

# Evaluation of Prevention of Malnutrition and Strengthening of Resilience at Community Level in Burundi/KFW Project (2021-2026)



Decentralized evaluation

Terms of reference

WFP & UNICEF Burundi Country Office

DE/BICO/2026/015

**February 2026**



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# 1. Introduction

1. These terms of reference are for the Evaluation of Prevention of Malnutrition and Strengthening of Resilience at Community Level in Burundi/KfW Project (2021-2026) and were prepared by the WFP and UNICEF offices in Burundi based on an initial document review and consultation with stakeholders. They aim to provide key information on the evaluation to stakeholders, guide the work of the evaluation team, and clarify expectations at the various stages of the evaluation.

2. Funded by the German Federal Ministry for Economic Cooperation and Development through Kreditanstalt für Wiederaufbau KfW, WFP and UNICEF, together with partners on the ground, have been implementing the project Prevention of Malnutrition and Strengthening of Resilience at Community Level in Burundi since 2021 for a period of 5 years until June 2026. The main objective of the project is, at its conclusion, vulnerable households, pregnant and breastfeeding women, and children aged 0 to 5 will benefit from enhanced food and nutritional security and increased resilience, thanks to quality multi-sectoral interventions in nutrition and social protection, carried out in 8 districts spread across 4 provinces targeted by the project.

3. The program's main outcomes include: (i) strengthening resilience and dietary diversity at both the household and individual levels, and (ii) increasing equitable access to quality health and nutrition services, both in institutions and within communities, covering both nutrition-specific and nutrition-sensitive interventions. Almost 5 years after its launch, despite the challenges, the project has generated measurable results which have undoubtedly contributed to the achievement of the project's overall objective of strengthening food and nutrition security and increased resilience through quality multi-sectoral interventions in nutrition and social protection.

4. Within this framework, an evaluation of the Prevention of Malnutrition and Strengthening of Resilience at Community Level in Burundi (2021-2026) project is planned to assess the efficiency, effectiveness, coherence, relevance, impact and sustainability of the project's results and effects. The scope of this activity evaluation covers the project areas, the activities related to the 5 components of the project, and throughout its implementation period, which is from December 2022 to November 2026.

# 2. Reasons for the evaluation

## 2.1. Rationale

5. This evaluation is commissioned jointly by WFP and UNICEF to document and analyze the effects and impact of the project in enhancing food and nutritional security and increased resilience, in Burundi. This evaluation is contractually required and is crucial at this point of time because the project is ending by June 2026 and the donor has also given a strict timeline of 30th June 2026 to have the evaluation report finalized. There is a need to document lessons arising from the evaluation and as well as for accountability purposes. This will allow the WFP and UNICEF offices in Burundi and their partners, including the donor, learn from and inform the development of new interventions to support the transformation of food systems. WFP, UNICEF in Burundi and their partners in this project, including the donor, will use the results of this evaluation to inform the design of new interventions, improve the approaches used in the implementation of this project, and also scale up or adjust these approaches to community-level resilience-building support interventions for the promotion of food security, nutrition in Burundi.

## 2.2. Objectives

6. Evaluations serve the dual and mutually reinforcing objectives of accountability and learning. Accountability to results remains critical, even as emphasis is placed on learning—this is a key lesson from past implementation. The learning objective in this evaluation is geared towards generating insights that will inform the fine tuning of ongoing interventions, ensuring they are adapted to the evolving context and responsive to stakeholder needs. In particular:

- **Accountability** – The evaluation will aim to examine and report on the performance and results of the project to prevent malnutrition and strengthen resilience at community level in Burundi, while considering the criteria of efficiency, effectiveness, coherence, relevance and sustainability.
- **Learning** – The evaluation will aim to examine whether implementation proceeded as planned, investigate the reasons for achieving or not achieving the expected results, and understand whether any unintended outcomes (positive or negative) occurred. It will generate lessons learned, identify best practices, and provide recommendations that can be built upon in the future. It will also formulate evidence-based conclusions to inform operational and strategic decision-making. The results will be actively disseminated, and the lessons learned will be integrated into relevant learning-sharing systems.

7. Aligned with WFP's commitment to gender equality and human rights-based approaches, this evaluation will systematically examine the project's differential impacts. Although the project did not include a specific component on gender orientation, the evaluation will nonetheless assess its effectiveness in advancing gender equality. Intersectionality will serve as a central analytical lens, recognizing how overlapping identities, such as gender, age, disability, geographic location, poverty, marital status, religion, and ethnicity interact with structural barriers and institutional practices. To date, no specific study analyzing gender dynamics has been conducted within this project.

## 2.3. Key stakeholders

8. The evaluation will solicit and benefit the views of numerous stakeholders, both internal and external to WFP and UNICEF. Several stakeholders will be involved in the evaluation process due to their roles in the project's design and implementation, their interest in the evaluation's outcomes, and their relative influence on the design, financing, and implementation of the program being evaluated. Table 1 presents a preliminary stakeholder analysis, which is expected to be refined by the evaluation team during the evaluation inception

phase.

9. Accountability to affected populations is part of WFP's commitment to including beneficiaries in its work as key stakeholders. WFP and UNICEF are committed to ensuring gender equality, equity, and inclusion in the evaluation process through the participation and consultation of women, men, boys, and girls from diverse backgrounds (including people with disabilities, older people, and people from different ethnic and linguistic groups).

**Table 1: Preliminary stakeholder analysis**

Stakeholders	Interest in and participation in the evaluation
<b>Internal stakeholders (WFP or UNICEF)</b>	
<b>WFP and UNICEF Country Offices in Burundi</b>	<b>Key informant and primary stakeholder</b> – Responsible for the planning and implementation of WFP and UNICEF interventions at the national level. Country offices are interested in evidence-based learning to inform decision-making. They are also accountable, both internally and to their beneficiaries and partners, for the performance and results of their programs, and in particular for this project which is the subject of this evaluation. WFP and UNICEF will use the evaluation findings to implement their programs or to inform decisions regarding future interventions and partnerships in the area of malnutrition prevention through community resilience building.
<b>WFP Global Headquarters</b> <b>UNICEF HQ and Regional Office</b>	<b>Key informant and primary stakeholder</b> – Responsible for both the supervision of country offices and their technical guidance and support, the regional office is interested in independent and impartial reporting on operational performance and lessons learned from evaluation results, contributing to overall regional priorities, with a view to applying these lessons, where possible, to other country offices. The regional office will be involved in planning future interventions and will therefore need to draw on the evaluation results to provide strategic guidance, program support, and oversight. The regional evaluation team supports both the country office and the regional office in ensuring the conduct of high-quality, credible, and useful decentralized evaluations.
<b>External stakeholders</b>	
<b>Beneficiaries:</b> Households (women and children aged 6-59 months), Village savings and credit associations, WASH beneficiary communities, community health workers, light mothers, etc.	<b>primary stakeholders</b> – As the end recipients of WFP and UNICEF assistance, beneficiaries are interested in the joint WFP-UNICEF evaluation to determine whether the assistance provided is adequate, effective, and efficient. To this end, the level of participation of women, men, boys, and girls from different groups in the evaluation will be determined, and their respective perspectives will be sought.
<b>Public authorities</b> The Ministry of Public Health), health districts, health centers, SEP/PMSAN under the Prime Minister's office, Ministry of Agriculture, as	<b>Key informants and primary/secondary stakeholders</b> – Public authorities have a direct interest in the evaluation and will therefore seek to determine whether WFP and UNICEF activities in the country are aligned with their priorities and harmonized with the actions of other partners, and whether they are achieving the expected results. Their interest focuses particularly on capacity building, accountability, and sustainability. These

<p>well as other ministries and national institutions with responsibilities related to the activities concerned.</p>	<p>various public institutions have a direct interest in this evaluation because they have been key partners in the implementation of the project activities.</p> <p>The finalization of the evaluation objective will be completed with their consultation, and the implementation will be done jointly with certain government institutions, and the latter will have a direct interest.</p>
<p><b>Non-governmental organizations (NGOs)</b> Concern Worldwide and GVC WeWorld.</p>	<p><b>Key informants and stakeholders [primary/secondary]</b> – NGOs work in partnership with WFP and UNICEF to implement WFP and UNICEF activities, while also carrying out their own interventions. The evaluation findings may influence implementation modalities, strategic directions, and future partnerships. NGOs will use the evaluation findings to inform the implementation of their programs. Some organizations, particularly those mentioned, have a direct interest in the evaluation as they were the field implementing partners for the project under evaluation.</p>
<p><b>Donors:</b> Germany through KfW.</p>	<p>Primary/Secondary Stakeholders – WFP and UNICEF interventions are funded voluntarily by a number of donors. These donors will have an interest in knowing whether their funds have been mobilized effectively and whether WFP and UNICEF's work have been successful and has benefited their own strategies and programs.</p>

# 3. Context and subject of the evaluation

## 3.1. Context

10. Burundi is a landlocked country ranked 187th out of 191 countries in the world according to the **Human Development Index** for 2021/2022<sup>1</sup>. The Burundian population is 12.33 million, of which 52.2% are women and 48.8% are men, with an annual growth rate of 2.3%<sup>2</sup>. Approximately 48% of the population are children aged 0 to 15 years, and 30% are people aged 15 to 34 years.

11. World Bank statistics show that Burundi's annual GDP growth rate averaged 2.75% from 1961 to 2022. During the 2015 conflict, it fell to -3.9%. However, it gradually recovered, reaching 3.1% in 2021, but dropped to 1.8% in 2022,<sup>3</sup> with an estimated 4.1% in 2024. The country is vulnerable to natural disasters that disrupt agricultural production and, consequently, threaten the population's **food security** and its already fragile economy.

12. The 2023 Global Vulnerability, Food Security and Nutrition Analysis (GVSNA) revealed that 41.2% of households, or 5,398,685 people (based on the 2023 population), are food insecure. This figure includes 32.3% of households experiencing moderate **food insecurity** and 8.9% of households experiencing severe food insecurity, representing populations of 4,229,604 and 1,169,081 people, respectively<sup>4</sup>. Food insecurity is higher in rural areas (44%) than in urban areas (17.8%)<sup>5</sup>. Similarly, female-headed households face greater food insecurity (50% compared to 39.1% for male-headed households). According to statistics from Ministry of Health, 53–56% of children under 5 are stunted, one of the highest rates globally<sup>6</sup>.

13. Rural populations are the most affected by **poverty**, particularly small-scale producers (who represent 87.3% of Burundian households). Poor people are heavily dependent on the agricultural and informal employment sectors, which are characterized by unpredictable production and income<sup>7</sup>.

14. Despite the strong demographic pressure on land, **agricultural potential** remains to be exploited with climatic conditions favorable to agricultural diversity, a possibility of agricultural intensification that can be achieved with the improvement of cultivation techniques, supervision, the introduction of new agricultural varieties, the rational use of water and land, the promotion of market agriculture and agribusiness etc.

15. Burundi faces significant challenges that significantly affect children (high rate of stunting more than 50%), adolescents and women (Acute malnutrition among pregnant and breastfeeding women is estimated to 5.6% in 2024)<sup>8</sup> and the country in general: an **unfavorable macroeconomic context**, the maintenance of a dynamic demographic (growth rate of 2.3%, 472hab/skm), ever-increasing food insecurity and the persistence of inequalities in access to community health and nutrition services.

16. The KfW-funded project ensured that equity means not only **addressing gender gaps** but also breaking down the structural barriers that continue to marginalize people with disabilities, especially women,

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<sup>1</sup>United Nations Development Program. 2022. Human Development Reports – Burundi.

<sup>2</sup> Résultat du RGPHAE, 2024.

<sup>3</sup> Comprehensive Food Security and Vulnerability Analysis (CFSVA) Burundi 2023

<sup>4</sup> Comprehensive Food Security and Vulnerability Analysis (CFSVA) Burundi 2023.

<sup>5</sup> *The State of Food Security and Nutrition in the World 2023: Urbanization, Agrifood Systems Transformation and Healthy Diets across the Rural–Urban Continuum.*

<sup>6</sup> *National Nutrition Statistics 2023.*

<sup>7</sup> Burundi Poverty Assessment 2023

<sup>8</sup> *Burundi: Acute Malnutrition Situation June–September 2024 and Projection for October 2024–May 2025.*

so that no one is left behind in nutrition and development efforts. Therefore, this evaluation takes place within a policy environment where Burundi has recently adopted a National Strategic Policy for the Promotion and Protection of the Rights of People with Disabilities (2024–2027), alongside broader commitments to gender equality and nutrition. Despite these frameworks, people with disabilities, particularly women, continue to face **structural barriers** such as limited access to education, health services, and livelihoods, compounded by restrictive gender norms and poverty. In refugee camps like Busuma and Bwagiriza, humanitarian pressures linked to migration and overcrowding further exacerbate vulnerabilities. International assistance, including WFP’s Country Strategic Plan (2024–2027), WFP Gender Policy 2022, complements the KfW-funded project by promoting equity and inclusion. However, persistent data limitations on gender and disability dynamics remain a challenge for trend analysis and evidence-based planning

