

# Ex post evaluation – Yemen

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**Sector:** Emergency food aid (72040)

**Programme/Project:** Project I: Measures to alleviate the food crisis (BMZ No. 2008 66 558)\*; Project II: Food aid for vulnerable people (BMZ No. 2011 66 644)

**Implementing agency:** World Food Programme (WFP)

## Ex post evaluation report: 2015

		Project I (Planned)	Project I (Actual)	Project II (Planned)	Project II (Actual)
Investment costs (total)**	EUR million	46.12****	18.47	118.22****	54.97
Counterpart contribution	EUR million	0.00	0.00	0.00	0.00
Funding	EUR million	46.12	18.47	118.22	54.97
of which BMZ budget funds	EUR million	10.13	8.20***	21.50	23.43***

\*) Random sample 2015; \*\*) Investment costs and funding under Projects I and II presented according to WFP programmes, supported significantly by the respective projects; \*\*\*) Remaining FC commitment from Project I used for WFP programme in Project II and thus presented there; \*\*\*\*) Last approved planned figure from the WFP after budget revisions; Actual figures correspond to donor payments



**Summary:** As part of Project I (2009-2010), EUR 8.2 million was earmarked to co-finance the food component of the WFP emergency aid programme entitled "Emergency Operation (EMOP) 107670". The component comprised the distribution of preventative nutritional supplement rations for pregnant women and nursing mothers as well as small children, and curative special rations for malnourished children under the age of five in four out of eight governorates promoted by the WFP in Yemen. Project II (2011-2012) and remaining funds from Project I were used to co-finance the WFP follow-up project "Protracted Relief and Recovery Operation (PRRO) 200038" in 14 governorates with EUR 23.4 million. Alongside the food component with preventative food supplement rations for small children and curative special rations for malnourished pregnant women, nursing mothers and children under the age of five, there were also other instruments used such as a seasonal emergency system for distributing staple foods, "Food for Work", and emergency rations for internally displaced people.

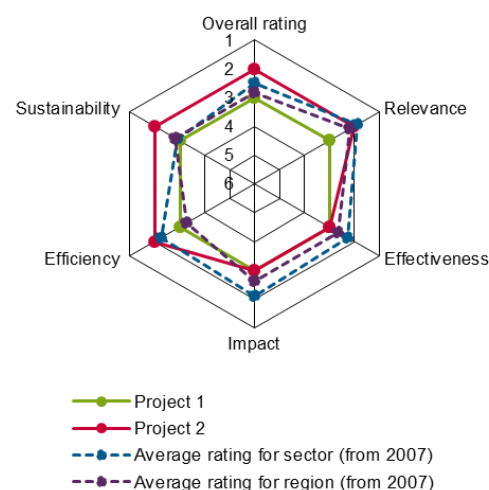
**Objectives:** The development objective of the project was to help alleviate the worst effects of the food crisis at the time and improve the humanitarian situation in Yemen. The programme objective of Project I was to avoid further deterioration of the food situation of the target group in the short term. The programme objective of Project II was to improve the food situation of the target group in the short term and increase the resilience of the population in the face of continuing and future crises.

**Target group:** Pregnant women and nursing mothers, small children (6-24 months) and malnourished children under the age of five in poor areas of the programme region as well as food-insecure households and internally displaced people.

## Overall rating: 3 (Project I) and 2 (Project II)

**Rationale:** Both projects had a limited sustainability requirement owing to their nature as emergency aid (rapid response procedure in the event of natural disasters, crises and conflicts in conformity with No. 47 of the FC-TC guidelines). In Project I the specific purpose of distributing food rations was promoted. While the measures were justified in the emergency humanitarian situation, they alone had a limited effect also because of their small scope. Waiving the earmarking and expanding both the measures and the coverage rate increased efficiency in Project II, helping to stabilise the food situation, however, the impacts of the food component fell short of expectations.

**Highlights:** Pilot measures and support studies on alternative transfer mechanisms (cash, vouchers) and the much improved data situation in the course of the project for assessing needs, monitoring and evaluating impacts could help to improve the design and planning of projects in the sector in the future.



