



WFP EVALUATION

Decentralized Evaluation of Cash-Based Transfers Pilot in Liberia in 2021

CONTEXT

Liberia is a low-income country on the western coast of Africa, emerging from decades of civil conflict and currently facing numerous development challenges, including high levels of food insecurity, widespread poverty, and vulnerability to climate change. Approximately 63 percent of the population lives in multidimensional poverty, with rural communities particularly disadvantaged in terms of access to basic services and livelihood opportunities. Gender inequalities and barriers faced by persons with disabilities further exacerbate Liberia’s socio-economic challenges.

In response to these issues, the World Food Programme (WFP) implemented a Cash-Based Transfers (CBT) Pilot in 2021 as part of its broader effort to enhance food security and improve educational outcomes through its school feeding program. The pilot focused on CBT Take-Home Rations (THR) for 25 percent of in-kind school feeding beneficiaries in Nimba and Maryland counties. By introducing CBT, WFP aimed to test its capacity to deliver cash-based assistance in a context with significant logistical and operational constraints. This initiative was designed to evaluate WFP’s readiness to scale up CBT interventions across Liberia and identify challenges, ensuring that vulnerable populations receive timely and relevant assistance in the face of recurring crises.

SUBJECT AND FOCUS OF THE EVALUATION

The evaluation assesses WFP’s implementation of the CBT Pilot, focusing on effectiveness, relevance, sustainability, and accountability to affected populations. It evaluates the program’s design, the selection of beneficiaries, and the choice of delivery mechanisms (mobile money transfers and e-vouchers). The key evaluation questions include:

1. To what extent has WFP Liberia demonstrated readiness and capacity to assess and select CBT modality and delivery mechanism response option packages that are beneficiary and contextually relevant? RELEVANCE & COHERENCE

2. To what extent has WFP Liberia demonstrated readiness to implement and monitor CBTs in ways that are effective? EFFECTIVENESS
3. To what extent has WFP Liberia demonstrated sustainable capacity to assess, design, implement and monitor CBT to a high standard in the future? SUSTAINABILITY & ACCOUNTABILITY

OBJECTIVES AND USERS OF THE EVALUATION

The evaluation aimed to achieve two main objectives:

Learning and Improvement: To provide insights for WFP Liberia and its partners on the planning and implementation of CBT programs, identifying lessons learned to improve future interventions.

Readiness for Scaling Up: To assess WFP’s capacity to expand CBT operations in Liberia, ensuring systems and processes are prepared for larger-scale interventions.

Key Users of the Evaluation:

1. **WFP Liberia Country Office:** To refine its approach to CBT programming and enhance internal capacities.
2. **Cooperating Partners (e.g., Caritas, MoE):** To improve coordination and implementation in future programs.
3. **Donors and Government Stakeholders:** To inform funding decisions and policy guidance for future CBT projects.
4. **Other Humanitarian Organizations:** To apply the lessons learned to similar CBT interventions in Liberia and beyond.

KEY EVALUATION FINDINGS

Relevance & Coherence:

The CBT Pilot was well-aligned with Liberia's national policies and WFP's internal systems, but weaknesses in communication and coordination at the county and community levels undermined coherence.

The selection of schools and the targeting of households based on one child per household was problematic. This approach did not allow to include all vulnerable groups and caused confusion among beneficiaries.

Effectiveness:

The pilot was timely and supported household needs during the lean season, but issues such as fluctuating transfer values and weak feedback mechanisms hindered overall effectiveness.

Mobile money transfer mechanisms faced challenges, with many beneficiaries receiving less than the intended transfer value. Monitoring of feedback mechanisms was insufficient, resulting in unaddressed complaints.

Sustainability:

The CBT pilot improved WFP's internal capacity to handle corporate systems, but the cooperating partners (Caritas and Ministry of Education) did not receive adequate capacity building, leaving a gap in program sustainability.

Accountability:

The program lacked robust accountability mechanisms, with inadequate community feedback loops and little involvement of local stakeholders in the design and decision-making process.

CONCLUSIONS AND RECOMMENDATIONS

Overall Assessment

The CBT Pilot in Liberia successfully tested WFP's internal systems and capacities, demonstrating readiness in corporate systems like mobile money transfers and e-vouchers. However, significant weaknesses were identified, including unclear program logic, poor targeting strategies, and inadequate communication with cooperating partners and beneficiaries. These issues undermined the program's overall effectiveness and led to confusion among stakeholders. Although internal capacity building within WFP improved, there were missed opportunities for more robust engagement and capacity development with cooperating partners, particularly at the local level. Moving forward, addressing these programmatic weaknesses and enhancing communication and accountability mechanisms will be critical to ensuring future CBT interventions are more effective, scalable, and sustainable.

Recommendations

The evaluation recommends improving strategic coherence by clarifying the program logic and targeting strategies to better align with the objectives. Communication with

beneficiaries and local stakeholders needs to be strengthened to ensure better understanding of program details. Capacity building efforts should be expanded to include cooperating partners, ensuring they are fully equipped to support future CBT interventions. It is also crucial to enhance accountability mechanisms, including stronger feedback and complaints systems. Finally, WFP should continue efforts to improve CBT readiness by refining internal processes and systems and ensuring that future pilots or scaled-up programs are implemented in periods of non-emergency to prevent overstretching resources.

Recommendation 1

Establish strategic coherence by clarifying programming logic and purpose and re-examining contextual vulnerabilities.

Recommendation 2

Ensure better alignment with CBT good practice around transfer values, registration, CBT communication, and coordination.

Recommendation 3

Improve communications to communities as-a-whole.

Recommendation 4

Continue CBT Readiness Efforts.

Recommendation 5

Improve Accountability to Affected Populations; undertake feasibility assessments of wide-ranging response and modality and delivery mechanism options and include more local knowledge in assessment and design decisions and throughout the programme.

Recommendation 6

Assess and improve corporate guidance capacities and gaps; make use of existing capacities and build those needed to fill remaining gaps.

Recommendation 7

Improve feedback and complaints mechanisms.

Recommendation 8

Improve quality and understanding of targeting and selection based on gender and vulnerability; ensure its logic is in line with programme objectives.

Recommendation 9

Improve monitoring, evaluation, accountability, and learning (MEAL).