### 3.2. Subject of the evaluation

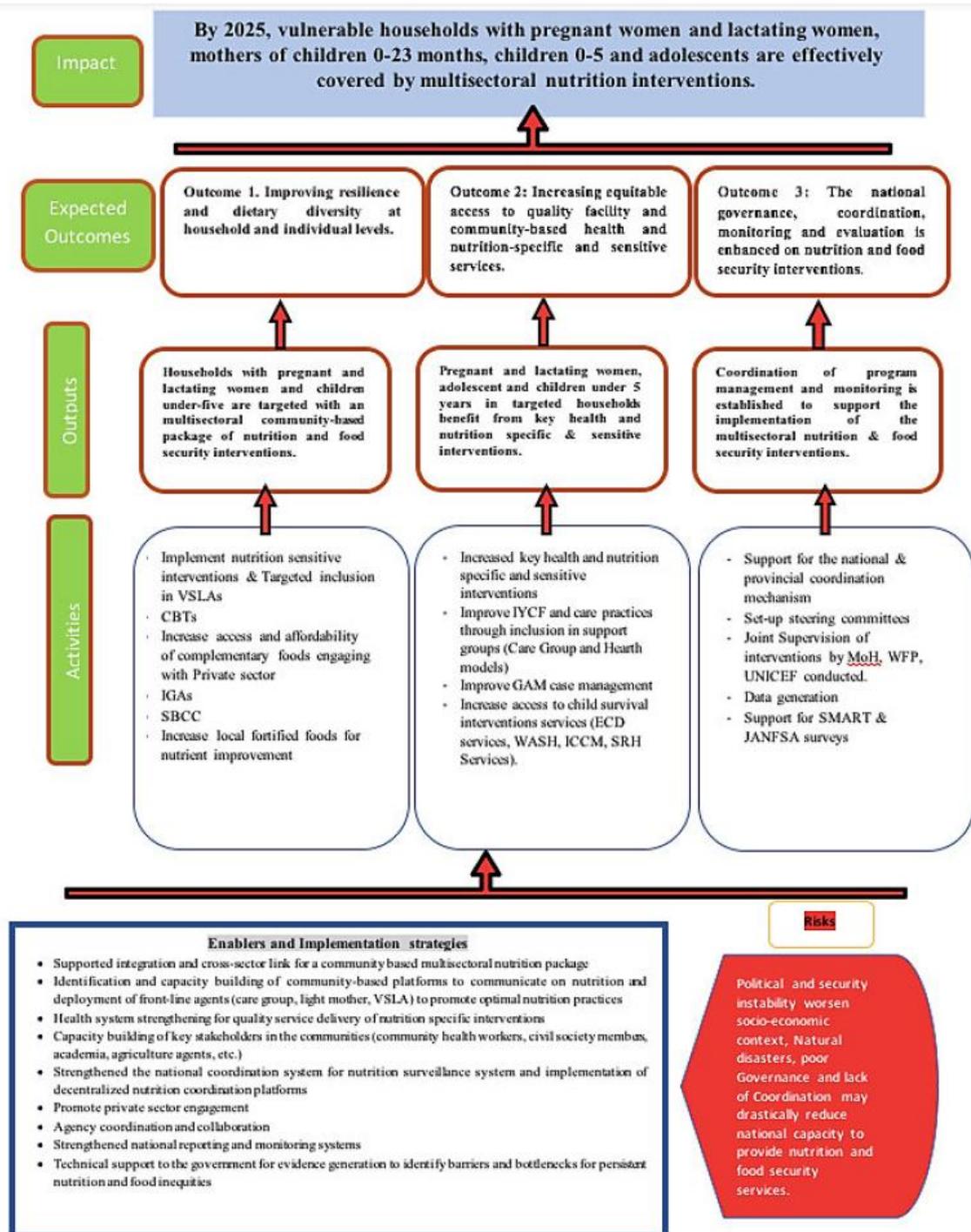
17. To sustainably address the multidimensional causes of food insecurity and malnutrition, the UNICEF, WFP, and their partners are implementing a joint project called **Malnutrition Prevention and Community Resilience Building in** in Burundi since 2021 for a period of 5 years until June 2026 under the financing of a German bank, KfW (Kreditanstalt für Wiederaufbau). The main objective of the project is enhanced food and nutritional security and increased resilience, for, vulnerable households, pregnant and breastfeeding women, and children aged 0 to 5 in 8 districts spread across 4 provinces targeted by the project. It is a comprehensive set of multi-sectoral interventions including malnutrition prevention, resilience building, behaviour change, promotion of fortified food consumption, as well as interventions for drinking water supply, hygiene and sanitation

18. . The overall objective of this project is the prevention of malnutrition and the strengthening of resilience at the community level, by improving food and nutritional security through three results, namely:

- Improving resilience and dietary diversity at the household and individual levels,
- Improving equitable access to quality, nutrition-specific and sensitive health services, both in healthcare facilities and at the community level.
- Improving governance, coordination, monitoring and evaluation at the national level with regard to nutrition and food security interventions.

19. The Burundi KfW project’s TOC envisions that by 2025, vulnerable households, particularly those with pregnant and lactating women, mothers of young children, and adolescents, will be effectively reached through a multisectoral package of nutrition interventions. It rests on three interconnected outcomes: strengthening household resilience and dietary diversity, ensuring equitable access to quality health and nutrition services, and enhancing national governance and coordination for food security. These outcomes are driven by evidence-based, community-led interventions that combine nutrition-sensitive approaches (like income-generating activities, fortified foods, and social behavior change communication) with nutrition-specific services (such as improved infant and young child feeding practices, case management of acute malnutrition, and expanded child survival services). Governance structures, including steering committees and coordinated oversight by ministries and partners, reinforce accountability and data-driven decision-making. The framework is enabled by cross-sector integration, capacity building of community platforms and stakeholders, private sector engagement, and strengthened information systems, while acknowledging risks such as political instability and natural disasters. Together, these strategies form a coherent pathway to ensure that nutrition and food security interventions are inclusive, sustainable, and resilient in Burundi. The theory of change that underpins these results and how activities contribute to achieving the results is summarized in the following diagram:

Figure 1: Project Theory of change



## Recommendations from the mid-term project review

20. A midterm evaluation was conducted at the midpoint of implementation of the joint project in 2024. Based on the analysis of programme performance, implementation processes, and emerging outcomes, the midterm evaluation formulated a set of recommendations aimed at addressing identified challenges, strengthening implementation strategies, and enhancing the likelihood of achieving the expected results during the remaining implementation period. These recommendations are summarized in annex 10.

21. Women (PLW, mothers of 0–23 months children) are the **primary beneficiaries** and central actors in IYCF counselling, Light Mother / PD Hearth approaches, VSLA participation, home gardening, IGAs. The project also promoted the inclusion of **fathers** in counselling to promote shared responsibilities. The project targeted 450,000 people, across 8 health districts in 4 provinces (Rutana, Karusi, Kirundo, Ruyigi). The beneficiaries include 326,000 children 0–59 months, 30,000 PLW receiving SNFs, 51,000 PLW/mothers reached via Light Mothers, 11,000 adolescents supported annually via YFHCs, 322,125 individuals via VSLAs, 25,000 individuals via CBT (over lifecycle), 160,000 people benefiting from WASH infrastructure and 1,200,000 people reached with fortified flour

22. The project has been explicitly designed to build on several ongoing or past programmes as previous BMZ-funded programmes (in Rutana, Kirundo, Karusi) and programmes contributing to resilience like Merankabandi Social Safety Nets Programme and other programmes of WFP for National fortification initiatives.

23. The main key partners include government structures (Ministry of health, Ministry of water, Energy and Mines for water systems and network, SUN Secretariat / Permanent Executive Secretary for Food and Nutrition Security), International and local NGOs as Worldvision, Concern Worldwide, GVC, etc. Technical institutions like BBN, CNTA and private sector including SUN Business network. Table2 provides a summary of partners and their responsibilities in the KfW project.

**Table 2: Project Partners**

Partner	Category (NGO/Government/Private)	Responsibility
Secretriat Executif Permanent de la Platerforme Multisectorielle de securite alimentaire et Nutrition (SEP/PMSAN)	Government	Coordination and President of COPIL
GVC WeWorld	NGO	Implementation Cooperating Partner
Concern WorldWide	NGO	Implementation Cooperating Partner
Bureau Burundais de Normalisation et Controle de la qualite (BBN) under the Ministry of Mines, Energies, Industry, Commerce and Tourism	Government	Quantity and standards assurance
Centre National de Technologie Alimentaire (CNTA) under the Ministry of Mines, Energies, Industry, Commerce and Tourism	Government	Good manufacturing and hygiene practices
Programme National d’Alimentation et de Nutrition (PRONANUT) under the Ministry of Public Health	Government	Coordination and supervision
Scaling UP Nutrition Business Netwrok (SBN)	Private sector	Platform for private actors’ implication and contribution for improved nutrition

This project was funded to the tune of 20 million USD and included the budget to fund this evaluation. The initial allocation was 15M but following the Ukraine crisis, a top up of USD 5M was added to the initial budget. This top up aimed to mitigate the impact of Ukraine war on already vulnerable populations in Burundi, due to inflationary pressures and increase of prices of basic commodities. Major resource components funded Nutrition commodities (MNP, RUTF, Super Cereal++), Cash-based transfers, WASH infrastructure (boreholes, networks, solar pumps), VSLA startup capital, Capacity building, SBCC campaigns, fortification equipment and Monitoring, evaluations, surveys (PDM, SMART, JANFSA)

# 4. Evaluation scope, criteria and questions

## 4.1. Scope of the evaluation

25. The evaluation will cover all activities implemented under the project from March 2021 to February 2026. The geographical scope of the review will be the same as that of the project, encompassing the targeted provinces and project areas. This will cover 4 former provinces (Rutana, Karusi, Kirundo, Ruyigi) and 8 health districts.

26. This evaluation will focus on vulnerable households assisted including lactating and pregnant women, VSLA beneficiaries, cooperating partners workers, the government entities, community millers, and private sector actors who have been involved in the project. The effects, direct results (outputs), activities and indicators that are part of the scope are those listed in Table 2 of these TORS. Key components to be evaluated relate to food security and nutrition, community resilience, women participation and empowerment, project coordination and results durability.

The target group for the evaluations consists of direct beneficiaries who are households, savings and credit associations (VSLAs), the leaders of these associations, implementing partners, local authorities, government institutions supported by the project, small and medium private enterprises that produce mixed and/or composite flours and others. Even if this project is not focused on gender transformative actions, women remain key beneficiaries, especially lactating and vulnerable women in the community. This evaluation will also focus on them, while paying attention to other groups who may face exclusion, including persons with disabilities, adolescents, the elderly, minority and displaced populations, and households living in poverty. Recognizing these intersecting vulnerabilities will ensure the evaluation captures a fuller picture of inclusion.

## 4.2. Evaluation criteria and evaluation questions

27. Key questions have been developed to guide this evaluation. These will be further detailed in an evaluation matrix during the actual design phase of the evaluation. The proposed evaluation questions are based on these 6 criteria of relevance, effectiveness, efficiency, coherence impact and sustainability. To meet the dual objectives of learning and accountability, the evaluation will address six key questions supported by fourteen sub-questions. Each of the six questions has been accorded equal priority, and their summaries are presented in Table XXX."

28. The evaluation will also analyze how gender, equity, and inclusion objectives, as well as principles of integration related to gender equality and women's empowerment, were incorporated into the project's design and implementation. Considerations related to gender equality, equity, and inclusion must be duly integrated into all evaluation criteria, and relevant issues must be fully integrated into the evaluation questions,

**Table 3: Evaluation questions and criteria**

Evaluation questions		
<b>EQ1 – To what extent has the project been relevant to the priorities of key stakeholders, including the government and partners, as well as to the needs of beneficiary groups?</b>		<b>Relevance</b>
1.1.	What extent does the design of interventions meet the priority needs of vulnerable households (FEA, children 0–59 months), rural/urban population, women and people with disabilities?	Relevance
1.2.	How relevant is the mix (VSLA/CBT/ SNFs /fortification, SBCC, WASH health nutrition, CMAM, ECD, iCCM , hydroponics) in light of access barriers, social norms, and local markets in the target provinces?	Relevance
<b>EQ2 - How compatible and aligned was the KfW project with other interventions in Burundi?</b>		<b>Coherence</b>
2.1	To what extent did the KfW project coordinate with existing government, NGO, and private sector initiatives to avoid duplication and maximise synergies?	Coherence
2.2	How well were the project’s strategies and activities adapted to local contexts and harmonised with the objectives and methods of other key actors and stakeholders in Burundi?	Coherence
<b>EQ3 - To what extent did the project achieve its results, and how did it contribute to improved outcomes for different beneficiary groups, considering intersectionality?</b>		<b>Effectiveness</b>
3.1.	To what extent have the outcomes and outputs been achieved according to the plan?	Effectiveness
3.2.	What factors facilitated or hindered the achievement of results, especially across different target beneficiary groups?	Effectiveness
<b>EQ4 – How efficiently was project implemented in terms of timeliness, quality, and cost-efficiency?</b>		<b>Efficiency</b>
4.1.	pricesHow efficient were project interventions/modalities (CBT, SNFs, fortification, WASH, SBCC/CMAM), in terms of cost per beneficiary, comparative value across approaches, and appropriateness of transfer levels relative to local market prices?	Efficiency
4.2.	To what extent did the processes (supply chains, targeting/payments, partner contracting, WFP-UNICEF coordination) enable -timely implementation.	Efficiency
4.3	What opportunities exist to improve the efficiency of the models, and what other alternative models can enhance the overall efficiency of the KfW programme?	Efficiency
<b>EQ5 – To what extent did the KfW project result in or generate significant higher-level effects (positive or negative, intended or unintended)?</b>		<b>Impact</b>
5.1	What wider changes, beyond the immediate project outputs, across targeted beneficiary groups or the wider system, has the project contributed to?	Impact
5.2	Have there been any unintended positive or negative consequences for stakeholders or the local context resulting from the implementation of the KfW project?	Impact
<b>EQ6 – To what extent are activities and results sustainable??</b>		<b>Sustainability</b>
6.1.	To what extent have national and provincial multisectoral governance, coordination, and monitoring and evaluation mechanisms been strengthened, and how sustainable are they beyond KfW funding?	Sustainability
6.2.	To what extent are services such as CMAM, iCCM, ECD, fortification, and WASH technically and financially sustainable, with adequate resources, budgets, maintenance routines (e.g., AEP), and regulatory frameworks to ensure continuity?	Sustainability
6.3.	Do millers and other stakeholders in the Scaling Up Nutrition Business Network (SBN) have viable incentives and value chains to sustain the provision of affordable fortified foods beyond the project period?	Sustainability

# 5. Methodological approach and ethical considerations

## 5.1. Evaluation approach

29. The evaluation team will need to design a rigorous approach to maximize the quality, credibility, and use of the results. The methodology will be designed by the evaluation team during the inception phase. It should:

- Employ the relevant evaluation criteria proposed for this evaluation
- Apply an evaluation matrix geared towards addressing the key evaluation questions taking into account the data availability challenges, the budget and timing constraints
- Ensure through the use of mixed methods that women, girls, men and boys from different stakeholders' groups participate and that their different voices are heard and used

30. The Evaluation Team will employ inclusive and innovative approaches, using participatory methods that actively engage stakeholders in shaping the findings. Techniques such as Most Significant Change, Outcome Harvesting, participatory mapping, and digital feedback tools will be applied to ensure community perspectives are central, while enriching the evidence base and strengthening ownership of the evaluation process in Burundi. The complete methodology will be confirmed and refined by the evaluation team based on the principles below:

- Consult secondary data, including the project document, project progress reports, budget, and reports of studies (baseline study, post-distribution follow-up studies, mid-term review study) carried out as part of the project.
- Sampling information sources (stakeholders, including beneficiary households, etc.),
- Observe the situations directly on the ground,
- In accordance with WFP's gender policy, women, girls, men and boys from different stakeholder groups will participate in mixed methods and their various pathways will be heard and used fairly.
- Organize validation and consultation workshops with all stakeholders (internal and external).