## Rating according to DAC criteria

### Overall rating: 3 (Project I) and 2 (Project II)

#### General conditions and classification of the projects

Both FC measures were implemented as a direct contribution via the WFP. As the remaining funds from Project I were transferred to the WFP follow-up project together with the funds from Project II, they are attributed to the impact of Project II.

Project I comprised the distribution of individual food parcels to pregnant women, nursing mothers and infants as well as the issue of special ready-to-eat rations to moderately malnourished children under the age of five<sup>1</sup> as part of the nutrition component. Besides a nutrition component with the preventative distribution of target group-specific nutritional supplement rations for infants and the curative treatment of malnourished pregnant and nursing women as well as acute moderately malnourished children under the age of five, resembling the nutrition component of Project I, Project II included a “seasonal emergency system” component for the distribution of staple foods during seasonal hunger gaps, a “Food for Work” component with temporary job offers in regions without secured access to food as well as later on the distribution of staple foods to internally displaced persons based on acute demand.

In order to reflect their nature of emergency aid, the five DAC criteria were expanded to include selected aspects that are used as evaluation criteria to assess humanitarian interventions. In compliance with the evaluation framework for the joint evaluation of the Federal Ministry for Economic Cooperation and Development and the German Federal Foreign Office, “German Humanitarian Aid Abroad” (2011), the relevance criterion was expanded to include appropriateness, and the effectiveness criterion to include consideration of the coverage rate. Sustainability was evaluated in terms of ability to be integrated into longer-term development measures.

Yemen is marked by chronic poverty and underdevelopment, population growth is high and the economic situation in the country has continually worsened in recent years. A large part of the limited water resources is used for the cultivation of the drug khat. In view of the increasing water shortage that is expected on account of climate change, the scarce water resources must be distributed more fairly and used more productively. Water is already the main driver of conflict in rural areas in the south of the country. Agriculture can no longer sustain the people so that 80% of food has to be imported. In 2010, close to one third of the population was considered food-insecure, while in 2012 45% and in 2014 41 % fell into this category, respectively. In the Food Security Index Yemen was ranked number 83 out of 105 countries in 2012, and number 90 out of 109 countries in 2015. Yemen is a highly fragile country that has been marked by many political, ethnic and civilian conflicts in its recent history and was also characterised by domestic conflicts and fragility during the term of the project. Following a period of relative political stability there was civil unrest at the start of 2011 which developed into an ongoing civil war. The FC measures focused on improving the food situation of the population between 2009 and 2012 and were not geared towards conflict management or peace-building. The explicit formulation of two-tiered objectives was dispensed with, although the distribution of food is expected to also have a stabilising effect on the fragility of the country. In the distribution of food, the “do no harm” principle was taken into account and the weak public structures were integrated as much as possible into the project implementation.

#### Relevance

**Project I:** With the co-financing of the WFP emergency aid programme the Federal Government responded to the Yemeni government's call for the food crisis to be mitigated in a suitable manner against the backdrop of increased food prices on the world market in 2008. By coordinating with the Ministry of Planning, a link was made to the national strategy to counter the food crisis. The selection of the WFP as the direct implementing agency was plausible because as the leading humanitarian organisation in Yem-

<sup>1</sup> In a child under the age of five, an upper arm circumference under 12.5 cm indicates “moderate” undernourishment, and a measured value under 11.5 cm indicates “severe acute” malnutrition, which is life-threatening.

en it had both experience in the area of food aid and the existing structures. However, at that time it had no experience in Yemen in the area of basic health services and special nutrition measures, consisting of preventative nutritional supplement rations for pregnant women, nursing women and infants as well as special curative rations for malnourished children. The subsequent evaluation of experiences at the WFP revealed that factors such as inadequate information on the application of rations and the distribution of rations within and outside of the household was not adequately considered in the design of the nutrition component, and contributed to the limited impact of the measures. On a positive note, the community-based approach with outpatient diagnostics and treatment of moderately malnourished children implemented for the first time in Yemen should be highlighted, however, according to the current state of knowledge such measures to counter chronic undernourishment can only be fully effective with extensive and coordinated packages of measures.

