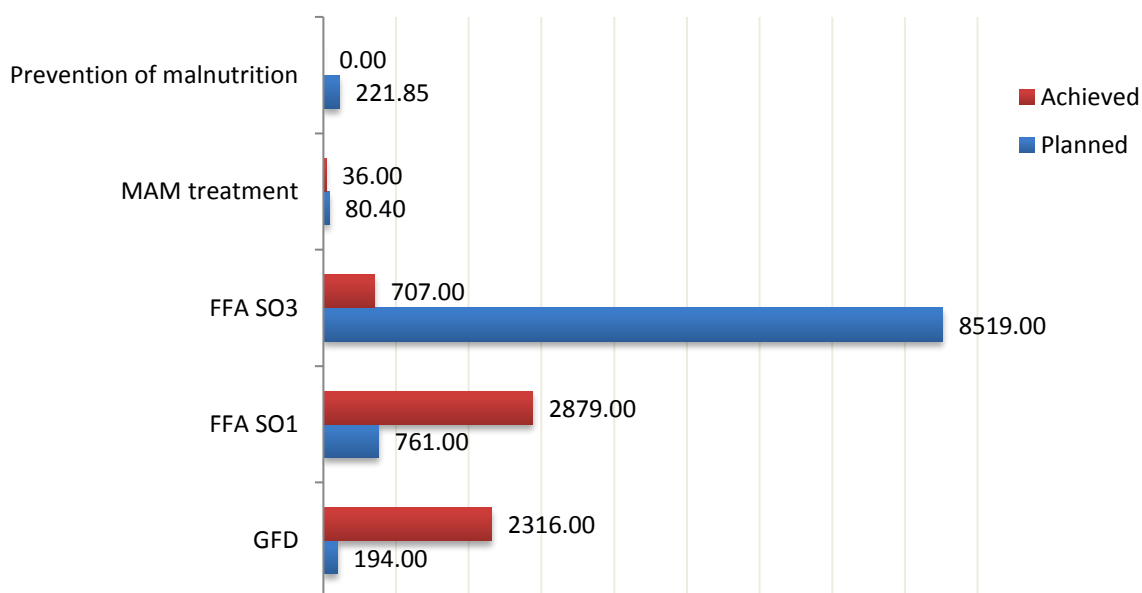


Figure 12 : Planned vs. actual food distributed by component - 2016 January to October (MT)⁶



⁵ Source: Information provided by WFP CO.

⁶ Source: Information provided by WFP CO.

Figure 13: Planned vs. actual cash distributed by component (2015)

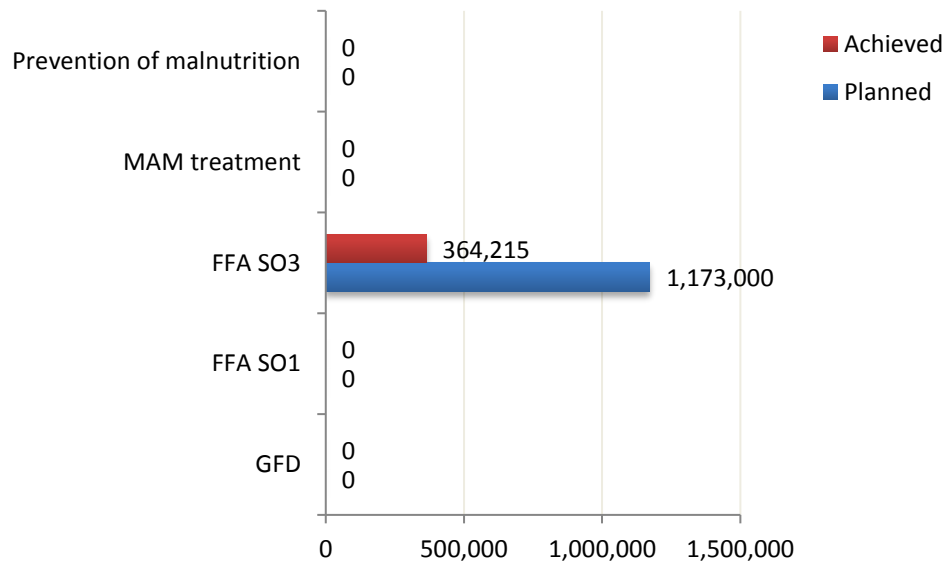


Figure 14: Planned vs. actual cash distributed by component (2016 January to October)

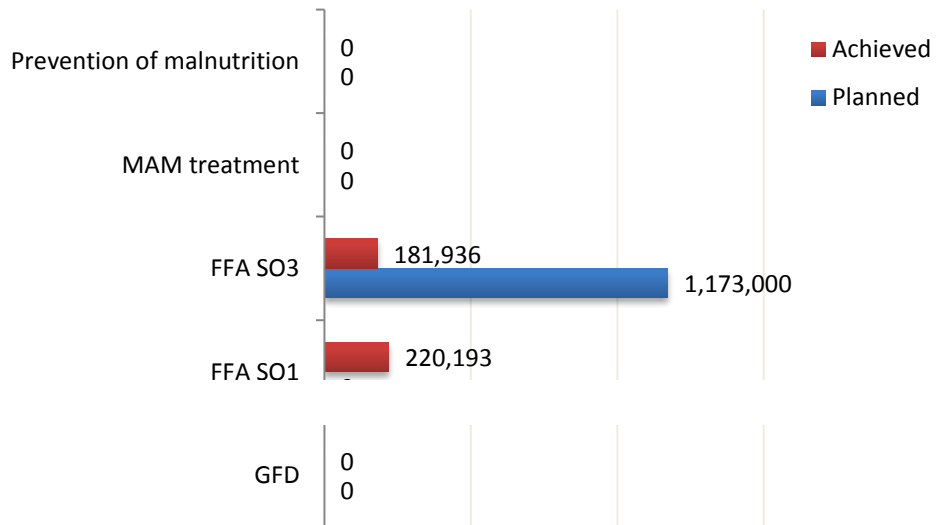


Figure 15: Planned vs. actual cash distributions for FFA activities (USD)

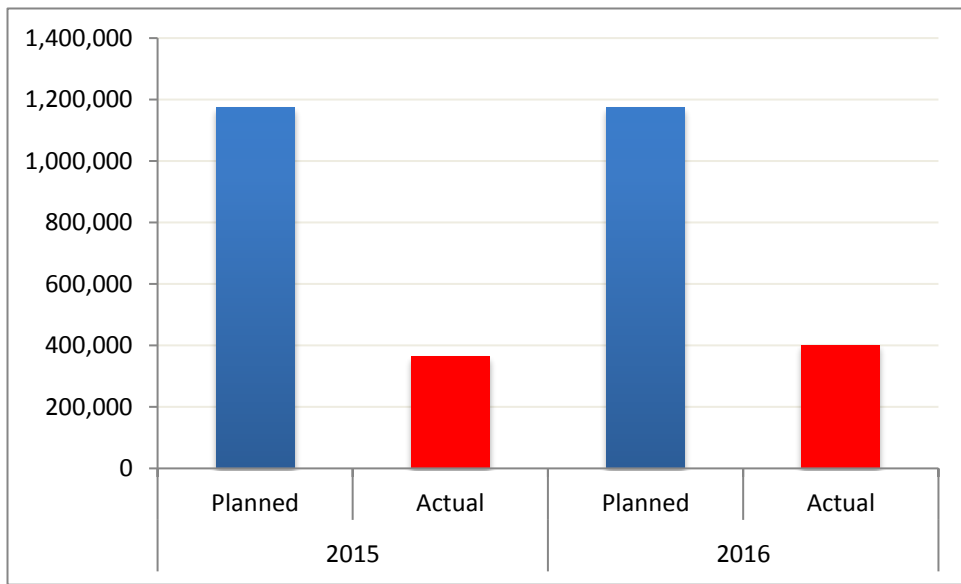
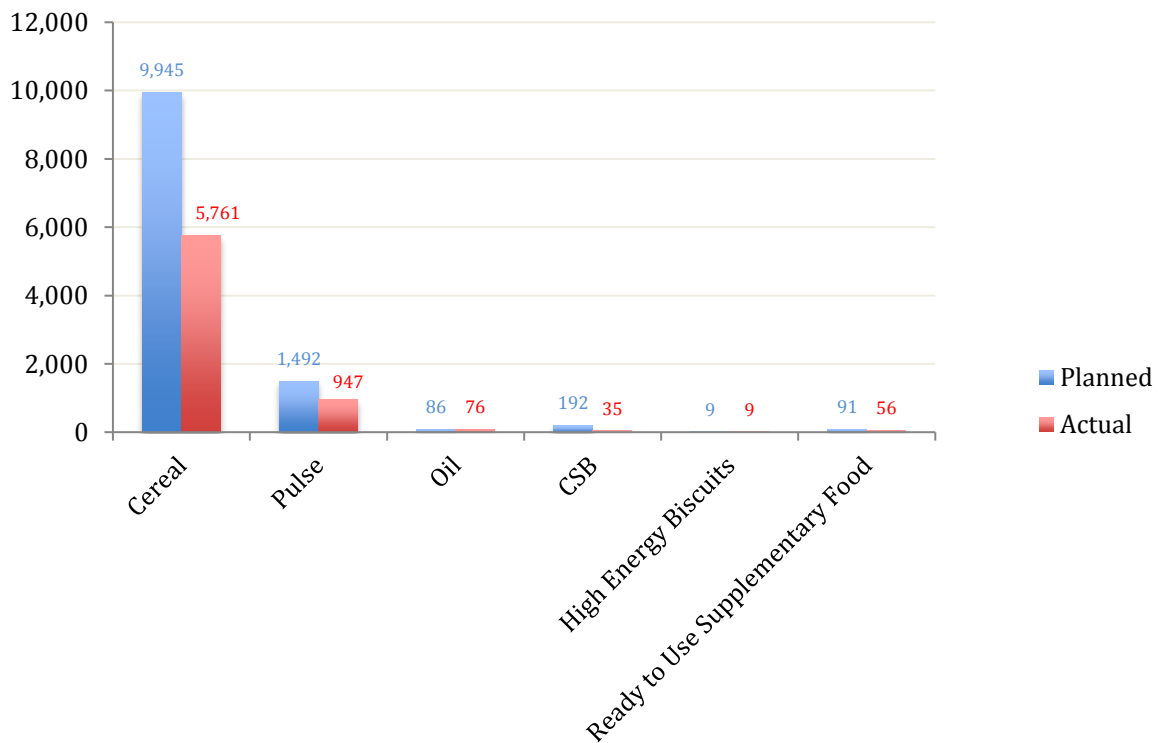


Figure 16: Planned vs. actual food distributed by commodities (2015)⁷



⁷ Not available for 2016

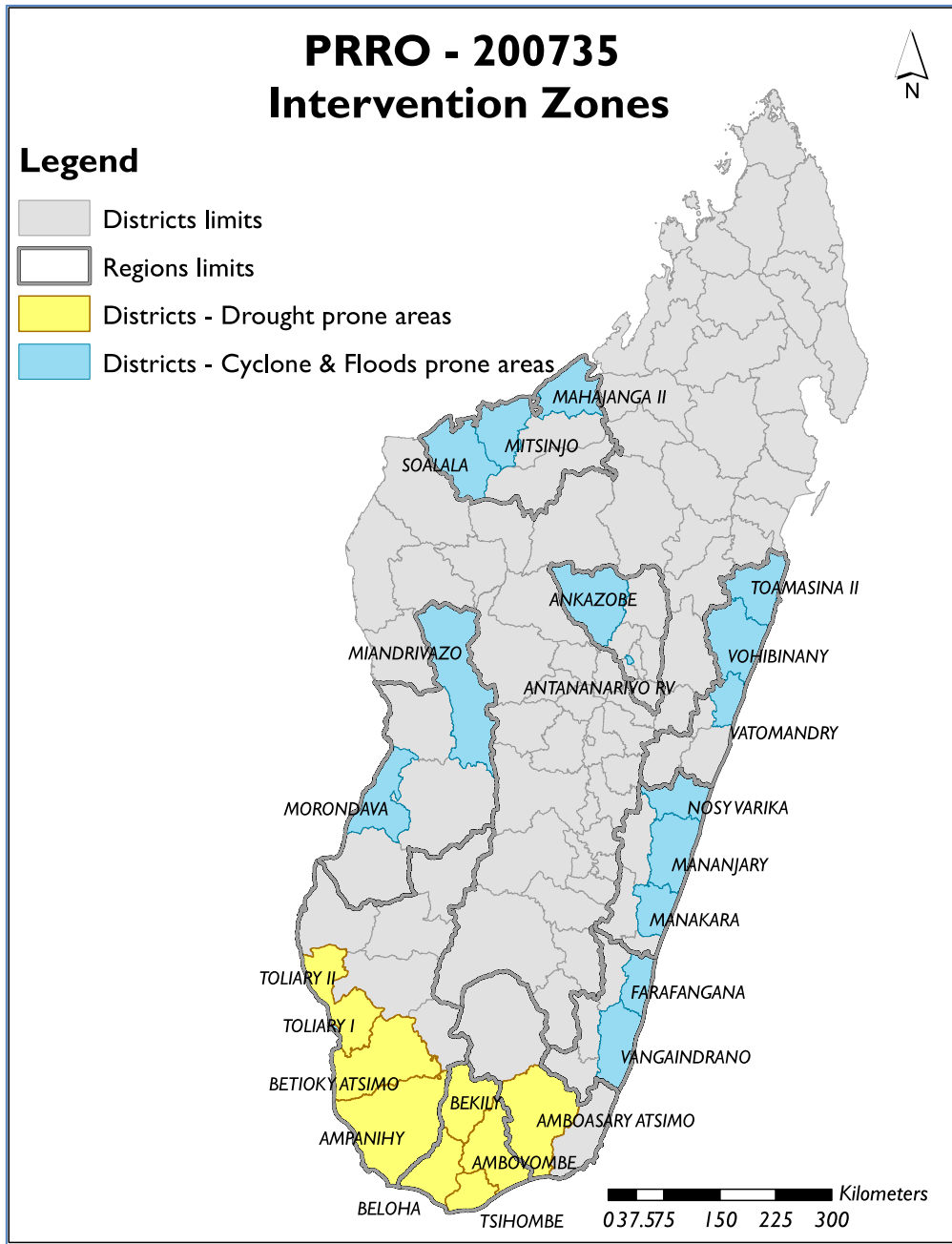
OUTCOMES ⁸				Key observations
Outcome Indicators (Per SPR 2015) KEY: SO – Strategic Objective, BV – Base Value, PFU – Previous Follow-up, LFU – Latest Follow-up, PET – Project End Target, FCS – Food Consumption Score	PET	BV	LFU	
SO 1: Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6-59 months and PLW				
MAM treatment recovery rate (%)				
Drought and cyclone & floods affected areas. BV: 12-2014 LFU: 12-2015	>75.0	73.3	83.0	
MAM treatment mortality rate (%)				
Drought and cyclone & floods affected areas. BV: 12-2014 LFU: 12-2015	<3.0	0.0	0.0	
MAM treatment default rate (%)				
Drought and cyclone & floods affected areas. BV: 12-2014 LFU: 12-2015	<15.0	26.0	17.0	
MAM treatment non-response rate (%)				
Drought and cyclone & floods affected areas. BV: 12-2014 LFU: 12-2015	<15.0	0.6	0.0	
Proportion of eligible population who participate in programme (coverage)				
Drought and cyclone & floods affected areas.	>50	0.0		
Southern regions. BV: 08-2014 LFU: 12-2015	>70	65.0	84.3	
Proportion of target population who participate in an adequate number of distributions				
Southern regions. BV: 08-2014 LFU: 12-2015	>66	94.0	95.3	
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				
FCS: % of HH with Poor FCS				
Shock affected zones. BV: 04-2015 LFU: 12-2015	<3.21	16.06	35.79	
FCS: % of HH with Poor FCS (female-headed HH)				
Shock affected zones. BV: 04-2015 LFU: 12-2015	<3.74	18.69	36.91	
FCS: % of HH with Poor FCS (male-headed HH)				
Shock affected zones. BV: 04-2015 LFU: 12-2015	<3.02	15.11	35.10	
Diet Diversity Score				
Shock affected zones. BV: 04-2015 LFU: 12-2015	>5.42	5.42	4.21	
Diet Diversity Score (female-headed HH)				
Shock affected zones. BV: 04-2015 LFU: 12-2015	>5.20	5.20	4.02	
Diet Diversity Score (male-headed HH)				
Shock affected zones. BV: 04-2015 LFU: 12-2015	>5.49	5.49	4.32	
Restored or stabilized access to basic services and/or community assets				
CAS: percentage of assets damaged or destroyed during emergency which were restored				
Drought and cyclone & floods affected areas. BV: 02-2015 PFU: Nov-2014 LFU: 12-2015	>50	0.0	100.0	
SO 3: Reduce risk and enable people, communities and countries to meet their own food and nutrition needs				
Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-insecure communities and households				
CAS; percentage of communities with an increased Asset Score				
Drought and cyclone & floods affected areas. BV: 12-2014 LFU: 12-2015	>80.0	0.0	36.0	
FCS: % of HH with Poor FCS				
South eastern regions. BV: 08-2015 LFU: 12-2015	<0.60	2.80	5.17	
FCS: % of HH with Borderline FCS				
South eastern regions. BV: 08-2015 LFU: 12-2015	<6.92	34.60	54.74	
FCS: % of HH with Borderline FCS (female-headed HH)				
South eastern regions. BV: 08-2015 LFU: 12-2015	<8.54	42.70	56.98	
FCS: % of HH with Poor FCS (male-headed HH)				
South eastern regions. BV: 08-2015 LFU: 12-2015	<0.50	2.60	9.59	
FCS: % of HH with Borderline FCS (male-headed HH)				
South eastern regions. BV: 08-2015 LFU: 12-2015	<6.40	32.00	53.42	
Diet Diversity Score				
South eastern regions. BV: 08-2015 LFU: 12-2015	>5.52	5.52	4.74	

⁸ Source: SPR 2015

Diet Diversity Score (female-headed HH)			
South eastern regions. BV: 08-2015 LFU: 12-2015	>5.20	5.20	4.76
Diet Diversity Score (male-headed HH)			
South eastern regions. BV: 08-2015 LFU: 12-2015	>5.49	5.49	4.74
CSI (Food): Copying Strategy Index (average)			
South eastern regions. BV: 08-2015 LFU: 12-2015	<10.41	10.41	16.00
CSI (Asset Depletion): Copying Strategy Index (average)			
South eastern regions. BV: 08-2014 LFU: 12-2015	<1.36	1.36	6.59
FCS: % of HH with Poor FCS			
Southern regions. BV: 08-2014 LFU: 12-2015	<7.28	36.40	31.33
FCS: % of HH with Borderline FCS (female-headed HH)			
Southern regions. BV: 08-2015 LFU: 12-2015	<7.00	35.20	50.00
FCS: % of HH with Poor FCS (male-headed HH)			
Southern regions. BV: 08-2015 LFU: 12-2015	<2.80	14.00	47.69
FCS: % of HH with Borderline FCS (female-headed HH)			
Southern regions. BV: 08-2015 LFU: 12-2015	<7.60	38.00	33.33
FCS: % of HH with Borderline FCS (male-headed HH)			
Southern regions. BV: 08-2015 LFU: 12-2015	<7.20	36.20	30.77
Diet Diversity Score			
Southern regions. BV: 08-2015 LFU: 12-2015	>4.46	4.46	3.10
Diet Diversity Score (female-headed HH)			
Southern regions. BV: 08-2015 LFU: 12-2015	>3.84	3.84	2.83
Diet Diversity Score (male-headed HH)			
Southern regions. BV: 08-2015 LFU: 12-2015	>4.56	4.56	3.17
CSI (Food): Copying Strategy Index (average)			
Southern regions. BV: 08-2015 LFU: 12-2015	<15.37	15.37	21.00
CSI (Asset Depletion): Copying Strategy Index (average)			
Southern regions. BV: 08-2014 LFU: 12-2015	<7.84	7.84	7.14
Risk reduction capacity of countries, communities and institutions strengthened			
Proportion of targeted communities where there is evidence of improved capacity to manage climatic shocks and risks supported by WFP			
Resilience intervention zones. BV: 11-2014	>60.00	0.00	
Cross-cutting indicators			
Proportion of HH where females and males together make decisions over the use of cash, voucher, food			
Androy, FFA. BV: 12-2014 LFU: 12-2015	>60.0	20.58	21.30
Proportion of HH where females and males together make decisions over the use of cash, voucher, food			
Androy, Nutrition, prevention of acute malnutrition. BV: 12-2014 LFU: 12-2015	>60.0	18.00	23.00
Proportion of HH where females make decisions over the use of cash, voucher, food			
Androy, FFA. BV: 12-2014 LFU: 12-2015	>30.0	63.27	57.36
Proportion of HH where females make decisions over the use of cash, voucher, food			
Androy, Nutrition, prevention of acute malnutrition. BV: 12-2014 LFU: 12-2015	>20.0	57.00	50.00
Proportion of HH where males make decisions over the use of cash, voucher, food			
Androy, FFA. BV: 12-2014 LFU: 12-2015	<10.0	16.14	21.50
Proportion of HH where males make decisions over the use of cash, voucher, food			
Androy, Nutrition, prevention of acute malnutrition. BV: 12-2014 LFU: 12-2015	<20.0	25.00	27.00
Proportion of women beneficiaries in leadership positions of project management committees			
Androy, FFA. BV: 12-2014 LFU: 12-2015	>50.00	60.00	60.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution			
Androy, FFA.	>60.00		
Proportion of assisted population informed about the programme			
Androy, FFA. BV: 12-2014 LFU: 12-2015	>90.0	90.86	71.40
Proportion of assisted population informed about the programme			
Androy, Nutrition, prevention of acute malnutrition. BV: 12-2014 LFU: 12-2015	>90.0	88.00	92.00
Proportion of assisted population who do not experience safety problems travelling to, from and/or at WFP programme site			

Androy, FFA. BV: 12-2014 LFU: 12-2015	>90.0	99.98	100.0	
Proportion of assisted population who do not experience safety problems travelling to, from and/or at WFP programme site				
Androy, Nutrition, prevention of acute malnutrition. BV: 12-2014 LFU: 12-2015	>90.0	88.0	99.0	
	Key	Attained		
		Not attained		
		Not measured		

Map



Source: Terms of Reference of the evaluation (Annexe 1)

Executive Summary

Introduction

1. The World Food Programme (WFP) Office of Evaluation (OEV) commissioned IRAM to conduct an independent mid-term evaluation of the Protracted Relief and Recovery Operation (PRRO) 200735⁹. This 30-month operation started in January 2015 and aims to (i) respond to immediate food security and nutrition needs and protect the livelihoods of populations affected by natural disasters; (ii) build the resilience of food-insecure communities facing recurrent shocks; and (iii) enhance the capacities of the government, cooperating partners and communities to prepare, monitor, detect and respond to emergencies. The operation initially included four components: (i) Capacity building in Disaster Risk Management (DRM); (ii) General Food Distribution (GFD) and Food Assistance for Assets (FFA) in response to emergencies; (iii) Moderate Acute Malnutrition (MAM) treatment; (iv) FFA for resilience building. A component to prevent malnutrition through a Blanket Supplementary Feeding Program (BSFP) was added in a budget revision (BR) in April 2015. The operation targets 449,000 persons and has a revised budget of US\$30,102,427¹⁰.
2. This evaluation is intended to provide feedback on the activities and the results achieved, learn lessons and formulate recommendations to improve the performance of the operation and prepare the next programming phase, within new Country Strategic Programming (CSP) approach. It covers the period from mid-2014 to October 2016. The main users of the evaluation will be the WFP Country Office (CO), partners involved in the operation, the government of Madagascar, the WFP regional Bureau (RB) and OEV.

Context

3. Madagascar is one of the ten countries in the world that are most vulnerable to natural disasters. About a quarter of its population live in disaster-prone areas.
4. A survey conducted by WFP and the National Institute of Statistics¹¹ in 2013 revealed that 31% of the population was chronically food insecure. Food insecurity is more prevalent among rural populations. Its main causes are poverty, low farm productivity, dependence and difficult access to markets, and recurrent climatic shocks. Disruptions to the 2015-2016 rainy season caused by El Niño have caused severe agricultural losses resulting in a large-scale crisis in southern Madagascar. An Integrated Phase Classification (IPC) assessment conducted in October 2016 in the seven districts worst affected by this crisis found that 848,659 people are currently in need of emergency assistance, including 330,000 persons in emergency IPC phase.
5. Acute malnutrition among under 5 children remains below the threshold of 10% at national level but is particularly prone to seasonal variations and increases during the lean season. Despite major improvements in health and nutrition indicators over the past decade, the prevalence of stunting remains unacceptably high, with a national rate of 47.3% for chronic malnutrition.¹²

⁹ *Response to food security and nutrition needs of population affected by natural disasters and resilience building of food insecure communities of south-western, southern and south-eastern regions of Madagascar*

¹⁰ A second Budget Revision (BR2) was being prepared at the moment of the evaluation mission. It has been approved in November 2016 and therefore falls out of the scope of this evaluation. The modified beneficiary target in BR2 is 1,555,790 and the modified budget is US \$112,198,933.

¹¹ Comprehensive Food Security and Vulnerability Analysis (CFSVA), 2014.

¹² INSTAT. 2012-2013. Madagascar Millennium Development Goals National Monitoring Survey (ENSOMD)

Key findings

Relevance of the operation

6. The evaluation confirmed the relevance of the operation's overall strategy, based on a dual approach that focused on building resilience and respond to immediate needs caused by natural disasters. The operation did not include specific measures to cover chronic food insecurity, such as seasonal transfers. This function had to be fulfilled by resilience FFA activities, although they have different objectives, approaches and implementation timings. WFP CO has changed this strategy, shifting most of the emphasis to the response to the large-scale crisis in the south, which is also found relevant.
7. MAM treatment is justified by the high rates of malnutrition, particularly during seasonal peaks, and its inclusion in the operation as a contingency plan in case the situation deteriorated is relevant. Malnutrition prevention activities are justified by the worsening situation.
8. The combination of GFD and FFA short-term programming for emergency responses was appropriate for sudden onset disasters. The switch to prolonged large-scale GFD to cover emergency needs, followed by a recovery phase with FFA, is also relevant.
9. Activities supported through FFA to build resilience can potentially improve water management, access to markets, agricultural adaptation and income generation. However, the initial target of 225,000 beneficiaries per year seems too ambitious for this activity that is new to the CO.
10. WFP applied two methods for beneficiary targeting: a community approach and a quantitative scoring with a community validation. There isn't a consensus on which method is more efficient and allows for more accuracy.
11. The main mode of assistance remains in-kind transfers. WFP CO has adopted a progressive scaling-up of cash-based transfers since their first introduction in 2012, with systematic feasibility and market assessments. This is relevant given the lack of supply in many secondary markets.

Coherence with WFP and national policies

12. The operation contributes to Strategic Objectives (SO) 1 and 3 of WFP Strategic Plan 2014-2017, and implicitly to SO2. It is coherent with nutrition, resilience, disaster risk reduction, climate change and gender policies. It also contributes to national policies on nutrition, DRM, rural development and social protection.

Operation results and factors that have influenced the results

13. The operation has reached or exceeded its initial target for beneficiaries – apart from the target for resilience building, which was not met due to the change of context. Food and cash deliveries were significantly lower than planned in 2015 due to the low level of resource mobilization.
14. All planned DRM capacity-building activities have been implemented, but have yet to produce any visible outcomes as they mainly targeted cyclone-prone areas, and no cyclones have occurred since the beginning of the operation.
15. MAM treatment activities started late due to the lack of operational partners. The integration of treatment activity into the National Programme of Community Nutrition (PNNC) allowed to rapidly scale up activities. The outcomes indicators show a good level of performance in terms of coverage, mortality and non-response. Recovery rates are below the targets, particularly in 2016, partly due to the protocol that discharges children after 2 months regardless of their anthropometric data, and the fact that many children do not follow the treatment

- accurately. Also, measurement of the recovery rate was not fully reliable since anthropometric records were not systematically registered at discharge.
16. BSFP activities did not cover the peak of the lean season at the beginning of 2016. Their implementation went well and had a positive impact on children's Middle Upper Arm Circumference (MUAC).
 17. WFP responded to floods in the area of Antananarivo in 2015 mainly through GFD. Support for food security in the south was delivered through FFA until mid-2016, when the response switched to GFD to allow for a major scale up. Emergency activities did not succeed in stabilizing the food security situation in the south, due to a third consecutive failed farming season. Short-term food and cash transfers up to mid-2016 briefly improved food consumption, but it worsened again when the transfers ended.
 18. Most FFA activities were implemented at short-term. Assets that were planned have been created/rehabilitated, but little attention has been paid to sustainability measures. Parts of the assets are sub-standard and more effort needs to be made to improve their quality. Feeder roads is the only asset-building activity that produced a positive outcome (improved access to markets), as all the other activities depend on rainfall, which has been virtually non-existent since they were undertaken.
 19. The CO conducted Seasonal Livelihood Programming (SLP) in four regions and Community-Based Participatory Planning (CBPP) in 21 sites. SLP helps identify 'convergence communes' where synergies between stakeholders can be created, although in reality WFP still intervenes alone in most cases. Nevertheless, there are several examples of positive synergies that have been created. WFP CO engaged in a capacity building process in order to up-grade quality of FFA activities. This process has been affected by the mobilization of the CO on emergency responses, and there are still important issues to address¹³.
 20. The program design included a good level of gender mainstreaming. The CO has applied several measures to promote women's participation in activities. However, there is still no evidence on positive effects on gender equality and women empowerment. Accountability mechanisms are not functional, and need to be reviewed to provide appropriate channels for beneficiaries and non-beneficiaries to assert their right to benefit from activities.
 21. Other factors that have positively influenced the performance of the operation are (i) logistical capacities, which have been updated to deal with the response in the south, despite still existing logistic challenges; (ii) quality of food security analysis; (iii) internal synergies between CP 200733 and the Miaro project. Conversely, it has been adversely affected by the lack of resources for M&E, limited CO capacities (particularly among field-level nutrition staff), long lead time for food procurement, the lack of reliability and accuracy of nutrition data and the generally limited technical capacities of partners.
 22. Participation by national stakeholders has been high in all activities, but their limited technical capacities and resources reduce the possible impact of capacity development actions.

