

OPERATION EVALUATION

SOMALIA Protracted Relief and Recovery Operation (200443)
Strengthening Food and Nutrition Security and Enhancing Resilience
June 2012 – December 2015

Management Response

[May, 2015]



World Food Programme

Detailed responses to evaluation recommendations

Evaluation Recommendations	Management Accepted, partially accepted or not accepted and COMMENT on the Recommendation, providing clear reasoning for partially accepted and not accepted	Management - Action to be taken			
		Action	Responsible CO unit	Timeframe	Further funding required (Y or N)
<p>Recommendation 1: WFP Somalia should prioritize, revise and streamline their nutrition and health programming for maximum effectiveness and efficiency according to the context and limited resources. Specifically, this evaluation has identified a number of nutrition and health activities that need to be discontinued, or modified.</p> <ul style="list-style-type: none"> BSFP can be discontinued in Somaliland and Puntland. 	<p>Partially accepted.</p>		Programme Unit	2016	YES
	<p>Partially accepted</p> <p>BSFP is determined by the prevailing acute malnutrition rates and the probability of seasonal deteriorations in the region. In Somaliland where Global Acute Malnutrition rates (GAM) are below 15%, which is the global emergency threshold, WFP could explore opportunities for phasing out BSFP and increasing MCHN coverage.</p> <p>In Puntland however, there are areas where malnutrition rates are critical: - pockets with high GAM rates and where seasonal BSFP interventions happen alongside TSFP. In addition,</p>	<p>Start other nutrition interventions to complement MCHN activities like BCC that addresses malnutrition in the long term like MCHN.</p> <p>Develop a transition or phase out plan with identified areas by priority</p>	Programme Unit	2016	YES

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<ul style="list-style-type: none"> TSFP for acutely malnourished PLW can be discontinued in Somaliland and much of Puntland as MCHN often covers the same target group and the caseload is small. Malnourished PLW can be effectively screened, managed and monitored in the context of MCHN. 	<p>MCH program coverage is not as extensive as Somaliland. However with MCHN expansion, BSFP could be phased out gradually.</p>	<p>where BSFP could be discontinued.</p> <p>Phase out BSFP through a 3-phase timeline, opportunities permitting</p>	Programme Unit	2016	Y
	<p>Partially accepted.</p> <p>While this is something WFP could consider, it is important to highlight that the objectives of the two interventions are not the same; while TSFP is primarily curative, MCHN focuses on the promotion of growth and the prevention of acute malnutrition among infants and young children < 24 months of age through nutritional support (including lactating mothers) and increased Postnatal Care attendance. It is however unclear if MCHN intervention could address high GAM rates in disaster prone settings;</p>	<p>Conduct a systematic screening of PLW being admitted for TSFP and MCHN and determine the malnutrition rates in this group in partnership with MOH and other partners</p> <p>Develop a phase out plan with identified areas by priority where</p>			

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<ul style="list-style-type: none"> The TSFP family ration can be discontinued in Somaliland and part of Puntland. Other options to address key causal factors for SAM and MAM should be considered, including reducing mothers' time and workload, and lack of household income. Using cash-based modalities 	<p>WFP however agrees that in the context of Somaliland (with relatively lower GAM rates) TSFP programmes can be replaced, with malnourished PLW screened and monitored under MCHN programmes. However, the CO will maintain the capacity to re-implement TSFP should there be an increase in the U5/PLW MAM prevalence.</p> <p>For Puntland WFP would be more cautious replacing TSFP programmes with MCHN, considering that the region is more vulnerable to food insecurity, with high GAM rates in some districts. There are also less fully functional health facilities to effectively accommodate MCHN programmes.</p>	<p>TSFP should be discontinued.</p> <p>Gradually phase out TSFP especially in Somaliland regions.</p>			
	<p>In considering where and when to discontinue TSFP programmes, WFP will explore at the same time the possibility of introducing diversified transfer modalities such as Cash and Voucher, especially for the household</p>	<p>Nutrition team will work with the Cash and Vouchers team, to explore and come</p>	Programme Unit	2016	YES