The FC funds were earmarked for the nutrition component of the programme in four of the eight governorates with TC-promoted health centres. Owing to a lack of data, the target regions were selected pragmatically using poverty data. As a result, the governorates worst affected by food insecurity might not have been selected, however, the selection of beneficiaries was later refined at the district and municipal level. The population in the catchment area of the inadequately equipped health centres was not considered, irrespective of their needs. The conceptual interlinkage of the efforts of the TC project with the emergency aid measure was meant to help further strengthen the public health system and embed the important issue of nutrition there. This was a sensible approach, but it should have been geared more intensely to the conceptual level and accompanied by capacity development measures in the areas of nutrition and mother/child health, due to the weak professional capacities of the health centres. De facto, the impacts of the FC and TC components were unable to complement each other because, while the TC health project supported the health centres, it did not do so in the area of nutrition, but in general quality assurance. The earmarking of the funds for a sub-region and sub-component of the WFP project ran the risk of a potential misallocation of funds and is to be avoided in humanitarian aid projects in line with humanitarian principles.

### Relevance rating: 3

**Project II:** The Federal Government responded appropriately to the continuing food crisis by co-financing the emergency aid follow-up programme of the WFP in ongoing crises (PRRO). One positive aspect is the fact that the FC funds were no longer earmarked for one component and selected regions, thus allowing full flexibility of the WFP in reacting to acute changes. The WFP expanded the operations from 8 to 14 governorates. Food was distributed on a seasonal basis to beneficiaries of the Social Welfare Fund in 14 governorates with more than 10% of households experiencing severe food insecurity, preventative and curative nutritional supplement rations were distributed in 11 governorates with more than 10% of children suffering from malnutrition. In terms of the design of these two components, it must be criticised that although the caloric intake of the beneficiaries stabilised thanks to the “seasonal emergency system”, however, adequate diversity in food intake was not ensured and the limited use of food by the target group was not taken into adequate consideration in the nutritional component.

From today’s perspective, the “Food for Work” measures of the project are to be conceptually classified as developmental and structure-building transition aid, which, however, could not be implemented to the intended extent. Owing to the worsened situation and the limited funds, in 2012 the focus shifted back to humanitarian food aid which prioritised the distribution of food to internally displaced persons and to households as part of the seasonal emergency system. This is assessed as being adequate.

### Relevance rating: 2

## Effectiveness

**Project I:** For the evaluation, the programme objective was adapted to the requirements for an immediate humanitarian measure: to avoid further deterioration in the food situation of the target group in the short term. The target group size of 120,000 mothers and children to be reached with food aid per year was exceeded with the figure of 127,801 in 2009 and 145,379 in 2010 thanks to cost-efficient procurement. One limitation is that although the reached target group was larger than planned, it is possible that the food was not consumed exclusively by those within that group due to the partitioning of rations and that the measures did not reach the people in need until the final quarter of 2009, despite the fact that the increase

in world market prices was clearly already discernible in 2007. There were shifts in regional distribution because the governorate of Sa'ada could not be covered for security reasons, which enlarged the target group in the three other governorates. Making an appraisal of the coverage rate of the measures in proportion to the number of people in need in the target districts is not feasible owing to the lack of data on the distribution of rations within the governorate. The number of health centre consultations by pregnant and nursing women was not recorded. It is plausible that the provision of special food rations motivated pregnant and nursing women to consult the health centres and make use of the basic health services as a secondary effect.

Negative secondary effects, such as market price distortions due to the distribution of additional rations, cannot be assumed because the special rations were largely procured internationally. The fact that women made up 33% of local management committees for the selection of beneficiaries with a remarkably high level of participation for Yemen is to be regarded as positive. Reported success stories from this project as well as monitoring data from the follow-up project confirm this positive secondary effect.

Based on the information available, the achievement of the programme objectives fell short of expectations. A limited yet still positive contribution due to the small scale of the measures is plausible, with regard to the nationwide deterioration of the situation. The effectiveness is thus rated as just satisfactory.

### Effectiveness rating: 3

**Project II:** The programme objective was to improve the food situation of the target group in the short term and increase the resilience of the population in the face of continuing and future crises. The capacities of the public health centres were supplemented by additional mobile units of five non-governmental organisations to increase the coverage rate of the nutrition component and compensate for the shortcomings of the public health system.