¹³ Such as longer term partnerships for multiyear programming or increased participation of decentralized technical services.

Recommendations

Strategic recommendations for the formulation of the future CSP (course of 2017)

- 1.** Complement FFA resilience building activities with seasonal transfers focused on assisting the most vulnerable households during the lean season (WFP CO). The resilience component of the operation has both objectives of reducing household's vulnerability to shocks and supporting access to food for severe and chronically food insecure households through. Despite both objectives are complementary, their integration into a single activity is not appropriate for several reasons. WFP CO should consider the association of complementary seasonal transfers, focused on the lean season, with long-term FFA resilience building activities implemented in the dry season. Seasonal transfers could be conditional or unconditional depending on the feasibility to develop relevant FFA or FFT activities at that season, the availability of working hand, and the ability of the target population to participate to physical work. Both activities should be integrated into the three-pronged approach, including the ICA that could provide a common geographical tool for the next CSP.
- 2.** Elaborate a resilience strategy (WFP CO, with the support of RB and the participation of institutional partners). Resilience is a complex concept that can include very large panel of different issues and activities. It is new for the CO, and requires to be guided with a strong quality and learning process. A resilience strategy should include measures such as the creation of a resilience unit in the CO, a reduction of the beneficiary target at the beginning, the definition of intermediate objectives¹⁴ with their respective indicators in order to measure and analyse progresses, long term partnership to allow multi-year programming at community level.
- 3.** Better tailor the programming of nutrition activities to merge with stunting prevention approach and to include a strong communication component (WFP CO in collaboration with UNICEF, UNFPA and NGOs). Nutrition activities should not be isolated but integrated in a larger package supported by other actors. This would mainstream nutrition awareness and improve other sectors interconnected with nutrition playing a role in the malnutrition causal tree, resulting in a better impact of WFP activities. WFP should develop an integrated approach aiming at preventing acute and chronic malnutrition and targeting the 1,000 days window of opportunity. In areas prone to high rates of malnutrition, BSFP should be maintained during the peak and complemented by other preventive measures along the year targeting PLW and under two children.

Operational recommendations for the present operation (short term, as soon as possible), by order of priority

- 4.** Improve monitoring of the nutrition component (WFP CO in collaboration with ORN, in the short term). The different stakeholders involved in the treatment of malnutrition don't share regularly data recorded at PNNC sites and there is a lack of ownership of the program's performance. This limits the calculation and reliability of some indicators such as recovering rate. It is thus needed to improve monitoring through the development of shared monitoring tools. Although ORN should keep the ownership of the monitoring, WFP should request ORN to share PNNC reports with its field offices, in order to better analyze, follow up and

¹⁴ such as livelihood diversification, income generation, water management, ...

understand performance at field level. A better involvement and tailored monitoring from the different stakeholders including WFP FAMs would reinforce quality and regularity of the records in the PNNC register.

5. Carry out a capitalization exercise on beneficiary targeting methods (WFP CO with cooperating partners, short-term), in order to identify the strengths and weaknesses of the two targeting methods used.
6. Strengthen the accountability mechanism for beneficiaries (WFP CO, short-term). Accountability is mainly based on barely functional committee-based complaints mechanism. To give the target population real opportunities to assert their right to benefit from activities, WFP CO should implement multiple complementary channels such as green phone numbers, letterboxes, accessible focal points in partner and WFP sub-offices, and involve communal councils.
7. Carry out an assessment on the national potential for local purchases (WFP CO, short-term). Lead times are long, especially for international purchases, and this affects the programming and effectiveness of the operation. WFP CO has to meet an annual quota of 20% of local purchases, even though it was set without any detailed analysis of the potential supply. WFP CO should carry out such an assessment to maximize the potential for local purchases.

1 Introduction

1.1 Evaluation Features

1. The World Food Programme (WFP) Office of Evaluation (OEV) commissioned the French Institute for Research and Application of Development Methods (IRAM) to conduct an independent mid-term evaluation of Protracted Relief and Recovery Operation (PRRO) 200735: *‘Response to food security and nutrition needs of population affected by natural disasters and resilience building of food insecure communities of south-western, southern and south-eastern regions of Madagascar’*.
2. The evaluation has **two complementary main objectives**:
 - **Accountability**: the evaluation should report on the activities implemented and the results achieved, and recommend improvements to maximize the achievement of objectives by the end of the implementation period. WFP Madagascar Country Office (CO) will prepare a management response plan for the implementation of these recommendations.
 - **Learning**: The evaluation team should analyze internal and external factors that have had positive and negative effects on the implementation of activities and achievement of results. This analysis should identify the lessons learned and good practices that could be included in the program or applied to other operations, and specifically to the new Country Strategic Programming (CSP) approach that will be applied from 2017¹⁵. The evaluation will present evidence-based findings to facilitate decision making at operational and strategic levels. WFP will actively disseminate these findings, and incorporate the lessons learned into relevant lesson-sharing systems.
3. The evaluation **covers** all the activities and processes of PRRO 200735 relating to its design, implementation, resources, and monitoring and evaluation (M&E) systems in the period from mid-2014 to the evaluation mission in October 2016. It also includes the WFP response plan to the ongoing emergency in southern regions of the country caused by the effects of El Niño.
4. The main end-users of the evaluation will be the WFP CO, its partners in the operation, the government of Madagascar, the WFP Regional Office (RB) and OEV.
5. The evaluation aims to answer the **evaluation questions** defined in the Terms of Reference (ToR, Annex 1), using the **criteria** of relevance, coherence (internal and external), coverage, effectiveness, efficiency, impact and sustainability of the actions implemented.
6. The three main evaluation questions are:
 - How appropriate is the operation?
 - What are the results of the operation?
 - Why and how the operation has produced the observed results?

¹⁵ According to WFP CO, a transitory CSP will cover from mid-2017 to the formulation of a 5 years CSP that could start approximately in 2019.

7. The evaluation ToR included detailed sub-questions for each main question. The evaluation team developed an evaluation matrix (Annex 2) identifying the information to be gathered and analyzed in order to answer the sub-questions, as well as the information-gathering methods and sources.
8. The evaluation team was composed of three members (2 women and 1 man): a team leader, an expert in food security and food assistance, a nutrition expert and a rural development expert. The evaluation methodology was based on a set of approaches designed to ensure that the information gathered was as reliable as possible. These included historical, multidisciplinary and gender approaches (differential analysis of the outcomes for men and women, using gender-disaggregated data and interviews of separate men's and women's focus groups), participation, triangulation and data systematization; also field visits to sample sites selected using criteria designed to make the sample as representative of the whole PRRO 200735 intervention area as possible (see Annex 3: List of sites selected for field visits).
9. The main information-gathering tools and methods used were a review of secondary data (see Annex 4: Literature), semi-structured interviews with focus groups and individuals, interviews with stakeholders (see Annex 5: List of persons met), observation, but also internal and external presentations of the preliminary results.
10. The evaluation was conducted in three phases: an inception phase (21st June to 15th September), the evaluation mission (26th September to 14th October, see Annex 6: Evaluation mission schedule) and the reporting phase (15th October to 13th January 2017). IRAM oversaw the quality assurance system, with contributions from the WFP CO, RB and OEV.
11. The main constraint to the evaluation and fulfilment of its objectives was the lack of time allowed for field visits to the huge area covered by the operation. As a result, the evaluation mainly focused on the three regions where most activities have been undertaken and which are most affected by the ongoing food crisis.¹⁶ In these regions the evaluation team selected field visit sites in collaboration with WFP CO to allow coverage of all the main activities. Because certain activities (such as capacity building on regional and local disaster risk management) have not been implemented in these regions, information on these activities is based on secondary data and interviews at national level.
12. Circumstances beyond the control of the evaluation team and WFP (flight modifications) meant that the team was only able to conduct interviews in one regional capital. Although this limited the gathering and triangulation of regional information to complement data from the local, field and national levels, the team does not feel that it affected the reliability of the evaluation findings due to the high level of triangulation via other sources of information.

1.2 Country Context

1.2.1 Geography, economy and political context

13. With a surface of 587,041 km², the island of Madagascar located in the Indian Ocean is characterised by a large variety of climate and agro-ecological systems.

¹⁶ The three southern regions: Atsimo Andrefana (southwest), Androy (south) and Anosy (southeast).

14. In 2015 the estimated total population of Madagascar was 24.2 million people, and the annual demographic growth rate 2.8%. About 80% of people live in rural areas, and half of the population is aged 15 years or less.
15. The country's recent history has been marked by recurrent political crises that have slowed down its development.¹⁷ The last crisis began in 2009 and lasted until 2013. Andry Rajoelina took power in March 2009 and forced the former president Marc Ravalomanana to leave the country. Following a lengthy mediation process initiated by the Southern African Development Community (SADC) and the African Union, the national political parties signed a roadmap in September 2011 and presidential elections took place at the end of 2013. Political tensions have persisted despite the return to the constitutional order and appointment of a Prime Minister in January 2015.
16. Madagascar is a low-income country (World Bank Classification). In 2015, it ranked 154th of the 188 countries on the United Nations Human Development Index, and featured among 54 low-income food-deficit countries.
17. The Malagasy economy mainly relies on the tertiary sector (which accounted for 57.6% of Gross Domestic Product/GDP in 2014). Despite the remarkable potential of its natural resources, economic growth has remained low (standing at 2.97% in 2014 and 3.05% in 2015¹⁸), and political instability has discouraged investments.¹⁹
18. According to the World Bank, nearly 4/5 of the population lived in extreme poverty between 2001 and 2012. Poverty is more widespread in rural areas and in the south west of Madagascar.²⁰ The government strategy to reduce poverty through inclusive growth is enshrined in the three pillars of its 2015-2019 National Development Program, which focuses on improving governance, promoting economic recovery and expanding access to basic social services.

1.2.2 Climate change and disasters

19. Madagascar is one of the ten countries in the world that are most vulnerable to natural disasters such as cyclones, floods, droughts and locust invasion, which have a considerable impact on economic growth.²¹ About a quarter of its population live in disaster-prone areas where risks and household vulnerability to shocks are exacerbated by Climate Change (CC), deforestation and poor land management.
20. Disruptions to the 2015-2016 rainy season caused by El Niño have caused a large-scale crisis in Southern Africa and severe agricultural losses in southern Madagascar due to the drought. In addition to this, there is a 55-60% chance that La Niña will lead to wetter than normal conditions and floods in Southern Africa towards the end of 2016²².
21. A national strategy for disaster risk management was established in 2003 and updated in 2014. This focuses on increasing resilience to disasters among national institutions, local authorities and other actors by 2020. In 2010,

¹⁷ Sources used for political context: <http://www.worldbank.org/en/country/madagascar/overview>

¹⁸ <http://data.worldbank.org/country/madagascar>

¹⁹ www.diplomatie.gouv.fr/fr/dossiers-pays/madagascar/presentation-de-madagascar/

²⁰ Madagascar: Systematic country diagnosis. World Bank Group. August 2015.

²¹ The 2008 cyclone caused economic losses equivalent to 4% of GDP.

²² <http://www.unocha.org/el-nino-southern-africa>

Madagascar issued a National Climate Change Policy whose main objectives were to: (i) promote adequate national measures to reduce the country's vulnerability to CC and greenhouse gas emissions, and (ii) develop new behaviors to help combat CC at every level.

1.2.3 Food Security and Livelihoods

22. Agriculture is the main source of income for most of the population of Madagascar (employing 78% of the national workforce, according to FewNet), but is characterized by low productivity and limited access to land. The country is nearly self-sufficient in its main staple food, rice, but does not produce enough cereal to cover national needs. Productivity is affected by low use of inputs, inappropriate farming techniques and practices and obsolescent irrigation schemes, and the situation has worsened since 2009 with the suspension of public investment in agriculture. Livestock keeping and small-scale fishing provide additional sources of income for rural populations.
23. A national survey conducted by WFP and the National Institute of Statistics (NIS) in early 2013²³ found that 31% of the population was chronically food insecure. Although the situation had improved slightly since 2005,²⁴ food consumption in the affected population group was found to be both quantitatively and qualitatively deficient in 2013, with 60% of the population affected by very poor quantitative food consumption, and 58% by very poor qualitative food consumption.
24. In 2013, food insecurity was most acute in rural areas (33% of the population) and secondary urban centers (30.7%), and less marked in the capital city and main urban centers (18.7%). The worst affected regions were Atsimo Atsinanana (64%), Sava (44%), Sofia (42.7%), Vatovavy Fitovinany (39.2%), and Boeny; while Melaky, Androy, Anosy and Ihorombe had food insecurity rates of between 31% and 35% (see map in annex 9). WFP identified the main causes of food insecurity as poverty, low agricultural productivity, dependence on and difficult access to markets, and recurrent climatic shocks.
25. In March 2015, the food security assessment carried out to evaluate the impact of El Nino in the Southern part of Madagascar found some 579,000 people to be severely food insecure²⁵. Negative coping strategies were observed such as assets selling, migration, seeds consumption for food, withdrawing children from school and reducing food consumption to one meal.
26. The situation has further deteriorated in 2016, which marks the third year of a persistent drought. In October 2016, an Integrated Phase Classification (IPC) exercise of the seven worst affected districts estimated that a total of 848,659 people are in need of emergency assistance, including 330,000 people identified as being in the IPC emergency phase (Phase 4 of 5)²⁶.

²³ Comprehensive Food Security and Vulnerability Analysis (CFSVA), 2014.

²⁴ 34.7% of the population were food insecure in 2005, and 32.8% in 2010.

²⁵ Evaluation des impacts de la sécheresse sur les moyens de subsistance et sur la vulnérabilité à l'insécurité alimentaire des population affectées, Région Androy, Anosy et Atsimo Andrefana, avril 2015.

²⁶ IPC October 2016-March 2017: IPC carried out from September 26th to October 6th for the most affected districts in the south of Madagascar.

1.2.4 Nutrition and health

27. Despite major improvements in health and nutrition indicators over the past decade, the prevalence of stunted Malagasi children under 5 years old remains unacceptably high. Madagascar is the fourth worst country in the world in terms of stunting, with a national rate of chronic malnutrition standing at 47.3%,²⁷ and 18.1% affected by severe malnutrition. The highlands are the worst affected areas (see maps in Annex 7).²⁸
28. Although the national rate of acute malnutrition among children under 5 is below the critical threshold of 10% (8.2% of Global Acute Malnutrition/GAM, including 1% of severe malnutrition²⁹), rates are critical in the three regions of Boeny (12.6%), Atsinanana (11.9%) and Vakinankaratra (11.9%). Acute malnutrition is particularly prone to seasonal variations and increases during the hungry season, and the national rate masks significant seasonal peaks and geographic pockets, especially in southern Madagascar. In 2015 and 2016, Ministry of Health screenings (MSP)³⁰ conducted in the seven drought-affected districts of southern Madagascar found average rates of 12%, rising to 30% in some communes³¹.
29. Food diversification and consumption have been correlated with acute malnutrition, which increases when food diversification and food consumption decreases.³² The rate of acute malnutrition among the adult population is worrying, as 27% of women of childbearing age were found to be suffering from malnutrition in 2010 (Body Mass Index/BMI < 18.5).³³
30. Micro-nutrients deficiencies is a serious public health issue in Madagascar that increases the risks of morbidity and mortality. High rates of vitamin A deficiency increase the risk of diarrhea and measles, and low iron intake among both children and adults is worsened by poor absorption due to worm infestation.
31. Feeding practices for infants and young children are poor: 65.8% of newborns are breastfed in the first hour after birth, and only 41.9% of children between 0 and 6 months are exclusively breastfed, with rates falling below 25% in some regions of Madagascar³⁴. Although a large majority of children are introduced to weaning food at 6 months onward, over half of them lack access to the required diversity of foods³⁵.
32. Madagascar has a National Nutrition Policy (PNN) and a National Action Plan for Nutrition (PNAN II) for 2012-2015. Its global objectives are to reduce chronic malnutrition among children under 5 from 50.2% to 42.8%, and ii) help reduce the mortality rate among under children 5 from 72 to 58 per 1,000 live births. Despite a strong commitment to fight malnutrition after joining the SUN movement in 2012, the resources to implement PNAN II have not been fully mobilized. Prevention activities with growth monitoring have been implemented in nutrition community sites since 1992 across the country through the National Programme of community based Nutrition (PNNC in French) supported by the

²⁷ INSTAT. 2012-2013. Madagascar Millennium Development Goals National Monitoring Survey (ENSOMD).

²⁸ Ibid.

²⁹ Ibid.

³⁰ Using Mid-Upper Arm Circumference measurement.

³¹ MSP/ONN/UNICEF : Screening of malnutrition in the south, April 2016

³² INSTAT. 2012-2013. Madagascar Millennium Development Goals National Monitoring Survey (ENSOMD).

³³ Demographic health survey, 2008-2009.

³⁴ INSTAT. 2012-2013. Enquête Nationale sur le Suivi des Objectifs du Millénaire (ENSOMD).

³⁵ Ibid

World Bank. A protocol for the treatment and management of acute malnutrition was developed in 2014, but governmental structures to manage acute malnutrition have not been fully operational.

33. The mortality rate for children under 5 has declined over the 20 past years and reached 62 per 1,000 live births in 2012. The main causes of death among children under 5 are pneumonia, diarrhea, malaria and neonatal complications.³⁶ Vaccination coverage for measles is still low, at under 50% in 5 regions and between 50% and 60% in 8 of the country's 22 regions. Use of antenatal and postnatal care remains low, and the maternal mortality rate was 478 per 100,000 live births in the period 2012-2013.³⁷
34. The country has a high incidence of tuberculosis (TB), with an estimated 60,000 people infected each year. In 2015, the prevalence of HIV/AIDS in Madagascar was low (0.4% for 15 to 45-year olds), and the country has adopted a National Strategic plan for 2013-2017 whose objective is to eradicate the epidemic.³⁸
35. Lack of infrastructures and services and poor access to water and sanitation are two of the main causes of high morbidity. Only 46% of the total population has access to potable water (35% of the rural population),³⁹ and sanitation coverage is very poor – just 33% of the population have access to improved or shared sanitation facilities.⁴⁰

1.2.5 Gender

36. Madagascar has made significant progress in term of gender equality, improving its ranking on the Global Gender Gap Index (GGGI) from 84th out of 115 countries in 2006 to 41st out of 142 countries in 2014. Greater equality between men and women is most evident in access to education and life expectancy.⁴¹
37. However, the country still has much to do in this respect: women's participation in the political life of the country is significantly lower than that of men,⁴² they have much less access to positions as senior officials and managers, and are paid less than men.⁴³ Certain cultural practices also undermine equality: for example, early marriage is still common, and most land is owned by men despite the adoption of a law intended to reverse this trend.
38. In 2000 the government of Madagascar approved a national policy of women empowerment 2000-2015, whose objective is to reduce disparities between men and women in both urban and rural areas.

1.2.6 International assistance

39. Madagascar is relatively dependent on international assistance. This accounted for 40% of the state budget before the crisis in 2009,⁴⁴ but many donors withdrew

³⁶ UNICEF, 2012: Madagascar at a glance.

³⁷ INSTAT 2012-2013, Madagascar Millennium Development Goals National Monitoring Survey (ENSOMD).

³⁸ UNAIDS, Country Progress Report 2015

³⁹ WHO/UNICEF JMP 2012.

⁴⁰ WHO/UNICEF JMP 2012.

⁴¹ Global Gender Gap Report (GGGP) 2014, Literacy female-to-male ratio: 0.91; enrolment in primary education ratio: 1; enrolment in secondary education: 1.01; enrolment in tertiary education ratio: 0.92; healthy life expectancy ratio: 0.97.

⁴² GGGR 2014: women in parliament female-to-male ratio: 0.3; women in ministerial positions ratio: 0.45.

⁴³ GGGR 2014: Wage equality for similar work female-to-male ratio: 0.62; legislators, senior officials and managers ratio: 0.58.

⁴⁴ Madagascar: Systematic country diagnosis. World Bank Group. August 2015.

their support during the crisis. The main donors since the government was established in April 2014 are the International Monetary Fund, the World Bank, the European Union and the African Development Bank – in conjunction with the African Fund for Development. The total cost of United Nation Development Assistance Framework (UNDAF) programs for 2015-2019 is estimated at US\$ 523.4m, with 53.1% to be mobilized.⁴⁵

40. The USA and France contributed 68.3% of bilateral aid between 2010 and 2013.⁴⁶ Other donors include Norway, Germany, Japan and China.⁴⁷

1.2.7 WFP interventions

41. WFP Madagascar has implemented a wide range of activities since 2009, and ensured continued support for emergencies and livelihoods rehabilitation, malnutrition prevention and school feeding programs in a context of political uncertainty and virtually non-existent government capacities. In its country strategy for 2015-2019, WFP has identified three strategic priorities in Madagascar:

- Increase household resilience and strengthen national and community capacity to manage risks.
- Increase access to basic social services and safety nets.
- Strengthen access to markets for smallholder farmers.

42. The aim is to achieve these priorities through two main capacity-building programs to support fragile state institutions in their transition to development and ensure sustainability: i) a development-oriented program (Country Program CP200733) that includes school feeding, nutrition, prevention activities and support for smallholders; and ii) PRRO 200735, which started in 2015, to address the needs of disaster-affected populations and help build resilience to recurrent shocks.

1.3 Operation Overview

43. PRRO 200735 was approved on 22nd December 2014. It covers the period from January 2015 to June 2017 (a total of 30 months), and is intended to contribute to WFP Strategic Objectives (SO) 1 ‘Save lives and protect livelihoods in emergencies’, and SO 3 ‘Reduce risk and enable people, communities and countries to meet their own food and nutrition needs’, as per the WFP strategic plan for 2014-2017.

44. PRRO 200735 is structured around three objectives: (i) to respond to immediate food security and nutrition needs and protect the livelihoods of populations affected by natural disasters; (ii) to strengthen the resilience of the most vulnerable men and women in food insecure communities facing recurrent shocks in the south-western, southern and south-eastern regions (resilience component); and (iii) to enhance the capacities of the government, cooperation partners and communities to prepare for, monitor, detect and respond to emergencies.

⁴⁵ mg.one.un.org

⁴⁶ Ministry for Economy and Planning Report on development cooperation, March 2015.

⁴⁷ For the period 2010-2013: Norway (US\$52,290,000, 8.2%), Germany (US\$37,944,000, 6%), Japan (US\$33,107,000, 5%), China (US\$29,833,000, 4.7%).

45. PRRO 200735 includes the following food assistance activities:

- Under the relief component, General Food Distribution (GFD)⁴⁸ and unconditional cash transfers to the most vulnerable households; followed by early recovery Food Assistance for Assets (FFA) through food or cash transfers aimed at restoring critical assets;
- Under the resilience component, FFA⁴⁹ is distributed (in kind or cash) using a three-pronged approach⁵⁰ to build the resilience of the most vulnerable and food insecure communities subject to recurrent shocks;
- The relief component includes a Blanket Supplementary Feeding Program (BSFP) to prevent malnutrition. This targets children under 2 years old and pregnant and lactating women (PLW) for three months, providing plumpy'doz for children (46g/person/day), and super cereal (200g/person/day) and oil (20g/person/day) for adults.
- The relief component includes a Targeted Supplementary Feeding Program (TSFP) to treat Moderate Acute Malnutrition (MAM). This targets moderately malnourished children under 5, providing plumpy'sup (92g/person/day) in accordance with the national protocol. This activity was initially included in the PRRO project document as a contingency plan, but was initiated during the first year of implementation.

46. PRRO 200735 also provides technical assistance and support to enhance the capacities of the Government, cooperation partners and communities to prepare for, monitor, detect and respond to emergencies.

47. The number of beneficiaries has consistently increased since 2015 as the food security situation in the south deteriorated due to the ongoing food crisis (see table below). As a result, two budget revisions (BR) were introduced: BR1 in April 2015 to incorporate BSFP activity into the operation, and BR2 in November 2016 (not approved at the moment of the evaluation) to increase the number of beneficiaries for all activities. BR1 increased the initial budget of US\$29,622,671 to US\$30,102,427; and BR2, whose main objective is to increase the capacity of the PRRO to respond to the food crisis, proposes a new budget of US\$112,198,933.

⁴⁸ According to the project document, rations for the GFD and FFA/Food under emergency component consist of cereals (400g/person/day), pulses (40g/person/day) and oil (35g/person/day), providing 1,954 kcal/day. However, oil was not distributed until October 2016.

⁴⁹ FFA rations under the resilience component provide 1,645 kcal/day, and are composed of cereals (400g/person/day) and pulses (40g/person/day).

⁵⁰ 1. Integrated context analysis (ICA), 2. Seasonal livelihoods programming (SLP), 3. Community-based participatory planning (CBPP).

Table 1: Planned beneficiaries for each activity

	Initial design			BR1	BR2 ⁵¹
	Boys	Girls	Total		
Emergency Response					
GFD+ FFA/Food	37,000	38,000	75,000	75,000	75,000
Unconditional cash + FFA cash	3,500	4,000	7,500	7,500	7,500
GFD/food only	0	0	0	0	628,790
GFD/cash only	0	0	0	0	380,000
FFA/food only	39,000	40,000	79,000	79,000	208,000
FFA/cash only	9,000	9,500	18,500	18,500	148,500
MAM Prevention	0	0	0	23,000	143,000
MAM Treatment	9,000	12,000	21,000	21,000	594,600
Resilience Building FFA	111,000	114,000	225,000	225,000	225,000
Total gross beneficiaries	111,000	217,500	426,000	449,000	2,410,390
TOTAL adjusted beneficiaries excluding overlap	208,500	217,500	426,000	449,000	1,555,790

Sources: Project document, BR1 and BR2.

48. According to WFP,⁵² PRRO 200735 received contributions of US\$45,111,031 on the 15th November 2016. This represents 150% of the budget approved in BR1, but only 40% of the budget modified in BR2. The main donors are the USA (45% of contributions received), the UN Central Emergency Response Fund/CERF (11%) and Switzerland (7%). Other donors are listed in the Operational Factsheet.