31. This methodology will need to be validated and further developed by the evaluation team during the evaluation initiation phase. The methodological approach will be designed by the evaluation team during the evaluation initiation phase. It must:

- Use the relevant evaluation criteria listed.
- Use an evaluation matrix to answer key evaluation questions, while considering constraints related to data availability, budget and time.
- To ensure, through mixed methods, that women, girls, men and boys from different stakeholder groups participate, and that their views are heard and integrated.

32. The chosen approach must emphasize impartiality and attempt to minimize bias by relying on mixed methods (quantitative, qualitative, participatory, etc.) and different sources of primary and secondary data systematically triangulated (documents from various sources, diversity of stakeholder groups, including beneficiaries, direct observations in several locations, between evaluators, different methods, etc.).

33. It will consider all difficulties concerning availability, validity, or reliability of data, as well as any budget or time constraints. The evaluation questions, research avenues, indicators, data sources, and data collection methods will be compiled in an evaluation matrix, which will form the basis of the sampling approach and the data collection and analysis instruments (documentary studies, interview and observation guides, survey questionnaires, etc.).

34. The approach must integrate considerations related to gender equality and women's empowerment, equity and inclusion, and specify how the views and perspectives of diverse groups (men, women, boys, girls,

older people, people with disabilities, and other marginalized groups) will be collected and taken into account. The primary data collected must be disaggregated by sex and age.

35. The evaluation's findings, conclusions, and recommendations must reflect an analysis of gender and equity issues within the context of the evaluation's objective. The findings should also initiate a discussion on the intended and unintended effects of interventions on gender equality and equity. The report should present lessons learned, challenges, and recommendations for implementing future evaluations that integrate gender and equity considerations.

36. The following mechanisms will be put in place to ensure independence and impartiality: the evaluation team will work independently on the design and implementation of the evaluation, while the final decisions regarding the evaluation products and their validation rest with the evaluation committee; an evaluation reference group will review the data collection process and methodology, and provide feedback in this regard.

37. The project evaluation approach does not present any particular risks, such as existing limitations like the lack of availability of key data or difficulties in accessing the populations receiving assistance. The evaluation team will need to further develop the approach presented in the terms of reference and create a detailed evaluation matrix, which will be included in the evaluation inception report.).

## **5.2. Preliminary considerations on evaluability and methodological implications**

38. The main sources of information available to the evaluation team are essentially the WFP and UNICEF annual report, the baseline study, the mid-project review, the reports of two post-distribution monitoring studies, and monitoring data from implementing partners and WFP. This data includes both qualitative data (from focus group discussions and interviews) and quantitative data from household surveys.

39. The project's mid-term review report detailed the project-specific indicators, which were regularly monitored, and outlined the types of data collected for this purpose. Currently, 80% of the project indicators have been collected as part of the mid-term review. Some relevant data sources other than WFP also exist, primarily government data and data from implementing partners.

40. That being said, some difficulties related to data availability and reliability exist. Indeed, WFP and UNICEF conducted the project's baseline study in a context where targeting was not yet complete, and this constitutes a major limitation for its evaluation; the evaluation team must be aware of this obstacle.

41. Currently, the availability and quality of data on gender analyses within the project also constitutes another limitation for trend analyses of gender dynamics within the framework of this evaluation.

42. For interviews with key individuals, frequent staff turnover (at WFP, UNICEF, and implementing partners) will limit institutional memory and negatively impact interview quality. The evaluation team will need to take this into account when finalizing the methodology.

43. The main source of data for the evaluation will be the collection of primary data and also the review of existing documentation. During the initial phase of the evaluation, the evaluation team is expected to accurately assess the availability, quality, and gaps in the data based on the aforementioned information.

44. This exercise will guide data collection and the choice of evaluation methods. The evaluation team must systematically verify the accuracy, consistency, and validity of the data and information collected. It must acknowledge all potential limitations and reservations when using this data during the results communication and conclusions formulation phase.

## **5.3. Ethical considerations**

45. The WFP office in Burundi, which is sponsoring this evaluation, will ensure that the evaluation team and the evaluation manager are not involved, and have never been involved, in the design, implementation or financial management of the project being evaluated, and do not have any personal interest or potential

or perceived conflict of interest.

46. Conflicts of interest are generally characterized by a lack of independence or impartiality. They arise when a primary interest, such as the objectivity of an evaluation, can be influenced by a secondary interest, such as personal considerations or financial gain (UNEP Guidelines, 2020). No official, professional, personal, or financial relationship should cause or lead to any perceived bias regarding the purpose, design, and execution of the evaluation, or the way in which the results are presented.

47. A conflict of interest can also arise when, due to potential contracts, the evaluator's ability to provide an impartial analysis is compromised. Upstream conflicts of interest occur when consultants could influence the analysis or recommendations to align with conclusions they have already reached.

48. Downstream conflicts of interest can, for example, lead evaluators to create false conditions favourable to their future employment (by recommending, for instance, additional work to secure the contract for that work). The likelihood of bias increases when an evaluator's work focuses on a single organization. During the evaluation process, evaluators are not permitted to enter any other contracts with the unit/entity being evaluated. To prevent conflicts of interest, careful attention must be paid to adherence to the principles of independence and impartiality.

49. All members of the evaluation team will be subject to the 2020 GNUE Ethical Guidelines, including the commitment to ethical conduct, as well as the 2014 guidelines on integrating human rights and gender equality into evaluations and the WFP Gender Technical Note. The evaluation team and individuals directly involved in the evaluation are expected to sign a confidentiality agreement and a commitment to ethical conduct at the time of publication of the order (or individual contracts). These templates will be provided by the country office at the time of contract signing.

50. Inspection and Investigation (OIGI) through WFP hotline (<http://www.wfphotline.ethicspoint.com>)<sup>9</sup>. At the same time, commission office management and the Regional Evaluation Technical Team should also be informed.

51. The commissioning office has ensured that the evaluation team and evaluation manager will not have been and/or are not currently involved in the design, implementation or financial management of the WFP KfW Project, have no vested interest, nor have any other potential or perceived conflicts of interest.

52. Conflicts of interest are typically identified by a lack of independence or a lack of impartiality. These conflicts occur when a primary interest, such as the objectivity of an evaluation, could be influenced by a secondary interest, such as personal considerations or financial gains (UNEG 2020 Guidelines). There should be no official, professional, personal or financial relationships that might cause, or lead to a perception of bias in terms of what is evaluated, how the evaluation is designed and conducted, and the findings presented. A conflict of interest can also occur when, because of possibilities for future contracts, the evaluator's ability to provide an impartial analysis is compromised. Cases of upstream conflict of interest are those in which consultants could influence the analysis or recommendations so that they are consistent with findings previously stated by themselves. Cases of downstream conflict of interest are those in which evaluators could artificially create favourable conditions for consideration in future assignments (e.g. making recommendations for additional work with aim of being contracted to conduct that work). The potential for bias increases when an evaluator's work is solely focused on one agency. During the evaluation process, the evaluators are not allowed to have another contract with the evaluand/ unit subject to evaluation. To avoid conflicts of interest, particular care should be taken to ensure that independence and impartiality are maintained.

53. All members of the evaluation team will abide by the [2020 UNEG Ethical Guidelines](#), including the Pledge of Ethical Conduct, the 2014 Guidelines on Integrating Human Rights and Gender Equality in Evaluation as well as the [WFP technical note on gender](#). The evaluation team and individuals who participate directly in the evaluation at the time of issuance of the purchase order (or individual contracts) are expected

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<sup>9</sup> For further information on how to apply the [UNEG norms and standards](#) in each step of the evaluation, the evaluation team can also consult the [Technical Note on Principles, Norms and Standards for evaluations](#).

to sign a confidentiality agreement and a commitment to ethical conduct.<sup>10</sup> These templates will be provided by the country office when signing the contract.

54. In accordance with Article 22 of the Statistical Law No. 1/18 of 24 July 2023, a national statistical visa is required only for surveys or research whose results are representative at the national, provincial, communal, or zonal level. This joint evaluation commissioned by WFP and UNICEF will not generate nationally or sub-nationally representative statistical results. Any quantitative data produced will be limited to programme intervention sites and used solely for evaluative purposes. Therefore, the statistical visa procedure is not applicable to this evaluation.

## 5.4. Quality assurance

55. The WFP evaluation quality assurance system sets out processes with steps for quality assurance and templates for evaluation products based on a set of [Quality Assurance Checklists](#). The quality assurance will be systematically applied during this evaluation, and relevant documents will be provided to the evaluation team. This includes checklists for feedback on quality for each of the evaluation products. The relevant checklist will be applied at each stage, to ensure the quality of the evaluation process and outputs.

56. The WFP Decentralized Evaluation Quality Assurance System (DEQAS) is based on the UNEG norms and standards and good practice of the international evaluation community and aims to ensure that the evaluation process and products conform to best practice. This quality assurance process does not interfere with the views or independence of the evaluation team but ensures that the report provides credible evidence and analysis in a clear and convincing way and draws its conclusions on that basis.

57. The WFP evaluation manager will be responsible for ensuring that the evaluation progresses as per the [DEQAS Process Guide](#) and for conducting a rigorous quality control of the evaluation products ahead of their finalization. There will be several rounds of reviews and feedback until draft deliverables are up to the expected quality.

58. To enhance the quality and credibility of DEs, an internal quality support (QS) process within OEV reviews the draft ToR, the draft inception and evaluation reports, and provides a systematic assessment of their quality from an evaluation perspective, along with recommendations.

59. The evaluation manager will share the assessment and recommendations from the quality support service with the team leader, who will address the recommendations when finalizing the inception and evaluation reports. To ensure transparency and credibility of the process in line with the [UNEG norms and standards](#)<sup>11</sup>, a rationale should be provided for comments that the team does not take into account when finalizing the report.

60. The evaluation team will be required to ensure the quality of data (reliability, consistency and accuracy) throughout the data collection, synthesis, analysis and reporting phases.

61. The evaluation team should be assured of the accessibility of all relevant documentation within the provisions of the directive on disclosure of information [WFP Directive CP2010/001 on information disclosure](#).

62. Given that the WFP office in Burundi, jointly with UNICEF, will be recruiting an external firm for this evaluation, WFP and UNICEF expect all deliverables from the evaluation team to undergo a thorough quality assurance review by the evaluation firm before being sent to WFP and UNICEF, in accordance with the evaluation quality assurance system.

63. The evaluation manager, the internal evaluation committee, and the evaluation reference group are additional measures planned to ensure the quality of the process and products at the various stages of

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<sup>10</sup> If there are changes in the evaluation team or a sub-contracting for some of the planned evaluation activities, the confidentiality agreement and ethics pledge should also be signed by those additional members.

<sup>11</sup> UNEG Norm #7 states “that transparency is an essential element that establishes trust and builds confidence, enhances stakeholder ownership and increases public accountability”

the evaluation and thus strengthen its credibility and impartiality.

64. All final evaluation reports will undergo further quality assessment by an independent entity, through a process managed by the Evaluation Office. The overall findings of this further quality assessment, along with the evaluation report, will be published on the WFP and UNICEF websites.

## 6. Organization of the evaluation

### 6.1. Phases and deliverables

65. Table 4 presents the structure of the main phases of the evaluation, along with the deliverables and deadlines for each phase. All deliverables will be in French. Annex 2 presents a more detailed timeline.

**Table 4 Summary timeline – key evaluation milestones and deliverables**

Main steps	Indicative timeline	Tasks and deliverables	Person responsible
1. Preparation	January 26 – March 25 2026	Preparation of terms of reference Final terms of reference Selection of the evaluation team and recruitment  Key Document Library	Evaluation Managers
2. Inception	March 26– April 30 2026	Document review/information meeting Onboarding mission [in person or remotely] Start-up report	Evaluation Managers
3. Data collection	May 4 - May 29, 2026,	Field activities Exit Debrief	Evaluation Team
4. Report preparation	June 1– July 31 2026. <b>Key</b> - Draft report ready on June 22 2026	Data analysis and report writing Feedback Collection Final evaluation report	Evaluation Team
5. Dissemination	August 4 - 15 2026	Management's response  Dissemination of the evaluation report	Evaluation Managers

### 6.2. Evaluation team composition

66. The evaluation team should have at least 3 members and maximum of five members, including a team leader, and include nationally/regionally and recruited evaluators with the required expertise. Wherever possible, the evaluation will be carried out by a diverse team in terms of professional experience, skills, and areas of expertise. Team members should be able to cover the areas being evaluated.

67. The evaluation team must possess in-depth knowledge of gender, equity, and inclusion issues in their broadest sense, and, where possible, of power dynamics. They will demonstrate methodological skills in designing feasible data collection and analysis methods, as well as synthesis and report-writing skills. At least one team member must have recent experience with WFP and/or UNICEF evaluation activities. At least one team member must have subject-matter expertise.