The target group of the overall WFP project co-financed by Project II comprised approximately 2.6 million people. In 2011 some 1.54 million beneficiaries were reached with 23,145 tonnes of food in the overall programme, while 4.1 million beneficiaries were reached with 59,294 tonnes of food in 2012, and the regional rate of coverage fell short of expectations with 8 of the 14 governorates. Due to the redistribution between the components in favour of the increasing number of internally displaced people, a smaller proportion of the target group was reached than intended in the nutrition component, and furthermore with some delay. The reaching of households in particular need from the group of recipients of the Social Welfare Fund as part of the seasonal emergency system can be assessed as more successful. They received and used the food aid largely as intended. The attempt to reach the largest target group possible, in spite of the underfunding of the programme, was at the expense of the quantity of food provided for each household. The planned "Food for Work" component could not be implemented until 2012 with 4,783 beneficiaries and on a pilot basis.

The contribution made by target group-specific nutritional supplement rations and curative special rations to improve the food situation of the target group fell well short of expectations. The recovery rate of acutely malnourished children under the age of five fell well short of the anticipated target figure (75%), at 36%. At around 38%, the dropout rate of acutely malnourished children under the age of five in order to measure the failure caused by early withdrawal was also significantly higher than the intended target figure of below 15%. According to the WFP, a possible reason for this was inadequate information on the use of rations, with the result that the curative and preventative rations did not only benefit the malnourished children and were used up in a significantly shorter timeframe than intended.

At 45.3%, when the programme ended in 2012, the proportion of households with an acceptable Food Consumption Score – the WFP indicator for food supply security – was 4.3 percentage points above the 2010 starting point. The general food distribution therefore contributed to an improved food situation of households in the target areas. Continuity of aid, an increase in the coverage rate and extensive FC funding of 44% of the entire programme also contributed to this. Further structure-building operations, e.g. within the "Food for Work" component, were only executed to a limited extent, with the result that an increase in resilience in the face of socio-economic crises could not be achieved. From today's perspective, one limitation that should be mentioned is the fact that the distribution of staple foods did not sufficiently consider the diversity of food intake, which is difficult to guarantee in cases of prolonged crisis. Alternative transfer mechanisms such as cash and vouchers tested in the course of this project turned out to be ad-

vantageous, not only with regard to cost efficiency, but also in terms of the positive impact on the diversity of food intake.<sup>2</sup>

### Effectiveness rating: 3

#### Efficiency

**Project I:** The cost structure of the measure was adequate; although comparatively high local transport costs accrued because the poor regions were difficult to reach, especially in mountainous areas. Existing structures were utilised to provide preventative nutritional supplement rations and special curative rations through the healthcare system. There were significant delays in procuring special rations from abroad due to shortfalls in funding, administrative hurdles and lack of availability in international markets, which must be considered as one of the causes of the limited effectiveness in light of the time-critical handling of malnutrition.

In view of the difficult situation and the extreme vulnerability and disadvantaged nature of women and children, at the time there was no alternative to the selected measure according to the information available. According to what we know today, the efficiency of the measure could have been increased with a more effective link to other measures specific and related to nutrition. In this respect, the link to the TC health project could have created synergies, but they were not achieved due to a lack of conceptual and operative coordination.

### Efficiency rating: 3

**Project II:** The cost structure of the measure was adequate. In particular, logistics is assessed as efficient. Expanding the WFP operation in Yemen reduced the proportionate costs for transport, operation and other direct costs. Despite increasing political instability, cooperation with the Social Welfare Fund and the healthcare system was continued, with the result that the actual costs based on the use of existing selection mechanisms and distribution structures did not rise in spite of the deteriorating framework conditions. Local procurement was further expanded.