49. At the institutional level, PRRO 200735 is implemented in partnership with the Government of Madagascar (National Office of Disaster Risk Management - BNGRC, Ministry of Agriculture, Ministry of Environment, National Office for Nutrition/ONN). Field activities are implemented in partnership with the Regional Offices for Nutrition (ORN) and international and national NGOs.⁵³

⁵¹ BR2 was not approved at the moment of the evaluation

⁵²

http://one.wfp.org/operations/current_operations/ResUpdates/200735.pdf?_ga=1.56884909.629105264.1464039969

⁵³ Croix Rouge Malagasy (CRM), Centre Betania Ankasina (CBA), Association d'Organisation Santé Secours (ASOS), Harmonisation des Actions pour un Développement Intégré (Hardi), Conseil de Développement d'Andohatapenaka (CDA), Sandratra, FITAMI, Havelontika, Kiomba, Lovasoa, Manao, Maison du Petit élevage (MPE), AIM, Lycée Technique Tuléar, Caritas Madagascar (CM), Sampan'Asa Fampanandrosoana (SAF), Association AIDER, Adventist Development and Relief Agency (ADRA), Hiara Hampandroso (HH), Welthungerhilfe (WHH), Organe de Développement du Diocèse de Toamasina (ODDIT), Association Fihamy, Ampelamitraoka, Miaro, Multi Action pour le Développement Rural, (MADR), FITAHIA, Centre de Services Agricole (CSA), Mahafaly Mandroso (MM), Conseil Diocésain de Développement de Atsimo Andrefana (CDD), Tamafa, Tanora Vaovao Hitondra Fampanandrosoana (TVHF), Interaide, Action Contre la Faim (ACF), FIASA, FDC Tsihombe, AIDES, Association Tsimbina, LTP Alarobia, LTP Mahamasina

2 Evaluation Findings

2.1 Appropriateness of the Operation

2.1.1 Relevance to needs

Overall relevance of the operation

50. The initial overall strategy of PRRO 200735 was based on a dual approach with a strong focus on (i) building the resilience of communities that are exposed to shocks and vulnerable to food insecurity, and (ii) responding to the immediate need for relief following natural disasters that may occur during implementation of the operation.
51. This approach is relevant to Madagascar's high exposure to natural disasters (see Chapter 1.2, *Country Context*) and recurrent climatic shocks, which are one of the main causes of food insecurity in a country where this affects 31% of the population (WFP, 2014). A resilience approach that strengthens livelihoods, reduces vulnerability and mitigates the negative effects of shocks is relevant to this context.
52. The inclusion of a relief component is justified by the immediate need to assist affected populations that may lose their means of access to food and livelihoods; and may also contribute to the resilience objective by enabling affected populations to avoid negative strategies that help them cope with the effects of disasters but destroy the benefits of resilience activities.
53. The relief component mainly focused on people affected by sudden onset disasters, cyclones and floods, and did not explicitly target those affected by droughts. It initially targeted 60,000 persons per year. However, food security surveys conducted in 2013 and 2014 showed that people cited drought as the main shock they have to contend with,⁵⁴ and that the planned 60,000 beneficiaries fell well short of the actual number of people affected by severe food insecurity each year.⁵⁵ The regions worst affected by severe food insecurity in 2013 and 2014 were in southern Madagascar.⁵⁶ The project document does not include an explicit strategy for providing food assistance to the large number of severely food insecure households, most of which are affected by droughts in the south of the country. Although WFP CO maintains that FFA activities under the resilience component are supposed to help these households (225,000 target beneficiaries per year), stakeholder interviews and Seasonal Livelihood Programming (SLP) reports show that the lean season, when the severely food insecure population is most critically in need of assistance, corresponds with the rainy season. This is not the most appropriate time to implement FFA activities, partly because most asset categories have to be determined during the dry season,

⁵⁴ About 30% of households interviewed in the 20 regions where the 2013 *FAO/WFP mission to evaluate food security in Madagascar (CFSAM)* was conducted said that drought was the main shock they had to face. About 8% of interviewees cited cyclones as their main concern, and about 4% floods. In 2014, about 24% of respondents listed lack of/delayed rains as the first shock, followed by cricket invasion (about 10%) and cyclones (under 5% of interviewees).

⁵⁵ The CFSAM 2013 report shows that 2.7% of rural households are affected by severe food insecurity, representing 388,566 persons in the 20 regions where the survey was conducted. The 2014 CFSAM survey found that 5.5% of rural households were affected by severe food insecurity in the 8 regions where the survey was conducted.

⁵⁶ 2013: 1. Androy, 2. Atsimo Atsinanana. 3. Atsimo Andrefana. 2014: 1. Androy, 2. Atsimo Andrefana, 3. Atsimo Atsinanana.

and partly because the workforce available for FFA activities is limited in the rainy season. In addition to this, severely food insecure households do not necessarily have the available labor to participate in FFA activities. Other COs (such as Mauritania, see recent WFP portfolio evaluation⁵⁷) have decided to tackle this kind of situation by associating FFA activities focused on creating/rehabilitating relevant and sustainable assets during the most appropriate season (in the case of Mauritania: dry season which is not the lean season, such as in Madagascar) with conditional or unconditional transfers developed as a complementary seasonal safety net implemented during lean season and targeted on the most vulnerable households. Such an approach provides the advantage to tackling both short term and long term food security needs of the population, and to support expected long term impact on livelihoods preventing negative coping strategies through transfers during the lean season.

54. The context has changed since the operation was designed, as a large-scale L3 emergency developed in southern Madagascar after several consecutive years of drought exhausted local livelihoods and coping strategies. As noted in Chapter 1.2.3, *Food security and livelihoods*, the last figures show that an estimated 848,659 people need emergency assistance, with 330,000 in the IPC emergency phase. Given this change in context, it was relevant to redefine the strategy for the operation in order to focus on mobilizing all available resources to respond to this emergency, and target 1.5 million people for emergency assistance and recovery.⁵⁸

Treatment of Moderate Acute Malnutrition

55. Standardized Methodology for Assessment in Relief Transition surveys (SMART) conducted from 2005 to 2011 show acute malnutrition rates of 4% to 14% in southern Madagascar.⁵⁹ Although the global malnutrition rate was 8% when PRRO 200735 was designed in mid-2014, it was already acknowledged that the pattern of malnutrition in the area was affected by seasonal peaks caused by factors such as food insecurity and poor access to water. Therefore, it was highly relevant to include a contingency plan for activities to treat malnutrition, in anticipation of the situation deteriorating to Global Acute Malnutrition (GAM) rates of 10% to 15% and the need to introduce treatment of Moderate Acute Malnutrition (MAM) in accordance with international guidelines.
56. The situation did deteriorate, and in April 2015 an assessment on Severe Acute Malnutrition (SAM)⁶⁰ recommended that appropriate structures be put in place to treat moderate and severe malnutrition. The active nutrition screening campaign conducted in this period found that the prevalent GAM rate was above 12%, confirming the need to introduce treatment activities in at least three targeted regions in the seven most affected districts.⁶¹ The food security situation continued to deteriorate in 2016, with GAM rates of over 10% in most communes and districts. The continuous scaling up of treatment in 2016 is entirely relevant in view of the current situation and preliminary signs of a third difficult lean season in 2017 (see Figure 17 in Annex 8).

⁵⁷ *Mauritanie: Une évaluation du portefeuille du PAM (2011-2015)*, 2016.

⁵⁸ BR2.

⁵⁹ Récapitulation des enquêtes SMART à Madagascar de 2005 à 2011. Office National de Nutrition, Ministère de la Santé Publique, UNICEF. December 2011.

⁶⁰ *Évaluation des impacts de la sécheresse sur les moyens de subsistance et sur la vulnérabilité à l'insécurité alimentaire des population affectées, Région Androy, Anosy et Atsimo Andrefana*, April 2015.

⁶¹ Amboasary, Ambovombe, Tsihombe, Beloha, Bekily, Ampanihy and Betioky.

57. The major part of the intervention related to the treatment is achieved through the PNNC. These sites were already operational, but because their geographic coverage in the three southern regions is based on a set of criteria that take account of other factors apart from nutrition,⁶² coverage is not homogenous⁶³ or fully consistent with local needs for malnutrition treatment. At the end of 2015 Androy region had a higher concentration of sites (311 sites for 4 districts) than Atsimo Andrefana (339 sites for 9 districts). Only one NGO apart from ORN was contracted to implement MAM treatment,⁶⁴ and there are still gaps as communes and even districts without PNNC sites have not been targeted despite their high malnutrition rates. The lack of screening in some areas, especially Atsimo Andrefana, has also limited treatment activities.

Prevention of malnutrition

58. BR1, which was submitted and approved in May 2015 in response to the deteriorating situation and screenings in seven districts, introduced malnutrition prevention activities through a Blanket Supplementary Feeding Program (BSFP). The decision to implement these activities in the worst affected communes is fully consistent with the alarming nutritional situation (GAM rate above 15% in the most affected districts, and sometimes as high as 30% at commune level), and in line with international recommendations to address emergency situations during seasonal peaks. However, the timing of the intervention could have been better, as it was implemented from November 2015 to January 2016, before the peak in malnutrition and supposedly outside the lean season. It would have been more appropriate to intervene in April 2015 to break the 2015 peak, or at the beginning of 2016 to control the February-March peak. Nevertheless, it was operationally relevant to implement BFSP in most communes where GAM treatment was still not in place at the end of 2015.

59. Limited resources meant that malnutrition prevention activities could not be implemented in all areas where the GAM rate was above 15%. The malnutrition rates used to justify BFSP interventions are derived from screening campaigns, whose rates and nutritional data were questioned during the evaluation. The MSP and ORN expressed concerns about their reliability, and a comparison of data from PNNC registers and MSP screening results showed significant discrepancies between the malnutrition rates recorded by health community workers during door-to-door MSP screening campaigns and screenings by nutrition community workers (ANC in French) at PNNC sites.⁶⁵ The PNNC results always gave higher rates than the MSP findings, and there is no clear evidence as to which are most representative. WFP uses several criteria to target beneficiary communes and protect the BFSP: malnutrition rates from MSP screenings, the presence of operational partners, levels of food insecurity and the implementation of other WFP food distribution activities. It is relevant to combine vulnerability factors and operational criteria in order to maximize the efficiency of the operation in the neediest communes and address concerns about the reliability of the nutritional data.

⁶² Accessibility, vulnerability (food insecurity and nutrition indicators), number of children under 5 years old, occurrence of different events affecting vulnerability

⁶³ For example, almost 80% of the districts of Atsimo Andrefana and Morombe have PNNC sites due to previous post-cyclonic responses, and these sites are still operational.

⁶⁴ Action Contre la Faim in Betioky district.

⁶⁵ Results of PNNC screenings have been two or even three times as high as the results of MSP screenings.

60. Type of food distributed during the BSFP was adapted to nutrition needs of the targeted group and the objective to prevent further nutrition deterioration. Though the population was not familiar with RUTF products, there was a strong enthusiasm for plumpy doz distributed to children under 2 and therefore strong acceptance of the distribution. However, flour consumption is not part of food habits and women did not consider the product received (Super cereal and oil) with high interest. Though beneficiaries are satisfied with the distribution, food used for PLW requires strong and long term sensitization on nutrition to avoid sharing among the household and diversion from its prime objective.

General Food Distribution and Food Assistance for Assets – SO1

61. The proposed approach for responding to climatic disasters focused on sudden onset disasters. It was initially structured around GFD and FFA activities, and targeted 60,000 people per year. It was relevant to include this component in the operation, given the BNGRC's limited capacity to respond to disasters.⁶⁶

62. As noted above, the decision to scale up this component to respond to the large-scale food crisis in the south was justified by changes in the operational context and the population's needs, as 848,659 people were in need of emergency assistance at the end of 2016.

63. The initial combination of activities (GFD + FFA) is relevant, in line with BNGRC policy, and designed to avoid dependency and help beneficiaries become self-reliant as soon as possible. This was done through a short period of GFD (15 days), followed by 30 days of recovery activities through FFA. This approach is particularly appropriate for rapid onset disasters, as it allows for quick and timely unconditional assistance for households that have lost their capacity to access food and develop emergency coping strategies, and facilitates rapid recovery of their livelihoods.

64. This approach changed in the response to the food crisis in the south, shifting to longer-term unconditional assistance for several months before the next harvest in February-March 2017 followed by a recovery phase based on FFA activities, with the dual objective of restoring livelihoods and building resilience. All the beneficiaries interviewed during the evaluation mission confirmed that this new approach is relevant to the nature of this slow-onset crisis, the seasonal and agricultural calendar, and the depleted livelihoods and coping strategies of affected populations in the south.

65. WFP and cooperating partners applied two different methods for beneficiary household targeting. Until mid 2016, a community approach was used, based on triangulation of 3 beneficiary lists prepared by selection committees, women and men focus groups. Since mid 2016, a mixed method based on a quantitative household scoring and a community validation was applied. Interviews with WFP CO and partners showed there isn't a consensus on which method is the more efficient. Opinions are contradictory in terms of the accuracy of both methods (avoid inclusions and exclusions) and the quantity of efforts and time dedicated for beneficiary selection.⁶⁷ It is worth précising that the mixed method has not

⁶⁶ Evidence of the BNGRC's limited capacities emerged from interviews with the BNGRC and various stakeholders, especially NGOs and donors.

⁶⁷ For example, some partners consider that the application of a questionnaire for scoring is more objective than the interpretation of vulnerability by committees and focus groups, whereas other partners mention that beneficiaries don't tell the truth during the application of the questionnaire.

always be fully applied, as in several communities visited, the community validation of the beneficiary list based on the scoring did not happen.

Building resilience

66. The objective of building the resilience of people who face recurrent disasters and food insecurity was introduced following recommendations by the evaluation of the previous PRRO (200065).⁶⁸ As noted above, this component is relevant to the context of recurrent shocks (cyclones, floods, droughts, locust invasions) shown in Table 2 below.

Table 2: Recurrent shocks in Madagascar cited in CFSAM surveys

	CFSAM 2011	CFSAM 2013	CFSAM 2014	CFSAM 2015	2016
Regions most exposed to drought	South (Androy, Anosy, Atsimo Andrefana, Atsimo Atsinanana)	Irregular rainfall with prolonged episodes of drought across the territory	Irregular rainfall in the south	Androy, Anosy (Amboasary district) linked to El Niño	South, linked to El Niño
Regions most exposed to floods and cyclones	Southeast (Bingiza)	Northeast (Felleng) and Southwest (Haruna)	Northwest (Boeny)	Atsimo Andrefana, Atsimo Atsinanana (Chezda and Funji)	
Regions most exposed to locust invasions		Southwest	South (Androy, Atsimo Andrefana)		

Sources: CFSAM 2011, CFSAM 2013, CFSAM 2014, CFSAM 2015 reports

67. These recurrent shocks affect local livelihoods, increase the prevalence of food insecurity and undermine possible coping strategies in regions that are most exposed to disasters.⁶⁹ Beneficiaries interviewed in southern Madagascar reported a systematic and drastic decline in livestock capital in recent years, and said that selling animals is no longer a viable coping strategy for many households.

68. The operation's resilience approach is based on WFP's three-pronged approach and FFA activities. Activities that have been supported include water management, feeder roads (dirt tracks), irrigation infrastructures, developing farmland and reforestation. Interviews with beneficiaries showed that all these activities are relevant to their priorities and needs, and can help build resilience by improving natural resource management, intensifying and diversifying livelihoods, and generating income.⁷⁰

⁶⁸ Madagascar, *Protracted, Relief and Recovery Operation (PPRO) 200065 'Response to Recurrent Natural Disasters and Seasonal Food Insecurity in Madagascar': An evaluation of WFP's Operation July 2010 – November 2013*; IRAM, 2014.

⁶⁹ The proportion of households in Androy affected by severe food insecurity was 15.6% in 2013, 27.08% in 2014, 32.3% in 2015 and 48% in 2016. In Atsimo Andrefana it was 8.9%, 11.11%, 6% and 16% in the same periods; and in Atsimo Atsinanana it was 10.8% in 2013 and 0% in 2014 and 2015, although moderate food insecurity increased in the period.

⁷⁰ Water scarcity is the main priority across the whole of southern Madagascar. Many *fokontany* (villages) are isolated, particularly in the rainy season, which limits their access to markets and opportunities to sell their produce. Improved land management practices (such as basket compost) can improve yields and make crops

69. The operation initially targeted 225,000 beneficiaries per year. This was probably too ambitious for an activity that was new to the CO and requires internal and external (cooperating partners) capacity building (which is planned, see Chapter 2.3.1, *Internal factors*).

Modalities of assistance

70. WFP introduced cash-based transfers in its operations in 2012, following an initial feasibility study. Pilot projects implemented in 2012 and 2013 tested various transfer mechanisms, starting with person-to-person transfers and moving on to SMS. In 2015 the CO signed a three-year contract with the mobile telephone operator, Airtel.

71. However, cash-based programming still faces a number of challenges: limited coverage by mobile phone operators, the fact that many poor households do not have a phone with a Sim card, and above all the poor supply to many markets, especially secondary markets at the district and commune levels, that depend on seasonality. This was confirmed in interviews with beneficiaries, which revealed that the only food commodity available on many secondary markets during the evaluation mission was cassava. However, according to WFP CO, beneficiary often go to primary markets that are better supplied in order to access a larger choice at lower price.

72. WFP has adopted a cautious approach, progressively scaling up cash transfers for project-based activities (i.e. activities covered by field-level agreements with cooperating partners) that include systematic feasibility, market and security studies. This approach is relevant to the challenges and risks noted above. The scaling-up process will continue with information technology and financial feasibility studies (already undertaken), and a market study in southern Madagascar. The ultimate objective is to apply systematically an analysis of the most appropriate modality.

2.1.2 Coherence with WFP policies

73. PRRO 200735 is formally aligned with Strategic Objectives (SO) 1 and 3 of the **WFP Strategic Plan for 2014-2017**.⁷¹ It also includes measures to help restore livelihoods after emergencies (SO 2) though a combination of GFD and FFA activities. The two main focuses of the operation are building resilience and developing capacities, which are two crosscutting objectives of the 2014-2017 plan.

74. WFP's four-pillar **Nutrition policy**⁷² was approved in February 2012.⁷³ PRRO 200735 is consistent with Pillars 1 and 2. Although the operation is globally coherent with the policy guidelines for Pillar 1, it does not comply with the targeting guidelines as PLW should be included in the Targeted Supplementary Feeding Program (TSFP), and this group was only targeted through a five-month partnership with ACF in one district.

more resistant to climatic variability, while reforestation can help protect land from degradation and support livelihood diversification.

⁷¹ SO1: *Save lives and protect livelihoods in emergencies*. SO3: *Reduce risk and enable people, communities and countries to meet their own food and nutrition needs*.

⁷² Pillar 1: Treating moderate acute Malnutrition; Pillar 2: Preventing acute malnutrition; Pillar 3: Preventing chronic malnutrition-stunting; Pillar 4: Addressing micronutrient deficiency.

⁷³ Nutrition at the World Food Programme. Programming for nutrition-specific interventions, December 2012.

75. Prevention activities are consistent with WFP Nutrition policy, particularly Pillar 2 in terms of targeting, justification and intervention modalities. But despite the alarming situation described in Chapter 1.2.4, *Nutrition and health*, PRRO has not developed Pillars 3 and 4 to prevent stunting and micronutrient deficiencies. While stunting is being addressed by CP 200733, PRRO could have developed Pillar 3 through the BSFP, which works through the 1,000-day window of opportunity and could provide an entry point to enhance activities to prevent stunting.
76. The GFD could have done more to tackle micronutrient deficiency (Pillar 4), as this was only done for a short period with the introduction of nutributter for children between 6 and 59 months old.⁷⁴
77. WFP formulated its **Resilience Policy** in April 2015. Its principles are based on multi-level, multi-sectorial, multi-stakeholder and context-specific interventions. PRRO 200735 is consistent with these principles as it planned to strengthen the resilience of the most vulnerable men and women in the regions most exposed to food insecurity and shocks, through the three-level WFP approach⁷⁵ and partnerships with the government and other stakeholders.
78. WFP policies on **Disaster Risk Reduction (DRR)** and **Climate Change (CC)**, which were formulated in 2011, focus on food assistance to vulnerable households during and after disasters, and emphasize the importance of participatory approaches, partnerships with governments and UN agencies, preparedness for emergencies, and support to governments in developing DRR policies and programs. Two objectives of PRRO 200735 are in line with the DRR policy: (i) to respond to immediate nutrition and food security needs and protect livelihoods of populations affected by sudden disasters; and (ii) to strengthen government, partners' and communities' capacities to prepare, follow, detect and respond to emergencies. The objective of building resilience is in line with the policy on climate change.
79. WFP has had a **Gender Policy** since 2009, which has been updated for the period 2015-2020. Its goal is to “*enable WFP to integrate gender equality and women’s empowerment into all of its work and activities, to ensure that the different food security and nutrition needs of women, men, girls and boys are met.*” This goal is articulated in four objectives.⁷⁶ The design of PRRO 200735 is closely aligned with these four objectives. The project document provides information about the specific needs of women, and the program strategy takes a gender-sensitive approach at every stage of the operation. Specific measures include implementing the gender-sensitive three-pronged approach to resilience building activities, enhancing women’s participation in community planning and decision making through equal participation in committees, including a gender clause in field-level agreements (FLA) with partners, and measuring gender and protection outcome indicators.

⁷⁴ Nutributter was added to GFD in July 2016 to distribute remaining stock from the MIARO project.

⁷⁵ The three-level approach includes the national level with the realisation of the Integrated Context Analysis (ICA), the regional level with the realisation of the Seasonal Livelihood Programming (SLP) and local level with the Community-based Participatory Planning (CBPP).

⁷⁶ 1: *Food assistance adapted to different needs.* 2. *Equal participation.* 3. *Decision-making by women and girls.* 4. *Gender and protection.*

2.1.3 Coherence with national policies

80. **Nutrition.** The National Nutrition Policy is implemented through the Programme National d'Action pour la Nutrition (PNAN) II, which is being revised. The 2012-2015 PNAN addresses malnutrition issues through five strategic directions, and PRRO 200735 is consistent with recommended interventions in axis 4 relating to disaster preparedness and emergency response. The WFP CO was closely involved in developing the sectoral contingency plan in collaboration with BNGRC, ONN and national and international agencies working in the nutrition sector. Treatment and prevention activities undertaken through PRRO follow the nutrition contingency plan developed by the nutrition cluster, and are therefore coherent with the BNRGC contingency plan.⁷⁷
81. The PNNC started treating moderate malnutrition in community sites in July 2015, acting under the auspices of the ONN. The PRRO provides appropriate food supplies and training to support treatment in these centres in accordance with national nutrition protocol, and to strengthen ONN and its operations through capacity building. The PRRO approach to nutrition activities aims to strengthen national institutions, especially for treatment, and the programming is closely in line with national policies.
82. **Resilience, Disaster Risk Management, Climate Change.** Madagascar does not have a specific policy on resilience. In September 2016 the BNGRC prepared a rehabilitation and resilience plan for the districts worst affected by the drought in order to address the current food crisis in the south. Activities in PRRO 200735 contribute to two components of this plan (rehabilitation following drought and environmental degradation, economic rehabilitation and reduction of structural vulnerabilities).
83. In terms of DRR, PRRO is consistent with strategic axes 1, 2, 3, 4 and 5 of the National Strategy for Disaster Risk Management (October 2014 version).⁷⁸ The collaboration with the BNGRC also shows that WFP is willing to align its interventions with national priorities.
84. The PRRO 200735 project document does not refer to the 2010 national policy on climate change, and WFP does not collaborate with the CC department in the Ministry of Environment. However, PRRO resilience activities do address climate change adaptation issues, even if this is not done explicitly.
85. **Rural Development.** The PRRO project document does not mention rural development policies (agriculture, livestock, fisheries and environment). However, PRRO resilience activities do contribute to Specific Objective 3 of the Sectorial policy letter for agriculture, livestock and fisheries (LPAEP, April

⁷⁷ Contingency plan for the Grand Sud, period 2013-2015.

⁷⁸ Strategic axis 1: *The integration of DRR and DRM in development national policy and sectoral policies is effective, and the legal and institutional frameworks are improved, reflecting the willingness of decision makers.*

Strategic axis 2: *Major risks for the whole territory are known and assessed, the multi-risk national early warning system is strengthened, and stakeholders' capacities are reinforced in terms of equipment and staff training.*

Strategic axis 4: *Interventions on underlying risk reduction at national and local levels are reinforced and decrease the vulnerability of the population to these risks in coming years.*

Strategic axis 5: *Technical tools for preparedness are improved and stakeholders' capacities in preparedness and disaster prevision are strengthened.*

2015),⁷⁹ and the national policy on environment and sustainable rural development (PNEDD, September 2015) objective of achieving sustainable natural resource management.

86. Madagascar formulated its **National Social Protection Policy** in 2015. The initial design for PRRO is strongly consistent with the first of the four axes of this policy (*Increase income of the poorest*) and its three strategic objectives. The first of these objectives includes scaling up social transfers in cash or kind in order to respond to and recover from shocks and disasters. The second objective aims to use the labor-intensive (HIMO in French) approach to recover from shocks and build resilience; and the third objective includes support for income generation and vocational training for the most vulnerable. Food for Training (FFT) activities undertaken by the operation contribute to this third objective.

2.1.4 Coherence with other interventions

87. PRRO 200735 contributes to the first priority axis of the 2015-2019 UNDAF: *Economic recovery through the establishment of a stable social and political environment, maintenance of macro-economic stability and recovery of an attractive business environment*. One of the intended effects of this axis is to increase the resilience of the most vulnerable populations.

88. UNICEF is the cluster lead agency for nutrition. The evaluation found that coordination and communication between WFP and UNICEF on nutrition activities is generally good. WFP is regularly and actively engaged in cluster meetings and there is continuous dialogue between the two agencies, especially in Antananarivo and more recently at the regional level. PRRO activities are coherent with UNICEF interventions, as it tackles MAM while UNICEF addresses SAM in the same areas. However, there is a lack of coordination at the field level, particularly with the reference system for MAM and MAS treatment programs affecting the treatment of global malnutrition as a whole:

- Several stakeholders said that some children referred to health centres (CSB in French) for treatment under SAM criteria do not reach these structures - better monitoring and information sharing is needed to improve this situation.
- The lack of continuity between SAM and MAM treatment is a major issue: the protocol for MAM treatment is based on a two-month cycle and does not allow admission at any time, which prevents children who have been cured and discharged from SAM treatment to continue recover from MAM. Therefore, the protocol for MAM treatment in PNNC sites supported by WFP is not coherent with a global approach to acute malnutrition treatment and consideration of both severe and moderate forms.

89. The operation is highly consistent with the **United Nation Population Fund** (UNFPA) emergency programming: activities to support reproductive health are undertaken in the same targeted communes as PRRO 200735, and complement the nutritional support for PLW beneficiaries of malnutrition prevention activities. Synergies could be reinforced to make better use of the 1,000-day window of opportunity through improved coordination to ensure that WFP beneficiaries access appropriately to health services supported by UNFPA.

⁷⁹ To contribute to food and nutritional security and reduce risks for the most vulnerable.

90. Several Non Governmental Organizations (NGO), such as GRET, ADRA, CRS, AIM and ACF, are implementing nutrition activities in the same area. Their prevention activities (especially sensitization) are in synergy with WFP programming as they enhance nutrition awareness in the area. However, the treatment activities use different products, and despite efforts and communication to avoid geographic overlap, more needs to be done to harmonize MAM treatments at the communal level.⁸⁰
91. WFP and FAO have complementary approaches to support for resilience in the south. FAO works on long-term agricultural adaptation to climate vulnerability, and has adapted its strategy to the changing context since the PRRO began. Both agencies have switched to emergency and recovery programming, using a complementary approach that includes preparing a joint concept note on the response to the crisis in the south.
92. In response to the food crisis in the south, the **World Bank** has donated US\$35 million through the social safety net program managed by the Development Intervention Fund (FID), ONN and the Ministry of Population. This intervention will run from December 2016 to September 2017, providing cash transfers for 45,000 households in 39 communes of 5 of the 7 worst affected districts, and will include relief and livelihood rehabilitation transfers. It will then evolve into a two-year human development cash transfer program. This intervention complements the WFP response in the south, although there are concerns about coordination issues, possible duplications and gaps and harmonized approaches.⁸¹

2.2 Results of the Operation

93. Overall figures

94. Table 3 below shows the global figures for the operation's achievements in terms of beneficiaries, food and cash distributed. The target figures are taken from BR1, as BR2 has yet to be approved. More details on each activity are provided in the following chapters.

Table 3: Total beneficiaries assisted and food and cash distributed

	2015			2016 (January to September)		
	Target	Achieved		Target	Achieved	
		Number	%		Number	%
Beneficiaries						
Men	154,350	166,632	108%			
Women	160,650	168,801	105%			
Total	315,000	335,433	106%	330,000	381,408	116%
Food (mt)	11,815	6,886	58%	9,617	5,939	62%
Cash (US\$)	1,173,000	364,215	31%	1,231,500	410,917	33%

Sources: 2015 - Standard Project Report (SPR) 2015; 2016 - RB1 for target figures, actual figures are extracted from comments provided by WFP CO.

95. The planned number of beneficiaries was exceeded in both 2015 and 2016, largely because of the response to the food crisis in southern Madagascar. Conversely,

⁸⁰ GRET and AIM were already implementing MAM treatment out of PNNC sites using fortified local flour (kobain ++) rather than plumpy sup. Their treatment is not limited to two months, as it is in PNNC sites.

⁸¹ In 11 communes out of 39, WFP transfers 60,000 ariarys per household per month, based on the estimated cost of the food basket, while FID will transfer 30,000 ariarys. Moreover, according to the FID, some communes will receive several supports whereas others will not be covered.

the amounts of food and cash transferred in 2015 were significantly lower than the target due to the lack of funding for much of the year. Good progress is being made in distributing the planned quantities of food in 2016, but once again cash transfers have been affected by gaps in funding.⁸²

2.2.1 Capacity building in Disaster Risk Management

96. Most DRM capacity-building activities were included in a project funded by the United Kingdom Department for International Development (DFID), which began in early 2014. All the activities planned under PRRO 200735 within this project have been undertaken, mainly in 2015, which represents a good level of effectiveness:
- Support in getting three regional risk management centers up and running: donations of communications and computer equipment, training on managing the centers.
 - Support for the creation of local disaster risk management committees, with training for committee members and donations of communications equipment. WFP reported (SPR 2015) that 2,000 people representing 950 committees were trained in 2015 (and supported the creation of 1,500 more committees in 2014).
 - Support to the BNGRC at national level: donation of two speedboats for rapid assessments and responses in flood-prone areas.
97. The BNGRC used the two speedboats to respond to the floods in the Antananarivo area in April 2015. However, the evaluation team was unable to gather evidence of its effect on the BNGRC's capacity to respond to this crisis in a timely manner.
98. Support for regional and local disaster risk management committees and centers: these bodies have not been activated since WFP activities started as there have not been any disasters in this period. As noted in Chapter 1.1, *Evaluation features*, the evaluation team did not have the opportunity to visit the regions where these activities were implemented, and was therefore unable to collect primary information on their outcomes. No complementary secondary information is available.
99. In addition to the DFID project, WFP has actively supported the BNGRC with funds and technical assistance on the design of the strategic response plan to the food crisis in southern Madagascar, and updating national and regional contingency plans for floods and cyclones. All stakeholders regard these plans as institutional references.
100. As planned in the PRRO 200735 project document, WFP has helped the BNGRC reactivate the Early Warning System (EWS) in southern Madagascar. This activity led to the formulation of a reactivation project that takes account of the lack of sustainability of the previous EWS supported by the European Union. However, this project has yet to be funded and implemented, and the EWS remains inactive.