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<p>and linking this target group to livelihood activities should be considered based on local capacity and access.</p> <ul style="list-style-type: none"> The purpose of the PLHIV and TB intervention should be clearly defined as nutritional treatment and as such standard entry and exit criteria must be used. An appropriate ready to use food (RUF) as an individual ration is highly preferable, and consistent with national guidelines and the global guidance on NACS programming for PLHIV and TB.¹ The food-based household ration for this target group should be replaced with a cash-based transfer modality when access and local capacity will allow and is sufficient or can be properly developed. 	<p>relief response of the TSFP family ration. Additionally, linkages and integration into existing livelihood activities will be considered.</p> <p>Partially Accepted National Nutrition, Assessment, Education, Counselling and Support (NAECS) guidelines specific for Somalia have been developed and are undergoing endorsement by the various Somalia MoHs. The guideline defines standard entry and exit criteria and is consistent with WFP HIV policy as well as other global guidelines on NACS programming for PLHIV and TB.</p> <p>WFP will explore appropriate ready to use food (RUF). For the Household ration, based on the results of the needs assessment, WFP could discontinue the family ration.</p>	<p>up with a concept note.</p> <p>Schedule and finalize endorsement plans of the NAECS guideline with MoH for Puntland and SCZ. Develop training plan for CP, MoH and WFP AO staff on programme implementation; Conduct a food security needs assessment for TB and HIV family ration</p>	<p>Programme Unit</p>	<p>2015-2016</p>	<p>YES</p>

¹ National Guidelines for Nutrition, Education, Counselling and Support (NECS) of PLHIV and TB Patients (Draft in progress May 2013). Nutrition Assessment Counselling and Support (NACS) for People Living with HIV and TB. September 2013. FANTA/AED. Available at <www.fantaproject.org>

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<ul style="list-style-type: none"> As other agencies such as UNICEF seek to pilot test non-food approaches to managing MAM, it is incumbent upon WFP to collaborate effectively to assess innovative and cost effective approaches in contexts where GAM rate is relatively low. 	<p>Partially accepted. WFP to explore UNICEF approach and work towards an effective collaboration plan to assess innovative and cost effective approaches.</p>	Consultations with UNICEF to establish an effective collaboration plan	Programme Unit	2017	YES
<p>Recommendation 2: WFP Somalia should collaborate with MoH, local health authorities and UN partners under the joint mandate and JHNP to consolidate and scale up integrated programming at the MCHN. Specifically, WFP should revise the following aspects of their programme to ensure that it is coherent with other agencies, and global best practice.</p> <ul style="list-style-type: none"> Adopt the one common approach to programming and align treatment programmes (OTP and TSFP) and prevention programs at static and outreach /satellite sites. 	<p>Partially accepted</p> <p>Rationalization plans are underway and WFP is actively engaged in the process. It is expected that the plan will provide a platform for WFP to align and integrate TSFP interventions with those of OTP and other services;</p> <p>WFP is also an active member of the Nutrition Cluster as well as a member of the Strategic Advisory Group of Nutrition Cluster. Through these</p>	Continue to actively participate in Nutrition Cluster Coordination (NCC), rationalization plans; Strategic Advisory Group (SAG) and other fora.	Programme Unit	2015-2016	YES

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<ul style="list-style-type: none"> Streamline and revise FLAs in the second quarter of 2015 to ensure one partner operating in one site, where feasible. Ensure provision of essential drugs and supplies concurrent with the significant increase in use of maternal and child health services. Simplify and streamline recording and monitoring systems. 	different avenues WFP will ensure its nutrition programmes are well align for an effective collaboration with MoH, local authorities and UN agencies under the Joint Health and Nutrition Programme (JHNP).	Prepare joint WFP-UNICEF concept note on common areas of collaboration.			
	WFP will continue to streamline and revise FLAs, to ensure that where feasible a single CP is implementing nutrition programmes in one site.			2015-2016	YES
	WFP will continue to ensure the provision of food supplies, using its logistical capabilities. Essential drugs are not part of WFP mandate, and therefore WFP will expect that other partners will address this adequately.	Ongoing process and part of rationalization plan	Programme Unit	2015-2016	YES
	Accepted – As per action identified for Recommendation 9 - Adjustments will be identified to lead to more efficient M&E system/process.	Ongoing	Programme Unit	2015-2016	YES