**Table 5: Summary of evaluation team and areas of expertise required**

	Expertise required
<b>Team Leader (Lead Evaluator)</b>	<p><b>MINIMUM REQUIREMENTS</b></p> <ul style="list-style-type: none"> <li>• Excellent team management skills (coordination, planning, ability to solve problems and meet deadlines).</li> <li>• Solid experience in conducting national-level assessments, particularly assessments in the field of nutrition-sensitive food systems</li> <li>• Experience in applying the evaluation approach using quasi-experimental methodology, including reconstruction and the use of theories of change in evaluations, where appropriate.</li> <li>• Reliable presentation skills and excellent writing and summarizing skills.</li> <li>• Experience in facilitating face-to-face or hybrid meetings and workshops.</li> <li>• Experience in working with agricultural communities, including agricultural cooperatives.</li> <li>• Expertise in one or more of the technical fields below.</li> </ul> <p><b>DESIRED SKILLS</b></p> <ul style="list-style-type: none"> <li>• Familiarity with the programmes and intervention methods of WFP and UNICEF, especially in the area of food security, nutrition and resilience.</li> <li>• Good knowledge of the national context, demonstrable by prior experience in the country.</li> <li>• Prior experience in conducting or leading WFP and UNICEF evaluations</li> <li>• In-depth knowledge of issues of gender, equity and inclusion in the broadest sense and, where possible, of power dynamics.</li> </ul>
<b>Thematic expertise – Evaluators (at least 2)</b>	<p><b>MINIMUM REQUIREMENTS</b></p> <ul style="list-style-type: none"> <li>• Excellent oral and written communication skills in French and English</li> <li>• Demonstrable and relevant analytical capabilities with regard to food security, nutrition and the resilience of small producers.</li> <li>• Prior experience in designing and implementing assessments, as well as in obtaining products and results in the following areas: <ul style="list-style-type: none"> <li>▪ Strengthening resilience at the community level</li> <li>▪ Food security and nutrition,</li> <li>▪ Credit group management and community finance</li> <li>▪ Analysis of gender inclusion in support for small-scale agricultural producers</li> </ul> </li> </ul> <p><b>DESIRED SKILLS</b></p> <ul style="list-style-type: none"> <li>• Familiarity with the programmes and intervention methods of WFP and UNICEF.</li> <li>• Prior experience in conducting or leading WFP and/or UNICEF evaluations</li> <li>• Good knowledge of the national context, demonstrable by prior experience in the country.</li> <li>• In-depth knowledge of issues of gender, equity and inclusion in the broadest sense and, where possible, of power dynamics.</li> <li>• Administrative and logistical experience.</li> </ul>
<b>Quality Assurance Evaluator (optional)</b>	<p><b>MINIMUM REQUIREMENTS</b></p> <ul style="list-style-type: none"> <li>• Experience in quality control of evaluations.</li> </ul> <p><b>DESIRED SKILLS</b></p> <ul style="list-style-type: none"> <li>• Familiarity with the programs and intervention methods of WFP and/or</li> </ul>

	Expertise required
	UNICEF. <ul style="list-style-type: none"> <li>• Previous experience in conducting one or more WFP and/or UNICEF evaluations.</li> </ul>

68. The team leader will have expertise in one of the aforementioned key skills, and proven experience in conducting similar assessments, including the design of methodological tools and data collection. This person will also possess leadership, analytical and communication skills, and will demonstrate excellent command of [language] (writing, summarizing and presentation).

69. The team leader's main responsibilities will be to: i) define the evaluation approach and methodology; ii) guide and manage the evaluation team; iii) conduct the evaluation mission and represent the team; and iv) prepare and revise, as appropriate, the inception report, the final field activity report (exit report) and the evaluation report in accordance with the DEQAS system.

70. Team members will be required to: i) contribute to the development of the methodology in their area of expertise based on a literature review; ii) carry out fieldwork activities; iii) participate in team meetings and meetings with stakeholders; and iv) contribute to the drafting and revision of evaluation products in their technical area(s).

The evaluation team will conduct the evaluation under the direction of the team leader and in close collaboration with the WFP evaluation managers. The team will be engaged after an agreement has been reached with WFP regarding its composition.

### 6.3. Roles and responsibilities

71. **The management of the WFP office and the UNICEF management** in Burundi will be responsible for:

- Assign an evaluation manager for the KfW evaluation
- Establish the internal evaluation committee (EC) and the evaluation reference group (ERG)
- Approve the final ToR, inception and evaluation reports
- Approve the evaluation team selection
- Ensure the independence and impartiality of the evaluation at all stages through EC and ERG
- Participate in discussions with the evaluation team on the evaluation design and the evaluation subject, its performance and results with the evaluation manager and the evaluation team
- Organize and participate in debriefings with internal and external stakeholders
- Oversee dissemination and follow-up processes, including the preparation of a management response to the evaluation recommendations.

72. The **evaluation managers** manage the evaluation process through all phases including:

- By serving as the main intermediary between the evaluation team, represented by the team leader, the coordinators and the WFP and UNICEF interlocutors, with a view to smooth implementation.
- By drafting the terms of reference for the evaluation, in consultation with key stakeholders.
- By selecting and hiring the evaluation team, as well as preparing and managing the evaluation budget.
- By preparing the terms of reference and planned commitments of the evaluation committee and the evaluation reference group.
- By ensuring the implementation and effective use of quality assurance mechanisms.
- By collecting and disseminating feedback on the evaluation start-up and provisional evaluation reports to the evaluation team.
- By ensuring the team has access to all the documents and information necessary to carry out the assessment; By facilitating communication between the team and local stakeholders.
- By providing support for the preparation of field activities by organizing meetings and site visits, providing logistical support in the field and arranging for interpreters to come if needed.

- By organizing security meetings for the assessment team and providing all necessary support.
- By communicating up-to-date information to the evaluation committee and the evaluation reference group regarding progress, and by reporting any problems to the committee, as appropriate.
- By applying first-level quality assurance procedures to the evaluation products.
- By presenting all provisional documents to the regional assessment unit for a second-level quality assurance exercise before submitting them for management validation

73. **An internal Evaluation committee** is established to manage the evaluation process and ensure its independence and impartiality. The committee's roles and responsibilities include overseeing the evaluation process, making key decisions, and reviewing the evaluation deliverables. Annex 3 provides further information on the composition of the evaluation committee, its roles, and its responsibilities as per the [TN on Evaluation Committee](#)].

74. **WFP Global HQ and UNICEF** will assume the following responsibilities

- Advise the evaluation manager and provide technical support to the evaluation throughout the process through the REU
- Participate in discussions with the evaluation team on the evaluation design and on the evaluation subject as required through the [name the technical units relevant for the subject of evaluation]
- Provide comments on the draft ToR, inception and evaluation reports from a subject-contents perspective through the RETT.
- Provide second level quality assurance of all evaluation products through the RETT before they are approved.
- Support the preparation of a management response to the evaluation and track the implementation of the recommendations.

75. While Valerie MUNYETI, Evaluation Officer is the RETT focal point of contact within the Office of Evaluation and will carry out most of the responsibilities listed above, other relevant members of the regional office technical staff may be part of the evaluation reference group or provide feedback on the evaluation outputs, as appropriate.

76. **The relevant divisions within WFP (and/or UNICEF) headquarters** will be responsible for:

- Discuss WFP/UNICEF strategies, policies or systems in their area of responsibility and subject of evaluation.
- Comment on the evaluation TOR, inception and evaluation reports, as required.

77. Other stakeholders (as listed in Table 1) will need to participate in the evaluation by providing data, participating in results sharing and validation sessions, and providing observations and comments on the evaluation products (tools, reports, etc.) as needed.

78. The WFP Evaluation Office is responsible for overseeing WFP's decentralized evaluation function, defining evaluation standards and rules, managing the external quality support service, publishing the final evaluation report, and submitting it for subsequent quality assessment. The Evaluation Office is also responsible for providing support and making recommendations to the regional evaluation unit, the evaluation manager, and evaluation teams as needed.

Internal and external stakeholders or evaluators are encouraged to contact the Regional Evaluation Unit and the Evaluation Office Support Service ([wfp.decentralizedevaluation@wfp.org](mailto:wfp.decentralizedevaluation@wfp.org)) in the event of a potential breach of impartiality, non-compliance with the UNEG ethical guidelines or any other risk to the credibility of the evaluation process.

## 6.4. Security considerations

79. **Security clearance** where required is to be obtained from WFP or UNICEF office in Burundi.

80. Consultants engaged by WFP or UNICEF are protected by the UN Department of Safety and Security (DSS) system, just like UN staff. This system covers WFP and UNICEF staff members and the consultants they directly engage. Independent consultants must obtain security clearance from DSS to travel from their

designated duty station. Before traveling, they must complete the UN Basic and Advanced Security Training (BSAFE and SSAFE), print their certificate, and carry it with them.

81. As an "independent contractor" for WFP or UNICEF assessment services, the contracted company will be responsible for the safety and security of the assessment team and for making appropriate arrangements in case of evacuation for medical or other unforeseen circumstances. However, to prevent any security-related incidents, the assessment manager must ensure that the WFP and UNICEF country offices register team members with the security officer upon arrival in the country and organize a briefing to familiarize them with the security situation in the field. The assessment team must comply with all applicable DSS rules and regulations, including completing BSAFE and SSAFE security training, respecting curfews, and attending in-country briefings.

82. In accordance with Annex 1 of the contract with independent providers of WFP assessment services, companies are expected to travel to all relevant countries of WFP programmes, including those with hazardous contexts.

83. Before participating in a mini-tender and submitting a proposal, the consulting firm conducting the evaluation is advised to check whether any government restrictions prevent team members from traveling to the project areas (Annex 1) to carry out the evaluation. If such government restrictions prevent team members from traveling, the firm should not participate in the mini-tender

## 6.5. Communication

84. To ensure a smooth and effective evaluation process, and to draw valuable lessons from this evaluation, the team should emphasize transparent and open communication with key stakeholders throughout the process. To this end, a clear agreement should be reached on the channels to be used and the frequency of communication with and among key stakeholders.

85. The evaluation team will propose/study communication and feedback channels according to the different audiences (including affected populations, where applicable) during the evaluation start-up phase.

86. If translation services are required as part of fieldwork, the evaluation firm will make the necessary arrangements and include the cost of said services in the proposed budget for services provided by the contractor for this assessment.

87. Based on stakeholder analysis, the communication and knowledge management plan will identify the evaluation users to be involved in the process and the recipients of the various evaluation outputs. The communication and knowledge management plan will specify how the findings related to gender, equity, and inclusion in the broadest sense will be disseminated, and how stakeholders interested in or affected by these issues will be involved.

88. In accordance with evaluation standards and rules, WFP requires that all evaluations be made public. It is important that evaluation reports be made accessible to a wide audience to promote their use and contribute to WFP's credibility through transparent information dissemination. After validation of the final evaluation report, the evaluation will be published on WFP's internal and external websites.

89. Copies of evaluation reports provided by evaluators must be free of any identifying information and any proprietary information. Final, publication-ready versions of evaluation reports must be accessible to persons with disabilities. For guidance on creating accessible documents, please see the following resources: <https://www.section508.gov/create/documents>; <https://www.section508.gov/create/pdfs>.

## 6.6. Proposal

**Funding:** The evaluation will be financed through project resources and jointly managed by the WFP and UNICEF offices in Burundi. The evaluation firm will be selected through a competitive procurement process in accordance with United Nations procurement principles of transparency, fairness, integrity, effective competition, and best value for money. Interested firms will be invited to submit separate technical and financial proposals, in line with the requirements set out in these Terms of Reference.

**Technical Proposal:** The technical proposal will be assessed based on the firm's demonstrated understanding of the assignment, the proposed methodology, relevant experience in similar evaluations or studies, qualifications and roles of the proposed team members, and the feasibility of the proposed work plan and timeline.

**Financial Proposal:** The financial proposal must be submitted as a separate Excel file, distinct from the technical proposal documentation. It must present a detailed and itemized budget, including consultant fees, travel costs, accommodation, subsistence, data collection costs, and any other direct or indirect expenses required to carry out the evaluation.