⁸² The main contribution to the PRRO budget comes from USAID, through in-kind donations.

2.2.2 Treatment of Moderate Acute Malnutrition

Outputs

101. Beneficiaries reached and food distributed for MAM treatment activities are presented in Table 4 below.

Table 4: Planned and actual figures for beneficiaries reached and food distributed for Nutrition treatment

	2015			2016 (up to August)		
	Planned	Achieved	%	Planned	Achieved	%
Children under 5	5,000	17,888	279%	30,000	13,000	43%
PLW	2,000	191	10%	6,000	0	0%
Total	7,000	18,079	295%	36,000	13,000	36%
Food (t)	80,40	44,91	60%	80	36,50	46%

Sources: 2015: Standard Project Report 2015 (SPR); 2016: Second budget revision documents (draft)

102. MAM treatment started in Betioky district in July 2015, through a partnership with the NGO Action Contre la Faim (ACF). Coverage of other districts and regions began later, in November, through the partnership with the Regional Office for Nutrition (ORN). Therefore, despite screening results and several reports alerting actors to the need to implement treatment activities, MAM treatment in the worst affected areas did not start until November 2015. This was mainly due to the lack of partners able to undertake this activity on a sufficient scale to address the needs of affected communities.

103. The number of planned beneficiaries for 2015 was exceeded due to the deteriorating situation in southern Madagascar and large-scale enrolment of children in the treatment program in November and December. However, the PNNC does not consider PLW for malnutrition treatment, and only 191 PLW were registered in 2015 through the partnership with ACF in 10 health centres in Betioky district. Treatment has recently been incorporated into routine PNNC activities, rapidly increasing the caseload. The evaluation found that despite the provision of training, PNNC sites still lack the capacity to include PLW in the program,⁸³ especially as the protocol for them differs from the protocol for children under 5 (admission and discharge criteria, products, duration of treatment). This may impact negatively on the quality of routine activities, including the treatment of children. As long as there is a high caseload of under 5 children in the program, it would be more appropriate to establish temporarily partnerships with NGOs for the treatment of PLW, as it was done in 2015.

104. Only 43% of the planned number of beneficiaries had been reached by August 2016. However, a major effort to scale up activities began in September, with additional PNNC sites (most notably in Atsimo Andrefana), and new partnerships with NGOs are planned at the end of the year to increase the number of beneficiaries.

⁸³ There is only one ACN in place in each PNNC site, with one NGO partner with one field monitor paying two visits /site per month (one field monitor for 10 sites). The PNNC also carry out routine activities and MAM treatment has been added. There are still some mistakes in data registration and protocol; new registers with additional data are not yet in place and will require more attention, so the capacity to absorb a new activity is limited.

105. Only 43% of the planned tonnage of food was distributed in 2015, even though far more beneficiaries were reached than planned. This is mainly due to (i) children enrolled in late November who did not receive all their rations by the end of the year, (ii) the low percentage of women entitled to larger quantities of food than children and (iii) the significant proportion of children that receive only two rations as above mentioned.

Outcomes

Table 5: Outcome indicators for MAM treatment

	Final project target	2015	2016
Coverage	>50		70
Recovery rate	>75	83	73
Default rate	<15	17	
Mortality rate	<3	0	
Non-response rate	<15	0	

Source: 2015: SPR 2015, 2016: Post Distribution Monitoring⁸⁴

106. The majority of beneficiaries were still receiving treatment at the end of 2015, and the coverage rate could not be reported in SPR 2015. The post-distribution survey conducted in May 2016 found a coverage rate of 73%, which is above the target value of 50%. This can be explained by activities implemented on PNNC sites near communities (no further than a 10-minute walk for most women) and regular visits to those sites before the onset of treatment activities. However, the methodology used data collected from retrospective household survey and secondary data from ORN and PNNC and both of them are not fully reliable⁸⁵. The survey acknowledged the poor reliability of the indicator⁸⁶ due to the methodology used

107. The SPR reported a recovery rate of 83% in 2015. However, data for this indicator were only collected in the district of Betioky, where the activity was carried out for a short period with support from ACF, and cannot be counted as representative of the whole activity. This is also the result from November, while recovery rates of 50% and 57% were registered in ACF statistic reports for September and October.

108. The recovery rate reported in the post-distribution monitoring (PDM) in May 2016, which was based on the ORN database, was 70%.⁸⁷ This is below the target of 75%, and WFP stakeholders reported that this indicator was lower at the beginning of the year. The performance of this indicator is limited by the simplification of the protocol and use of treatment duration (2 months) as discharge criteria without any consideration of anthropometric measures, as some children still have MUAC < 125 when they are discharged. Furthermore, observations of registers in PNNC sites found that it is difficult to get an accurate value for this indicator. WFP introduced new registers to collect MUAC

⁸⁴ *Revue documentaire et enquête auprès des ménages- MAM traitement USAID PDM, May-June 2016.*

⁸⁵ 41% of the household surveyed did not remember the nutritional status of the child which biased the results. ONN/PNNC data used to collect the global malnutrition prevalence are issued from screening at PNNC sites and do not give a representative rate.

⁸⁶ « Le calcul du taux de couverture issue de l'étude est vraiment à prendre avec beaucoup de précaution car les résultats présentent probablement un biais », page 19, *Revue documentaire et enquête auprès des ménages – MAM traitement USAID-PDM, Mai-Juin 2016*

⁸⁷ *Revue documentaire et enquête auprès des ménages- MAM traitement USAID PDM, May-June 2016.*

measurements at discharge, which should increase the reliability of this indicator. However, new registers were not in place and used yet at the moment of the evaluation.:

- MUAC is sometimes measured three weeks before the end of treatment rather than at the time of discharge;
- The post-distribution monitoring found that only 49% of all beneficiaries receive more than two rations. Although it is not mandatory, this indicator confirms observations of the register books and discussions with beneficiaries. Some children stopped the treatment and others missed one or two of the four distributions. This has a negative impact on the recovery rate and makes it harder to calculate.

109. The low percentage of children receiving more than two rations indicates that the program needs more effectiveness, as these children are not cured and will be re-admitted for a second two-month cycle.

2.2.3 Prevention of malnutrition

Outputs

110. Beneficiaries reached and food distributed for malnutrition prevention activities are presented in Table 6 below.

Table 6: Planned and actual beneficiaries reached and food distributed: Nutrition prevention (BSFP)

	Planned 2015- 2016	Achieved			
		2015	2016	Total	%
Children under 2	15,000	10,077	8,983	19,060	127%
PLW	8,000	5,746	15,711	21,457	268%
Total	23,000	15,853	24,694	40,517	164%
Food (t)	221,85	50,25	NA	NA	NA

Source: 2015 - Standard project report 2015; 2016 - Data communicated by CO

111. The BSFP started at the end of 2015 and eventually exceeded the target set in BR 1 during the first semester of 2016, with a global achievement of 264% as of May 2016. Distributions were made into two phases: the first phase in November and December 2015 targeted 20 communes, and the second phase with additional resources ran from March to May 2016 targeting 14 communes according to Nutrition CO records. The amount of food distributed in 2015 is low compared with the number of beneficiaries as the distribution had not been completed at the end of 2015.

112. The proportion of PLW increased in 2016 to the extent that the actual ratio of children to PLW reversed the target ratio. Of the 15,711 women targeted in 2016, 7,124 are from the Miaro stunting project and were registered under the PRRO project.⁸⁸

⁸⁸ Due to the high prevalence of acute malnutrition, from March to June 2016, children under 2 from the MIARO project received plumpy doz instead of nutributter adapted to prevent stunting. PLW received the same products (super cereal and oil) but have been registered as PRRO beneficiaries. The proportion of women in this project is high.

113. The WFP CO noted that although it would have been relevant to start the BSFP before treatment was in place, its implementation was limited by the fact that some of the resources requested in BR 1 were unavailable in 2015.

Outcomes

Table 7: Outcome indicators for MAM Prevention

	Final project target	2015	2016
Coverage	> 66	95.3	84.1
Proportion of target population who participated in adequate number of distributions	> 75	84.3	66

Source: 2015 - SPR 2015; 2016 - Coverage and participation survey conducted in May 2016.⁸⁹

114. BSFP activity at the commune level covered all *fokontanies* (villages in Malagasy). The coverage indicator calculated through the coverage survey conducted in May 2016 is 84.1%, exceeding the target value of 66%.⁹⁰ Discussions with beneficiaries showed that this high level of participation was achieved thanks to the partnership with a local NGO that already worked with local people in the commune. The NGOs performed well in terms of:
- Informing local people about the distribution;
 - Establishing a list of beneficiaries in collaboration with key stakeholders such as the village chief and the CSB and ACN midwife (where there is a PNNC site). No major difficulties were encountered during the listing as the criteria were easy to control (health center records of the children's age, and stage of the woman's pregnancy).
 - Setting up an appropriate number of distribution points in the commune to minimize the distance beneficiaries had to walk (most beneficiaries walked for less than 3 hours to pick up their rations).
115. The proportion of the target population that participated in an adequate number of distributions just reached the target of 66%. Although some respondents to the coverage survey said that this was due to sickness, needing to work, or lack of information, this also reflects a lack of interest in these distributions noted during the focus group discussion, which is discussed in chapter 2.1.1 *Relevance to needs* (consistency with food habits).
116. The implementation of the BSFP went well, as the three rounds of distribution generally kept to the timetable and rations, apart from one case identified during the evaluation.⁹¹ However, the number of beneficiaries was estimated by WFP and the evaluation found that the partner NGO sometimes had to exclude children with highest MUAC so that the number of children matched the set number. For further distribution in the same communes, WFP and partner will better collaborate on the estimation of beneficiary figures to avoid exclusion.

⁸⁹ *Post-distribution monitoring surveys of WFP interventions.*

⁹⁰ *Post-distribution monitoring surveys of WFP interventions.*

⁹¹ Due to a shortage of plumpy doz, the NGO MADR only distributed super cereal with oil in the first round in four communes of Ampanihy; in the second round, which was delayed, plumpy doz was given to a limited number of children and super cereal was not distributed, so PLW were not targeted. There was no third round.

117. Although the aim of the BSFP is to prevent rather than cure GAM, it had a positive impact on MUAC, as WFP CO data analysis shows that the proportion of children with an MUAC >125 rose from 75.71% to 86.20% between the first and third round.

2.2.4 Response to emergencies (SO 1)

118. FFA activities in PRRO 200735 contribute to SO1 and SO3, with a short-term focus on livelihood recovery for SO1, and a longer-term intervention based on WFP's three-pronged approach focused on building community resilience for SO3. SO1 FFA activities followed the planned approach, while a mixed approach was used for SO3 activities due to the changing context and the food crisis in southern Madagascar. WFP and its partners started the process of building resilience and engaged in SLP and community-based participatory planning (CBPP) in some communities, but prioritized the implementation of short-term FFA activities to transfer food rations using the same model as the SO1 approach, while FFA resilience activities should prioritize building relevant and sustainable assets.

119. WFP reported SO1 and SO3 FFA activities separately. The activities reported as SO3 were implemented in communities where SLP and CBPP processes were undertaken. However, as noted above, once the identification process had been completed there was no difference in the process used to implement FFA activities for SO1 and SO3. In other words, FFA activities were not implemented in accordance with the whole resilience approach. In areas and communities where SLP and CBPP have been undertaken, these processes that include a programming for "normal" and "bad" years, were used to identify the assets that have been supported in response to the recurrent drought in the south. However, they did not contribute to the planning of the scaling-up of the response to the crisis in 2016, as they only consider an intensification of conditional transfers during bad years. The decision to shift to a prolonged phase of unconditional transfers in the south, following a third consecutive agriculture season failure in 2016 was taken after these exercises were carried out.

120. To ensure that these observations are clear and coherent, and to avoid repetitions, the outputs and outcomes of FFA activities for both SOs are presented together in this chapter as they are considered to have mainly contributed to SO1. Chapter 2.2.5, *Resilience building*, is then mainly dedicated to information on the three-pronged approach used to implement activities.

Outputs

121. The beneficiaries reached and quantities of food and cash distributed for GFD and FFA activities (both SO1 and SO3) are presented in Table 8 below.

Table 8: Beneficiaries reached and food and cash distributed through GFD and FFA activities

	Target/year*	2015		2016 (January to September)	
		Number	%	Number	%
Beneficiaries					
GFD	27,500	80,888	294%	143,425	521%
FFA SO1	60,000	325,263	547%	153,250	257%
FFA SO3	225,000	38,943	17%	73,137	32%
Food (mt)					
SO1 (GFD+FFA)	956	5,597	585%	5,195	543%
SO3 (FFA)	8,513	529		707	
Cash (USD)					
SO1 (GFD+FFA)	120,000	211,380	176%	220,193	183%
SO3 (FFA)	1,111,500	139,117	12%	181,936	16%

Sources: For target values, BR1; for actual values, data provided by WFP CO.

122. The figures for beneficiaries reached and food and cash distributed exceeded the targets for emergency responses for DGV and FFA activities; while figures for SO3 beneficiaries reached and food and cash distributed fell well short of planned levels. This is mainly due to the occurrence of two emergencies since the operation began:

- WFP responded to floods in several regions of Madagascar between January and April 2015, especially in the Antananarivo area where 46,000 of the 50,000 displaced people reported by the government received GFD assistance. 16,000 beneficiaries also benefited from FFA livelihood recovery activities.
- At the beginning of 2015, WFP started FFA assistance for people affected by the drought in the south during the 2014-2015 farming season. There have been continuous emergency activities in the south since the beginning of the operation. In July 2016, the response switched to GFD as the food security situation worsened following the failure of the 2015-2016 farming season. As noted in Chapter 2.1.1, *Relevance to needs*, WFP now aims to reach 1.1 million GFD beneficiaries by March 2017, and will follow this up with FFA livelihood recovery activities. This approach is relevant to the situation.

123. Most activities in the emergency response component have been implemented in the south through FFA interventions. Table 9 below shows the type and number of assets created/rehabilitated in 2015 (the information for 2016 is not yet available).

Table 9: Assets created/rehabilitated through SO1 and SO3

Type of asset	Planned	Achieved	% of achievement
Hectares (ha) of land covered by rehabilitated irrigation schemes	4,180	1,159	28%
Ha of crops planted	2,400	2,468	103%
Ha of forest planted	550	288	52%
Km of feeder roads rehabilitated and maintained	160	139	87%
Volume (m ³) of check, dams and gully rehabilitation structures	45,000	36,658	81%

Source: SPR 2015

124. During field visits the evaluation team found that the quality of assets created/rehabilitated in 2015 and 2016 varied. Despite efforts to improve the quality of FFA activities (see Chapter 1.3.1, *Internal factors*), a significant proportion of assets still seem to be of sub-standard quality. This is particularly true of water management assets, for which WFP has had to plan corrective works.

125. In most (but not all) cases, measures have been taken to ensure that the assets are sustainable, mainly by creating and training management committees. However, as all these activities were implemented in a short two- to three-month process, with no follow-up on the use and maintenance of the assets, there is no guarantee of their sustainability. Nevertheless, some positive practices were observed, such as maintenance works already carried out by beneficiary communities.

Outcomes

126. Measurements of the outcomes for both components of emergency response and resilience building are presented in Table 10 below.

Table 10: Outcome indicators for response to emergencies and resilience building

Indicators	Intervention zones	Targets	Measures	
			April/August 2015	January 2016
% of households with poor food consumption score (FCS)	Areas affected by shocks	<3.21	16.06	35.79
	Southeastern regions	<0.60	2.80	5.17
	Southern regions	<3.38	16.90	48.19
Dietary diversity score (DDS)	Areas affected by shocks	>5.42	5.42	4.21
	Southeastern regions	>5.52	5.20	4.76
	Southern regions	>4.46	4.46	3.17
Coping strategy index (CSI)	Southeastern regions	<10.41	10.41	16
	Southern regions	<15.27	15.27	21
Community asset score (CAS)	Areas affected by shocks	>50	-	100
	South-East regions	>80	-	36

Source: SPR 2015

127. Overall, these indicators show that the objective of stabilizing the food security situation has not been achieved. The situation has significantly worsened in the PRRO 200735 implementation area, particularly in the southern regions despite the delivery of food assistance. This is mainly due to a third successive drought and the failure of the farming season.

128. Interviews with beneficiaries showed that household food consumption in most of the communities visited was poor before the assistance was delivered (regardless of when it was received), mainly based on wild commodities (red cactus, wild tubers) supplemented with cassava, with most households consuming only one meal a day. Food and cash transfers enabled beneficiaries to improve their food consumption for a limited period during distributions, in

terms of the type of food consumed (less wild food and more diverse foodstuffs) and the quantity and frequency of meals (1 to 2 meals per day before assistance, and 2 to 3 meals during assistance). However, food consumption worsened again when the two- to three-month period of assistance came to an end. Most beneficiary households consumed the food and cash that was distributed, although a small number systematically shared with other households, and there were a few reported cases of the community organizing a redistribution of the assistance to all households, both beneficiaries and non-beneficiaries.

129. Coping strategies: interviews with beneficiaries showed that after three successive years of shocks, households in southern Madagascar have exhausted their main coping strategy of selling animals as their livestock capital is severely depleted. Their other main strategies are changes in diet, and long-term migration (for several years) by one or more family members. The only positive outcome of food assistance is the decline in negative food consumption strategies, but this is temporary.
130. Asset creation/rehabilitation: field visits and interviews with beneficiaries showed that only outcome so far has been the rehabilitation of feeder roads, which improves the supply to secondary markets that usually have to rely on local products. Water management assets and works to improve farmland (irrigation schemes, red cactus eradication, basket compost) have yet to be exploited as no rain has fallen since the activities were undertaken.
131. Since a donor reported on the risk of negative health effects associated with water management assets (water catchment and impluvium), WFP asset creation activities have been accompanied by sensitization on protection from animal pollution and good water use practices. However, interviews with several stakeholders involved in water management in Madagascar showed that there is no consensus on appropriate technical norms adapted to the context in the south.

2.2.5 Building resilience

132. As noted in Chapter 2.2.4, *Response to emergencies*, the findings on FFA resilience activities are presented in that chapter. This section is dedicated to specific information on the three-pronged approach.
133. To date, SLPs have been conducted in four regions, including the three regions with the highest rates of food insecurity (Androy, Atsimo Andrefana and Atsimo Atsinanana), and there have been CBPP activities in 21 communes. However, the WFP CO said that the lack of available data for several regions meant that they could not proceed with an Integrated Context Analysis (ICA). The process began in 2015, and although there was some CBPP in 2016, it was affected by the decision to prioritize the response to the food crisis in the south.
134. CBPP activities were undertaken by similar groups of *fokontanys* (villages) within the commune concerned, which is more efficient than going through the process with each individual *fokontany*. However, interviews with beneficiaries and communes showed that the lack of preliminary community work in participating villages can lead to bias in their priorities (a maximum of 6-7 persons represent each fokontany for CBPP activities); while interviews with villagers revealed that failure to systematically report back on CBPP workshops affects the extent to which plans are appropriated. In addition to this, some

communities have been waiting for over a year for their CBPP reports due to the WFP and Ministry of Population's extremely lengthy review process.

135. FFA activities have been implemented in communes and villages that participated in the CBPP process. As noted above, although these activities were reported in SO3, their primary objective was to transfer food or cash to households affected by the food crisis. Field visits and interviews with WFP and cooperating partners show that certain essential elements of the resilience building approach have not been followed:

- Although the SLP and CBPP reports show a wide range of activities that can potentially be supported through FFA or FFT, the FFA activities that were implemented were limited to the few types of activity that can be planned and implemented at short notice and largely rely on manual labor, rather than other assets that require complementary resources. FFA budgeting mainly takes account of resources for food or cash transfers, and given the lack of concrete synergies for implementing resilience activities (see Chapter 1.3.2, *External factors*), this limits the operation's capacity to work on relevant assets that require a certain level of investment in technical studies, capacities and materials.
- Interventions were short term, lasting a few months, while the resilience approach recommends interventions that extend over several years.
- Measures for the sustainable management of assets were limited to setting up committees and providing periodic training.

136. At the end of 2015, the operation provided cash for training activities for 8,000 participants in Androy, Andrefana and Analamanga (40,000 beneficiaries of transfers considering an average of 5 members per household). This activity consisted of vocational training for young people in urban and suburban areas, delivered in collaboration with 27 professional education centers. Interviews with beneficiaries and managers of these centers showed that overall, the training options were appropriate to beneficiaries' needs (with over 11 specialist topics). However, participating in these trainings did not enable beneficiaries to develop or diversify their livelihoods and thereby increase their incomes. There are two main reasons for this. First, beneficiaries lack access to capital (from their own resources or via microfinance systems), and do not have the financial capacity to start an activity. Second, many participants did not have the opportunity to put the training into practice due to a lack of resources and materials, and do not feel that they have acquired the necessary skills to find a job.

2.2.6 Cross-cutting issues

Gender

137. As mentioned in Chapter 2.1.2, *Coherence with WFP policies*, the project document includes specific measures to promote gender equality. In practice, the following measures have been implemented:

- SLP and CBPP activities include gender equality analysis, propose specific activities for women and take account of women's workloads when planning potential FFA activities.
- The selection criteria for food assistance include households headed by women.

- Although the operation has promoted women's participation in the identification process and CBPP activities, the CBPP process rarely included separate focus groups. This meant that women only had the opportunity to participate in community meetings and through women's representatives on male-dominated panels.
- Women's participation in FFA activities has been promoted, and specific tasks that men and women regard as drudgery have been identified.
- Women's participation in committees has also been promoted (selection, complaints and reconciliation, asset management), and some women have secured responsible positions (such as FFA team supervisor).

138. All these measures are relevant and appropriate. However, interviews with beneficiaries and stakeholders did not allow identifying yet visible outcomes on gender equality and women empowerment generated by these measures.

Protection and accountability

139. 'Complaint and reconciliation' committees have been set up in every community where the operation intervenes. Their main function is to monitor the selection process and distributions, and to manage and transmit complaints to cooperating partners and WFP.

140. Interviews with beneficiaries and these committees showed that very few of them are functional, and complaints are rarely formalized. Respondents felt that this is mainly due to local attitudes, as people are not used to complaining or getting problems dealt with outside the community. In addition to this, these committees and the beneficiary selection committees are formed during community meetings, where people who are regarded as influential and trustworthy are appointed by the community. As they are leaders or influential individuals, other community members are unlikely to complain about the beneficiaries that they select. Therefore, a community complaints mechanism does not seem appropriate or sufficient in this context.

141. However, interviewees in all the communities visited by the evaluation team said that they were satisfied with the selection of beneficiaries. There was only one community where interviewees said that the cooperating partner had diverted assistance and asked beneficiaries for money in order to receive assistance. The communal council complained about this case to WFP, which is currently dealing with it.

142. To make the process more efficient, and because certain areas are hard to access for trucks that transport food, especially during the rainy season, distributions are sometimes made several kilometres from the beneficiary community. This means that beneficiaries have to walk this distance or collectively rent carts, so the distribution may carry significant opportunity costs in money and time (some beneficiaries had to allow a full day to collect their assistance). The evaluation team heard of one case where the beneficiary's assistance was stolen on such a journey.

2.3 Factors Affecting the Results

2.3.1 Internal factors

Monitoring and evaluation system

143. The operation had insufficient resources to implement its monitoring and evaluation (M&E) plan. The fact that there is only one M&E officer in the CO and none in the sub-offices had several consequences:

- Although the M&E plan includes two measurements per year for many indicators, the outcomes of nutrition, GFD and FFA activities have only been measured once, through a PDM for nutrition activities and a mixed PDM and Community and Household Survey for GFD and FFA activities.
- Measurement of outcome indicators for nutrition treatment, GFD and FFA activities has been subcontracted to local companies. Nutrition PDM report depicts briefly the methodology used to calculate the recovery rate⁹² but it is not clear how this indicator could be obtained based on ORN data reports⁹³. For MAM treatment coverage rate, the final result has to be considered with precaution⁹⁴ despite clarity of the methodology provided in PDM report.
- There has been insufficient monitoring and analysis of changes in the figures for nutrition beneficiaries, especially at field level.
- Data on the registers in PNNC sites are monitored by ORN partners and sent to ORN every month but not to WFP over the evaluated period reflecting a poor data flow chart between WFP, ORN and partners, with little involvement from WFP sub office⁹⁵ in data control and analysis.
- Although the register books were supposed to be revised in mid-2016 so that recovery rates could be calculated, this does not seem to have happened in the PNNC sites visited during the evaluation.
- The only outcome indicator for the capacity-building component for DRM, emergency preparedness and national response capacity index has not been measured due to the lack of a guideline to measure this indicator and the institutional instability.

144. These deficiencies in the M&E system affect analysis of the processes and outcomes of activities undertaken by the operation, and the CO's ability to take relevant decisions to improve its effectiveness.

Country Office capacities

145. Interviews with WFP staff showed that they have a good overall understanding of the context and operation. However, there have been times when technical staffing on nutrition and FFA components has been weak.⁹⁶

⁹² "Number of children changing from yellow (PB<125mm) to green (PB ≥ 125 / number of children with PB < 125 during the screening".

⁹³ ORN reports are consolidated from register book data. The evaluation team did not access to these reports but only to register books in the visited PNNC sites and most of the books showed up weakness in the discharge records to calculate accurate recovery rates.

⁹⁴ The proportion of children malnourished during the screening is not precise since the 41% of the respondent did not remember the nutritional status of their child. Furthermore, the GAM prevalence within the population is estimated according to ORN data and results from screening at PNNC sites.

⁹⁵ This was also pointed out during the monitoring support mission (M&E support and oversight mission report, August 2016, recommendations 17.6 and 17.7)

⁹⁶ The Ambovombe sub-office only had a nutritionist for 6 months, and the position has not been filled since the end of 2015, when nutrition activities started to be scaled up. Rural and agricultural engineers were only recruited

146. The operation had initially a strong focus on resilience building and FFA activities. The CO produced an action plan to develop capacities and improve the quality of FFA resilience activities, in accordance with the findings and recommendations of the evaluation of the previous PRRO (200065). This plan included various actions to deal with issues such as technical staffing, building staff capacities, creating synergies with other actors, and preparing specific monitoring and methodological tools. Capacity building for WFP and its partners' staff included training on the three-pronged approach by WFP's regional office and HQ. Although this process has started, and training on the three-pronged approach has been delivered and technical staff have been recruited, WFP CO says that it has been affected by the changing context and new focus on the emergency response to the crisis in the south. As a consequence and due to the changing context and the emphasis put on SO1, WFP CO has prioritized low technology FFA activities that could be undertaken on a short term planning.
147. The action plan did not include the creation of a resilience unit or a full-time position for a resilience focal point at the CO level. Given that it is a new approach for the CO and was initially the main focus of the operation – and will become its main focus once again when the emergency phase in the south comes to an end, specific resources are needed at the CO level to lead the capacity-building and capitalization processes. Despite decades of development cooperation in the south, much more needs to be done to capitalize, validate and generalize WFP and other actors' experiences with technical options for critical issues such as water management, natural resources or climate-smart agriculture. There is also a broader need to develop a more specific strategy for resilience building that defines sub-objectives such as income generation, livelihood diversification, natural resource management, agricultural intensification and adaptation to climate variability, access to markets, etc., and relevant technical options for each of these sub-objectives.

Food security analysis

148. The Vulnerability Analysis and Mapping (VAM) unit in the WFP CO is a key contributor to one of the main food security analysis tools at the national level: the annual Crop and Food Security Assessment Mission (CFSAM) which is carried out each July with FAO.
149. It is used in conjunction with other periodic rapid food security assessments led by the Food Security and Livelihoods cluster to analyze the food security situation at the time of the survey, and to some extent to anticipate changes in the situation.
150. This level of food security analysis is a positive factor that has allowed WFP to assess the severity of the crisis in the south in a timely manner, identify the seven worst affected districts and inform the geographical targeting of activities.

Internal synergies

151. Although GFD and FFA activities represent a coherent combination of emergency response actions in the overall design of PRRO 200735, this synergy

in November 2015 in Ambovombe, and recruitment is still under way in Ampanihy, despite the operation's initial focus on resilience and the fact that the evaluation of the previous PRRO flagged up the need to improve the quality of FFA activities.

has only been harnessed to help certain communities in the area of Antananarivo affected by floods in 2015.