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<ul style="list-style-type: none"> Strengthen and consolidate community based behavioural change interventions aimed to address the key determinants of acute malnutrition and increase resilience. 	<p>Accepted</p> <p>WFP will continue to strengthen and consolidate Behaviour Change Communication (BCC) interventions. A BCC strategy has been developed and piloted in Somaliland and based on the feedback the first phase worked well.</p> <p>WFP together with UNICEF currently trains community nutrition workers (CNW) on BCC especially in areas where IMAM and resilience programs are running. CNW are trained on BCC as part of strengthening provision of community based basic nutrition services.</p> <p>WFP also does considerable work on basic health, nutrition and hygiene promotion that has not been well acknowledged.</p>	<p>Develop ToR and recruit consultant to translate BCC strategy into Somali;</p>	Programme Unit	2015-2016	YES
		<p>Develop Radio and other IEC materials/ publicity;</p> <p>Work with UNICEF to better define and determine the roll of both parties, based on comparative advantage.</p>	Programme Unit	2018	YES

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<ul style="list-style-type: none"> Scale up MCHN in SCZ following a thorough quarterly review to address issues in the pilot phase. Clearly determine impact of the MCHN programme through the planned impact assessment in 2015. This assessment should also identify barriers to access and integrated programming including unreported results. Sufficient budget for technical expertise should be allocated for this and the findings documented to contribute to the global evidence base. 	<p>Partially accepted. Subject to availability of resources, Partner capacity, UN and Federal Government rollout of complementary inputs and availability of appropriate facilities</p> <p>Partially accepted While the process is starting in 2015, the assessment will not be completed until 2016.</p>	Undertake Impact assessment in 2016	Management/Donor Relations/Programme Unit (Nutrition Team)	2016-2017	YES
<p>Recommendation 3: WFP Somalia should continue to provide food assistance to the most food insecure population groups based on food security assessments, but a greater emphasis should be placed on the use of alternative transfer modalities. GFD should continue as an option under the ‘contingency activities’ but defined with clear exit strategies. Wet feeding</p>	<p>Partially Accepted The CO will continue to implement, based on assessed needs, the relief responses using the different modalities available to WFP.</p> <p>The current approach employed by the CO includes a mechanism to transition</p>	Continue in the new PRRO 2016-2018, resources permitting, to expand non in-kind responses to be in line with the	Programme Unit/Management/Donor relations/Compliance	2016-2018	YES

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should continue in urban centres in the South but exit strategies should be developed.	<p>beneficiaries from relief to Food for Asset (FFA) SO1 and SO2 in rural areas. However, the CO agrees that a specific and nuanced transition strategy for urban beneficiaries assisted through the current wet feeding programme could be further elaborated.</p> <p>Given the current fragility, systemic vulnerability and dynamic environment in Somalia, relief will continue to play a critical role in the CO's response basket for providing lifesaving assistance to highly food insecure populations and as such requires consistent resource mobilization in order to ensure a timely response. Consequently relief responses, will continue to be included in the planning response caseload based on the Integrated Context Analysis, early warning and early action guidance and food security assessments.</p>	<p>corporate guidance</p> <p>Develop a transition strategy for urban recipients of 'wet feeding' programmes to livelihood skill development activities</p>	Programme Unit	2016	YES

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Recommendation 4: In collaboration with FAO and UNICEF, WFP Somalia should continue to develop and implement appropriate community resilience approaches. The approach should not only focus on protecting livelihoods but on improving livelihood opportunities, increasing community capacity and building resilience at all levels. This should be coordinated with other resilience initiatives in Somalia, including SomRep and the Informal Humanitarian Donor Group (IHDG) working on resilience.	Partially accepted in terms of collaboration with FAO and UNICEF. Key lesson learnt – currently defined - during the Joint Resilience Strategy phase (2013-2015) will be take into account for future programming. Future resilience programming will focus on 1- Enhanced productive sectors; 2- Access to basic services, 3- Safety nets for social protection however it is important to note that activities for improving livelihood opportunities are identified and prioritized by the community through seasonal livelihood programming and community based participatory planning.	WFP Somalia will enhance its coordination with resilience consortiums (SomRep, BRCIS) and informal Humanitarian Donor Groups through the following ways: Regular coordination meetings with UN agencies and consortia. Organization of workshops and training on resilience approach together with other stakeholders including government,	Programme Unit	2015-2016	YES

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		INGOs and UN agencies Sharing of lessons learnt and adoption of appropriate lessons/recommendation into resilience programming when and where feasible Launch of online joint resilience activity data base that can be accessible to anyone interested			
Recommendation 5: WFP Somalia should collaborate with UNICEF to ensure that School Feeding makes a contribution to educational outcomes. This includes assessments of enrolment, attendance and any other impact the activity makes to education in Somalia. The comparative advantage of the current take-home-	Partially Accepted The CO will undertake an evaluation of the School Meals programme to assess the achievement of objectives and quality of implementation. The evaluation is expected to generate recommendations for enhancing	Undertaking of an independent evaluation of the School Meals Programme	Programme Unit	2016	YES

