# TALKING POINTS - EB2/13 RT + Session: CPE Republic of the Congo

#### **DESCRIPTION**

• The evaluation covered the period 2009 – 2012, followed the standard approach for CPE's series, focusing on: i) alignment and strategic positioning; ii) factors and quality of strategic decision-making, and iii) portfolio performance and results.

#### **CONTEXT**

- The Congo is now a lower-middle income urbanised country of about 4 million people, half of whom live below the poverty line with poor health, food security and nutrition levels. The country has also hosted over 100,000 refugees since 2009, and the Government has become an important donor to WFP in recent years.
- Moving from an emergency focus to recovery, development and capacity-development, the portfolio comprised 2 PRROs, 2 EMOPs, 1 SO, and 2 DEVs (2011&12), providing General Food Distribution (GFD) to refugees and disaster stricken populations; school-feeding; nutritional support to PLWHA & TB; and a conditional urban safety-net voucher scheme (in support of education and nutrition for PLWHA/TB)<sup>1</sup>.

**FINDINGS:** The evaluation presents a **MIXED** picture.

## A. ON THE ONE HAND:

- Building on it's comparative advantage for rapid response, field presence and ability to reach remote areas, operations were found relevant and appropriately adjusting to evolving humanitarian and development needs.
- The portfolio was well aligned and strategically engaged with Government priorities and policy development, esp. in education and social protection - the latter involving a pioneering role for WFP, implementing a pilot urban voucher scheme.
- There was reasonable evidence of effectiveness, e.g.:
  - in **nutrition** support to PLWHA/TB with improved nutritional recovery and treatment completions rates; and...

<sup>&</sup>lt;sup>1</sup> GFD = 39% of total Actual beneficiaries reached 2009-2012 [REFUGEES: between 95,000 to 125,000 reached per year; GFD/2012 explosion: 18,000 affected reached]; Education / School-feeding (39%) - close to 175,000 children reached over the four-years; HIV/TB patients= 19% (1,000-6,000 per year); Conditional (education/nutrition) safety net programme reached some 19,200 urban dwellers in 2012

- In **education**, enrolment<sup>2</sup> and gender parity increased in WFP-targeted schools compared to baselines and national rates<sup>3</sup>;
- In the humanitarian domain, food security and nutritional status of refugee populations improved, **but** gaps in baselines and outcome monitoring meant **attribution to WFP activities could not be confirmed.**
- Outcome monitoring was a common issue raised by the evaluation as hindering full effectiveness analysis, and importantly for pilot programme learning, the evaluation noted that conditionalities in the *Urban Safety-net voucher pilot* programme (for school & health centre attendance) were not fully applied – this will hinder full future assessment of the pilot's results.

... on Gender – while some positive results were found e.g. in education gender parity and in the pilot safety-net voucher programme, with women forming 83% of beneficiaries, ... overall, gender analysis in programme design, implementation and reporting remains an area for improvement, reflecting the CO's limited gender capacity.

## **B. ON THE OTHER HAND...**

- On efficiency the evaluation identified performance beyond initial emergency response as below expectations:
- **EG: 1.** for most operations fewer beneficiaries were reached than planned. Across humanitarian operations, 76% of planned beneficiaries were reached, with 34% of originally planned food tonnage.
- **EG 2.** The safety-net programme reached almost double (195%) the planned number of beneficiaries over the period, but with only 15% of the planned value transfer.
- While efficiency weaknesses were often linked to funding constraints during the early part of the evaluation period, an important efficiency constraint emerging as the portfolio moved to development interventions funded increasingly by the Government, was an ambitious innovative agenda not matched with adequate resources and skill sets.

<sup>&</sup>lt;sup>2</sup> From ER – section 2.3.3: Enrolment in WFP assisted schools increased on a year-by-year basis, from an enrolment increase target of 6% in 2010 to 25.7% in 2012. Even more so for indigenous children

<sup>&</sup>lt;sup>3</sup> From ER – section 2.3.3: There has been an increase in the ratio of girls to boys in the targeted schools, from 0.90 (2008) to 0.95 in 2012 (national gender parity index was 0.9 in 2009).

... also on the less positive side, the evaluation noted that WFP policy and guidance in important areas of WFP's work was not always consistently applied:

**EG**: in *education* (key elements of the Essential Package - including school health and nutrition interventions to reinforce basic education<sup>4</sup> were not found);

and in **social-protection** there were gaps in context-analysis, such as partner capacity assessment and gender analysis.

# IN CONCLUSION, the evaluation confirmed a number of lessons relevant for WFP in MICS and small CO's, especially concerning innovation and capacity development:

- Innovative programming and national capacity development progress at policy level must be substantiated by solid analysis and operational performance to ensure effectiveness and efficiency, with strategic agenda-setting balanced by consideration of technical and other needs.
- Effective social protection programmes require consistent effort and should build long-term resilience, and not just provide short-term support.
- This is also true of humanitarian programming, which should place greater emphasis on livelihoods, disaster preparedness and mitigation.

**RECOMMENDATIONS** were formulated to feed into the new CSD process, and focus on:

- Evidence and analysis, especially for pilots and scale up;
- Capacity-development and knowledge transfer strategy;
- Staffing needs, monitoring and evaluation system reviews to underpin effective programming.

<sup>&</sup>lt;sup>4</sup> The Essential Package includes: 1) basic education; 2) food for education; 3) promotion of girls' education; 4) potable water and sanitary latrines; 5) health, nutrition and hygiene education; 6) systematic deworming; 7) micronutrient supplementation; 8) HIV and AIDS education; 9) psychosocial support; 10) malaria prevention; 11) school gardens; and 12) improved stoves