152. Since July 2016, GFD distributions in the south have included nutributter in order to address specific nutrition needs of children. This is a relevant measure, but distributions of nutributter have been irregular due to its short expiry date.
153. Previous awareness-raising activities by the MIARO project in PRRO intervention sites improved local people's understanding of the BFSP. It increased the global perception of nutrition actions and the targeting of women and young children, and has helped promote a longer-term approach encouraging individuals to use kitchen gardens. However, the presence of two programs can lead to confusion over their respective targeting criteria.
154. The school feeding programme undertaken as part of CP 200733 has a large presence, with 240,000 beneficiaries in the regions most affected by the food crisis in the south: Androy, Atismo Andrefana and Anosy. However, although school feeding exists in a number of communities covered by the PRRO, and contributes to its expected results, there is no active coordination to target technical synergies between school feeding activities and PRRO activities in these regions, particularly the response to the crisis.

Procurement and logistics

155. Long lead times of 5 to 6 months for international procurement and 2 to 3 months for local procurement affected the availability of certain commodities, delayed some activities, and led to rations being changed. For example, GFD in the south started in July in response to the food crisis, but procurement delays meant that the rations included cereals and pulses but not oil as planned. This affected the outcome of the activity, as beneficiaries interviewed during the evaluation said that they were unable to supplement their rations and had to eat the cereals and pulses without any oil.
156. The continuity of nutrition treatment was also affected. This had knock-on effects on outcomes as the treatment had to be stopped, and can also adversely affect beneficiary acceptance of this activity and attendance at PNNC sites. In the short-term, this issue could be resolved by using locally produced nutritional products.
157. The procurement unit systematically updates information on parity between international and national procurement, and takes account of the lead-time in decisions. However, it assumes that 20% of supplies will be procured locally each year, despite the lack of a detailed assessment of the capacities for local procurement.
158. Interviews with WFP CO showed that logistics is generally an enabling factor for implementation of the operation, despite certain issues associated with scaling up the response in the south that have been resolved through specific measures. For example, between May and July 2016 the CO put out calls for tender to increase land transport capacity by 60%. It plans to increase the current storage capacity by installing mobile storage units, and has identified possibilities to rent storage space, although this would increase storage costs. In addition, staff surge capacity for emergency response has been increased through Temporary Duty Assignments. However, there are still logistic challenges such as limited cargo shipped to the ports in the south, lack of capacities in discharging cargo in Break

Bulk, port congestion, limited distribution network and insufficient transport capacity.

159. The CO is also establishing food stocks in Antananarivo and Tamatave ahead of the cyclone season, as recommended by the evaluation of PRRO 200065.

Support from the regional office and headquarters

160. Support from the regional office (RB) and HQ was particularly crucial for the introduction of the three-pronged approach. The review of SLP and CBPP reports suggests that the regional-level training sessions attended by regional stakeholders enabled the CO to take ownership of the method and facilitate good quality SLP and CBPP – although the CO said that this exercise has been delayed by delays in the training on ICA.

2.3.2 External factors: Evolution of the food security and nutritional situation

Evolution of the food security situation

161. As noted repeatedly in this report, the main external factors that have influenced the operation are the effects of El Niño in southern Madagascar. These caused repeated droughts in the 2014-2015 and 2015-2016 farming seasons, after previous bad seasons due to locust invasions and earlier droughts, and ultimately triggered a large-scale crisis classified as an L3 emergency at the regional level.
162. This event had a profound effect on the programme strategy, as WFP had to switch its main focus from resilience to emergency response. It also affected processes such as planned capacity building on resilience and FFA that could only partially be implemented, and other activities and outcomes.
163. The available outcomes indicators and interviews with beneficiaries show that the operation had not succeeded in stabilizing the food security and nutrition situation at the time of the evaluation. Heightened vulnerability has weakened the impact of FFA activities and undermined nutrition sensitisation and intervention activities, as food shortages have led to more food sharing and diversion within the household.
164. Lack of rainfall prevented many FFA activities from generating their expected effects; while lack of water and poor health limited their impact on malnutrition rates, which are affected by multiple factors. Lack of water and high prices can also lead to beneficiaries using distributed food to raise cash to buy water.

Participation and capacity of national and local stakeholders

165. National institutions have generally been closely involved in the implementation of this operation. The BNGRC is a strong institutional partner in all disaster management activities, and has participated in the design and implementation of disaster risk management capacity-building activities. WFP ties its programming in with national and regional plans, particularly the planned response to the food crisis in the south.
166. The Ministry of Population has been involved in the three-pronged approach, and has taken leadership of this approach at the regional level, adopting and using it to guide interventions by other actors.

167. The ONN's close involvement in the nutrition component encouraged active coordination through bilateral meetings at the national level, and contributed to the efficiency of the operation.
168. Decentralized technical services outside the Ministry of Population and ORN have been indirectly involved in the operation through cooperating partners, particularly for FFA activities. WFP has promoted their involvement at the activity design stage, in monitoring implementation, and in efforts to improve the quality of asset creation/rehabilitation. However, their limited technical capacities mean that their involvement is no guarantee that acceptable quality standards will be achieved.
169. The level of national stakeholder participation in PRRO activities should make a positive contribution to the ownership, impact and sustainability of these interventions. However, several stakeholders said that they felt severely limited by their lack of technical capacities, leadership and resources.

Partners' availability and capacity

170. Interviews with WFP CO and partners showed that the overall technical capacity of cooperating partners is limited, particularly for FFA resilience activities. Many partners lack staff with advanced technical skills relevant to the disciplines and types of asset covered by the program. This situation, and the lack of skills at WFP level has affected the quality of the FFA work, despite input from the decentralized technical services in the design and monitoring of activities (and the ongoing capacity building process, which has been slowed down by the food crisis in the south).
171. Interviews with partners also showed that they find it difficult to fully capture some of the social aspects of the operation, such as conflicts in communities, which are essential for identifying relevant and adapted FFA actions and developing community ownership. This has been exacerbated by the food crisis in the south, as communities are now primarily interested in food and cash transfers.
172. As far as nutrition is concerned, the partnership with ORN and previous presence of PNNC sites has been a very positive factor in scaling up malnutrition treatment activities for children at the community level.
173. Similarly, the history of local partners working closely with communities speeded up implementation of the BFSP as the listing could be done efficiently in a few days, and their accepted presence in the area helped distribution proceed smoothly. However, activities were limited by lack of capacity in nutrition and the fact that key sensitisation messages focused solely on food rations. Food transfers should be accompanied by awareness raising on nutrition practices to increase their impact.

External synergies and coordination with other stakeholders

174. WFP has strongly promoted the creation of regional-level synergies through its three-pronged approach. Interviews with WFP staff, decentralized technical services and other stakeholders showed that regional-level stakeholders have participated in SLP and CBPP exercises. SLPs in particular led to the identification of 'convergence communes' where stakeholders agree to concentrate their interventions in order to build real complementarities and synergies. However, WFP notes that this commitment relates to future projects,

not current ones that already had a geographical target before the SLPs were developed. As a result, it still undertakes most FFA resilience activities on its own.

175. There are several positive and interesting exceptions to this rule, most notably, the project 'Actions Intégrées en Nutrition et Alimentation' (AINA), which is implemented by a consortium of eight organizations led by FAO. WFP's role in this project is to carry out FFA activities to support actions by other members of the consortium that provide complementary resources. Another example is the collaboration between FAO and WFP to protect seeds distributed by FAO in four districts in 2016.
176. The evaluation team also identified some missed opportunities, such as GRET's work on agro-ecology and adaptation to climate variability. Discussions are under way, but have not yet resulted in a seasonal calendar of activities as WFP planned its transfers during the lean season, while GRET was proposing support for tree planting in March. This finding supports the view that resilience activities should be separate from lean season safety nets, and should prioritize the creation of relevant and sustainable assets instead of transfers.
177. WFP plays an important role in coordinating food security and livelihood initiatives, through its national and regional leadership (sub-clusters in Ambovombe and Tuléar) with FAO. WFP maintains that the coordination is very efficient at the national level, and has facilitated collaborations such as the seed protection action with FAO mentioned above. However, this does not seem to apply at the regional level, where some basic coordination tasks are not functioning.⁹⁷ Strong coordination between the three main providers of food assistance in the south – WFP, ADRA and CRS – has helped optimize geographical targeting, avoid duplications and harmonize rations.
178. Coordination with UNICEF and the Ministry of Health needs to be improved, as the reference system needs to be adjusted so that children who have been discharged from CRENAS can be included in the PNNC for MAM follow-up at any time. Effective coordination could also be supportive to avoid duplication of actions such as sensitisation and training while implementing joint activities.
179. Coordination with other NGOs working on nutrition has improved somewhat during PRRO implementation. Recent initiatives to map activities and better distribute them among actors could increase global coverage, and could even constitute 'capital' to rationalize and increase the impact of future actions. The national protocol includes a wide range of products, and having two actors using two different products in the same area complicates nutrition sensitization and undermines its impact.

Quality and availability of nutrition analysis

180. The accuracy and reliability of nutrition data, and hence nutrition analysis, is affected by the lack of recent SMART surveys (a decision to conduct another one was made in October 2016). There has been some screening (exercises undertaken twice a year, and monthly screenings at the communal level), which has been used for targeting, but the lack of screening in some areas (Atsimo Andrefana) has limited the WFP intervention, which has been concentrated where data was available.

⁹⁷ For example Ambovombe cluster did not manage to establish a Who is doing What and Where matrix.

3 Conclusions and Recommendations

3.1 Overall Assessment

181. The evaluation confirmed the **relevance** of the initial design of PRRO 200735. Its dual approach with a focus on resilience building and capacity to respond to emergencies with a combination of GFD and FFA activities is appropriate to the context of high recurrence of natural disasters. Treatment of MAM was justified by the prevalence of acute malnutrition with seasonal peaks of up to 14% observed between 2005 and 2011, and the integration of malnutrition prevention is relevant considering the deterioration of the situation in 2015.
182. However, the operation design did not include a seasonal safety net, despite the high prevalence of food insecurity in some regions. According to WFP CO this function had to be covered by resilience FFA activities, which is not the most appropriate solution as resilience FFA activities and seasonal safety nets have different priorities (the former to establish relevant, adapted and sustainable assets for resilience; the latter to provide a safety net by transferring food or cash during the lean season), approaches and seasonal programming.
183. WFP CO substantially modified the initial strategy, reducing resilience activities and considerably increasing the emergency component. This adaptation of the strategy is relevant to the change in context as a third consecutive drought in southern Madagascar resulted in a large-scale food crisis.
184. WFP and cooperating partners applied two methods for beneficiary targeting: a community approach and a mixed method based on quantitative scoring completed with a community validation. Interviews with WFP and partners, and filed visits showed the second method has not been always fully applied, and there isn't a consensus on which method is more efficient and allows for more accuracy of the selection.
185. The main assistance modality is still in-kind transfers. Cash-based activities have been progressively and prudently introduced with systematic feasibility and market studies, which is relevant to the context of poor supply to many secondary markets.
186. Overall, the operation is **coherent** with WFP and national policies and interventions by key stakeholders in the nutrition, food security and DRM sectors.
187. The implementation of the operation shows a high level of **effectiveness** in relation to the expected outputs identified at the outset, except for resilience activities. This finding is coherent with the modification of the programme strategy. The emergency response to the crisis in the south is being scaled up to cover the entire estimated affected population. Most targets for planned activities and beneficiaries have been achieved and often exceeded for capacity building in DRM, nutrition treatment and prevention, and emergency response. However, the lack of available partners delayed the implementation of MAM treatment until November 2015, and PLW coverage is less than expected due to the PNNC's limited technical capacities and low availability of other partners.
188. The emphasis on emergency response meant that FFA activities essentially followed this objective, even in communities where the WFP's three-pronged approach has been implemented. As a result, they were programmed as short-

term activities (2-3 months), and little attention has been paid to **sustainability** measures. A significant proportion of assets do not meet the quality standards for asset creation/rehabilitation. WFP developed an action plan for capacity development and to improve the quality of FFA, but its implementation has been affected by the CO's mobilization on emergency responses.

189. The operation has not achieved one of its main expected **impacts** – stabilizing the food security and nutrition situation in the south. The process of scaling up emergency activities that began in mid-2016 should help improve this critical outcome if the required resources are available.
190. Food transferred through GFD and FFA in southern Madagascar allowed people with severely depleted livelihoods and coping strategies to briefly improve the quality and quantity of their food consumption, although it deteriorated again when the short-term assistance ended (one DGV distribution at the time of the evaluation, and 2-3 months of assistance through FFA). No other outcomes on livelihoods were reported.
191. The outcome indicators for nutrition activities show that the operation performed well in terms of coverage, mortality and non-response. Its implementation in PNNC sites is a positive factor that encourages the target population to participate in the program. It seemed to perform well in terms of recovery in 2015, but the measurement was not representative of the whole operation, and the target for 2016 was missed. This is due to an inappropriate measurement of the indicator, a treatment protocol that lasts two months without considering the anthropometry of beneficiaries at that stage, and a high proportion of beneficiaries that do not receive the full treatment. The BSFP had a positive impact on MUAC evolution.
192. The evaluation found that the rehabilitation of feeder road is the only asset-building activity that has had a positive effect on livelihoods, helping improve supplies to secondary markets and thereby improve access to food. All the other assets that have been created are dependent on rainfall, which has been virtually non-existent since the intervention.
193. The operation design included a good level of **gender** mainstreaming, which has been implemented through appropriate measures to promote gender equality and women's participation. However, the evaluation team did not collect evidence of specific outcomes on gender equality.
194. WFP CO and its partners established systematic **accountability** measures, with complaint and reconciliation committees. However, this approach has not proved effective and other channels should be considered.
195. Factors that contributed to the **efficiency** of the operation's implementation include appropriate logistical capacities that were updated to deal with the emergency response in the south, a partnership with ONN that facilitated the scaling up of nutrition activities, the quality of food security analysis, and some internal synergies between CP 200733 and the Miaro project. Conversely, its performance has been adversely affected by the lack of resources for M&E, limited CO capacities (particularly among field-level nutrition staff for monitoring, analysis and communication, and for the resilience capacity building and learning process), long lead time for food procurement, especially for international procurement, the lack of reliability and accuracy of nutrition data

and the generally limited technical capacities of partners. Availability of manual, training and implementation of new register books was done recently and should address this weakness.

196. Participation of national stakeholders has been high in all the activities, but their limited technical capacities and resources reduce the possible impact of capacity development actions

197. Creating **synergies** is still a challenge, particularly for resilience building, despite the will to do so in WFP CO and the existence of several positive synergies.

Table 11: Evaluation synthesis matrix

Indicators	A: Excellent E: Weak
Question 1: How appropriate is the operation?	
1-1 During the design and subsequent implementation of the operation, were the proposed objectives relevant to the needs of targeted groups?	B
1-2 To what extent are the design and implementation of the operation coherent with national policies, strategies, programs and WFP sectorial policies?	A
1-3 Does the operation complement humanitarian and development programs undertaken by other actors in the country?	A
Question 2: What are the results of the operation?	
2-1 To what extent have the expected results helped achieve the planned objectives?	C
2-2 To what extent has the operation has been implemented efficiently?	B
Question 3: Why and how has the operation produced the observed results?	
	1: Not important 5: Very important
3-1 What are the main implementing factors that have influenced performance? <ul style="list-style-type: none"> • Resource mobilization • Cooperating partnerships • Monitoring, evaluation, information management and capitalization • Technical capacity and support provided by the RB and head office 	<ul style="list-style-type: none"> • 3 • 3 • 3 • 3
3-2 What are the main external factors that have influenced performance? <ul style="list-style-type: none"> • Political and institutional transition • Institutional capacities • Level of funding level for the operation • Climate events 	<ul style="list-style-type: none"> • 1 • 2 • 3 • 5

3.2 Key Lessons for the future

198. In accordance with its mandate WFP gives priority and directs resource mobilization towards emergency response. This may affect the other components of the operation, in this case resilience building. The resilience objective can only be achieved within a prolonged intervention without periodic interruptions. It is also necessary to implement simultaneously activities at middle-long term and activities of emergency response, and not in an alternated way. Hence the integration of both objectives in a single programme is relevant, but the issue of their independence one from the other in terms of programming and resources mobilization represents a challenge. The new approach of Country Strategic Planning may support the integration and complementarity of both objectives providing security on resource mobilization avoiding that the priority given to emergency during a period affects resilience building.

199. During the evaluation mission, some informants have questioned the relevance of water management assets due to the lack of rainfalls since they have been created/rehabilitated. The evaluation finds that this debate is not justified, as water is a crucial issue in the south of Madagascar and needs to be addressed in priority, in the extent that relevant solutions can supported through community mobilization. The analysis of appropriateness of these infrastructures has to take in account the high level of exceptionality of successive droughts that occurred. Also, the identification of assets has to be integrated within a broader resilience building strategy that defines intermediate and complementary objectives such as livelihoods diversification, water management, adaptation of production systems, rural infrastructures, etc.
200. The partnership with ORN allows a great appropriation from decentralized technical services and represents an opportunity to transfer to the government in a sustainable way provided that supplies, monitoring and mastery of protocol are consolidated including inclusion of PLW in the program when overall caseload remains low.
201. For malnutrition prevention, the flexibility showed in criteria for targeting the communes entitled to distribution was positive. The combination of operational and vulnerability criteria has contributed to increase the effectiveness of the BSFP: having a partner already present and operational supported rapid implementation, appropriation by the community and facilitated beneficiaries list development. Presence of GFD in the same implementation area limited sharing inside and outside the household and supported the protection of the ration.
202. Irregularity of supplies impacted negatively the treatment of malnutrition with two main impacts: discontinuity or interruption of the treatment with limited impact on nutritional status and admission later in a second two months cycle of distribution, long gaps in the supply (up to 4-5 months) involving lack of appropriation of the activity by the population.
203. Weakness of the reference system between MAS treatment and MAM treatment impacts negatively the continuity of MAS treatment: poor consideration of global acute malnutrition management as a whole.
204. Insufficient development of sensitization on nutrition whereas combination with soft approach such as it is developed in MIARO project has evidenced synergies and increased impact of prevention activities especially for medium and long term approach.

3.3 Recommendations

Two types of recommendations are proposed:

- i) Strategic recommendations, for the formulation of the transitory SCP that will start at mid 2017. Some of these recommendations also include operational aspects that could be introduced at short term. However, the mobilization of the CO for the response to the emergency in the south reduces its capacity to undertake significant modifications at short term. Hence the evaluation team considers more realistic to propose these modifications to be implemented in the new CSP.
- ii) Operational recommendations to improve the efficiency and effectiveness of the operation, which should ideally be implemented during the PRRO 200735. However, due to the priority given to the response to the

emergency in the south, some of these recommendations are more likely to be implemented within the CSP.

Strategic recommendations for the formulation of the future CSP.

Recommendation 1: Complement FFA resilience building activities with seasonal conditional or unconditional transfers focused on assisting the most vulnerable households during the lean season (WFP CO, in 2017 for the formulation of the CSP). The resilience component of the operation has both objectives of reducing household's vulnerability to shocks through the provision of assets, and supporting access to food for severe and chronically food insecure households through food and cash transfer. However, despite both objectives are complementary, their integration into a single activity is not appropriate for several reasons: (i) Seasonal transfers are implemented when access to food is the more difficult (lean season), while resilience activities should be carried out at the most appropriate season depending on types of assets and working hand availability, which is mainly the dry season. (ii) Seasonal transfers should target the most vulnerable households who don't always have the capacity to participate to physical works. For the formulation of the new CSP, WFP CO should consider the association of complementary seasonal transfers, focused on the lean season, with long term FFA resilience building activities that should be mainly implemented during the dry season. Seasonal transfers could be conditional or unconditional depending on the feasibility to develop relevant FFA activities during the rainy season, the availability of working hand in this season, and the ability of the target population to participate to physical work. Food for Training activities could also be considered if they meet the same requirements. Both activities should be integrated into a single targeting and programming approach, based on the three-pronged approach, including the ICA that has not been undertaken in Madagascar and could provide a common geographical targeting tool for the next CSP.

Recommendation 2: Elaborate a resilience strategy (WFP CO, with the support of RB and the participation of institutional partners, from March 2017, after the peak of the emergency response). Resilience is a complex concept that can include very large panel of different issues and activities. It is new in the country and for the CO, and requires to be guided with a strong quality and learning process. For this purpose, WFP CO should define a strategy that should include the following elements:

- Creation of a resilience unit in the CO, as a prior measures to increase the CO capacity to implement the other proposed measures. The main tasks of this unit would be to coordinate the programming of resilience activities, to guide the capacity building process and capitalize experiences.
- Reduce the target of the component at the beginning in order to allow for a process focused on quality, and plan a scaling up in a second time. The initial target beneficiaries of 225,000 persons per year was too ambitious considering it is a new approach that requires a strong investment on quality.
- Definition of intermediate objectives and activities that contribute to each objective. Based on the activities that have already been developed, intermediate objectives could be: (i) Access to water and water management, (ii) Livelihoods diversification, (iii) Food diversification, (iv) Income generation, (v) Agriculture adaptation to climate variability, intensification and diversification, (vi) Access to market.

- Intermediate objectives should be associated with specific indicators in order to measure and analyse outcome and feed the learning process.
- Implement the already designed action plan for capacity development of the CO and cooperating partners. Complement it with a plan of capitalization of experiences.
- Programming approach and partnership strategy aimed at promoting multi-year programming in communities, taking in account funding constraints.
- A direct partnership with technical services at national and local level that strengthens their role in activities identification, design, and monitoring; capacity development plan of these services should be included. Such a partnership could be resourced on a revised upwards capacity development budget line, which would release ODOC for asset investment (the participation of technical services is included in FLAs with partners and therefore resourced on ODOC).
- A consultation with specialized agencies on the technical approach for water management infrastructures adapted to the context of the south, the different uses of water and water quality standards.
- Increase resources for FFT activities, in order to implement high quality trainings so that beneficiaries can have the opportunity to access employment, and look for potential synergies with micro-finance institutions that can accompany beneficiaries with the provision of capital.

Recommendation 3: Better tailor the programming of nutrition activities to merge with stunting prevention approach and to include a strong communication component (WFP CO in collaboration with UNICEF, UNFPA, NGOs, in 2017 for the formulation of the CSP). When sensitization is reinforced beside the PRRO, there is a better understanding of the distributions by the population. Nutrition activities should not be isolated but integrated in a larger package supported by others actors. This would mainstream nutrition awareness and improve others sectors interconnected with nutrition playing a role in the malnutrition causal tree, resulting in a better impact of WFP activities. WFP should develop an integrated approach aiming at preventing acute and chronic malnutrition and targeting the 1,000 days window of opportunity. In areas prone to high rates of malnutrition, BSFP should be maintained during the peak (lean season) and complemented by other preventive measures conducted along the year targeting PLW and under two children. Among others, two ranges of activities should be implemented with priority:

- Support to CSB on perinatal care in partnership with health actors, UNICEF and UNFPA, including quality and regularity of the consultation and sensitization on Infant and Young Child Feeding.
- Advocate together with UNICEF and NGOs on the crucial issue of access to drinking water in drought prone area since this is a major preoccupation for the population deteriorating livelihood and one of the potential key factor of malnutrition.
- Development of nutrition sensitive activities for all the population with kitchen gardening when feasible and cooking demonstration for women including demonstration for weaning food as well as for family food. Radio spot will enhance the sensitization and this could be also supported by nutrition messages at school. Even if developed at small-scale level this will support nutrition awareness that needs to be mainstreamed. These activities will have to take into consideration lessons learnt of MIARO project and could be developed through a

FFT approach that would create a synergy with the resilience component. Agricultural nutrition sensitive activities will have to be developed with FAO.

- Strengthen particularly sensitization during BSFP in order to maximize use of products by beneficiaries: explanations should not be limited to the preparation of food but extended to the justification of the targeting and the importance of appropriate food for this particular group of the population.

This approach should not duplicate PNNC routines activities but should reinforce the sites through training and material support in order to have a single community based structure working together in coordination with the CSB to address both stunting and acute malnutrition.

Operational recommendations: all these recommendations should be implemented at short term, as soon as possible. They are presented by order of priority

Recommendation 4: Improve monitoring of the nutrition component (WFP CO in collaboration with ORN), at short term).

- The different stakeholders involved in the treatment of malnutrition (ORN, WFP and their respective partners) don't share regularly data recorded at PNNC sites and there is a lack of ownership of the program's performance. This limits the calculation and reliability of some indicators such as recovering rate. It is thus needed to improve monitoring through the development of shared monitoring tools. Although ORN should keep the ownership of the monitoring, WFP should request ORN to share PNNC reports compiled by their partner with its field offices, in order to better analyze, follow up and understand performance at field level. In parallel, a better involvement and tailored monitoring from the different stakeholders including WFP FAMs would reinforce quality and regularity of the records in the PNNC register. New registers that have been designed by WFP should improve the calculation of recovery rate since MUAC measurement at discharge will be systematically recorded. Nevertheless, particular attention should be paid on the utilization of the new registers from ANC and monitoring staff.
- A simplification of the protocol into two months treatment cycle following screening campaign is an appropriate measure for better programming and control of the activities at community level with the ANC. However, this simplification prevents the continuum between MAS and MAM treatment. WFP should closely monitor the recent change that has been introduced into the protocol in order to allow at any time admissions of children cured from MAS treatment but needing to recover from MAM.
- Shortage of food in the PNNC prevent the completion of treatment. WFP should improve supply planning and its coherence with the beneficiaries' number of each sites in order to provide sufficient food to complete the treatment cycle. Improved, shared and timely monitoring would also play a crucial role in supporting the appropriate estimation of beneficiary figures and food needed.
- Currently attention and staff involvement towards nutrition is not sufficient to implement these recommendations (for both monitoring and communication/awareness). It is needed to strengthen human resources at field level (both sub-offices and antennas) with staff having nutrition background. In addition, capacity building of staff on nutrition should be added among the tasks of

nutritionists appointed for short periods in field offices. Improvement of capacities in nutrition of NGO partners through training and continuous coaching on nutrition activities is also recommended.

Recommendation 5: Carry out a capitalization exercise on beneficiary targeting methods (WFP CO with cooperating partner, short-term). PRRO 200735 has used two targeting methods: (i) community targeting, and (ii) community-validated quantitative household scoring. The second method was designed in order to improve reliability and accuracy of targeting. However there is not a consensus within cooperating partners on the extent to which the introduction of the quantitative scoring has resulted in more efficiency and accuracy in targeting. WFP should carry out a capitalization exercise, through a workshop to exchange experiences, to assess how both methods were implemented by partners, identify the strengths and weaknesses of each method, and use the results of this exercise to adjust the method for the next round of beneficiary selection.

Recommendation 6: Strengthen the accountability mechanism for beneficiaries (WFP CO, short-term). Accountability is mainly based on barely functional complaints and reconciliation committees. To give beneficiaries and non-beneficiaries real opportunities to assert their right to benefit from activities, WFP CO should complement the committee-based mechanism with multiple complementary channels such as green phone numbers, letterboxes, accessible focal points in partner and WFP sub-offices, and by involving communal councils. Interviews with WFP CO showed that none of these options constitute a valuable channel in all situations. For instance, lack of coverage of phone networks and low level of phone ownership within rural population are imitating factors for the effectiveness of a green phone number. This is why the implementation of multiple channels should be considered. In addition to this, WFP and its partners should also do more to raise target communities' awareness of their right to benefit from activities, and the selection criteria and available channels that enable them to assert this right.

Recommendation 7: Carry out an assessment on the national potential for local purchase (WFP CO, short-term). Lead times are long, especially for international purchases (5-6 months), and this affects the programming and effectiveness of the operation. WFP CO has to meet an annual quota of 20% of local purchases, even though it was set without any detailed analysis of the potential supply. WFP CO should carry out such an assessment to maximize the potential for local purchases, especially for emergency responses requiring prompt action.

Annex 1: Terms of Reference for the evaluation



EVALUATION QUALITY ASSURANCE SYSTEM

Office Of Evaluation

Measuring Results, Sharing Lessons

[FINAL VERSION, 06.05.2016]

TERMS OF REFERENCE - OPERATION EVALUATION

MADAGASCAR – PROTRACTED RELIEF AND RECOVERY OPERATION –200735 : ‘Response to food security and nutrition needs of population affected by natural disasters and resilience building of food insecure communities of south-western, southern and south-eastern regions of Madagascar’

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1. Introduction

1. These Terms of Reference (TOR) are for the evaluation of the Protracted Relief and Recovery Operation (PRRO 200735) '*Response to food security and nutrition needs of population affected by natural disasters and resilience building of food insecure communities of south-western, southern and south-eastern regions of Madagascar*'. This evaluation is commissioned by the WFP Office of Evaluation (OEV) and will last from August 2016 to January 2017. In line with WFP's outsourced approach for Operation Evaluations (OpEv), the evaluation will be managed and conducted by an external evaluation company amongst those having a long-term agreement with WFP for operations evaluations.
2. These TOR were prepared by the OEV focal point based on an initial document review and consultation with stakeholders and following a standard template. The purpose of the TOR is twofold: 1) to provide key information to the company selected for the evaluation and to guide the company's evaluation manager and team throughout the evaluation process; and 2) to provide key information to stakeholders about the proposed evaluation.
3. The TOR will be finalised based on comments received on the draft version and on the agreement reached with the selected company. The evaluation shall be conducted in conformity with the TOR.