Travel, accommodation, and other direct costs must be budgeted based on:

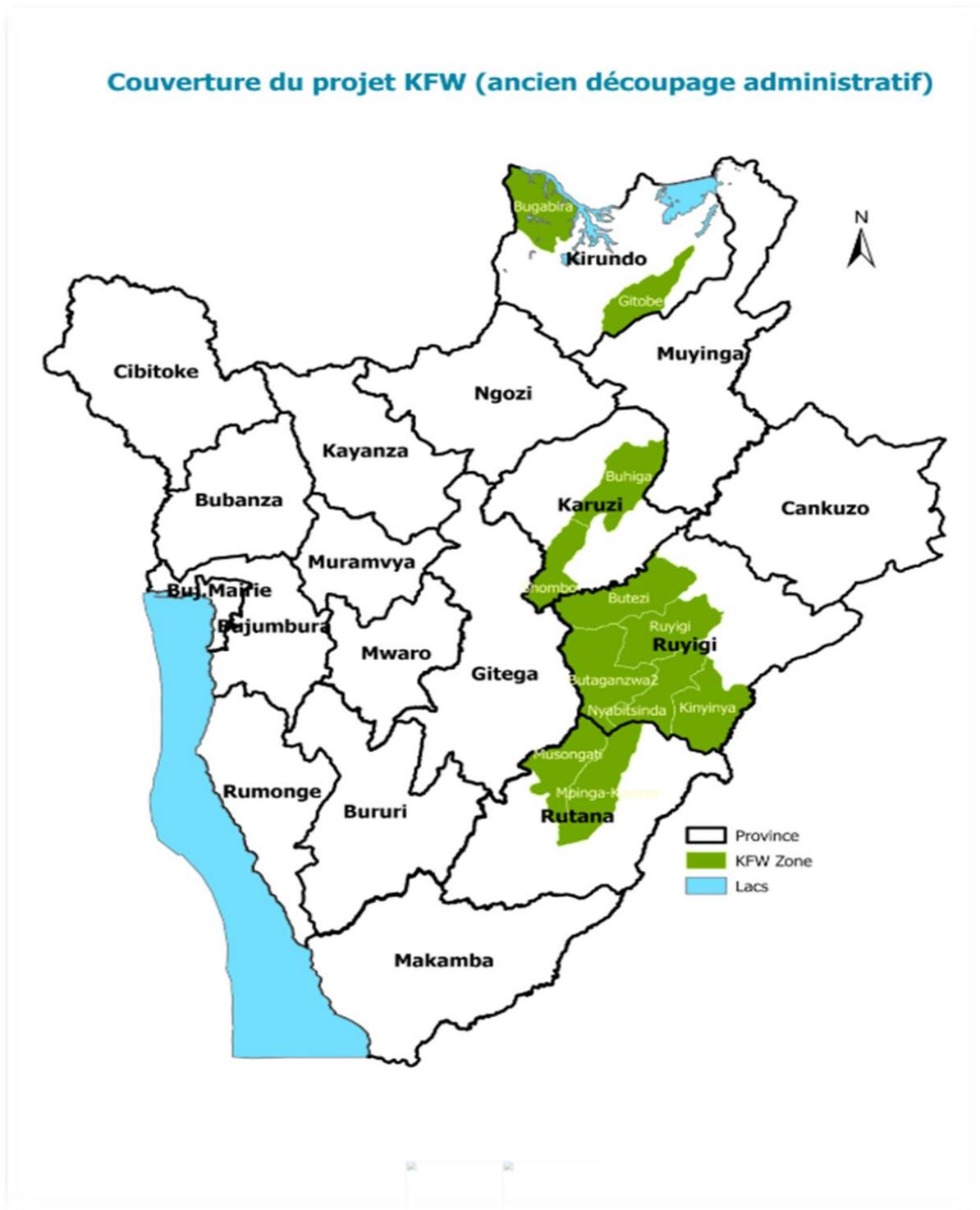
- The number of personnel involved (consultants, data collection agents, and support staff),
- The duration of the assignment,
- The applicable United Nations standards for consultant fees and per diem in Burundi, and
- The logistical requirements necessary to complete the evaluation.

**Evaluation of Proposals:** Proposals will be evaluated in two stages: a technical evaluation followed by a financial evaluation of technically compliant proposals. Selection will be based on the best overall value for money, taking into account both quality and cost considerations.

Following the technical and financial evaluation, WFP may request an improved or clarified offer from one or more preferred bidders to ensure full alignment with the Terms of Reference.

**Due Diligence and Final Selection:** As part of the decision-making process, WFP may conduct reference checks and interviews with proposed key team members. The contract will be awarded to the firm that best meets the technical, financial, and institutional requirements of the assignment.

# Annex 1. Map



# Annex 2. Timeline

**NB: Please note that this is a tentative draft timeline to be revised as the evaluation progresses**

	Phases, deliverables and timeline	Level of effort	Dates
<b>Phase 1 - Preparation (total duration: 2 months up to 25<sup>th</sup> March)</b>			
EM	Desk review, draft ToR and quality assure (QA) using ToR QC	(2 weeks)	26th Jan – 6th Feb '26
REU	Quality assurance of draft 0 TOR by RETT Focal	Simultaneous with the drafting	2nd – 6th Feb '26
EM	Revise draft ToR based on feedback received	Simultaneous	2nd – 6th Feb '26
EM	Share draft 1 ToR with quality support service (DEQS)	N/A	17th Feb '26
DEQS	DEQS review of draft 1 ToR and follow-up call with DEQS, if required	(4 days)	17th – 24th Feb '26
EM	Revise draft ToR based on DEQS and share with ERG	(1 day)	25 <sup>th</sup> -26 <sup>th</sup> Feb '26
ERG	ERG stakeholder review and comment on draft 2 ToR	(2 days)	27 <sup>th</sup> Feb – 2 <sup>nd</sup> Mar '26
EM	Revise draft ToR based on ERG comments received & submit final TOR to EC Chair for approval	(1 day)	3 <sup>rd</sup> Mar '26
EM	Start recruitment process (Share TOR with supply chain and launch the call for proposal)	(0.5 day)	3 <sup>rd</sup> Mar '26
EC Chair	<b>Approve the final ToR, share with ERG, and key stakeholders</b>	Simultaneous	3 <sup>rd</sup> Mar '26
LTA Firms	LTA firms submit evaluation proposals and budgets	(10 days)	5 <sup>th</sup> Mar – 18 <sup>th</sup> Mar '26
EM	Download and Assess evaluation proposals/ Conduct interviews and meetings to recommend team selection	(2 days)	19th - 20th Mar '26
	Presentation of recommended firms to the EC and follow-up, clarifications and EC decision	(2 days)	23rd & 24 <sup>th</sup> Mar '26
EC Chair	<b>Approve the evaluation team selection</b>	Simultaneous	25th Mar '26
EM	Evaluation team contracting and PO issuance	(1 day)	25th Mar '26
<b>Phase 2 - Inception (total duration: 1.75 months -26<sup>th</sup> March – 30<sup>th</sup> April)</b>			
EM	Evaluation team orientation meeting	(0.5 day)	26 <sup>th</sup> Mar '26
ET	Desk review of key documents	(5 days)	24th – 30th Mar '26
EM/ET	Inception briefing	(1 days)	30th Mar '26
ET	Inception missions and IR drafting	(1 week)	1st – 7th Apr '26
EM	QA draft IR by EM and RETT Focal	(1 day)	8th Apr '26
ET	Revise draft IR based on feedback from EM and REU	(1 day)	9th Apr '26
DEQS/EM	Simultaneous review draft 1 IR and follow-up call with DEQS, if required	(5 days)	10th – 16th Apr '26
ET	Revise draft IR based on feedback received by DEQS	(2 days)	17th -20th Apr '26
EM	Review draft 2 IR to check if all DEQS comments have been adequately address	(1 day)	21st Apr '26
ET	Revise draft 2 IR to address any pending DEQS comments from EMs	(1 day)	22nd Apr '26
ERG/RETT	ERG stakeholders/RETT review and comment on draft 2 IR	(3 days)	23rd -27th Apr '26
ET/REO	Inception Workshop & consolidation of any comments	(1 day)	28th Apr '26
ET	Revise draft IR based on feedback received and submit final revised IR	(1 day)	29th Apr '26
EC Chair	<b>Approve final IR and share with ERG for information</b>	(1 Day)	30th Apr '26
<b>Phase 3 - Data collection (total duration: – 1 months) 1<sup>st</sup> - 30<sup>th</sup> May</b>			

EM	Scheduling of KII appointments with key stakeholders and support logistical preparations for data collection Facilitate second payment after approval of IR	Simultaneously with preceding activities	20th Apr– 6th May '26
ET	Enumerators training	(3 days)	4th – 6th May '26
ET	Data collection	(3 weeks)	7th – 28th May '26
ET	In-country end-of-fieldwork debriefing with EC, AND Programme staff.	(0.5 day)	29th May '26
<b>Phase 4 - Reporting (total duration - 2 months) 1<sup>st</sup> June - 30<sup>th</sup> July - draft by 30<sup>th</sup> June)</b>			
ET	Draft 0 evaluation report	(3 weeks)	1st – 19th Jun '26
EM/RETT	Quality assurance of draft 0 ER by EM and RETT Focal	(2-3 days)	22nd – 24th Jun '26
ET	Revise and submit draft ER based on feedback received by EM and REU	(2 days)	25th – 26th Jun '26
DEQS	ER DEQS	(1 week)	29th Jun – 6th Jul '26
ET	Revise and submit draft ER based on feedback received by DEQS	(2 days)	7th – 8th Jul '26
ERG	ERG stakeholders review and comment on draft 2 ER	(3 days)	9th -13th Jul '26
ET/EM	Validation workshop (Internal and External) In-person	(2 days)	15th – 16th Jul '26
ET	Revise draft ER based on feedback received. Submit the revised ER and the summary of the ER (6 -8 Pages)	(2-days)	17th – 20th Jul '26
EM	Review the revised ER to check if the comments have been adequately addressed, engage ET if there are outstanding comments, and share with the E if any	(2 days)	21st – 22nd Jul .26
REO	Review and endorsement of final ER prior to EC Chair approval	(1 week)	23rd Jul – 29th Jul '26
EC Chair	<b>Approve final evaluation report and share with key stakeholders</b>	(1 day)	30th Jul '26
EM	<b>Facilitate payment after final ER</b>		31st Jul '26
<b>Phase 5 - Dissemination (total duration - 0.75 months) 1<sup>st</sup> August - 15<sup>th</sup> August</b>			
EC Chair	CO to prepare management response (MR)	(5 days)	3rd – 7th Aug '26
EM &REU	Regional Office stakeholders review of the draft MR	(3 days)	10th – 12th Aug '26
EC Chair	CO to revise the draft MR to address stakeholders' comments	(2 days)	13th – 14th Aug '26
EM	<b>Share final evaluation report and management response with the REU and OEV for publication and participate in end-of-evaluation lessons learned call</b>	(0.5 day)	14th Aug '26

# Annex 3. Role and composition of the evaluation committee

90. **Mission and role:** The evaluation committee aims to ensure credibility, transparency, impartiality, and quality of the evaluation, in accordance with WFP's evaluation policy. To this end, it will support the evaluation manager in decision-making, reviewing draft documents (terms of reference, start-up and evaluation reports), and submitting them for validation to the country office management, who will chair the committee.

91. **Composition:** The evaluation committee will consist of the following staff members:

- Country Director – WFP (chair of the evaluation committee)
- Country Representative – UNICEF (Co-Chair)
- Evaluation Managers (Secretary)
- Deputy Representative - Programme (UNICEF)
- Deputy Country Director/HOP (WFP)
- Chief - Planning, Monitoring & Evaluation (UNICEF)
- Chief - Nutrition UNICEF)
- Regional Evaluation Officer (WFP)
- Regional Evaluation Specialist (UNICEF)

Evaluation stage and collaborative task	Estimated effort in days	Provisional dates
<b>Preparation stage</b> <ul style="list-style-type: none"> <li>• Selection and establishment of members of the ERG.</li> <li>• Review of the revised draft TORs prepared by the EM.</li> <li>• Validation of the final terms of reference.</li> <li>• Final validation of the evaluation team and budget.</li> </ul>	1 day	January/February 2026
<b>Inception stage</b> <ul style="list-style-type: none"> <li>• Sharing information with the evaluation team regarding the purpose of the evaluation.</li> <li>• Guiding the design of the evaluation by discussing with the evaluators.</li> <li>• Assistance in selecting sites for field visits</li> <li>• Review of the revised interim start-up report.</li> <li>• Validation of the final start-up report.</li> </ul>	2 days	March/2026
<b>Data collection stage</b> <ul style="list-style-type: none"> <li>• Key informants: answering interview questions.</li> <li>• Facilitating access to sources of information and contextual data and to stakeholders.</li> <li>• Participation in information meetings at the end of field missions.</li> <li>• Supporting the team by clarifying emerging issues/gaps and developing related solutions.</li> </ul>	2 days	April & May/2026
<b>Analysis and report preparation stage</b> <ul style="list-style-type: none"> <li>• Review of the final evaluation report after the quality assurance process conducted by the evaluation team and the evaluation manager.</li> <li>• Validation of the final evaluation report.</li> </ul>	2 days	June & July/2026
<b>Dissemination and monitoring stage</b> <ul style="list-style-type: none"> <li>• Management decides whether to approve, partially approve, or not approve the recommendations, justifying its decision.</li> <li>• Execution of the preparation of management's response to the evaluation recommendations.</li> </ul>	2 days	August/2026

# Annex IV. Role, composition and schedule of engagement of the evaluation reference group

92. **Mission and role:** The evaluation reference group is an advisory group that provides guidance and feedback to the manager and the evaluation team at key stages of the process. Established during the preparation phase, it is mandatory for all decentralized evaluations.

93. The overall mission of the evaluation reference group is to contribute to the credibility, usefulness, and impartiality of evaluation. To this end, its composition and activities are based on the following principles:

- **Transparency** : Ensuring that relevant stakeholders remain involved and informed during key stages helps guarantee transparency throughout the evaluation process.
- **Ownership and use:** Stakeholder participation promotes ownership of the evaluation process and products, which can then influence their use.
- **Accuracy:** Feedback from stakeholders at key stages of preparation, data collection and reporting contributes to the accuracy of the facts and figures reported and the evaluation analysis.