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rations compared to alternative measures for promoting girls' enrolment should form the basis for the School Feeding activities in the next PRRO. Moreover, the School Feeding component should include mechanisms to ensure that children from the most destitute households will be able to attend school.	programme implementation and identifying potential 'barriers' that could potentially restrict highly food insecure households from participating The CO will collaborate with UNICEF to obtain data on complementary assistance offered by UNICEF in WFP supported schools. WFP will also closely work with the Ministry of Education in obtaining data. To ensure that most destitute households will be able to attend, priority will be given to schools included in the national 'Go2School' initiative supported by UNICEF.	Define collaborative framework with UNICEF and MoE			
Recommendation 6: WFP Somalia should address identified capacity gaps in a number of sectors including nutrition and health, the use of cash-based modalities, and gender analysis. The ET therefore recommends that WFP Somalia develop a comprehensive capacity development strategy. This strategy should be based on capacity needs assessments and with monitoring indicators showing the specific capacity aspects to be increased. The capacity development strategy should not only address government counterparts but	Partially Accepted The CO agrees that a capacity evaluation related to WFP's ongoing activities with federal and regional authorities would be beneficial, however, this should only complement the on-going work lead by UNSOA and the PSGs and not an independent work on its own.	The CO review and identify gaps in the current capacity evaluations of the federal, regional and local authorities as well as LNGO partners pertaining to WFP's activities in	Management/Programme Unit	2016-2018	YES

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increase identification and integration of alternative community governance structures. Furthermore, the capacity development strategy should address WFP Somalia's internal capacity needs.	<p>The CO agrees that in the new PRRO greater investment is required in federal and regional authorities. However, given the current context caution needs to be exercised due to:</p> <ol style="list-style-type: none"> 1) The young nature of the current federal government and regional administrations; 2) There still remain significant sub-national divisions between regional administrations and the federal government around the responsibilities and funding of service provision; 	<p>nutrition, education and livelihoods. The gap analysis will then form a specific action plan to target key government ministries, regional departments and local extension workers to mitigate key gaps in the provision of humanitarian assistance. This will be a key component in the new PRRO currently designed.</p> <p>Through the expanded Seasonal Livelihood</p>			

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<ul style="list-style-type: none"> Nutrition and Health: It is essential that WFP invest in its own technical capacity in the health and nutrition sector in order to fully engage and provide leadership on policy, strategy and coordination in Somalia and to ensure effective programme implementation. Specifically this will require investing in long-term technical capacity at senior management level as well as at AO level. 	Nutrition and Health Accepted The CO has already recruited a Nutritionist based in Mogadishu to strengthen the dialogue and relationship with the MoH as well as provide support to AO on roaming basis. The CO Nutrition team is	Programming (SLP) and Community Based Participatory Planning (CBPP) activities the CO will explore and document its findings on how these tool can support greater community and intra-community empowerment vis-à-vis the current political and insecurity context.	Programme Unit	2015-2016	YES
		Recruit additional nutrition staff Continue to engage and provide leadership in			

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<p>This technical leadership will also enable WFP to address persistent issues with Letter of Understanding (LOUs), FLA contracts, the development of a phased handover strategy with government and leveraging funding for nutrition programming with major donors. Good technical leadership will also address programmatic issues currently hampered by policy constraints including the need for revision of national guidelines for IMAM.</p> <ul style="list-style-type: none"> • The use of cash-based transfer modalities: The CO should work with the Regional Bureau and/or WFP HQ to strengthen the capacity of WFP and CPs in cash-based transfer modalities. • • Gender analysis: The CO should strengthen its gender analysis capacity, including through recruitment of a gender consultant and a full-time 	<p>currently being strengthened by recruiting more senior nutrition staff.</p> <p>Through WFP's role as the UN co-lead of PSG5, more appropriate sector wide health/nutrition handover strategies can be developed</p>	<p>PSG5 in developing sector wide health/nutrition handover strategies.</p>	<p>Programme Unit</p>	<p>2015-2018</p>	<p>YES</p>
	<p>The use of cash-based transfer modalities Accepted</p> <p>The CO organized PRRO 200443 C&V transfers after action review last April for lessons learning purposes – facilitated by the Regional Bureau. At the end of May the CO will host one week C&V training for AO and CO staff</p>	<p>After Action Review</p> <p>Training for CO and AO staff</p> <p>Analysis and learning from other cash transfer experiences prior to roll out of cash transfers</p>	<p>Programme Unit</p>	<p>2015-2016</p>	<p>YES</p>
	<p>Gender Analysis Partially Accepted</p> <p>The CO has recently recruited a consultant to boost capacity in gender</p>	<p>Undertake needs and opportunities context analysis</p>		<p>2015-2018</p>	<p>YES</p>