There would have been an additional financial requirement for structure-building measures within the “Food for Work” component. However, after prioritising the basic supply for the largest possible target group, the “Food for Work” component was restricted in favour of the seasonal emergency system and the supply for internally displaced people. This was reasonable in consideration of the demand, but it narrowed the medium-term impact of the allocation efficiency. There were delays in the procurement and provision of services in the nutrition component due to funding shortfalls, which is to be considered as one of the reasons for the limited effectiveness of the nutrition component. Supply gaps and capacity constraints of the national healthcare system in the rendering of services were addressed by involving external service providers.

On a positive note, the pilot measures and an accompanying study on alternative modes of transfer of food aid in the form of foodstuffs, cash or voucher systems should be highlighted. In Yemen, the cash transfers were characterised by significant cost advantages in contrast with the physical provision of food.

### Efficiency rating: 2

#### Impact

**Project I:** Helping to alleviate the worst effects of the food crisis at the time and improve the humanitarian situation in Yemen formed the development objective for the co-financing of the WFP's emergency aid programme. In the absence of data on the regional and temporal coverage rate of the food measures, no definite assertions on the impact in the target regions can be made. Post-distribution monitoring surveys by the WFP for follow-up projects with similar measures indicate an impact that falls short of expectations. The impacts were assessed by the reduction of the prevalence of malnutrition on the basis of secondary data and plausibility considerations.

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<sup>2</sup> In a study by the World Bank, statistics showed that considerably improved effects on food consumption were documented for cash and voucher systems for Yemen in comparison to the distribution of food.



1) Reduction of the prevalence of acute malnutrition in children under the age of five in the target regions: Whilst success rates were not collected systematically in Project I, monitoring data from Project II indicates that the recovery rates of treated children and thus the impact on the prevalence of malnutrition fall short of expectations. The prevalence of acute malnutrition in children increased from 9.5% to 13.0% nationwide against the backdrop of increased market prices of food staples between 2009 and 2011. Data for the three governorates reveals an increase in the prevalence of acute malnutrition between 2009 and 2011, from 5.8% to 10.1% in Abyan, from 9.6% to 10.2% in Amran and from 12.2% to 14.9% in Hajjah.

2) Reduction in the prevalence of malnutrition among pregnant and nursing women in the target regions: data on success rates was not collected. Monitoring data of subsequent follow-up projects confirms that the preventative special rations for pregnant and nursing women were only used exclusively by them in 29% of cases. The WFP indicates the rate of 25.4% for 2010 as a baseline for the prevalence of malnutrition in women nationwide (19.4% in Abyan, 31.0% in Amran and 34.2% in Hajjah). An improvement in malnutrition cannot be assumed due to the nationwide increase in food insecurity.

Possible reasons for the fact that the impact on the prevalence of malnutrition falls behind expectations were inadequate information on the use of rations and the partitioning of rations within and outside of the household. As the scope of the WDF emergency aid programme was ultimately significantly smaller than originally planned, however, the requirements for impacts have to be reduced. Particularly in view of the nationwide deterioration of the situation, it is plausible that the provision of food in the short term contributed towards alleviating the worst effects of the food crisis at the time at the individual level of the recipients in the target areas, and improving the humanitarian situation. The impact is therefore still assessed as satisfactory.

### Impact rating: 3

**Project II:** The co-financing of the WFP emergency aid programme was intended to contribute towards alleviating the worst effects of the food crisis at the time and improving the humanitarian situation in Yemen. Here too, the impacts were assessed based on the reduction in the prevalence of malnutrition using secondary data and plausibility considerations. According to WFP, the desired reduction in the prevalence of acute malnutrition in children under the age of five in the target areas of 10 percentage points by the end of the programme in 2012 could not be fully reached. In 2014 there was a slight improvement or stabilisation in 8 of the 11 target governorates in comparison to 2011 before the start of the programme. The rate of undernourishment fell nationwide from an average of 27.3% between 2008 and 2010 to 25.6% between 2011 and 2013, despite worsened economic conditions due to civil unrest and political instability. A positive effect on food security was determined for seven of the eight governorates in which food was distributed on a seasonal basis.

Based on the expansion of the coverage rate and the coordinated use of funds with other humanitarian actors, it is plausible that a contribution was made to alleviating the worst effects of the food crisis and improving the humanitarian situation for the project term and in the target regions.