## Composition

Country Office	Name
<b>Members:</b> <ul style="list-style-type: none"> <li>• Country Director – WFP (Chair)</li> <li>• Country Representative – UNICEF (Co-Chair)</li> <li>• Evaluation Managers (Secretary)</li> <li>• Deputy Representative - Programme (UNICEF)</li> <li>• Deputy Country Director/HOP (WFP)</li> <li>• Activity Managers (Nutrition, Resilience, SBC) - WFP</li> <li>• Head of the Supply Chain Unit - WFP</li> <li>• Chief - Nutrition (UNICEF)</li> <li>• Chief - Planning, Monitoring &amp; Evaluation (UNICEF)</li> <li>• Nutrition Specialist (UNICEF)</li> <li>• Gender &amp; Protection Officer (WFP)</li> <li>• Cooperating Partner Management Officer (WFP)</li> <li>• Partnerships Officer (WFP)</li> <li>• KfW</li> <li>• NGO - Concern Worldwide, GVC We World</li> <li>• Government – SEP/PMSAN &amp; PRONANUT</li> </ul>	Jean-Noel GENTILE France Begin Eddy/Valerie/Ndriakita Mame Selbee Diouf Arduino MANGONI Egide NSENGIMANA, Donatien BUZOYA, Thierry NININHAZWE Souleymane SOW Christine Kaligirwa Beifith Kouak Tiyab Jean Michel Goman Allegria INAMUCO Espérance KAMARIZA Michel RWAMO TBC TBC Fidèle Ndagijimana Francine Nizigama
Regional Office	Name
<ul style="list-style-type: none"> <li>• Regional Evaluation Office</li> <li>• Regional Advisor for Monitoring</li> <li>• Member of the Regional program group</li> <li>• Regional advisor on gender</li> <li>• Regional program managers (cash transfers, social protection, resilience and livelihoods)</li> </ul>	Nikki Zimmerman Federico Doehnert TBC Jane REMME TBC

### Collaboration schedule of the evaluation reference group and deadlines

Evaluation stage and collaborative task	Estimated level of effort required in days	Provisional dates
<p><b>Preparation stage</b></p> <ul style="list-style-type: none"> <li>• Review of the provisional terms of reference and comments on them.</li> <li>• As appropriate, providing feedback on evaluation issues. <ul style="list-style-type: none"> <li>• Determining the source documents useful to the evaluation team.</li> <li>• Participation in in-person and remote meetings.</li> </ul> </li> </ul>	1 day	January/2026
<p><b>Getting started stage</b></p> <ul style="list-style-type: none"> <li>• Meetings with the evaluation team to discuss how they can design a realistic/practical, relevant and useful evaluation.</li> <li>• Identifying key stakeholders and facilitating dialogue with them for interviews.</li> <li>• Determining the documentation and data and accessing the latter.</li> <li>• Assistance in selecting sites to visit in the field, based on the criteria established by the evaluation team in the start-up report.</li> <li>• Review of the provisional start-up report and comments on it.</li> </ul>	1 day	March/2026
<p><b>Data collection stage</b></p> <ul style="list-style-type: none"> <li>• Key informant: answering interview questions.</li> <li>• Providing sources of information and facilitating access to data.</li> <li>• Participation in the team's information meeting at the end of their field mission.</li> </ul>	2 days	April & May/2026
<p><b>Analysis and report preparation stage</b></p> <ul style="list-style-type: none"> <li>• Review of the interim evaluation report and comments on it, emphasizing the accuracy, quality and completeness of the results, and linking them to the conclusions and recommendations.</li> </ul>	2 days	June & July/2026
<p><b>Dissemination and monitoring stage</b></p> <ul style="list-style-type: none"> <li>• Distribution of the final report internally and externally, as appropriate.</li> <li>• Dissemination of results to units, organizations, networks and at events.</li> <li>• Contribution to the management's response and its implementation.</li> </ul>	2 days	August/2026

# Annex 5. Communication and knowledge management plan

When Evaluation phase	What Product	To whom Target audience	From whom Creator lead	How Communication channel	Why Communication purpose
<b>Preparation</b>	Draft TOR	Evaluation Reference Group; WFP & UNICEF (CO & Regional office, ESARO-HQ)	Evaluation managers	Email; Meetings; SharePoint	To request a review of and comments on the draft TOR
	Final TOR	Evaluation Reference Group; WFP & UNICEF (CO, Regional Office)	Evaluation managers	Email; websites	To inform of the final agreed upon overall plan, purpose, scope, and timing of the evaluation
<b>Inception</b>	Draft Inception report	Evaluation Reference Group; WFP & UNICEF (CO & Regional Office)	Evaluation managers	Email; SharePoint	To request a review of and comments on the inception report
	Final Inception Report	Evaluation Reference Group; WFP & UNICEF (CO, Regional Office)	Evaluation managers	Email; SharePoint	To inform key stakeholders of the detailed plan for the evaluation, including critical dates and milestones, sites to be visited, stakeholders to be engaged etc.
<b>Data collection</b>	Debriefing power-point	Burundi country office management and programme staff; Evaluation Reference Group	Evaluation Team leader and Evaluation managers	Meetings	To discuss the preliminary findings after data collection
<b>Reporting</b>	Draft Evaluation Report	Evaluation Reference Group	Evaluation managers	Email; SharePoint	To request a review of and comments on the evaluation report
	Validation workshop PowerPoint and visual thinking <sup>11</sup>	Burundi country office management and programme staff; WFP & UNICEF Regional Office & HQ; Evaluation Reference Group.	Evaluation managers and Team Leader	Meetings	To discuss preliminary conclusions and recommendations
	Final Evaluation report	Evaluation Reference Group; WFP & UNICEF Management; WFP & UNICEF employees (CO, Regional Office, HQ, OEV); Donors	Evaluation managers	Email; Websites, Evaluation Network platforms (e.g., UNEG, ALNAP)	To inform key stakeholders of the final main product from the evaluation and make the report available publicly

		Partner NGOs			
<b>Dissemination &amp; Follow-up</b>	Draft Management Response	WFP CO & Regional Office Management, Programme & M&E Staff; WFP & UNICEF Regional Office Senior Regional Programme Adviser; M&E; Evaluation Reference Group;	Evaluation managers	Email and/or an online seminar	To discuss the commissioning office's actions to address the evaluation recommendations and solicit comments
	Final Management Response	WFP & UNICEF Management; WFP & UNICEF (CO, Regional Office, HQ, OEV); donors, partners, and government	Evaluation managers	Email;	To ensure that all relevant staff are informed of the commitments made on taking actions and make the Management Response publicly available
<b>Dissemination &amp; Follow-up (Associated Content)</b>	Evaluation Summary/Brief	WFP employees (CO, Regional Office, HQ, OEV); donors and partners; National decision-makers	Evaluation managers	Websites	To disseminate evaluation findings

# Annex 6. Bibliography

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# Annex 7. Acronyms and abbreviations

BMZ	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung (German Federal Ministry for Economic Cooperation and Development)
CBT	Cash-Based Transfer
CFSVA	Comprehensive Food Security and Vulnerability Analysis
CHWC	Community Health and Wellness Committee
CMAM	Community-based Management of Acute Malnutrition
CSP	Country Strategic Plan
DE/BICO	Decentralized Evaluation / Burundi Country Office (reference code in ToR)
DEQS	Decentralized Evaluation Quality Support
ECD	Early Childhood Development
FEA	Femmes Enceintes et Allaitantes (Pregnant and Breastfeeding Women)
FVS	Famille et Vie Scolaire (local implementing partner)
GDP	Gross Domestic Product
GVC	Gruppo di Volontariato Civile (part of WeWorld-GVC NGO)
GVSN	Global Vulnerability, Food Security and Nutrition Analysis
HDI	Human Development Index
IPC	Integrated Food Security Phase Classification
IYCF	Infant and Young Child Feeding
KfW	Kreditanstalt für Wiederaufbau (German Development Bank)
MDD-W	Minimum Dietary Diversity for Women
MINISANTE	Ministère de la Santé (Ministry of Health)
MNP	Micronutrient Powder
NGO	Non-Governmental Organization
PND	Plan National de Développement (National Development Plan)
SAM	Severe Acute Malnutrition
SBCC	Social and Behaviour Change Communication
SBN	SUN Business Network

SEP/PMSAN	Secrétariat Permanent du Programme Multisectoriel de Sécurité Alimentaire et Nutritionnelle
SNF	Specialized Nutritious Food
UNCDF	United Nations Capital Development Fund
UNICEF	United Nations Children's Fund
UNSDCF	United Nations Sustainable Development Cooperation Framework
VSLA	Village Savings and Loan Association
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme
YFHC	Youth Friendly Health Center
iCCM	Integrated Community Case Management

# Annex 8: Results Matrix

Objectives	Success indicators	Source verification	Assumptions
	<p><b>Overall objective</b> Prevention of malnutrition and strengthening of resilience at community level in Burundi, by improving the food and nutrition security among vulnerable communities in 4 provinces</p>		
<p><b>OUTCOME 1</b> <b>Improving resilience at household and individual levels and dietary diversity.</b></p>	<p>1. Percentage of households using a. crisis or b. emergency coping strategies</p> <p><b>Baseline value</b> (SMART survey): 16% (changed from 10.7% national value in initial proposal) of households using emergency coping strategies in project intervention areas. <b>Target value year 5</b> : 8% (changed from 5% in initial proposal) of households using emergency coping strategies in project intervention areas (New target value to be validated by the project National Steering Committee) <b>Actual value</b>: 12% (mid-term review)</p> <p><b>Baseline value</b> (SMART survey): 27% (changed from 12.7% national value in initial proposal) of households using crisis coping strategies in project intervention areas. <b>Target value year 5</b> : 15% (changed from 5% in initial proposal) of households using crisis coping strategies in project intervention areas. (New target value to be validated by the project National Steering Committee) <b>Current value</b> : 24% (mid-term review)</p>	SMART survey/ JANFSA	<p><b>Assumptions regarding achievements of overall objective:</b> Target can be achieved in the absence of natural shocks (flood/drought) and insecurity (population movement, livelihood loss etc.)</p>
<p><b>Output 1.1</b> <b>Households with pregnant and lactating women and children under 2 years are linked to VSLAs</b></p>	<p>1. Number of VSLAs established.</p> <p><b>Baseline value</b> : 423 <b>Target value</b>: 1,600 VSLAs established New: 477 UNICEF + 600 WFP Old: 423 (existing) Top up UNICEF: 100 <b>Achievements as of June 2025</b> : 1177</p> <p>2. Number of VSLAs receiving training and capacity building on livelihood and resilience activities.</p> <p><b>Baseline value</b>: 0 in project intervention areas</p>	Partners quarterly reports Baseline and end-line surveys	

Objectives	Success indicators	Source verification	Assumptions
	<p><b>Target value year 5</b> : 1,500 VSLAs receiving training to improve livelihoods and resilience in project intervention areas.            New: 477 UNICEF + 600 WFP            Old : 423 (existing)            Top up UNICEF: 100  <b>Achievements as of June 2025: 1177</b></p>		
<p>Key Activities of Output 1.1</p> <p>1.1. 1 Training and capacity building (planning and management) on the development of functional VSLAs which have strong linkages to women enrolled in the Care Groups</p> <p>1.1. 2 Provision of material inputs in order to make VSLAs function and to ensure that VSLAs can carry out nutrition sensitivity and resilience building activities</p> <p>1.1.3 Dissemination of the national SBC strategy to maximize the impact of nutrition specific and nutrition sensitive interventions</p>	<p>1. Number of VSLAs receiving start-up capital funding</p> <p><b>Baseline value</b> : 0 in project intervention areas  <b>Target value year 5</b> : 1177 VSLAs: 477 UNICEF+ 600 WFP+ 100 top up UNICEF (initial target was 600 VSLAs) in project intervention areas  <b>Achievements as of June 2025: 887</b></p> <p>2. Number of organizations/entities receiving the coordinated national SBC strategy</p> <p><b>Baseline value:</b> 0 in the project intervention areas  <b>Target year 5:</b> 2,610 structures such as committees, local government authorities, district authorities for disseminating the SBC strategy in the project intervention areas.  <b>Achievements as of June 2025:</b> 2878 organizations/entities. This includes 9 Health districts/nutrition focal points, 4 Provinces/nutrition health focal points, 94 École de maris (EDM), 200 Care groups, 29 Health centers, 320 FARN, 548 FAN and 1674 VSLA.</p> <p>3. Number of targeted households in the 26 hills /Hills through the utilization of technically sound and economically efficient hydroponics techniques</p> <p><b>Baseline value</b> : 0  <b>Target value:</b> 52 (in each hill two units of ten households)  <b>Achievements as of June 2025:</b> A total of 27 greenhouses are already established. The remaining 25 greenhouses will be installed during the period from July 2025 to February 2026.</p>	<p>Partners quarterly reports            Baseline and end-line surveys</p>	
<p><b>Output 1.2:</b>  <b>Vulnerable households have improved market access to an affordable nutritious diet</b></p>	<p>Proportion of household for which nutritious food is not affordable.</p> <p><b>Baseline value:</b> 73% ( mean value in project intervention areas)  <b>Target value year 5:</b> 68% in project intervention areas.</p>	<p>Baseline data available from 2019 FNG analysis            End line survey.</p>	<p><b>Assumptions regarding reaching project outcome:</b>            As a result of cash</p>

Objectives	Success indicators	Source verification	Assumptions
	<p>Reduce percentage of households for which nutritious food is not available by 5 points.  <b>Achieved to date:</b> N/A. This data will be available at the end of project or once another FNG assessment will be organized.</p>		<p>transfers and improved production  improve market access to an affordable nutritious diet over the project period increases</p>
<p>Key activities of output 1.2  1.2.1: Provision of the CBT to the identified most vulnerable households via existing CBT platforms   1.2.2: Promotion of spending of the CBT on nutritious foods   1.2.3: Linkage of the CBT recipient households with resilience-building strategies and activities   1.2.4: Provision of specialized nutritious foods to PLW and children 6-23 months in the identified households</p>	<p>1 . Number of households receiving CBT  <b>Baseline value:</b> 0  <b>Target value year 5:</b> 9,450 (5000+4450 top up) households have received CBT  <b>Achievements as of June 2025:</b> 7,641  CBT activities were completed by December 2024. No cash transfer was planned for the year 2025.</p> <p>2. Proportion of households receiving the CBT which spend it on nutritious foods.  <b>Baseline value:</b> 0  <b>Target year 5:</b> 70% of CBT recipients report spending portion of CBT on nutritious foods in the project intervention areas.  <b>Achievements (monitoring value from January to December 2024) :</b> 94.5 % of supported households use cash transfers for purchasing food (mid-term review)  <b>Achievement as of June 2025 :</b> No Households received the CBT during the reporting period</p> <p>3. Number of households receiving the CBT which undertake resilience-building strategies and activities as identified in their household development plans  <b>Baseline value:</b> 0  <b>Target year 5:</b> 70% of CBT recipients enacting strategies and activities identified in their household development plans in the project intervention areas.  <b>Achievements (monitoring value from January to December 2023) :</b> 77.4% of supported households invested a part of the cash in agricultural inputs and income generating activities (source PDM report Dec 2023)  <b>Achievements (monitoring value from January to December 2024):</b> 85.7% use cash transfers for agricultural and livestock investment (farmland, agricultural inputs, animal purchases, etc.) (mid-term review)</p>	<p>Partners quarterly reports  Baseline and end-line surveys</p>	