2. Reasons for the Evaluation

• 2.1. Rationale

4. In the context of renewed corporate emphasis on providing evidence and accountability for results, WFP has committed to increase evaluation coverage of operations and mandated OEV to commission a series of Operation Evaluations in 2013 -2016.
5. Operations to be evaluated are selected based on utility and risk criteria.⁹⁸ From a shortlist of operations meeting these criteria prepared by OEV, the Regional Bureau (RB) has selected, in consultation with the Country Office (CO), the PRRO 200735 '*Response to food security and nutrition needs of population affected by natural disasters and resilience building of food insecure communities of south-western, southern and south-eastern regions of Madagascar*' for an independent evaluation. In particular, the evaluation has been timed to ensure that findings can feed into future decisions on programme implementation and the design of the future Country Strategic Plan and/or PRRO.

• 2.2. Objectives

6. This evaluation serves the dual and mutually reinforcing objectives of accountability and learning:
 - **Accountability** – The evaluation will assess and report on the performance and results of the operation. A management response to the evaluation recommendations will be prepared.
 - **Learning** – The evaluation will determine the reasons why certain results occurred or not to draw lessons, derive good practices and pointers for learning. It will provide evidence-based

⁹⁸ The utility criteria looked both at the timeliness of the evaluation given the operation's cycle and the coverage of recent/planned evaluations. The risk criteria was based on a classification and risk ranking of WFP COs taking into consideration a wide range of risk factors, including operational and external factors as well as COs' internal control self-assessments.

findings to inform operational and strategic decision-making. Findings will be actively disseminated and lessons will be incorporated into relevant lesson sharing systems.

• **2.3. Stakeholders and Users**

7. **Stakeholders.** A number of stakeholders both inside and outside of WFP have interests in the results of the evaluation and many of these will be asked to play a role in the evaluation process. Table one below provides a preliminary stakeholders’ analysis, which will be deepened by the evaluation team in the inception package in order to acknowledge the existence of various groups (women, men, boys and girls) that are affected by the evaluation in different ways and to determine their level of participation. During the field mission, the validation process of evaluation findings should include all groups.

Table 1: Preliminary stakeholders’ analysis

Stakeholders	Interest in the evaluation
INTERNAL STAKEHOLDERS	
Country Office (CO)	Responsible for the country level planning and operations implementation, the CO is the primary stakeholder of this evaluation. It has a direct stake in the evaluation and an interest in learning from experience to inform decision-making. It is also called upon to account internally as well as to its beneficiaries, partners for the performance and results of its operation.
Regional Bureau (RB) based in Johannesburg, RSA	Responsible for both oversight of COs and technical guidance and support, the RB management has an interest in an independent account of the operational performance as well as in learning from the evaluation findings to apply this learning to other country offices.
Office of Evaluation (OEV)	OEV is responsible for commissioning OpEvs over 2013-2016. As these evaluations follow a new outsourced approach, OEV has a stake in ensuring that this approach is effective in delivering quality, useful and credible evaluations.
WFP Executive Board (EB)	The WFP governing body has an interest in being informed about the effectiveness of WFP operations. This evaluation will not be presented to the EB but its findings will feed into an annual synthesis of all OpEvs, which will be presented to the EB at its November session.
EXTERNAL STAKEHOLDERS (See Table 2 for list of external stakeholders)	
Beneficiaries	As the ultimate recipients of food assistance, beneficiaries have a stake in WFP determining whether its assistance is appropriate and effective. As such, the level of participation in the evaluation of women, men, boys and girls from different groups will be determined and their respective perspectives will be sought.
Government	The Government has a direct interest in knowing whether WFP activities in the country are aligned with its priorities, harmonised with the action of other partners and meet the expected results. Issues related to capacity development, handover and sustainability will be of particular interest.
UN Country team	The UNCT’s harmonized action should contribute to the realisation of the government developmental objectives. It has therefore an interest in ensuring that WFP operation is effective in contributing to the UN concerted efforts. Various agencies are also direct partners of WFP at policy and activity level.
NGOs	NGOs are WFP’s partners for the implementation of some activities while at the same time having their own interventions. The results of the evaluation might affect future implementation modalities, strategic orientations and partnerships.

Civil society	Civil society groups work within the same context in which WFP operates and have an interest in areas related to WFP interventions (food security, nutrition, education, gender equity, etc.). Their experience and knowledge can inform the evaluation and they will be interested in the evaluation findings, especially those related to partnerships.
Donors	WFP operations are voluntarily funded by a number of donors. They have an interest in knowing whether their funds have been spent efficiently and if WFP's work has been effective and contributed to their own strategies and programmes.

8. **Users.** The primary users of this evaluation will be:

- The CO and its partners in decision-making related notably to programme implementation and/or design, country strategy and partnerships.
- Given RB's core functions the RB is expected to use the evaluation findings to provide strategic guidance, programme support and oversight,
- OEV will use the evaluation findings to feed into an annual synthesis of all OpEvs and will reflect upon the evaluation process to refine its OpEv approach, as required.

3. Subject of the Evaluation

9. Madagascar is a low-income food deficit country ranking 154 of 188 countries in the UNDP Human Development Index⁹⁹. In 2012, 72 percent of its estimated 22 million population lived below the national poverty line. The country is one of the few in the world to have experienced, over the past decades, a stagnation in per capita income coupled with a rise in absolute poverty.
10. Madagascar is vulnerable to natural disasters, especially cyclones, floods, and drought. A quarter of the population, some five million people, live in areas highly vulnerable to frequent natural disasters. Climate change and environmental degradation exacerbate these risks and further increase household vulnerability.
11. Madagascar's food and nutrition situation is classified as "alarming" in the 2015 Global Hunger Index. The 2015 Crop and Food Security Assessment Mission, carried out in eight regions, indicates that 46 percent of the population are food insecure. Madagascar has the fourth highest rate of chronic malnutrition in the world, with almost half of children under five affected (47.3 percent). The average national global acute malnutrition (GAM) prevalence is 8.2 percent, while anaemia affects 35 percent of women aged 15-49 years and 50 percent of children under five.
12. WFP Country Strategy (2015-2019), which was formulated in close alignment with the National Development Strategy and the new United Nations Development Assistance Framework (UNDAF), defines WFP's strategic orientation and focus in Madagascar and constitutes the basis for WFP's two main programmes: i) a Country Programme (CP 200733) for the period 2015-2019; and ii) PRRO 200735 (2015-2017). CP 200733 has two components: i) under component 1, WFP supports school feeding for 288,000 primary school children and activity supporters; and ii) under component 2, WFP assists 27,000 beneficiaries including 23,000 through a programme for the prevention of acute malnutrition and 4,000 pregnant women for the prevention of stunting; there is a Food-by-Prescription activity which was planned but not implemented due to resources constraints. In addition, two trust funds complement these programmes: i) a demonstration model named Miaro aimed at preventing stunting and (ii) a project supporting the development of a pro-smallholder farmer procurement strategy to strengthen agricultural production and access to markets.
13. The objectives of PRRO 200735 launched in January 2015 were to:
 - Strengthen resilience of the most vulnerable men and women in food insecure communities in the south-western, southern and south-eastern regions (Strategic Objective (SO) 3);

⁹⁹ UNDP 2015 Human Development Report, 2015

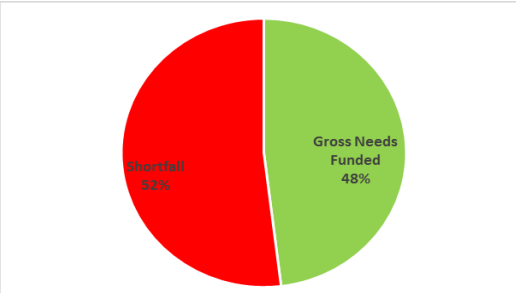
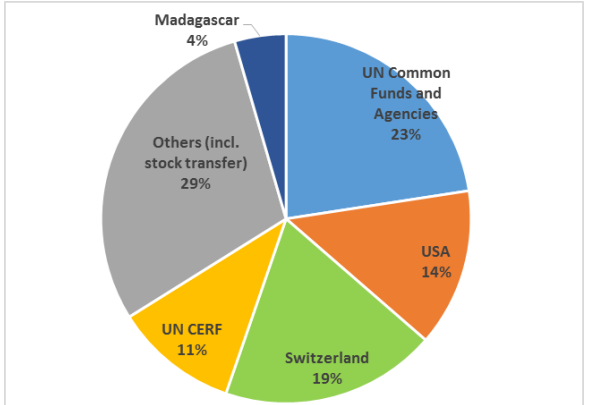
- Respond to immediate food security and nutrition needs and protect livelihoods of populations affected by sudden onset natural disasters (SO 1);
 - Enhance capacity of government, cooperating partners and communities to prepare for, monitor, detect and respond to emergencies (SO 1 & 3).
14. Specifically, the PRRO 200735 initially planned to assist 426,000 beneficiaries with focus on three main components: i) a relief component providing general food distribution (GFD) and/or unconditional Cash and Vouchers (C&V) transfers followed by early recovery through food/cash assistance for assets (FFA) aimed at restoring critical assets. A moderate acute malnutrition (MAM) treatment intervention is also included, in the event of a nutritional emergency; ii) under the resilience component, FFA is implemented through seasonal and community-based participatory planning following WFP's three-pronged approach; iii) a capacity development component is planned to enhance capacities of the Government, cooperating partners and communities to prepare for, monitor, detect and respond to emergencies.
15. A 2015 budget revision (BR#1) included a programme for the prevention of acute malnutrition for young children and pregnant and lactating women (PLW) in areas affected by current emergency conditions providing assistance for 15,000 children aged 6-23 months and 8,000 PLW during the period June-August 2015, bringing the total number of beneficiaries targeted by the operation to 449,000. The new activity complements the programme for the treatment of moderate acute malnutrition in the same communities.
16. The project document, related amendments (Budget revisions) and the latest resource situation are available by clicking <https://www.wfp.org/countries/madagascar/operations>.¹⁰⁰ The project logframe is in annex 3. The key characteristics of the operation are outlined in table two below:

Table 2: Key characteristics of the operation

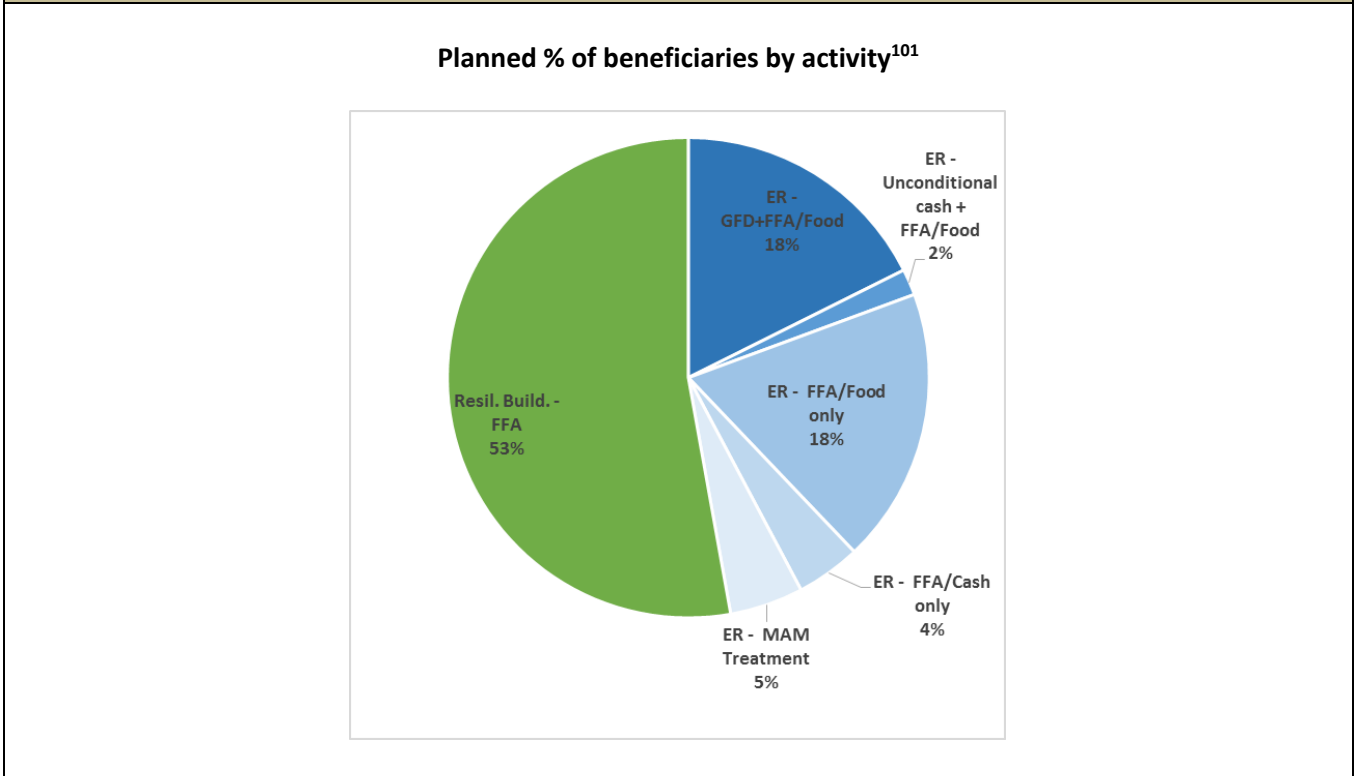
OPERATION			
Approval	The operation was approved by WFP Executive Director (ED) on 22 December 2014.		
Amendments	There has been one substantial amendment to the initial project document: BR#1, approved by the RBD Regional Director in July 2015, increasing the total number of beneficiaries to 449,000 as a result of the inclusion of the BSFP.		
Duration	Initial: 30 months (1 January 2015 - 30 June 2017)	Revised: N/A	
Planned beneficiaries	<u>Initial:</u> 426,000	<u>Revised:</u> 449,000	
Planned food requirements	<u>Initial:</u> In-kind food: 28,629 mt of food commodities Cash and vouchers: US\$3,694,500	<u>Revised:</u> In-kind food: 28,851 mt of food commodities Cash and vouchers: US\$3,694,500	
US\$ requirements	<u>Initial:</u> US\$29,622,671	<u>Revised:</u> US\$30,102,427	
OBJECTIVES, OUTCOMES AND ACTIVITIES			
Contributes to UNDA	SO	Operation specific objectives and outcomes	Activities
	Strategic	Objective: Save lives and protect livelihoods in emergencies	

¹⁰⁰ From WFP.org – Countries – Madagascar – Operations.

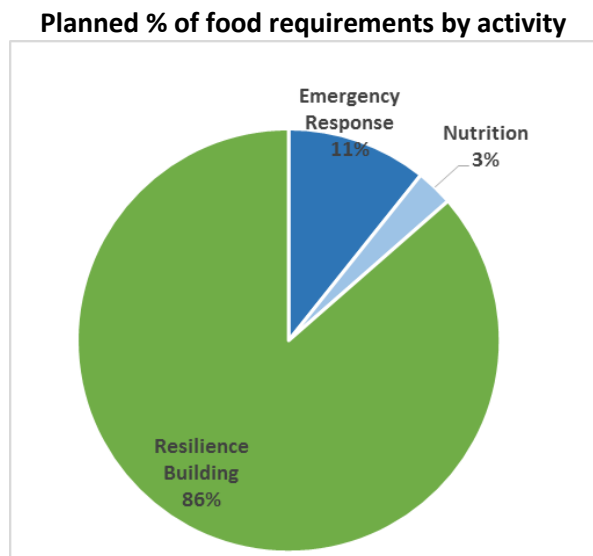
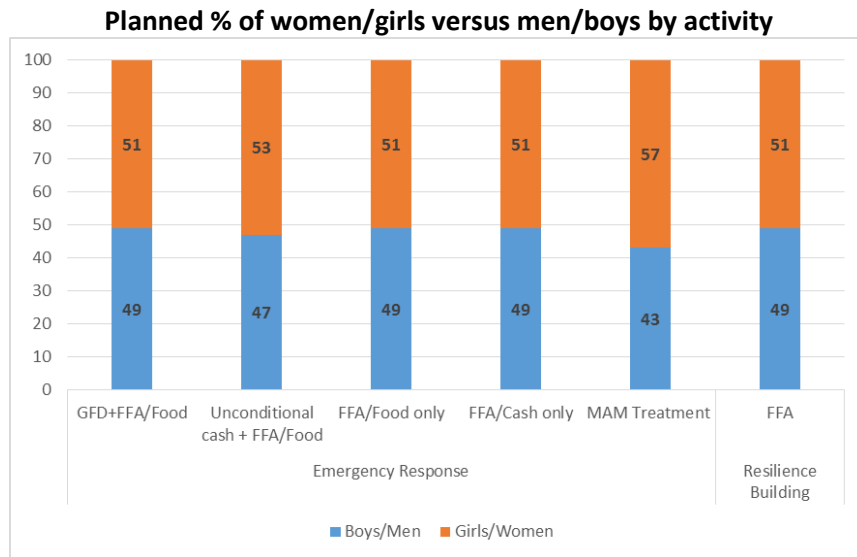
	Objective 1	Outcome 1.1. National institutions, regional bodies and the humanitarian community are able to prepare for, assess and respond to emergencies.	<ul style="list-style-type: none"> • Technical support in Preparedness, Early warning, Food Security Monitoring and assessments, Resilience and Nutrition. • Communities preparedness activities
		Outcome 1.2. Stabilised or reduced undernutrition among children 6-59 months and PLW	<ul style="list-style-type: none"> • MAM treatment for children 6-59 months and PLW • MAM prevention for children 6-23 months and PLW (<i>from BR#1</i>)
		Outcome 1.3. Stabilised or improved food consumption score over assistance period for targeted households and/or individuals.	<ul style="list-style-type: none"> • GFD (in-kind and cash) • FFA (cash and in-kind)
	Strategic Objective 3	Objective: Reduce risk and enable people, communities and countries to meet their own food and nutrition needs.	
		Outcome 3.1. Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-insecure communities and households.	Resilience / FFA
		Outcome 3.2. Risk reduction capacity of countries, communities and institutions strengthened.	Resilience / FFA
Cross-cutting results	Gender: Gender equality and empowerment improved; Protection and Accountability to Affected Populations (AAP): WFP assistance delivered and utilized in safe, accountable and dignified conditions; Partnership: Food assistance interventions coordinated and partnerships developed and maintained		
PARTNERS			
Government	The National Disaster Management Authority (<i>Bureau National de Gestion des Risques et des catastrophes - BNGRC</i>) and the National Office for Nutrition (<i>Office National de Nutrition -ONN</i>) are key partners in the implementation of PRRO 200735. WFP also interact with the Prime Minister's Office, the Ministry of Economy and Planning others such as Social Protection, Public Health, Agriculture, Livestock and Fisheries; Education; and of Women Affairs (<i>Ministere de la promotion de la femme</i>).		
United Nations	The Food and Agriculture Organization of the United Nations (FAO), the International Fund for Agricultural Development (IFAD), the United Nation Children's Fund (UNICEF), the Office for the Coordination of Humanitarian Affairs (OCHA) and the United Nations Development Programme (UNDP).		
NGOs	International NGOs (9) include: Catholic Relief Services (CRS), Welthungerhilfe (WHH), Cooperative for Assistance and Relief Everywhere (CARE), Adventist Development and Relief Agency (ADRA). National NGOs (20) include: Groupe de Recherches et d'Echanges Technologiques (GRET), Sandatra and others.		
RESOURCES (INPUTS)			

<p>Contribution received as of April 10, 2016: USD 14,468,658</p> <p>% against appeal: 48%</p> <p>Top 5 donors: UN Common funds and agencies; Switzerland; USA; UN CERF and Madagascar</p>	 <p>% funded of total requirements</p>	 <p>Top five donors</p>
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PLANNED OUTPUTS (at design)



¹⁰¹ The GFD+FFA activity refers to general food distribution for 15 days after an emergency, followed by FFA to help restore the critical assets (e.g. clearing of roads to access markets and basic social services, emergency water supply and sanitation, immediate drainage of canals, clearing of debris etc.). Nonetheless, the most affected households from the emergency continue benefitting from GFD beyond the initial 15 days.



4. Evaluation Approach

- **4.1. Scope**

17. **Scope.** The evaluation will cover PRRO 200735 including all activities and processes related to its formulation, implementation, resourcing, monitoring, evaluation and reporting relevant to answer the evaluation questions. The period covered by this evaluation captures the time from the development of the operation (1 June 2014 to – December 2014) and the period from the beginning of the operation until the start of the evaluation (1 January 2015 -30 September 2016).

18. The evaluation will focus on PRRO ongoing activities as per BR#1, for which all evaluation questions will apply. While evaluating the PRRO, the evaluation team should also assess the linkages with the Miaro project (a demonstration model aimed at preventing stunting).

• **4.2. Evaluation Questions**

19. The evaluation will address the following three questions.

Question 1: How appropriate is the operation? Areas for analysis will include the extent to which the objectives, targeting, choice of activities and of transfer modalities:

- Were appropriate at project design stage to the needs of the food insecure population including the distinct needs of women, men, boys and girls from different groups, as applicable, and remain so during implementation period.
- Are coherent with relevant stated national policies, including sector and gender policies and strategies and seek complementarity with the interventions of relevant humanitarian and development partners as well as with other CO interventions in the country, such as the CP and the trust funds.
- Were coherent at project design stage with relevant WFP and UN-wide system strategies, policies and normative guidance (including gender¹⁰²), and remain so over time. In particular, the team will analyse if and how gender empowerment and equality of women (GEEW) objectives and mainstreaming principles were included in the intervention design in line with the MDGs and other system-wide commitments enshrining gender rights.

Question 2: What are the results of the operation? While ensuring that differences in benefits between women, men, boys and girls from different groups are considered, the evaluation will analyse:

- The level of attainment of the planned outputs (including the number of beneficiaries served disaggregated by women, girls, men and boys);
- The extent to which the outputs lead to the realisation of the operation objectives as well as to unintended effects highlighting, as applicable, differences for different groups, including women, girls, men and boys; how GEEW results are been achieved;
- How different activities of the operation dovetail and are synergetic with other WFP operations and with what other actors are doing to contribute to the overriding WFP objective in the country; in particular, a new programme for the prevention of acute malnutrition was introduced to the existing programme for the treatment of moderate acute malnutrition in the PRRO after BR1; the evaluation team will assess the links and synergies between the PRRO's and the CP 200733 nutrition interventions.
- Analyse the efficiency of the operation and possibly make recommendations on how to ensure that the benefits will continue during implementation as well as after the end of the operation.
- Given the short implementation period of the resilience component (21 months) and considering that the funds mobilized in 2016 are mainly utilized to respond to the relief needs, the evaluation team will focus on assessing the implementation processes for resilience activities rather than on activity impact.

¹⁰² Relevant WFP Policies include: Gender Policy, Building Resilience for Food Security and Nutrition, Nutrition Policy, Policy on Disaster Risk Reduction and Management, WFP role in humanitarian system, humanitarian protection. For a brief on each of these and other relevant policies and the links to the policy documents, see the WFP orientation guide on page 14. For gender, in addition to WFP policy, refer to <http://www.ohchr.org/en/hrbodies/cedaw/pages/cedawindex.aspx> for information on UN system wide commitments.

Question 3: Why and how has the operation is producing the observed results? The evaluation should generate insights into the main internal and external factors that are causing the observed changes and affecting how results are achieved. The inquiry is likely to focus, amongst others, on:

- Internally (factors within WFP’s control): the processes, systems and tools in place to support the operation design, implementation, monitoring/evaluation and reporting; the governance structure and institutional arrangements (including issues related to staffing, capacity and technical backstopping from RB/HQ); the partnership and coordination arrangements; etc. In particular, the evaluation team will identify the existing bottlenecks in the M&E system for the CO to address the issues.
 - Externally (factors outside WFP’s control): the external operating environment; the funding climate; external incentives and pressures; etc.
 - In particular, the CO would also benefit from recommendations on how best it can position itself, adjust its overall capacity building strategy to ensure that the government, communities and the humanitarian community are effectively able to prepare for, assess and respond to emergencies.
20. Throughout the evaluation and in making recommendations, the team should bring forward considerations to inform current implementation as well as the design of WFP’s Country Strategic Plan and/or its future PRRO giving due consideration to the specific issues of interest to the CO and RB.

• **4.3 Evaluability Assessment**

21. Evaluability is the extent to which an activity or a programme can be evaluated in a reliable and credible fashion. The below provides a preliminary evaluability assessment, which will be deepened by the evaluation team in the inception package. The team will notably critically assess data availability and take evaluability limitations into consideration in its choice of evaluation methods. In doing so, the team will also critically review the evaluability of the gender aspects of the operation, identify related challenges and mitigation measures and determine whether additional indicators are required to include gender empowerment and gender equality dimensions.
22. In answering question one, the team will be able to rely on assessment reports, minutes from the project review committee, the project document and logframe, evaluations¹⁰³ or reviews of ongoing and past operations as well as documents related to government and interventions from other actors. In addition, the team will review relevant WFP strategies, policies and normative guidance.
23. For question two the operation has been designed in line with the corporate strategic results framework (SRF) and selected outputs, outcomes and targets are recorded in the logframe. Monitoring reports as well as annual standard project reports (SPRs) detail achievement of outputs and outcomes thus making them evaluable against the stated objectives.
24. When answering question two, the team should refer to the project detailed logframe containing targets and baselines for the specific activities. The evaluation team will have access to the detailed logframe from the folder shared on BOX.

Table 3: List of Available Data Sources

¹⁰³ [Madagascar PRRO 200065:](#)

List of Data Sources	2015	2016
SPR	✓	✓
Community and Household Surveillance Survey Report	✓	
Post Distribution Monitoring report (Asset creation / Nutrition)	✓	✓
Coverage Survey report (Nutrition)	✓	✓
Distribution report (COMET)	✓	✓

25. For question three, the team members will have access to some institutional planning documents and is likely to elicit further information from key informant interviews.

• **4.4. Methodology**

26. The methodology will be designed by the evaluation team during the inception phase. It should:

- Employ relevant internationally agreed evaluation criteria including those of relevance, coherence (internal and external), coverage, efficiency, effectiveness, impact and sustainability (or connectedness for emergency operations), giving special consideration to gender and equity issues.
- Use applicable standards (e.g. SPHERE standards; UNEG guidance on gender¹⁰⁴);
- Demonstrate impartiality and lack of biases by relying on a cross-section of information sources (e.g. stakeholder groups, including beneficiaries, etc.) and using mixed methods (e.g. quantitative, qualitative, participatory) to ensure triangulation of information through a variety of means. Participatory methods will be emphasised with the main stakeholders, including the CO. The selection of field visit sites will also need to demonstrate impartiality.
- Be geared towards addressing the key evaluation questions taking into account the evaluability challenges, the budget and timing constraints;
- Be based on an analysis of the logic model of the operation and on a thorough stakeholders analysis;
- Ensure through the use of mixed methods and appropriate sampling that women, girls, men and boys from different stakeholders groups participate and that their different voices are heard and used;
- Be synthesised in an evaluation matrix, which should be used as the key organizing tool for the evaluation.

• **4.5. Quality Assurance**

27. OEV's Evaluation Quality Assurance System (EQAS) defines the quality standards expected from this evaluation and sets out processes with in-built steps for quality assurance, templates for evaluation products and checklists for the review thereof. It is based on the UNEG norms and standards and good practice of the international evaluation community (DAC and ALNAP) and aims to ensure that the evaluation process and products conform to best practice and meet OEV's quality standards. EQAS does not interfere with the views and independence of the evaluation team.

28. At the start of the evaluation, OEV will orient the evaluation manager on EQAS and share related documents. EQAS should be systematically applied to this evaluation and the evaluation

¹⁰⁴ These are put into context of WFP evaluation in the OEV technical note on integrating gender in evaluation. Evaluation team will be expected to review this TN during the inception phase and ensure that gender is well mainstreamed in all phases and aspects of the evaluation.

manager will be responsible to ensure that the evaluation progresses in line with its process steps and to conduct a rigorous quality control of the evaluation products ahead of their submission to WFP. OEV will also share an Orientation Guide on WFP and its operations, which provides an overview of the organization.

5. Phases and deliverables

29. The evaluation will proceed through five phases. Annex two provides details of the activities and the related timeline of activities and deliverables.
30. **Preparation phase** (April - May 2016): The OEV focal point will conduct background research and consultation to frame the evaluation; prepare the TOR; select the evaluation team and contract the company for the management and conduct of the evaluation.
31. **Inception phase** (August –September 2016): This phase aims to prepare the evaluation team for the evaluation phase by ensuring that it has a good grasp of the expectations for the evaluation and a clear plan for conducting it. The inception phase will include a desk review of secondary data and initial interaction with the main stakeholders.