### Impact rating: 3

## Sustainability

Based on the emergency aid character (rapid response procedure in the event of natural disasters, crises and conflicts in conformity with No. 47 of the FC-TC guidelines), both projects had a limited sustainability requirement. It is one of the principles of humanitarian aid, very similar to emergency aid, to enable the ability to be integrated into structure-building and development-promoting operations in accordance with the “Linking Relief, Rehabilitation and Development” approach. The capacity development of local actors is a critical factor for success.

**Project I:** The nutritional component was implemented through the public healthcare system; the important issue of nutrition was to be embedded there. The actors were given basic training. This was a solid approach, however, with effective coordination of FC/WFP and TC there would have been considerably greater potential to using conceptual synergies during execution and to firmly establishing the issue of nutrition in the health care system.

The potential to ensure the capability of measures to be integrated into potential follow-up projects was not exploited to a sufficient degree, and for this reason sustainability can only be assessed as satisfactory.

**Sustainability rating: 3**

**Project II:** National structures were integrated wherever possible into the implementation of the project; the capacities of the healthcare system had to be supplemented by external service providers to execute the nutrition component. The food distribution in the seasonal emergency system was implemented in close cooperation with the Social Welfare Fund, which is assessed as appropriate, and from today's perspective, cooperation within the "Food for Work" component was a reasonable approach with a strong focus on resilience to tackle malnutrition in chronic food crises. Even though the "Food for Work" component could not be implemented to the planned extent, the WFP played a pioneering role with the introduction of this concept in Yemen and strengthened the image of the Social Welfare Fund as a public service provider among the population.

A positive development worth highlighting is that, thanks to significant improvements in monitoring, there is now a data basis for working out lessons learnt that are critical for success as well as for planning and implementing future projects.

In view of the requirements to be placed on emergency aid operations, sustainability met expectations.

**Sustainability rating: 2**

### Notes on the methods used to evaluate project success (project rating)

Projects (and programmes) are evaluated on a six-point scale, the criteria being **relevance, effectiveness, efficiency** and **overarching developmental impact**. The ratings are also used to arrive at a **final assessment** of a project's overall developmental efficacy. The scale is as follows:

<b>Level 1</b>	Very good result that clearly exceeds expectations
<b>Level 2</b>	Good result, fully in line with expectations and without any significant shortcomings
<b>Level 3</b>	Satisfactory result – project falls short of expectations but the positive results dominate
<b>Level 4</b>	Unsatisfactory result – significantly below expectations, with negative results dominating despite discernible positive results
<b>Level 5</b>	Clearly inadequate result – despite some positive partial results, the negative results clearly dominate
<b>Level 6</b>	The project has no impact or the situation has actually deteriorated

Rating levels 1-3 denote a positive assessment or successful project while rating levels 4-6 denote a negative assessment.

### Sustainability is evaluated according to the following four-point scale:

Sustainability level 1 (very good sustainability): The developmental efficacy of the project (positive to date) is very likely to continue undiminished or even increase.

Sustainability level 2 (good sustainability): The developmental efficacy of the project (positive to date) is very likely to decline only minimally but remain positive overall. (This is what can normally be expected).

Sustainability level 3 (satisfactory sustainability): The developmental efficacy of the project (positive to date) is very likely to decline significantly but remain positive overall. This rating is also assigned if the sustainability of a project is considered inadequate up to the time of the ex post evaluation but is very likely to evolve positively so that the project will ultimately achieve positive developmental efficacy.

Sustainability level 4 (inadequate sustainability): The developmental efficacy of the project is inadequate up to the time of the ex post evaluation and is very unlikely to improve. This rating is also assigned if the sustainability that has been positively evaluated to date is very likely to deteriorate severely and no longer meet the level 3 criteria.

The **overall rating** on the six-point scale is compiled from a weighting of all five individual criteria as appropriate to the project in question. Rating levels 1-3 of the overall rating denote a "successful" project while rating levels 4-6 denote an "unsuccessful" project. It should be noted that a project can generally be considered developmentally "successful" only if the achievement of the project objective ("effectiveness"), the impact on the overall objective ("overarching developmental impact") and the sustainability are rated at least "satisfactory" (level 3).