Objectives	Success indicators	Source verification	Assumptions
	<p>Data to be updated at the End of the year 2025.</p> <p>4. Number of PLW and children 6-23 months receiving SNFs</p> <p><b>Baseline value:</b> 0  <b>Target year 5:</b> 30,000 PLW and children 6-23 months receive SNFs in the project intervention area.  <b>Achievements as of December 2025 :</b> 22,708 (9,562 PBW and 13,146 children)  Achievements : During the reporting period from January to June 2025 13,554 children and 194 PBW were supplemented</p>		
<p><b>Output 1.3:</b>  <b>Using a food systems approach, targeted communities have access to local fortified food to improve access to key nutrients at household level</b></p>	<p>Number of millers benefit from capacity strengthening on fortified staples.</p> <p><b>Baseline value :</b> 0  <b>Target value year 5:</b> 24 mills are functional, adhere to national standards and can supply fortified flour to the market in the project intervention areas. (12 initial and 12 top up)  <b>Achievements as of December 2024:</b> A capacity needs assessment was carried out by WFP and CNTA (including equipment needs). The process of purchasing equipment and premix for 21 mills is ongoing. 24 millers benefited from training done by CNTA.  <b>Achievements as of June 2025 :</b> 24 thousanders benefited from training done by CNTA.</p>	<p>Partners quarterly reports</p>	
<p><b>Key activities for output 1.3</b>  1.3.1: Capacity strengthening on fortifying staples by community mills adopting national standards.</p> <p>1.3.2: Demand generation on fortified food consumption through mass communication campaign; behavior change</p>	<p>1. Number of millers/associations strengthened on fortifying staples and adopting national standards</p> <p><b>Baseline value:</b> 0  <b>Target value year 5:</b> 24 mills in the project intervention areas (12 initial and 12 top up)  <b>Achievements as of June 2025:</b> 10</p> <p>2. <b>Number of individuals receiving messaging on the importance of consuming fortified foods</b></p> <p><b>Baseline value:</b> 0  <b>Target year 5:</b> 1,000,000 individuals receiving messaging on the importance of consuming fortified foods in the project intervention areas.  <b>Achievements as of June 2025:</b> 708,867 This includes <b>13,748</b> beneficiaries of SNF , 62,920 beneficiaries of MNPs 541,866 people reached through <i>spots broadcast on 4 radios</i> , 1,500 reached through mobile cinema, <b>151,567</b> participants in <i>FAN/FARN</i> , <b>2,000</b> Care Group</p>	<p>Partners quarterly reports  Baseline and end - line surveys</p>	

Objectives	Success indicators	Source verification	Assumptions
<p>messaging and social marketing.</p> <p>1.3.3: Commercialization of fortified products through improved networking from farm to market.</p> <p>1.3.4: Support to businesses and millers engaged in fortification through the SUN Business Network.</p>	<p><i>volunteers , 945 members of Écoles des maris , 1,975 Community health workers , and 996 Maman Lumières, 186 VSLA committee members trained on fortification . Messages shared including good nutrition practices among others the importance of consuming fortified flours</i></p> <p>3. Number of commercialized fortified food products available</p> <p><b>Baseline value :</b> 0</p> <p><b>Target year 5:</b> Baseline + commercialized products (fortified flour) produced by 24 millers in the project intervention areas. (12 initial and 12 top up)</p> <p><b>Achieved to date:</b> see 1.3.2</p> <p>A <b>chievement as of June 2025</b> : 30% of 16 mt of fortified flour produced were commercialized</p> <p>4. Number of trainings on nutrition-sensitive initiatives through the SBN</p> <p><b>Baseline value:</b> 0 at the national level</p> <p><b>Target year 5:</b> Roll out 2 training on nutrition sensitive initiatives through the SBN over the project period at the national level.</p> <p><b>Achievements as of December 2023:</b> An MoU has been signed with SBN, and staff recruitment is underway, alongside consultations with SEP/PMSAN to revitalize the Scaling Up Nutrition Business Network. An awareness workshop for SBN actors (SMEs and others) has been organized</p> <p><b>Achievements as of June 2025</b> : -0</p>		
<p><b>OUTCOME 2</b> <b>Increasing equitable access to quality facilities and community-based health and nutrition-specific and sensitive services</b></p>	<p>1. Percentage of children under-five with chronic malnutrition</p> <p><b>Baseline value</b> : 61% average in project provinces  <b>Target year 5</b> : 54% in project provinces  <b>Achievements (monitoring value from January to December 2023):</b> 61%  <b>Achieved (monitoring value from January to December 2024):</b> 54.8% (SMART 2024)  <b>Achievements as of June 2025</b> : 54.8% (SMART 2024)</p> <p>2. Percentage of women meeting MDD-W</p>	<p>National SMART and JANSFA surveys</p> <p>Baseline and end-line survey</p>	

Objectives	Success indicators	Source verification	Assumptions
	<p><b>Baseline value:</b> 12.3% at national level (value in project intervention. (SMART)  <b>Target value:</b> 15%, an increase of 3 points in the project intervention provinces  <b>Achievements (monitoring value from January to December 2023):</b> 14.8% (SMART 2022)  <b>Achievements (monitoring value from January to December 2024):</b> 31.5% (SMART 2024)  <b>Achievements as of June 2025 :</b> 31.5% (SMART 2024)</p>		
<p><b>Output 2.1: Pregnant and lactating women, adolescents and children under 5 years in targeted households benefit from key health and nutrition specific and sensitive interventions</b></p>	<p>1. Percentage of children aged 6 to 23 months with a minimum acceptable diet</p> <p><b>Baseline value (SMART):</b> 10% in Project Provinces  <b>Target year 5:</b> 10% in the project intervention areas  <b>Achievements (monitoring value from January to December 2023):</b> 13.3% (SMART 2022)  <b>Achievements (monitoring value from January to December 2024) :</b> 18.7% (SMART 2024)  <b>Achievements as of June 2025 :</b> 18.7% (SMART 2024)</p> <p>2. Percentage of children exclusively breastfed</p> <p><b>Baseline value:</b> 73% in provinces targeted by the project.  <b>Target year 5:</b> over 80% in provinces targeted by the project.  <b>Achievements as of December 2023 :</b> 91.9% (SMART 22)  <b>Achievements as of December 2024:</b> 75.5% (SMART 2024)  <b>Achievements as of June 2025 :</b> 75.5% (SMART 2024)</p>	<p>SMART/JANSFA Baseline and end-line surveys</p>	
<p>Key activities for output 2.1 2.1.1: Improved Infant and Young Child Feeding (IYCF) and care practices</p> <p>2.1.2 Training of community health workers (CHWs) and Light mothers on the IYCF guidelines</p>	<p>1. Percentage of pregnant and lactating women and mothers of children 0-23 months benefiting from counseling on young infant feeding and care practices</p> <p><b>Baseline value:</b> 0%  <b>Target year 5:</b> 70% in provinces targeted by the project.  <b>Achievements as of December 2023:</b> 93% (76,164)  <b>Achievements as of December 2024:</b> 104% (125,300)  <b>Achievements as of June 2025 :</b> 69.6% (83,578)</p> <p>2 . Number of Light mothers and CHWs trained and equipped on IYCF counseling and Community-based nutrition IYCF support group models</p>	<p>Baseline and end-line survey National reporting platform DHIS2 Partners quarterly reports</p>	

Objectives	Success indicators	Source verification	Assumptions
2.1.3: Support interventions on micronutrient deficiencies	<p><b>Baseline value:</b> 500 in provinces targeted by the project.  <b>Target year 5:</b> 6,300 in provinces targeted by the project.  <b>Achievements as of December 2023:</b> 162 LMs, 334 CHWs  <b>Achievements as of December 2024:</b> 722 LMs, 1244 CHWs  <b>Achievements as of June 2025 :</b> 996 LMs and 498 VSLA representatives</p> <p>3.Number of children 6-23 months receiving in-home fortification with MNP supplementation in target districts</p> <p><b>Baseline value:</b> 35,000 in provinces targeted by the project.  <b>Annual target:</b> 78,000 in provinces targeted by the project (Target for 5 years: 390,000)  <b>Achievements (monitoring value from January to December 2023):</b> 112,664 children  <b>Achievements (monitoring value from January to December 2024) :</b> 74,593  <b>Achievements as of June 2025 :</b> 62,920 children</p> <p>4. Percentage of children 6-59- months with 2 annual doses of Vitamin A</p> <p><b>Baseline value :</b> 90% in the targeted districts  <b>Annual target:</b> above 95% in provinces targeted by the project.  <b>Achievements (monitoring value from January to December 2023):</b> 83%  <b>Achievements (monitoring value from January to December 2024):</b> 64%  <b>Achievements as of June 2025 :</b> 32%</p>		
<b>Output 2.2:</b> <b>Children under 5 affected by severe acute malnutrition have access to essential and quality integrated nutrition services</b>	<p>1 . Percentage of children under 5 years screened for acute malnutrition</p> <p><b>Baseline value:</b> 0%  <b>Target year 5:</b> 100% in provinces targeted by the project (400,000 under 5 children)  <b>Achievements as of December 2023 :</b> 97 % (393,016)  <b>Achievements as of December 2024:</b> 104% (313,994)  <b>Achievements as of January to June 2025: 87.3% (261,941 children)</b></p> <p>2. Number of children under-five with severe acute malnutrition admitted for treatment</p>	<p>Program report</p> <p>DHIS2</p>	

Objectives	Success indicators	Source verification	Assumptions
	<p><b>Baseline value:</b> 6,750 in project intervention areas  <b>Annual target:</b> 15,000 in Project intervention areas (75,000 children under 5 target for year 5)  <b>Achievements (monitoring value from January to December 2023):</b> 13,686 SAM children in project intervention areas  <b>Achievements (monitoring value from January to December 2024):</b> 7,500 SAM children  Achievements from January to June 2025: 6,509 SAM children</p> <p>3. Percentage of children with SAM cured</p> <p><b>Baseline value:</b> 75% in provinces targeted by the project  <b>Target:</b> &gt;75% in provinces targeted by the project  <b>Achievements as of December 2023:</b> 85%  <b>Achievements as of December 2024 :</b> 94 %  <b>Achievements as of June 2025 :</b> 95%</p> <p>4. Number of Health care providers will receive refresher trainings on the CMAM guidelines and updated guidance lined with Covid 19</p> <p><b>Baseline value:</b> 0 provinces targeted by the project.  <b>Target year 5:</b> 134 (revised from initially 148) in provinces targeted by the project  <b>Achievements as of December 2023:</b> 132  <b>Achievements as of December 2024:</b> n /a  <b>Achievements as of June 2025 :</b> n/a-</p>		
<p><b>Output 2.3:  Vulnerable pregnant and lactating women and mothers of children aged under five have access to quality Child Survival interventions</b></p>	<p>Percentage of beneficiaries benefiting from at least 3 interventions to improve the quality of maternal and child survival at primary health care and community level</p> <p><b>Baseline value :</b> 15% national (value in project intervention TBD through Baseline Survey)  <b>Target year 5:</b> 50% targeted project provinces  <b>Actual value :</b> Indicator was proposed to be deleted in consultation with KfW.</p>	<p>Baseline and end-line survey</p>	
<p>Key activities for Output 2.3  2.3.1 Provide access to integrated early Childhood Development services.</p>	<p>1. Number of children under five with access to integrated ECD</p> <p><b>Baseline value (new):</b> 3.888  <b>Target year 5:</b> 60,000 in provinces targeted by the project.</p>	<p>Baseline survey  Program quarterly report  DHIS2 national reporting platform</p>	

Objectives	Success indicators	Source verification	Assumptions
<p>2.3.2 Improved water, hygiene and sanitation practices</p> <p>2.3.3 Improved access and use of Integrated Management of Childhood Illness</p> <p>2.3.4 Improved access and use of Sexual and Reproductive Health (SRH) services</p>	<p>Achievements (<b>monitoring value from January to December 2022</b>): 7500 malnourished children admitted for treatment with KFW funds benefited from integrated ECD</p> <p><b>Achievements (monitoring value from January to December 2023)</b> : 13,686 SAM children admitted for treatment benefited from integrated ECD</p> <p><b>Achievements (monitoring value from January to December 2024)</b>: 7,500 SAM children with KWF funds</p> <p><b>Achievements as of June 2025</b> : 6,509 malnourished children admitted for treatment with KFW funds benefited from integrated ECD</p> <p>2. Number of people with access to WASH infrastructures (borehole with a water reservoir, network with water taps for HCF and public water tap) in the project area.</p> <p><b>Baseline value</b> (new): 313,151</p> <p><b>Target year 5</b>: additional 160,000 people in provinces targeted by the project. Proposed Target value to be validated by project national Steering Committee: +additional 112,264 people in provinces targeted by the project.</p> <p><b>Achievements as of December 2022: N/A</b></p> <p><b>Achievements as of December 2023: N/A</b></p> <p><b>Achievements as of December 2024</b> : 125,145</p> <p><b>Achievements as of June 2025</b> : 129,651 people</p> <p>3. Number of children reach with the iCCM services in targeted project health districts</p> <p><b>Baseline value</b> (new): 2.855</p> <p><b>Target year 5</b> : 90,000 in provinces targeted by the project.</p> <p><b>Achievements (monitoring value from January to December 2023)</b> : 19,713 children were treated</p> <p><b>Achievements (monitoring value from January to December 2024)</b>: 16,258 children were treated</p> <p><b>Achievements as of June 2025</b> : 9,183 children were treated</p> <p>4. Number of Youth Friendly Health Center (YFHC) set-up in the project districts</p> <p><b>Baseline value</b>: 0 in provinces targeted by the project.</p> <p><b>Target year 5</b>: 21 (revised from initially 27) in provinces targeted by the project .</p>		