- **Deliverable: Inception Package.** The Inception Package details how the team intends to conduct the evaluation with an emphasis on methodological and planning aspects. The IP will be shared with CO, RB and OEV for comments before being approved by OEV. It will present an analysis of the context and of the operation, the evaluation methodology articulated around a deepened evaluability and stakeholders’ analysis; an evaluation matrix; and the sampling technique and data collection tools. It will also present the division of tasks amongst team members as well as a detailed schedule for stakeholders’ consultation. For more details, refer to the [content guide for the inception package](#).

32. **Evaluation phase** (3-21 October 2016): The fieldwork will span over three weeks and will include visits to project sites and primary and secondary data collection from local stakeholders. Two debriefing sessions will be held upon completion of the field work. The first one will involve the country office (relevant RB and HQ colleagues will be invited to participate through a teleconference) and the second one will be held with external stakeholders.

- **Deliverable: Exit debriefing presentation.** An exit debriefing presentation of preliminary findings and conclusions (PowerPoint presentation) will be prepared to support the debriefings.

33. **Reporting phase** (November 2016 – January 2017): The evaluation team will analyse the data collected during the desk review and the field work, conduct additional consultations with stakeholders, as required, and draft the evaluation report. It will be submitted to the evaluation manager for quality assurance. Stakeholders will be invited to provide comments, which will be recorded in a matrix by the evaluation manager and provided to the evaluation team for their consideration before report finalisation.

- **Deliverable: Evaluation report.** The evaluation report will present the findings, conclusions and recommendations of the evaluation in a concise report of 40 pages maximum. Findings should be evidence-based and relevant to the evaluation questions. Data will be disaggregated by sex and the evaluation findings and conclusions will highlight differences in performance and results of the operation for different beneficiary groups as appropriate. There should be a logical flow from findings to conclusions and from conclusions to recommendations. Recommendations will be limited in number, actionable and targeted to the relevant users. These will form the basis of the WFP management response to the

evaluation. For more details, refer to the [content guide for the evaluation report](#) and the [OpEv sample models for presenting results](#).

34. **Follow-up and dissemination phase:** OEV will share the final evaluation report with the CO and RB. The CO management will respond to the evaluation recommendations by providing actions that will be taken to address each recommendation and estimated timelines for taking those actions. The RB will coordinate WFP’s management response to the evaluation, including following up with country offices on status of implementation of the actions. OEV will also subject the evaluation report to an external post-hoc quality review to report independently on the quality, credibility and utility of the evaluation in line with evaluation norms and standards. A feedback online survey on the evaluation will also be completed by all stakeholders. The final evaluation report will be published on the WFP public website, and findings incorporated into an annual synthesis report, which will be presented to WFP’s Executive Board for consideration. This synthesis will identify key features of the evaluated operations and report on the gender sensitivity of the operations among other elements. Findings will be disseminated and lessons will be incorporated into other relevant lesson sharing systems.

Notes on the deliverables:

The inception package and evaluation reports shall be written in English and follow the EQAS templates.

The evaluation team is expected to produce written work that is of very high standard, evidence-based, and free of errors. The evaluation company is ultimately responsible for the timeliness and quality of the evaluation products. If the expected standards are not met, the evaluation company will, at its own expense, make the necessary amendments to bring the evaluation products to the required quality level.

The evaluation TOR, report and management response will be public and posted on the WFP External Website (wfp.org/evaluation). The other evaluation products will be kept internal.

Table 4: Key dates for field mission and deliverables

Entity responsible	Phase	Activities	Key dates (tentative)
EM/ET	Inception	Draft Inception Package	1 Sept. 2016
EM/ET	Inception	Final Inception Package	15 Sept. 2016
CO/ET	Evaluation	Evaluation field mission	3-21 October 2016
ET	Evaluation	Exit Debriefing Presentation	21 October 2016
EM/ET	Reporting	Draft Evaluation Report	6 Dec. 2016
EM/ET	Reporting	Final Evaluation Report	13 Jan. 2017
CO/RB	Follow-up	Management Response	17 Jan. 2017

6. Organization of the Evaluation

6.1 Outsourced approach

35. Under the outsourced approach to OpEvs, the evaluation is commissioned by OEV but will be managed and conducted by an external evaluation company having a long-term agreement (LTA) with WFP for operations evaluation services.

36. The company will provide an evaluation manager (EM) and an independent evaluation team (ET) in line with the LTA. To ensure a rigorous review of evaluation deliverables, the evaluation manager should in no circumstances be part of the evaluation team.

37. The company, the EM and the ET members will not have been involved in the design, implementation or M&E of the operation nor have other conflicts of interest or bias on the subject. They will act impartially and respect the code of conduct of the profession.

38. Given the evaluation learning objective, the evaluation manager and team will promote stakeholders' participation throughout the evaluation process. Yet, to safeguard the independence of the evaluation, WFP staff will not be part of the evaluation team or participate in meetings with external stakeholders if the evaluation team deems that their presence could bias the responses.

6.2 Evaluation Management

39. The evaluation will be managed by the company's EM for OpEvs (as per LTA). The EM will be responsible to manage within the given budget the evaluation process in line with EQAS and the expectations spelt out in these TOR and to deliver timely evaluation products meeting the OEV standards. In particular, the EM will:

- Mobilise and hire the evaluation team and provide administrative backstopping (contracts, visas, travel arrangements, consultants' payments, invoices to WFP, etc).
- Act as the main interlocutor between WFP stakeholders and the ET throughout the evaluation and generally facilitate communication and promote stakeholders' participation throughout the evaluation process.
- Support the evaluation team by orienting members on WFP, EQAS and the evaluation requirements; providing them with relevant documentation and generally advising on all aspects of the evaluation to ensure that the evaluation team is able to conduct its work.
- Ensure that the evaluation proceeds in line with EQAS, the norms and standards and code of conduct of the profession and that quality standards and deadlines are met.
- Ensure that a rigorous and objective quality check of all evaluation products is conducted ahead of submission to WFP. This quality check will be documented and an assessment of the extent to which quality standards are met will be provided to WFP.
- Provide feedback on the evaluation process as part of an evaluation feedback e-survey.

6.3 Evaluation Conduct

40. The ET will conduct the evaluation under the direction of the EM. The team will be hired by the company following agreement with OEV on its composition.

41. **Team composition.** The evaluation team is expected to include two to three members, including the team leader. It should include women and men of mixed cultural backgrounds. At least one team member should have WFP experience. It should include women and men of mixed cultural backgrounds and one or two nationals of Madagascar. At least one team member should have WFP experience.

42. **Team competencies.** The team will be multi-disciplinary and include members who together include an appropriate balance of expertise and practical knowledge in the following areas:

- Resilience building
- Emergency Response as well as Disaster Risk Reduction (DRR) and Disaster Risk Management (DRM);
- Participatory Rural Appraisal (PRA) and community development;
- Community Nutrition programming or a good understanding of nutrition issues;

- Gender expertise / good knowledge of gender issues within the country/regional context as well as understanding of UN system-wide and WFP commitments on gender.
43. All team members should have strong analytical and communication skills; evaluation experience and familiarity with the country or region.
44. Oral and written language requirements include full proficiency in both English and French within the team. As specified in section 5, the Inception package and Evaluation report will need to be written in English.
45. The **Team Leader** will have good communication, management and leadership skills and demonstrated experience and good track record in leading similar evaluations. He/she should also have excellent English writing and presentation skills, technical expertise in one of the technical areas listed above as well as expertise in designing methodology and data collection tools.
46. Her/his primary responsibilities will be: i) defining the evaluation approach and methodology; ii) guiding and managing the team; iii) leading the evaluation mission and representing the evaluation team; iv) drafting and revising, as required, the inception package, exit debriefing presentation and evaluation report in line with EQAS; and v) provide feedback to OEV on the evaluation process as part of an evaluation feedback e-survey.
47. **The team members** will bring together a complementary combination of the technical expertise required and have a track record of written work on similar assignments.
48. Team members will: i) contribute to the methodology in their area of expertise based on a document review; ii) conduct field work; iii) participate in team meetings and meetings with stakeholders; iv) contribute to the drafting and revision of the evaluation products in their technical area(s); and v) provide feedback on the evaluation process as part of an evaluation feedback e-survey.

6.4 Security Considerations

49. As an 'independent supplier' of evaluation services to WFP, the evaluation company is responsible for ensuring the security of all persons contracted, including adequate arrangements for evacuation for medical or situational reasons. The consultants contracted by the evaluation company do not fall under the UN Department of Safety & Security (UNDSS) system for UN personnel.

50. However, to avoid any security incidents, the Evaluation Manager is requested to ensure that:
- Travelling team members complete the UN system's applicable Security in the Field courses in advance, print out their certificates and take them with them. (These take a couple of hours to complete.)
 - The WFP CO registers the team members with the Security Officer on arrival in country and arranges a security briefing for them to gain an understanding of the security situation on the ground.
 - The team members observe applicable UN security rules and regulations – e.g. curfews etc.

For more information, including the link to UNDSS website, see [EQAS for operations evaluations](#) page 34.

7. Roles and Responsibilities of WFP Stakeholders

51. **The Country Office.** The CO management will be responsible to:
- Assign a focal point for the evaluation. Fatimata Sow-Sidibe (Deputy CD); Rijasoia Rakotoarinoroandriamahazo (M&E Officer) will be the CO focal points for this evaluation.

- Comment on the TORs, inception package and the evaluation report
 - Provide the evaluation manager and team with documentation and information necessary to the evaluation; facilitate the team's contacts with local stakeholders; set up meetings, field visits; provide logistic support during the fieldwork; and arrange for interpretation, if required.
 - Organise security briefings for the evaluation team and provide any materials as required
 - Participate in discussions with the evaluation team on the evaluation design and on the operation, its performance and results and in various teleconferences with the evaluation manager and team on the evaluation products.
 - Organise and participate in two separate debriefings, one internal and one with external stakeholders.
 - Prepare a management response to the evaluation recommendations.
 - Provide feedback to OEV on the evaluation process as part of an evaluation feedback e-survey.
52. **The Regional Bureau.** The RB management will be responsible to:
- Assign a focal point for the evaluation. Silvia Biondi, Regional M&E Adviser will be the RB focal point for this evaluation.
 - Participate in discussions with the evaluation team on the evaluation design and on the operation, its performance and results. In particular, the RB should participate in the evaluation debriefing and in various teleconferences with the evaluation manager and team, as required.
 - Provide comments on the TORs, inception package and the evaluation report.
 - Coordinate the management response to the evaluation and track the implementation of the recommendations.
 - Provide feedback to OEV on the evaluation process as part of an evaluation feedback e-survey.
53. **Headquarters.** Some HQ divisions might, as relevant, be asked to discuss WFP strategies, policies or systems in their area of responsibility and to comment on the evaluation TOR and report.
54. **The Office of Evaluation.** OEV is responsible for commissioning the evaluation and Miranda Sende, Evaluation Officer, is the OEV focal point. OEV's responsibilities include to:
- Set up the evaluation including drafting the TOR in consultation with concerned stakeholders; select and contract the external evaluation company; and facilitate the initial communications between the WFP stakeholders and the external evaluation company.
 - Enable the company to deliver a quality process and report by providing them with the EQAS documents including process guidance, content guides and templates as well as orient the evaluation manager on WFP policies, strategies, processes and systems as required.
 - Comment on the draft inception package.
 - Comment on the evaluation report and approve the final version.
 - Submit the final evaluation report to an external post-hoc quality review process to independently report on the quality, credibility and utility of the evaluation and provide feedback to the evaluation company accordingly.
 - Publish the final evaluation report on the WFP public website and incorporate findings into an annual synthesis report, which will be presented to WFP's Executive Board for consideration.
 - Conduct an evaluation feedback e-survey to gather perceptions about the evaluation process and the quality of the report to be used to revise the approach, as required.

8. Communication and budget

8.1. Communication

55. Issues related to language of the evaluation are noted in sections 6.3 and 5, which also specifies which evaluation products will be made public and how and provides the schedule of debriefing with key stakeholders. Section 5 (paragraph 33) describes how findings will be disseminated.

56. To enhance the learning from this evaluation, the evaluation manager and team will also emphasize transparent and open communication with WFP stakeholders. Regular teleconferences and one-on-one telephone conversations between the evaluation manager, team and country office focal point will assist in discussing any arising issues and ensuring a participatory process.

8.2. Budget

57. **Funding source:** The evaluation will be funded in line with the WFP special funding mechanism for Operations Evaluations (Executive Director Memorandum dated October 2012 and July 2015). The cost to be borne by the CO will be established by the WFP Budget & Programming Division (RMB).

58. **Budget:** The budget will be prepared by the company (using the rates established in the LTA and the template) and approved by OEV. For the purpose of this evaluation the company will:

- Use the management fee corresponding to a small operation.
- Budget for internal flights between Antananarivo and Fort-dauphin (estimated cost is US\$ 251 or 800,000 MGA per flight per person).

Miranda Sende, Evaluation Officer, at: miranda.sende@wfp.org, phone: +39 06 6513 2539

Annex 2: Evaluation matrix

Key Question 1: How appropriate is the operation?						
Nber	Sub-questions	Measure/Indicator	Main Sources of Information	Data Collection Methods	Data Analysis Methods	Evidence quality
1.1	Is the intervention relevant to needs of the food insecure population, including to the specific needs of women, men, girls and boys from different groups?	<p>1.1.1: Relevance of the objectives of the operation regarding the context and needs identified, and of the evolution of needs during the implementation</p> <ul style="list-style-type: none"> - Process and quality of the initial assessment of food security, resilience and nutrition needs - Process and quality of the continuing review of needs during the implementation of the operation - Situation and needs in term of food security, exposure to shocks and nutrition when the programme was designed and amended (food consumption, coping strategies, livelihoods, malnutrition, recurrence and effects of shocks...); situation and specific needs of women, men, girls and boys - Relevance of nutrition proposed activities according to overall nutrition situation in targeted area and to the nutrition causal current analysis. - Effects of El niño and 2015 droughts on food security, livelihoods and nutrition. Relevance of the WFP response plan - Extent to which the operation represents and appropriate response to the identified needs <p>1.1.2: Relevance of activities and transfer modalities implemented</p> <ul style="list-style-type: none"> - Quality and relevance of the logic of intervention, and proposed activities to achieve the objectives of the programme - Relevance of the approaches proposed for GFD, nutrition and FFA. Existence of alternatives - Appropriateness of proposed food rations and cash transfers to needs, food habits and expected results 	<ul style="list-style-type: none"> - WFP staff implicated in the programme design - Government and authorities at national and regional level, - Cooperating partners - Beneficiaries - Project document - Budget revision document - Needs assessment reports - Other relevant documents <ul style="list-style-type: none"> - WFP staff involved in the programme design - Government and authorities at national and regional level, - Cooperating partners - Other key informants - Project document - Food security, livelihoods, nutrition 	<ul style="list-style-type: none"> - Semi structured interviews - Restitution of preliminary findings - Literature review <ul style="list-style-type: none"> - Semi structured interviews - Restitution of preliminary findings - Literature review 	<p>Triangulation of evidences</p> <p>Validation of preliminary findings in restitutions</p>	Good

		<ul style="list-style-type: none"> - Relevance of assets created through FFA - Relevance of transfer modalities proposed (food vs. Cash and Voucher) - Relevance of the organization of distributions - Level of participation of stakeholders, including beneficiaries, in the definition of activities, modalities and ration composition - Level of satisfaction of beneficiaries on activities implemented <p>1.1.3: Relevance of beneficiary targeting and coverage</p> <ul style="list-style-type: none"> - Relevance of the geographic targeting at regional, district and settlement level according to identified needs - Relevance of targeting criteria for GFD, nutrition and FFA - Relevance of the area (district and communes) targeted for nutrition activities - Quality of the selection process, level of reported inclusions and exclusions, including complaint mechanism - Level of participation and satisfaction of stakeholders (including beneficiaries) in the definition of selection criteria and on the beneficiary selection process 	<p>reports</p> <ul style="list-style-type: none"> - Technical documents on activities' conception and implementation <ul style="list-style-type: none"> - WFP staff - Cooperating partners - Local authorities - Local representations of sector ministries - Beneficiaries - Other key informants - Project document - Food security, livelihoods, nutrition assessment reports - Targeting approach conception documents 	<ul style="list-style-type: none"> - Semi structured interviews - Restitution of preliminary findings - Literature review 		
1.2	<p>Is the intervention coherent with relevant Government policies including sector and gender policies? Is the operation coherent and complementary with the interventions of other humanitarian actors?</p>	<p>1.2.1: Coherence of the operation with Government policies and strategies on nutrition, food security, rural development, resilience, DRR and emergency response and gender :</p> <ul style="list-style-type: none"> - Objectives - Approaches - Priorities <p>1.2.2: Coherence of the operation with other humanitarian interventions:</p> <ul style="list-style-type: none"> - Donor's strategies on nutrition, food security, rural development, resilience, DRR and emergencies - Objectives, approaches and geographical coverage of the main NGOs and UN agencies involved in nutrition, food security, rural development, resilience, DRR and emergencies 	<ul style="list-style-type: none"> - Government institutions staff at national level - Local representations of sector ministries - Documents on national and regional policies, strategies and national programmes - Project document <ul style="list-style-type: none"> - Donors - National and international NGOs - Coordination mechanisms lead institutions at national and regional 	<ul style="list-style-type: none"> - Semi structured interviews - Literature review <ul style="list-style-type: none"> - Semi structured interviews - Literature review 	<p>Comparison of the programme's objectives, activities, standards and approaches with national policies and strategies and other interventions' objectives and activities</p>	Good

		<ul style="list-style-type: none"> - Quality of sector and humanitarian coordination mechanisms at national and regional. Level of participation and contribution of WFP - Synergies with other humanitarian interventions - Coherence with Nutrition cluster response plan for Nutrition activities 	<ul style="list-style-type: none"> level - WFP staff Cooperating partners 			
1.3	Is the operation coherent with WFP and UN-wide policies, strategies and normative guidance?	<p>1.3.1: Coherence of the operation with WFP strategic plan and Strategic Results Framework 2014-2017, in term of:</p> <ul style="list-style-type: none"> - objectives - activities - indicators - modalities... <p>1.3.2: Coherence of the operation with WFP regional strategy</p> <p>1.3.3: Coherence of the operation with WFP sectorial policies and technical guidance in term of:</p> <ul style="list-style-type: none"> - GFD - Nutrition - DRR and resilience - FFA - Gender - Capacity development <p>1.3.4: Coherence and complementary of the operation with other UN interventions</p> <ul style="list-style-type: none"> - Objectives and activities of the UNDAF - Objectives, approaches of other UN interventions - Synergies with other UN interventions 	<ul style="list-style-type: none"> - WFP representative and head of programme - WFP strategic plan and SRF - WFP regional strategy - WFP technical staff - Policies and technical guidance documents - UNDAF document - Relevant other UN agency country strategies or program documents - UNICEF, FAO, UNFPA, UNDP 	<ul style="list-style-type: none"> - Semi structured interviews - Literature review - Literature review - Semi structured interviews - Literature review - Semi structured interviews - Literature review 	Comparison of the programme's objectives, activities, approaches and modalities with the objectives and guidance of strategic plans and technical guidance documents	Good
Key Question 2: What are the results of the operation?						
Nber	Sub-questions	Measure/Indicator	Main Sources of Information	Data Collection Methods	Data Analysis Methods	Evidence quality
2.1	What is the level of attainment of	<p>2.1.1. Capacity development on DRR</p> <ul style="list-style-type: none"> - Number of people trained, disaggregated by sex and type of 	<ul style="list-style-type: none"> - WFP staff 	<ul style="list-style-type: none"> - Semi-structured interviews: 	Comparison between	Good

	the planned outputs?	<p>training</p> <ul style="list-style-type: none"> - Number of technical assistance activities provided, by type <p>2.1.2: GFD</p> <ul style="list-style-type: none"> - Number of women, men, boys and girls receiving food assistance, disaggregated by activity, beneficiary category, sex, food, non-food items, cash transfers and vouchers, as % of planned - Total amount of cash transferred to targeted beneficiaries, disaggregated by sex and beneficiary category, as % of planned - Number of feeding days, as % of planned - Quantity of food assistance distributed, disaggregated by type, as % of planned - Reasons for differences <p>2.1.3: Nutrition</p> <ul style="list-style-type: none"> - Number of women, men, boys and girls receiving food assistance, disaggregated by activity, beneficiary category, sex, food, non-food items, cash transfers and vouchers, as % of planned - Total amount of cash transferred to targeted beneficiaries, disaggregated by sex and beneficiary category, as % of planned - Number of feeding days, as % of planned - Quantity of food assistance distributed, disaggregated by type, as % of planned - Reasons for differences <p>2.1.4: Resilience/FFA</p> <ul style="list-style-type: none"> - Number of assets built restored or maintained by targeted households and communities, by type and unit of measure 	<ul style="list-style-type: none"> - Cooperating partners - Beneficiaries of each activities - Local representations of sector ministries - Standard Project Reports - Monthly distribution reports - Partner's reports - M&E reports 	<p>individual (WFP, partners) and focus groups (beneficiaries)</p> <ul style="list-style-type: none"> - Observation - Literature review - Restitution of preliminary findings 	<p>planned and attained outputs using tables and graphs</p> <p>Triangulation of evidences</p> <p>Validation of preliminary findings in restitutions</p>	
2.2	To what extent the outputs attained have contributed to the achievement of the defined	<p>2.2.1: Measures of outcomes: capacity development on DRR</p> <ul style="list-style-type: none"> - EPCI: Emergency Preparedness and Response Capacity Index (SO1) - Proportion of targeted communities where there is evidence of improved capacity to manage climatic shocks and risks supported by WFP (SO3) 	<ul style="list-style-type: none"> - WFP staff - Cooperating partners - Beneficiaries of each activities - Local representations of sector ministries 	<ul style="list-style-type: none"> - Semi-structured interviews: individual (WFP, partners) and focus groups and 	<ul style="list-style-type: none"> - Comparison between targets and achieved - Comparison 	<p>Several indicators of outcomes have not been</p>

	<p>objectives and/or have resulted in positive, negative, expected or unexpected effects?</p>	<p>2.2.2: Measures of outcomes: GFD (SO 1)</p> <ul style="list-style-type: none"> - FCS: percentage of households with poor Food Consumption Score - FCS: percentage of households with poor Food Consumption Score (female-headed) - FCS: percentage of households with poor Food Consumption Score (male-headed) - Diet Diversity Score - Diet Diversity Score (female-headed households) - Diet Diversity Score (male-headed households) <p>2.2.3: Measures of outcomes: Nutrition (SO 1)</p> <ul style="list-style-type: none"> - MAM treatment recovery rate (%) - MAM treatment mortality rate (%) - MAM treatment non-response rate (%) - Proportion of eligible population who participate in programme (coverage) - MAM treatment default rate (%) - Proportion of target population who participate in an adequate number of distributions - <p>2.2.4: Measures of outcomes: Resilience and FFA</p> <ul style="list-style-type: none"> - CAS: percentage of assets damaged or destroyed during emergency which were restored (SO1) - CAS: percentage of communities with an increased Asset Score (SO3) - FCS: percentage of households with borderline Food Consumption Score (SO3) - FCS: percentage of households with borderline Food Consumption Score (female-headed) (SO3) - FCS: percentage of households with borderline Food Consumption Score (male-headed) (SO3) - FCS: percentage of households with poor Food Consumption Score (SO3) 	<ul style="list-style-type: none"> - Standard Project Reports - Monthly distribution reports - Partner's reports - M&E reports - Standard Project Reports - Partners reports - Post distribution monitoring reports 	<p>individual beneficiaries)</p> <ul style="list-style-type: none"> - Observation - Literature review - Restitution of preliminary findings 	<p>between targets and achieved</p> <ul style="list-style-type: none"> - Comparison between targets and achieved 	<p>measured or are not fully reliable (eg. Recovery rate)</p> <p>ET did not collect primary evidences at local level for the component of capacity development on DRR</p>
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		<ul style="list-style-type: none"> - FCS: percentage of households with poor Food Consumption Score (female-headed) (SO3) - FCS: percentage of households with poor Food Consumption Score (male-headed) (SO3) - CSI (Food): Coping Strategy Index (average) (SO3) - CSI (Asset Depletion): Coping Strategy Index (average) (SO3) <p>2.2.5: Cross-cutting outcomes</p> <ul style="list-style-type: none"> - Proportion of households where males make decisions over the use of cash, voucher or food - Proportion of women beneficiaries in leadership positions of project management committees - Proportion of households where females and males together make decisions over the use of cash, voucher or food - Proportion of households where females make decisions over the use of cash, voucher or food - Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution - Proportion of project activities implemented with the engagement of complementary partners - Number of partner organizations that provide complementary inputs and services - Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site - Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain) <p>2.2.6: Other effects, positive or negative</p>				
2.3	To what extent activities implemented are complementary within themselves	<p>2.3.1: Synergies and complementarity of the activities of the operation in term of:</p> <ul style="list-style-type: none"> - Geographic convergence - Coherence of approaches - Technical coherence 	<ul style="list-style-type: none"> - WFP staff - Actors involved in nutrition, DRR, food security, resilience in 	<ul style="list-style-type: none"> - Semi structured interviews - Literature 	Identification and analysis of convergences/ synergies and contradictory	Good

	<p>and with interventions of other actors to contribute to the overriding objectives of WFP in the country?</p>	<ul style="list-style-type: none"> - Partnership - GFD and blanket feeding - Other aspects : beneficiaries understanding on the operation and acceptance to the different activities <p>2.3.2 Coherence and synergies with other WFP activities, especially for nutrition activities</p> <ul style="list-style-type: none"> - Geographic complementarity and/or convergence with Country Programme and Miaro project - Technical coherence - Partnership - Other aspects <p>2.3.3: Complementarity and synergies with interventions of other actors in emergencies and recovery: geographic convergence, technical coherence, partnership</p> <ul style="list-style-type: none"> - DRR at national and regional level - Prevention and treatment of malnutrition: coherence and complementarity with others type of prevention activities implemented in the area (AINA project), Complementarity and synergies with others actor for MAM treatment roll out . Continuum with MAS treatment (UNICEF supported) - Food security - Resilience 	<p>emergency and recovery (UN, main NGOs, others)</p> <ul style="list-style-type: none"> - Beneficiaries of capacity development activities at national level - Local representations of sector ministries - Cluster and other coordination mechanisms leaders - Beneficiaries - Project documents and evaluations of CBPP and Miaro project; - UNICEF nutrition projects documents; <p>Nutrition cluster NGOs members (ACF, GRET) strategy and projects documents and reporting</p> <p>Integration and participation into nutrition cluster activities</p>	<p>review</p> <ul style="list-style-type: none"> - Restitution of preliminary findings 	<p>approaches, gaps and overlaps</p> <p>Validation during restitutions</p>	
2.4	<p>What is the efficiency of the operation and what are the perspectives of sustainability of the effects after the end of the implementation period of the programme?</p>	<p>2.4.1: Efficiency of the operation</p> <ul style="list-style-type: none"> - Timeliness of activities implementation regarding the implementation plans and the context - Adequacy of human, financial and material resources regarding the objectives of the programme - Modalities' choices - Quality of the NGO's partner selected for implementation of the different activities (especially for nutrition) - Level of implementation of the budget - Efficiency and capacities of the logistic set up 	<ul style="list-style-type: none"> - WFP staff - Cooperating partners - Beneficiaries - Local representations of sector ministries - Other key informants 	<ul style="list-style-type: none"> - Individual and focus group interviews - Observation - Restitution of preliminary findings 	<p>Triangulation of evidences</p> <p>Validation during restitutions</p>	Good

		<p>2.4.2: Perspective of continuation of the activities and their effects</p> <ul style="list-style-type: none"> - Existence/relevance of the exit strategy and measures planned to support the sustainability of actions - Use of lessons learnt from previous programmes and evaluations - Level of sustainability of actions in term of appropriation by national actors, social and organizational, technic, economic institutional, environmental - Integration of MAM treatment in health centre (Centre de Santé de base) and in nutrition site at community level and appropriation at community and district level - MAM treatment perception by the beneficiaries 	<ul style="list-style-type: none"> - Results of training of health workers and community nutrition worker (ANC) trained for MAM treatment and prevention intervention - PNNC staff at district level and Nutrition community workers 			
Key Question 3: Why and how has the operation produced the observed results?						
Nber	Sub-questions	Measure/Indicator	Main Sources of Information	Data Collection Methods	Data Analysis Methods	Evidence quality
3.1	What are the internal (implementing, under WFP control) factors that have positively or negatively affected the implementation of activities and the achievement of objectives?	<p>3.1.1: Quality of the operation's implementation, in term of:</p> <ul style="list-style-type: none"> - Planning process and appropriateness and appropriateness of activities' implementing periods - Institutional arrangements, decision making process and constraints management - Logistic and food procurement (procurement, transport, storage, losses, management of pipeline breaks,...) - Quality and constraints of partnerships, partner's capacity - Administrative and financial management of the operation (appropriateness and respect of procedures) - M&E and reporting systems - Resource mobilisation strategy - Support provided by the CO, RB and HQ - Appropriateness, competences and capacities of staff 	<ul style="list-style-type: none"> - WFP representative and head of programme - WFP staff - Cooperating partners - Donors - Documents of planning of activities - Logistic, administration and finance management tools - Distribution reports - Partners reports - M&E reports - Project equipment - Project budget and financial reports - MoU with partners 	<ul style="list-style-type: none"> - Semi-structured interviews - Literature review - Observation - Restitution of preliminary findings 	<ul style="list-style-type: none"> - Triangulation of evidences - Validation in restitutions 	Good
3.2	What are the external factors that have positively or	<p>3.2.1: Positive and negative effect of contextual factors</p> <ul style="list-style-type: none"> - Political, economic, institutional and security situation - Existence/quality/appropriateness of national policies and strategies, and institutional support to the operation 	<ul style="list-style-type: none"> - WFP representative and head of programme - WFP CO staff 	<ul style="list-style-type: none"> - Semi-structured interviews - Literature 	<ul style="list-style-type: none"> - Triangulation of evidences 	Good