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gender expert. This will maximize gender impacts during the last months of implementation of the current PRRO while ensuring the next PRRO will be based on sound gender analysis and with additional specific indicators to monitor gender impact at community level.	and protection mainstreaming throughout current and future programming. Working closely with the regional bureau, CO technical teams, and AO/SO staff, the consultant will undertake a needs and opportunities context analysis. This will assist the CO in both identifying immediate actions that may be taken in current programming, and those that may be integrated into the new PRRO. This will include gender and protection specific objectives and indicators. Research into the relationship between WFPs work and gender and protection will be ongoing. The consultant will build awareness of and capacity in gender and protection mainstreaming amongst technical teams in the CO, staff at Area and Sub offices, and where possible with key cooperating partners. The consultant will also identify and build relationships with other agencies and organisations active in gender and protection programming in Somalia to	Training/Awareness raising for CO and AO staff	Programme Unit		

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	enable ongoing lessons sharing and coordination.				
Recommendation 7: WFP Somalia, together with HQ, should develop a fundraising strategy to enable programming to be implemented as planned. The strategy should include focus on funds available for cash-based approaches to be more effectively utilised across multiple sectors.	<p>Partially accepted</p> <p>The CO will continue to engage with HQ to further develop its fundraising strategies and continue to advocate for funding for WFP to be used in Somalia.</p> <p>It should be noted however that resources mobilization is not the sole responsibility of the CO.</p> <p>It should also be noted that as a voluntarily funded organization, WFP's operations are never fully funded. Efforts to raise funds will therefore be accompanied by a resource management strategy to prioritize resources for the most vulnerable and food insecure people in Somalia.</p> <p>The CO will continue to advocate for cash resources to further strengthen its market-based interventions.</p>	Continue engagement with HQ and RB on fundraising	Donor Relations/External Relations	2016-2018	NO

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<p>Recommendation 8: WFP Somalia should continue using a flexible approach that links relief and recovery, while strengthening community resilience in the next PRRO. The overall country strategy should also be aligned with the New Deal Compact and the strategies of other humanitarian and development agencies working in Somalia.</p>	<p>Partially Accepted Upcoming PRRO document will take into account New Deal Compact and other strategies. However it should be noted that New Deal Compact PSG4 and PSG5 leans more towards developmental approach. Nevertheless, WFP Somalia will align to these strategies without compromising neutrality and beneficiaries focus to our existing and upcoming programming.</p>	<p>Continue to be active member of PSG 4 and UN Co-lead for PSG5</p> <p>Active membership and contribution to clusters (Food Security, Nutrition and Education) to ensure that the next Strategic Response Plan/CAP continue to provide strategic humanitarian response plan in line with humanitarian principles</p> <p>Continue working with UN Country Team (UNCT),</p>	<p>Programme Unit/Management</p>	<p>2016-2018</p>	<p>YES</p>

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		Heads of Humanitarian Agencies (HOHA), Humanitarian Country Team (HCT) to ensure future Integrated Strategic Framework (ISF) continue to be strategic bridge between humanitarian approach and development approach/PSGs.			
Recommendation 9: WFP Somalia should ensure further development of the M&E system to ensure greater attention to its usefulness for planning and management purposes. Indicators should be developed to support the strengthening of an integrated approach, as well as indicators allowing for the assessment of impacts of different implementation modalities such as livelihood activities implemented under the Joint Resilience Strategy. Moreover, the M&E system	Accepted The Logical Framework of the upcoming PRRO document (2016-2018) will include new outcome indicators for assessment of the different WFP implementation modalities. The CO will undertake development of a comprehensive M&E data base to	Develop and include impact indicators in the new PRRO(2016-2018) Development of an M&E data base	Programme Unit	2015-2016	YES

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should develop compatible and easily accessible databases to promote optimal use of monitoring and evaluation for planning and management purposes.	promote optimal use of M&E information. Adjustments will be identified to lead to more efficient M&E system/process.				