Objectives	Success indicators	Source verification	Assumptions
	<p><b>Achieved value as of December 2024:</b> 21  <b>Achievements as of June 2025 :</b> 21</p> <p>5. Number of adolescents with access to youth friendly services and reproductive health services including counseling</p> <p><b>Baseline value:</b> 0 provinces targeted by the project.  <b>Target value 5 years:</b> 55,000 (Annual target: 11,000) adolescents in the provinces targeted by the project.  <b>Achievements (monitoring value from January to December 2022):</b> 17,867 adolescents in targeted provinces)  <b>Achievements (monitoring value from January to December 2023):</b> 50,116 adolescents in targeted provinces  <b>Achievements (monitoring value from January to December 2024):</b> 31,584 adolescents in targeted provinces  <b>Achievements as of June 2025 :</b> 9,832 adolescents in targeted new communes/old provinces</p>		
<p><b>OUTCOME 3:</b>  <b>The national governance, coordination, monitoring and evaluation is enhanced on nutrition and food security intervention</b></p>	<p>1. Number of Province with functional multisectoral coordination mechanisms for nutrition intervention</p> <p><b>Baseline value:</b> 1 in the project intervention areas  <b>Target value year:</b> 4 in the project intervention areas  <b>Achievements as of December 2024:</b> 4 (all targeted provinces have a functional multisectoral coordination mechanism for nutrition intervention)  Achievements as of June 2025: 4</p>	Partners quarterly reports	
<p><b>Output 3.1:</b>  <b>Coordinated program management and monitoring to support achievement of planned outcomes</b></p>	<p>1. Number of joint supervision of interventions by National and local authorities, UNICEF/WFP and implementing partners conducted.</p> <p><b>Baseline value:</b> 0 in the project intervention areas  <b>Annual target:</b> 3 in the project intervention areas  <b>Achievements (monitoring value from January to December 2023):</b> 3  <b>Achievements (monitoring value from January to December 2024):</b> 2  <b>Achievements as of June 2025:</b> 2</p> <p>2. Percentage of Monitoring visits carried out on a monthly basis by CHWs</p>	Partners quarterly reports	
<p><b>3.1.1 Regular monitoring of</b></p>	<p><b>Baseline value :</b> 0%</p>		

Objectives	Success indicators	Source verification	Assumptions
<p><b>activities by community health workers as well as by local authorities</b></p>	<p><b>Target per month:</b> 50% of light mothers are visited by CHWs per month in the project intervention areas.</p> <p><b>Achievements (monitoring value from January to December 2023):</b> 80%</p> <p><b>Achievements (monitoring value from January to December 2024):</b> tbc</p> <p>3. Number of project-specific coordination meeting conducted with the national nutrition multi-sectoral platform as part of the currently proposed program.</p> <p><b>Baseline value:</b> 0</p> <p><b>Annual target:</b> 3</p> <p><b>Achievements (monitoring value from January to December 2023):</b> 1</p> <p><b>Achievements (monitoring value from January to December 2024):</b> 2</p> <p><b>Achievements as of June 2025:</b> 1</p> <p>4. Setting-up of community granaries at hill level to support the treatment of MAM (indicator added for top-up funds)</p> <p><b>Baseline value:</b> 0</p> <p><b>Target value:</b> 30 community granaries established</p> <p><b>Achieved to date:</b></p> <p>0</p>		<p>Sensitizations at community level already ongoing. The setting up of granaries will start in August</p>
<p><b>Output 3.2: Monitoring and Supervision to support achievement of planned outcomes, including evidence generation</b></p> <p>Key activities for output 3.2</p> <p>3.2.1: Support the national and provincial coordination mechanism</p> <p>3.2.2: Support the national multisectoral coordination of Nutrition and Food Security platforms in the target provinces.</p>	<p>1. Number of joint supervisions of nutrition interventions by Ministry of Health, WPF and UNICEF as part of the currently proposed program.</p> <p><b>Baseline value:</b> 0</p> <p><b>Annual target:</b> quarterly</p> <p><b>Achievements (monitoring value from January to December 2023):</b> 2</p> <p><b>Achievements (monitoring value from January to December 2024):</b> 2</p> <p>Achievements January to June 2025: 2</p> <p>2. Number of coordination workshops organized to analyze CMAM data at a decentralized level per year as part of the currently proposed program.</p> <p><b>Baseline value:</b> 0</p> <p><b>Annual target:</b> 2</p> <p><b>Achievements (monitoring value from January to December 2023):</b> 2</p> <p><b>Achievements (monitoring value from January to December 2024):</b> 2</p> <p>Achievements as of June 2025: 2</p>	<p>Partners quarterly report</p>	

# Annex 9: KfW Project Results

Objectives/Outcomes/Outputs/Activities	Performance Indicators
<b>Overall objective</b> <b>Prevention of malnutrition and strengthening of resilience at community level in Burundi, by improving the food and nutrition security among vulnerable communities in 4 provinces</b>	
<b>OUTCOME 1: Improving resilience and dietary diversity at household and individual levels.</b>	Percentage of households using <b>emergency</b> coping strategies
	Percentage of households using <b>crisis</b> coping strategies
	Percentage of households using <b>stress</b> coping strategies
	Food consumption score
<b>Output 1.1</b> <b>Households with pregnant and lactating women and children under 2 years are linked to VSLAs</b>	Number of VSLAs (already) established (1500)
	Number of VSLAs receiving training and capacity building on livelihood and resilience activities.
	Number of VSLAs created (477 UNICEF, 600 WFP)
<b>Activities/ output 1.1.1</b>	Number of VSLAs receiving start-up capital funding (supported by WFP)
	Number of VSLAs receiving start-up capital funding (supported by UNICEF)
	Missing data on HYDROPONY (placeholder)
<b>Activities output 1.1.2</b>	Number of organizations/entities receiving the coordinated national SBCC strategy
<b>Output 1.2</b> <b>Vulnerable households have improved market access to an affordable nutritious diet</b>	Proportion of households for which nutritious food is not affordable
<b>Activities output 1.2.1</b>	Number of households receiving CBT
	Number of households receiving CBT
<b>Activities output 1.2.2</b>	Proportion of households receiving CBT spent it on nutritious foods.
	SBC formative research on maximizing use of CBT, diet and use of cash
<b>Activities output 1.2.3</b>	Number of households receiving the CBT which undertake resilience-building strategies and activities as identified in their household development plans (to verify conditionality is respected and indicative of HH participating in new year activities)
<b>Activities output 1.2.4</b>	Number of PLWs receiving SNFs

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Objectives/Outcomes/Outputs/Activities	Performance Indicators
Activities output 1.2.4	Number of children 6-23 months receiving SNFs
Output 1.3 Using a food systems approach, targeted communities have access to local fortified food to improve access to key nutrients at household level	Number of millers benefit from capacity strengthening on fortified staples
Activities output 1.3.1	Number of millers benefit from capacity strengthening on fortified staples & adopting national standards
Activities output 1.3.2	Number of individuals receiving messaging on the importance of consuming fortified foods (link to 1.1.2)
Activities output 1.3.3	Number of commercialized fortified food products available
Activities output 1.3.4	Number of trainings on nutrition-sensitive initiatives through the Sun Business Network (SBN)
OUTCOME 2 Increasing equitable access to quality facilities and community-based health and nutrition-specific and sensitive services	Percentage of children under-five with chronic malnutrition
	Percentage of women meeting MDD-W
Output 2.1 Pregnant and lactating women, adolescents, and children under 5 years in targeted households benefit from key health and nutrition specific and sensitive interventions	Percentage of children aged 6 to 23 months with a minimum acceptable diet
	Percentage of children exclusively breastfed
Activities output 2.1.1	Percentage of pregnant and lactating women and mothers of children 0-23 months benefiting from counseling on young infant feeding and care practices
	Number of Light mothers and CHWC trained and equipped on IYCF counseling and Community-based nutrition IYCF support group models
Activities output 2.1.2	Number of children 6-23 months receiving in-home fortification with MNP supplementation in target districts
	Percentage of children 6-59-months with 2 annual doses of Vitamin A
Output 2.2 Children under 5 affected by severe acute malnutrition have access to essential and quality integrated nutrition services	Percentage of children under 5 years screened for acute malnutrition
Activities output 2.2.1	Number of children under-five with acute malnutrition admitted for treatment

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Objectives/Outcomes/Outputs/Activities	Performance Indicators
	Percentage of children with SAM cured
<b>Activities output 2.2.2</b>	Number of Health care providers will receive refresher trainings on the CMAM guidelines and updated guidance aligned to Covid 19
<b>Output 2.3 Vulnerable pregnant and lactating women, mothers of children aged under five and adolescents have access to quality Child Survival interventions</b>	Percentage of beneficiaries benefiting from at least 3 interventions to improve the quality of maternal and child survival at primary health care and community level
<b>Activities output 2.3.1</b>	Number of children under five with access to integrated ECD
<b>Activities output 2.3.2</b>	Number of people with access to WASH infrastructures (borehole with a water reservoir, network with water taps for HCF and public water tap) in the project area
<b>Activities output 2.3.3</b>	Number of children reach with the ICCM services in targeted project health districts
	Number of Youth Friendly Health Center (YFHC) set up in the project districts
<b>Activities output 2.3.4</b>	Number of adolescents with access to youth friendly services and reproductive health services including counseling
<b>Activities output 2.3.5</b>	Support the set up and dissemination of communication campaign through mass media
<b>OUTCOME 3 The national governance, coordination, monitoring, and evaluation is enhanced on nutrition and food security intervention</b>	Number of Province with functional multisectoral coordination mechanisms for nutrition intervention
<b>Output 3.1 Coordinated program management and monitoring to support achievement of planned outcomes</b>	Number of joint supervision of interventions by National and local authorities, UNICEF/WFP and implementing partners conducted.
<b>Activities output 3.1.1</b>	Percentage of Monitoring visits carried out monthly by CHWs
<b>Activities output 3.1.2</b>	Number of project-specific coordination meeting conducted with the national nutrition multi sectoral platform as part of the currently proposed program.
<b>Output 3.2 Monitoring and Supervision to support achievement of planned outcomes, including evidence generation</b>	Number of joint supervisions of nutrition interventions by Ministry of Health, WPF and UNICEF as part of the currently proposed program
<b>Activities output 3.2.1</b>	Number of coordination workshops organized to analyze CMAM data at a decentralized level per year as part of the currently proposed program.

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# Annex 10: Recommendations from the Mid-Term Review

## To the United Nations agencies (WFP and UNICEF) in consortium and project implementation partners

- Strengthening bilateral and horizontal communication and coordination among all partners (Concern Worldwide, GVC WeWorld, FVS, UNCDF, and UN agencies such as WFP and UNICEF) is essential to ensure harmonization of approaches, intervention methods, and a shared understanding of the project. It is necessary to clearly establish a household development plan model and specify the nature of the assets created (household or community-based).
- Evaluate the added value of each actor to avoid duplication of efforts and waste of resources, in particular by analyzing the complementarity between FVS and GVC WeWorld.
- Establish a joint, detailed and participatory operational planning of activities, involving all key actors (steering committee, field staff, experts in resilience, nutrition, hydroponics, fortification, WASH, social protection, etc.), based on a logical analysis of the sequence of interventions and the harmonization of approaches.
- Developing the skills of households benefiting from cash transfers and savings groups (VSLA) in rural entrepreneurship, identifying economic opportunities and seeking markets outside their area of residence.
- Supporting the sustainability of project-supported structures by connecting them to other service users and strengthening their operational capacity beyond the project's duration. To mitigate the negative impacts of prioritizing pregnant and breastfeeding women and households with children aged 6 to 23 months on family planning and family cohesion, it is essential to intensify awareness campaigns highlighting the benefits of cash transfers and nutritional inputs. It is also recommended to establish a system for recognizing and rewarding model households—those that have demonstrated greater resilience, have no malnourished children, and have shown capacity for self-development.

## At the World Food Programme (WFP)

- Strengthen the number of collective income-generating activities supported by the project, in order to promote capital accumulation and the acquisition of common productive assets (e.g., large tracts of land), which are difficult for a single household to access.
- Review the amount of cash transfers to adjust them to local economic realities, taking into account the economic dynamics and factors of production in the intervention area.
- Develop a hydroponics model that can be easily replicated within households for home vegetable production.
- Strategically orient hydroponics towards the development of niche value chains (such as seed production) and promote soilless cultivation practices using accessible local equipment (bags, etc.), in order to make them more suited to the realities of beneficiary households.

## For UNICEF

- Supporting households benefiting from FARN activities to improve their incomes as well as their physical and economic access to adequate food, recognizing that poverty and limited access to food are major causes of malnutrition.
- Strengthen the involvement of decentralized structures in the maintenance and upkeep of water distribution infrastructure, in particular by involving the AEP to guarantee the sustainability of the networks put in place.
- Intensify awareness among households on the production and consumption of foods rich in iron,

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vitamins and protein, which are readily available locally.

**To our cooperating partners**

- Strengthening staff stability and retention, particularly among partners like GVC, to ensure greater continuity and efficiency in project implementation.

**To state and decentralized structures:**

- Improve early warning systems to enable beneficiary households to anticipate shocks and strengthen their resilience.
- Strengthen the capacities of provincial and municipal platforms, and promote leadership within state bodies involved in food and nutrition security.
- To improve understanding of the issues related to food and nutrition security, and to promote effective mechanisms to ensure sustainable improvement in this sector.
- Facilitate the exemption of premixes used for fortification and their inclusion in the catalogue of essential medicines and inputs.

**To other development actors in Burundi:**

- Prioritize the integration of humanitarian and development approaches in interventions.
- Supporting community structures, systematically identifying actors and stakeholders in order to consolidate achievements and avoid competition or destruction of results obtained by others
- Conduct a political economy analysis of the sectors of intervention to adapt actions to local contexts, rather than relying solely on existing strategic documents.

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