	<p>negatively affected the implementation of activities and the achievement of objectives?</p>	<ul style="list-style-type: none"> - Evolution of the food security and nutrition situation - Occurrence of shocks - Situation of women and girls - Other constraints faced by beneficiaries - Socio-cultural characteristics and knowledge, behaviour of beneficiaries - Access to beneficiaries - Socio- cultural factor (belief) on nutrition and IYCF - Socio-cultural factor regarding health centre frequentation - Communication infrastructures - Level of mobilization of donors - Other factors 	<ul style="list-style-type: none"> - BIAFA - UNHCR - Donors - School and training centres staff - Health centre staff - Refugee councils - Beneficiaries - Other key informants - Policy and strategy documents - Sitreps - Partners reports - M&E reports - Project equipment 	<p>review</p> <ul style="list-style-type: none"> - Observation - Restitution of preliminary findings 	<ul style="list-style-type: none"> - Validation in restitutions 	
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Annex 3: List of sites selected for field visits

Region	District	Commune (site)	Year	Beneficiaries	Partners	Access
GFD						
Analamanga	Ankazobe	Andranofeno				Antananarivo
Atsimo Andrefana	Tulear I	Tulear 1	2015	114	UNFPA	Close to sub-office Tulear
Atsimo Andrefana	Toliary II	Beheloka	2016	394	ECAR	North of Tulear
Androy	Ambovombe	Ambondro		1,743	ORN Androy	45 mn from Ambovombe
Androy	Bekily	Tanandava	2016	6,731	Manao	Axis Bekily
Anosy	Amboasary Atsimo	Sampona	2016	7,545	Centre de Services Agricoles	East of Ambovombe
FFA – SO1						
Atsimo Andrefana	Tulear II	Tulear II			ECAR	
Atsimo Andrefana	Tulear II	Beheloka	2016	7,600	ECAR	North of Tulear
Atsimo Andrefana	Betioky Atsimo	Soamanonga	2015	5,660	TAMAFA	Axis Betioky - Ampanihy
Atsimo Andrefana	Betioky Atsimo	Ankazamonga Ouest	2016	5,905	TAMAFA	Axis Betioky- Ampanihy
Atsimo Andrefana	Ampanihy Ouest	Antaly				Axis Betioky - Ampanihy
Atsimo Andrefana	Ampanihy Ouest	Itampolo				Axis Betioky - Ampanihy
Androy	Tsihombe	Betanty	2015	12,500	Ampelamitrika oka	Axis Tsihombe
Androy	Bekily	Manakompy (Befangitsy)	2015	4,675	MADR	Axis Bekily
Androy	Bekily	Ambatosoloa				Axis Bekily
Androy	Bekily	Belindo Mahasoia	2015	2,100	MADR	Axis Bekily
Androy	Tsihombe	Marovato (Soramena)			CAC Havelontika	Axis Tsihombe
Anosy	Amboasary Atsimo	Amboasary Atsimo	2015, 2016	9,000	MIARO	East of Ambovombe
FFA – SO3						
Androy	Ambovombe	Ambovombe (cash) (Ambovombe Centre)	2016	7,000	Taza Maison des jeunes	Close to sub-office Ambovombe
Androy	Bekily	Bekily (cash) (Amararata Ouest)	2015	5,526	AIM	Axis Bekily
Anosy	Amboasary Atsimo	Amboasary Atsimo (food) (Amboasary)	2015	2,831	CARE	East of Ambovombe
Anosy	Amboasary Atsimo	Sampona	2016	4,280	CARE	East of Ambovombe
MAM treatment						
Androy	Ambovombe	Ambovombe (Sevohipoty)	2015, 2016	11,703 + 9,574	ONN, UPNNC	Close to sub-office Ambovombe
Androy	Tsihombe	Marovato	2015, 2016		ONN, UPNNC	Axis Tsihombe

Androy	Bekily	Anja Nord (Anja Nord)	2015, 2016		ONN, UPNNC	Axis Bekily
Androy	Bekily	Manakompy (Befangitsy)	2015, 2016		ONN, UPNNC	Axis Bekily
Atsimo Andrefana	Ampanihy Ouest	Itampolo				Axis Betioky-Ampanihy
<i>Prevention of malnutrition</i>						
Atsimo Andrefana	Ampanihy Ouest	Antaly			Fihamy	Axis Betioky-Ampanihy
Atsimo Andrefana	Betioky Atsimo	Soamanonga			Tamafa	
Androy	Bekily	Tanandava (Antsovela SAMA)				
Androy	Bekily	Manakompy				

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Annex 5: List of persons met

Name	Agency	Position
Moumini Ouedraogo	WFP	Country director
Fatimata Sow-Sidibé	WFP	Deputy country director
Arisoa Raharinjatovo	WFP	PRRO 200735 coordinator
Norah HOBBS	WFP	Nutrition officer
Volana Rarivoson	WFP	Gender focal point
Laurence De Graeve	WFP	Donors relation officer
Léa Razanany	WFP	Budget programming officer
Rijaso Rakotoarinoroandriamahazo	WFP	M&E officer
Maherisoa Rakotonirainy	WFP	Head of VAM and M&E unit
Christiane Rasamiarisa	WFP	Procurement officer
Miarisoa Andriamanalinandrasana	WFP	Procurement associate
Uwe Sonntag	WFP	Logistic officer
Tanjona Andriamarolaza	WFP	Cash officer
Naval Rovaovison	WFP	Cash officer
Blandine Legonou	WFP	Head of Ambovombe sub-office
Moïse Konat	WFP	Policy officer – Ambovombe office
Bartholy Andriavijaraso	WFP	PRRO 200735 coordinator – Ambovombe office
Loubien Razafimarolahy	WFP	Tsihombe head of antenna
Richard Ralaimitandrina	WFP	Logistic officer – Tsihombe antenna
Pierre Clément Ramandimbiasina	WFP	Food Aid Monitor of Ambovombe sub-office
Mamy Razafindrakoto	WFP	Amboasary head of antenna
Jaona Rafanomezantsoa	WFP	Ambovombe sub-office Agronomist
Thémistocle Ndrianasolo	WFP	Ambovombe sub-office agricultural engineer
Ligne Relignisa Mitondra	WFP	Bekily head of antenna
Robert	WFP	Tuléar head of sub-office
Tokinomenjahary Fitarikandro	WFP	School feeding focal point – Tuléar sub-office
Richard Ramiandrisoa	WFP	Food aid monitor – Tuléar sub-office
Eli Randriahajaina	WFP	Logistic associate - Tulear sub office
Mme Sana	WFP	Nutrition programme officer – Tulear sub-office
Lahiniriko Tsivevy Zanany		Food aid monitor – Ampanihy antenna
Ange Ralison		Ampanihy head of antenna
Philippe Glauser	WFP (DDC seconded)	Scope officer
Siméon Nanama	UNICEF	Chief of Nutrition section
Silvia Gaya	UNICEF	Chief of Wash section
Joceline Rasoanirina	UNFPA	Programme officer Tulear
Carlos MUNOZ	UNDP	Adviser for Risk and Disaster reduction
Charles Rambolarson	BNGRC	Deputy executive secretary
Norotiana Rakotomalala	ONN	Director of Operation
Mr Raveloharison	ONN	National coordinator
Mrs. Hanta Baraka	Ministry of Population	General Director of Social Protection
Prudence	Ministry of Population	Anosy Regional director

Mickaël Randrianirina	Androy Region	Chief of Region
Christian Randrianjatovo	Androy Region	ORN Coordinator
	Faux-Cap commune	Mayor
Fabien Ramananjatovo	Beheloka commune	Mayor
	Ankazomanga commune	Mayor
Hery Rakotondramanana	FAO	Southern area officer
Victorien Raobsoamanitrdrasana	FAO	Head of Ambovombe sub-office
Fabrice Lhérieau	GRET	Head of project – Ambovombe
Christiane Rakotomalala	GRET	Nutrition officer
Olivier Benquet	ACF	Country Director
Jaona Rajaonesy	CRS	Deputy Head of Programming
James Hazen	CRS	Chief of Party/ projet Fararano
Toky	ACF	Nutrition programme officer Ampanihy
Lucien Rakotorahalaha	ACF	Betioky Food security programme officer
Leonide Rasoahenikaha	UNICEF	Nutrition programme Officer Ambovombe
Madame Raymonde	VAM Association	Coordinator
Flavien Rebara	MIARO	Coordinator
Flavien Fahanatana	ECART/AGEX	Animator
Ludovic Remana	FDC Bekily	Animator
Gaston Ranaivomanana	MADR	Coordinator
Rambelison Andrianirintsoa		Technical responsible
Tsiandrongo Hericot		Secretary
Maharavo André		Animator
Adrien Ratrimo	CTAS	Coordinator
Jean-Pierre Nicolas	MANAO	Coordinator
Bonnaventure Ravelina	Mandresy	Chief of board
Michel Pierre Adolphe	AIM	Nutrition programme officer
Laurent Gabriel Tsvinda		Economic development officer
Léoncia Randrianasolo		Intensification officer
Rivo Razafinarivo	Fihamy	Coordinator
Raymond Indiamanana	ADRA	Nutrition programme officer
Junior Sandrata	2H	Assistant Coordinator
Aina Raharison	ADRA	Agriculture officer – Bekily office
Eliane Gomez	CDD	Programme coordinator
Yvan Zambahiny Beza	Tamafa	Head of operations
Annie Berene	CSB Itampolo	Chief of CSB
Françoise Rasoananteina	CSB Ambantry	Chief of CSB
Michel Makarefeno	CSB Saomanga	Chief of CSB
Hervé Alix Fanomezatsoa	SOS village d'enfants Betioky	Cantin programme officer
Victorine Anjarasoa	TAMAFA	Coordinator
Ratovomanantsoa	Itampolo commune	Mayor
Voriandro Jean Marie		Communal policeman
Andry Solomampionona	Tuléar technical college	Head of professional training
Albert Simon Rajaonarivelo	Women training centre Misombe Ianamboa	Director
Fanja Razafimahatratra	ORN Atsimo Andrefana	Monitoring and evaluation officer
Sabine Eddé	Switzerland Embassy	Programme officer
Stéphanie Druguet	EU delegation	Rural development, food security and emergency programme officer
Kenny Antal	USAID	Food security and crisis management director
Eddy	USAID	Food security specialist

Julien Rougerie	USAID	Nutritionist
Fidi	USAID	Food follow up and emergency response officer
Judith Randriamamonjy	WHH	Finance Manager
Rija Randrianarisoa	CARE Tana	Emergency Coordinator
Auguste Ramanantsialonina	Ministry of Agriculture and Livestock	Director of Agricultural Engineering
Hantaniaina Rabesandratana	ADRA	Program Director Assistant
Tojo Ratefason	Ministry of Environment	Androy Regional Director
Julien Andrianarisoa	Ministry of Agriculture and Livestock	Androy Regional Director
Rehozoe Rafanomezantsoa	Ministry of Agriculture and Livestock	Androy Ex-Regional Director
Mily Hervé Rafanomezantsoanantenaina	Ministry of Population	Androy Regional director
Jeannick Rasolondrainy	CAC Havelontika Tsihombe	Director
Nestor Sylvestre Tsiandraha	Ministry of Agriculture and Livestock	Chief of Bekily Service
Saturnin Razafimandimby	Soamanonga commune	Mayor
Tsimbazafy Randriantiana	Ankazobe commune	Assistant mayor
Jean Joseph Maevalahy	Ankazobe district	Chief of district Assistant in charge of development
Mamisoa Rapanoelina	Intervention fund for development (FID)	Productive safety net program officer
Vero Raboanary		Chief of South emergency unit

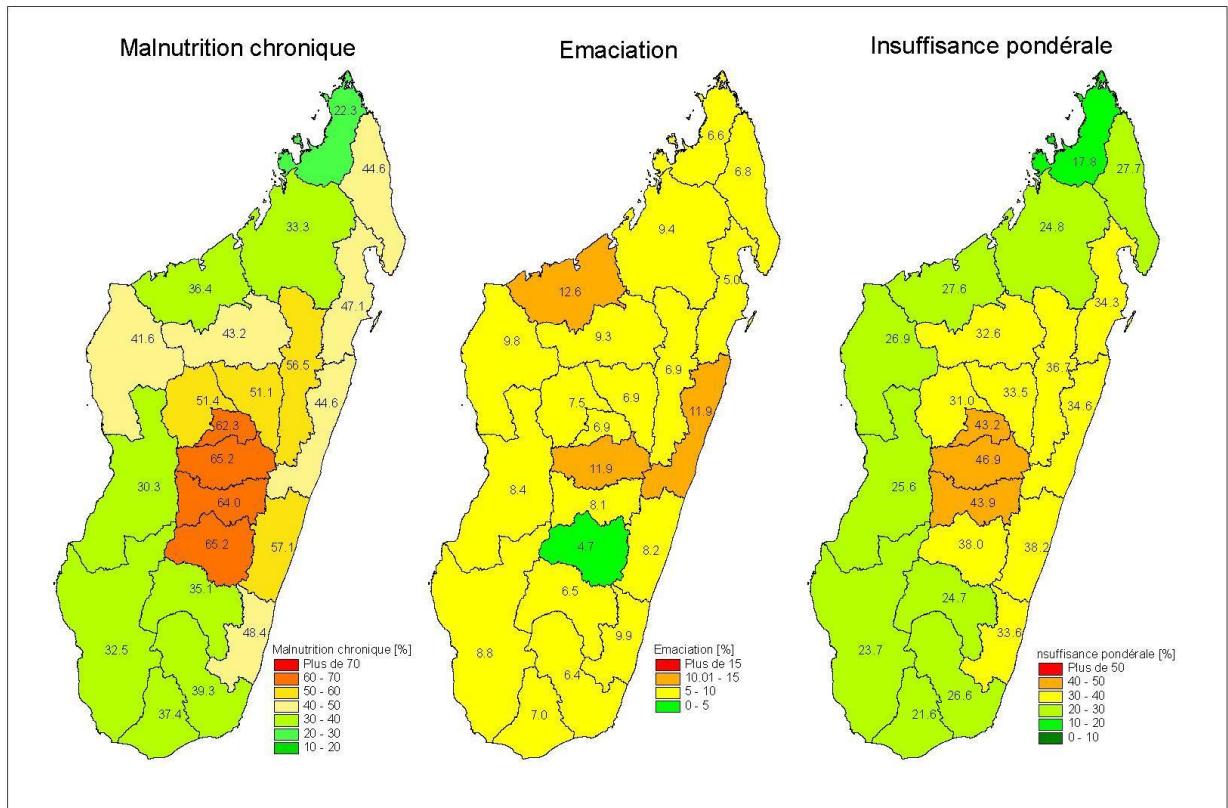
Annex 6: Evaluation mission schedule

Date	Pierre Leguéné		Claire Ficini		Holy Raharinjanahary	
	Place	Activities	Place	Activities	Place	Activities
26/09	Antananarivo	Briefing with WFP CO Interviews with WFP CO units	Antananarivo	Briefing with WFP CO Interviews with WFP CO units	Antananarivo	Briefing with WFP CO Interviews with WFP CO units
27/07	Antananarivo	Interviews with WFP CO units Interviews with stakeholders	Antananarivo	Interviews with WFP CO units Interviews with stakeholders	Antananarivo	Interviews with WFP CO units Interviews with stakeholders
28/08	Fort Dauphin Ambovombe	Interviews with stakeholders Interviews with WFP sub-office	Fort Dauphin Ambovombe	Interviews with stakeholders Interviews with WFP sub-office	Fort Dauphin Ambovombe	Interviews with stakeholders Interviews with WFP sub-office
29/09	Ambovombe	Interviews with stakeholders Interviews with WFP su-office Visit of Narysy II fokontany	Ambovombe	Interview with stakeholders Interview with partner Visit of Sevohipoty fokontany	Ambovombe	Interview with stakeholders Visit of Commune Ambovombe
30/09	Ambovombe	Visit of Erombazy fokontany Visit of Vahovola Centre fokontany	Amboasary	Visit of Antsovela Sama fokotany, Tanandava commune, Interview with Partner Interview with WFP sub-office	Amboasary	Visit of Ianakafy fokontany, Amboasary commune Interview with WFP antenna Interview with WFP sub-office
01/10	Tsihombe	Visit of Anovy fokontany Visit of Anja Haut fokontany Interview with Faux-Cap mayor Interview with WFP antenna	Tsihombe	Visit of Marovato fokontany Marovato commune, Interview with ORN district staff Interview with partner Interview with WFP antenna	Tsihombe	Visit of Soramena fokontany Marovato commune, Interview with partner Interview with WFP antenna
02/10	Bekily	Visit of Mahasoia 1 fokontany Interview with partner	Bekily	Visit of Anja fokontany, Anja Nord fokontany Interview with WFP partner Interview with ORN partner	Bekily	Visit of Ambararata Ouest fokontany, Bekily commune
03/10	Bekily	Visit of Anataky fokontany Visit of Bedona Centre	Bekily	Visit of Befangitsy fokontany, Manakompy	Bekily	Visit of Befangitsy fokontany, Manakompy

		fokontany Visit of Anadabolava fokontany Interview with partner Interviews with WFP antenna		commune Interview with partner Interview with stakeholder Interview with WFP antenna		commune Interview with partner Interview with stakeholder Interview with WFP antenna
04/10	Beheloka	Travel Bekily - Beheloka	Ampanihy	Visit of Antaly commune Interview with partner Interview with stakeholder	Ampanihy	Visit of Antaly commune Interview with partner Interview with WFP antenna
05/10	Beheloka	Visit of Besambay fokontany Interview with Beheloka commune mayor Visit of Beheloka Haut fokontany Interviews with partner	Itampolo	Visit of Itampolo II, Itampolo commune Interview with CSB midwife Interview with partner	Itampolo	Visit of Itampolo II fokontany, Itampolo commune Interview with WFP partner Interview with stakeholder
06/10	Betioky	Interview with Ankazomanga commune mayor Interview with partner Visit of Ankazomanga fokontany Visit of Tokoendolo fokontany	Betioky	Visit of CSB Ambatry commune Interview with CSB midwife	Betioky	Interview with stakeholder
07/10	Tuléar	Travel Betioky – Tuléar	Betioky	Visit of Soamanonga commune Interview with partner Interview with WFP nutritionist Interview with ORN staff	Betioky	Visit of Soamanonga commune Interview with WFP partner Interview with stakeholder
08/10	Tuléar	Interviews with WFP sub- office Visit of cash for training activities in Tuléar	Tulear	Interview with WFP sub- office Interview with stakeholder	Tulear	Interview with WFP sub- office
09/10	Tuléar	Rest	Tuléar	Rest	Tuléar	Rest
10/10	Antananarivo	Travel Tuléar - Antananarivo Interviews with WFP units	Antananarivo	Travel Tuléar – Antananarivo Interview with stakeholder Interviews with WFP units	Antananarivo	Travel Tuléar – Antananarivo
11/10	Antananarivo	Interviews with stakeholders Interviews with WFP units	Antananarivo	Interviews with stakeholders Interviews with WFP units	Ankazobe	Visit of Andranofeno sud fokontany Ankazobe commune Interviews with stakeholders

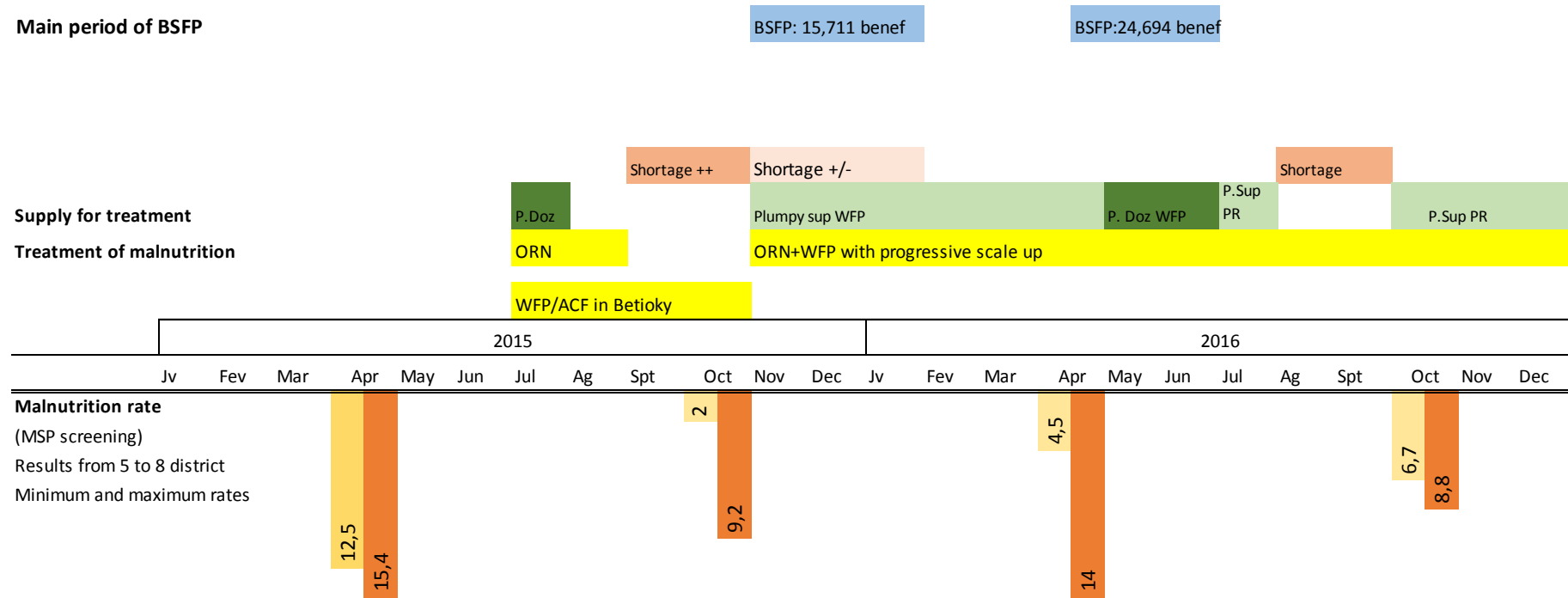
12/10	Antananarivo	Preparation of preliminary results restitution	Antananarivo	Preparation of preliminary results restitution	Antananarivo	Preparation of preliminary results restitution
13/10	Antananarivo	Internal preliminary results restitution	Antananarivo	Internal preliminary results restitution	Antananarivo	Internal preliminary results restitution
14/10	Antananarivo	External preliminary results restitution Interviews with WFP units	Antananarivo	External preliminary results restitution Interviews with WFP units	Antananarivo	External preliminary results restitution

Annex 7: Maps: distribution of malnutrition in Madagascar



Annex 8: Scaling up nutrition activities

Figure 17: Evolution of nutrition activities and malnutrition situation

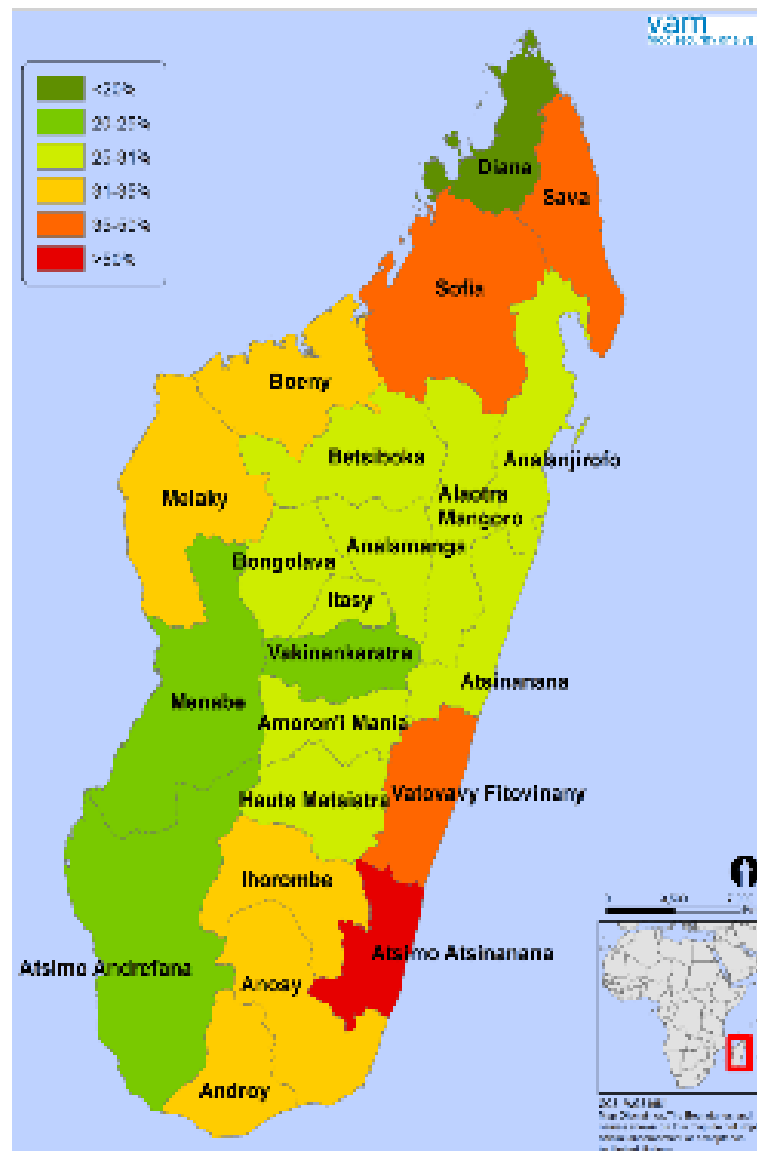


P.doiz: Plumpy Doz

P.sup: Plumpy Sup

P.sup PR: Plumpy sup with Protection ration

Annex 9: Map of food insecurity



Source: CFSVA 2014

Annex 10 : List of Acronyms

ACN	Nutrition community workers
AS	Health community worker
BNGRC	National Office of Disaster Risk Management
BR	Budget Revision
BSFP	Blanket Supplementary Feeding Program
CAS	Community Asset Score
CC	Climate Change
CERF	Central Emergency Response Fund
CO	Country office
CP	Country Program
CBPP	Community-based Participatory Planning
CSB	Health Centre
CSI	Copying Strategy Index
CSP	Country Strategy Programming
DDS	Diet Diversity Score
DRR	Disaster Risk Reduction
DFID	Department for International Development
DRM	Disaster Risk Management
EU	European Union
FCS	Food Consumption Score
FFA	Food Assistance for Assets
FFT	Food for Training
FID	Development Intervention Fund
FLA	Field-level Agreement
GAM	Global Acute Malnutrition
GFD	General Food Distribution
HIMO	Labor-intensive public works
ICA	Integrated Context Analysis
IPC	Integrated Phase Classification
IRAM	Institute for Research and Application of Development Methods
LPAEP	Sectorial policy letter for agriculture, livestock and fisheries
MAM	Moderate Acute Malnutrition
M&E	Monitoring and evaluation

MSP	Ministry of Public Health
NGO	Non Governmental Organizations
NIS	National Institute of Statistics
OEV	Office of Evaluation
ONN	National Nutrition Office
ORN	Regional Nutrition Office
PDM	Post-distribution monitoring
PNAN	Programme National d'Action pour la Nutrition
PNEDD	National policy for environment and rural sustainable development
PNN	National Nutrition Policy
PNNC	National Program for Community Nutrition
PRRO	Protracted Relief and Recovery Operation
RB	Regional Bureau
SADC	Southern African Development Community
SAM	Severe Acute Malnutrition
SAP	Early Warning System
SLP	Seasonal Livelihood Programming
SMART	Standardized Methodology for Assessment in Relief Transition
SO	Strategic Objectives
SPR	Standard Project Report
ToR	Terms of Reference
TSFP	Targeted Supplementary Feeding Program
VAM	Vulnerability Analysis and Mapping
WFP	World Food Programme

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