

OPERATION EVALUATION

**Lesotho Country Programme 200369 (2013-2017) evaluation of
WFP's operation at mid-term**

Management Response

[September, 2015]



World Food Programme

Detailed responses to evaluation recommendations

| Evaluation Recommendations | Management response 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 | | | |
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| | | Action | Responsible CO unit | Time frame | Further funding required? (Y or N) |
| Recommendation 1: Focus food and cash incentives on a pilot to demonstrate what resilience building in Lesotho could look like and requires: The pilot should replace business-as-usual FFA projects, and its strategic objective should be: 1) To answer the question “What does it take for a chronically food insecure household/community to get permanently out of its vulnerability status” and 2) Promote a programme based on the results. The pilot should take a holistic view of resilience, including much greater attention to the technologies and connections that small-holder farmers need to both improve and protect their livelihoods. Duration should be 3-5 years and intervention areas reduced to 2-4 communities (each targeted to provide learning from a particular geographic, topographic and/or climatic zone). Participants should be limited to those that will immediately benefit from the technology or intervention. It would, in effect, be the operationalisation of the Three Pronged Approach and the Lesotho Resilience Strategic Framework 2014, and under the latter WFP should bring together the MoFLR, MOA, DMA, FAO, and NGOs into the design, inputs, implementation, and monitoring of the pilot project. It should be developed on the assumption that the government will adopt the working model after the pilot period. By having a far smaller but longer intervention costs should not increase, but a well-defined pilot drawing together many actors will have multiple income streams and its learning focus should be help it to attract funding from international research initiatives. | Accepted: The CO commits to smaller, more focused and multiyear FFA interventions with a view towards setting an effective resilience model for the government to take over. However this will be subject to the government’s willingness to assume responsibility over this process and to funding. | -Perform a budget revision on the DRR component in order to extend the duration of the DRR programmes. -Seek a wider consensus and engagement from the government’s side in the planning and implementation of resilience building projects. | DRR | Oct to Dec 2015 Oct 2015-June2016 | yes |
| Recommendation 2: Choose appropriate asset types to meet CP objectives: In the pilot mentioned above, and/or if the CO | Accepted The CO jointly with the communities as | -Conduct jointly with the government a research on | DRR | Oct ober2015 | yes |

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| initiates any future cash or food project during the CP timeline, the CO should rethink the outputs of the incentives. Agriculture is a very difficult livelihood in Lesotho (especially for Poor and Very Poor households), yet the assets promoted by WFP, such as gully strengthening, are doing little to improve short-term agricultural incomes, and certainly nothing unique from what MoFLR is doing. A number of assets, such as water harvesting, irrigation schemes and plastic sheets for crop protection, could bring near-term benefits to farmers. WFP should also consider promoting a diversity of livelihoods, not just agricultural, so if disaster does affect crops communities have other sources of income rather than just labouring or brewing. | well as key partners, such as the government will select a limited type of assets whose creation will directly contribute to address the main context specific vulnerabilities. Use of participatory approaches to selection of activities and types of assets will be used to ensure that livelihood linkages are established. | what constitutes resilience in Lesotho as well as comprehensive analysis and planning activities. | | to june2016 | |
| Recommendation 3: If longer term funding can't be achieved, target within other livelihood programmes. Given the current funding climate in Lesotho it may not be possible for WFP to generate funding for long-term livelihood projects, but the objectives of these remain a critically important thing to do within Lesotho. Rather than start short projects where there is not the time or surrounding partners to initiate and, crucially, maintain livelihood activities, WFP should target FFA within partners' existing agricultural programmes. This arrangement should be explicitly stated in the partnership agreement so it is understood that the partner will continue the livelihood activities, and it will be clear what can be achieved in period of food provision. WFP would have to ensure that its definitions of vulnerability is still accounted for a partner's targeting, but the ability to secure development goals should consider along with a recognition of time-scale required for these. The re-targeting should apply to any new short-term piece of funding awarded after the two 2015 projects end. | Accepted: Cooperating with other partners within resilience is a necessity. However lack of longer term funding will jeopardize the CO's ability to set a new and more effective model. However, WFP is supporting the engagement process with government and other partners with a view of enhancing government's leadership in the resilience agenda. This ultimately could lead to long-term government funding for resilience programmes. | -Strengthen the cooperation with the government, the UN, NGOs and other relevant stakeholders i.e. private sector, local donors e.t.c . | DRR | Oct 2015- Dec 2017 | yes |
| Recommendation 4: Significantly increase emphasis on capacity | Accepted | -Include ECCD feeding in | School | 2015 to | Yes |

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| building at all levels of the activity, and its future handover: The smooth handover of pre-school support, with fully functioning management systems, to a fully capacitated Government counterpart will be critical to the longer term sustainability of the intervention. A comprehensive and strategic capacity building plan, with clear milestones, timelines, handover dates and budget, needs to be agreed with counterparts and established as soon as possible with its own dedicated resources and management. The resources, capacities, and approach of the WFP CO should be realigned accordingly. As part of the already established wider transition process towards a national school feeding programme, including both pre-school and primary schools, management handover of pre-school support should be closely coordinated with that of the Primary School Feeding which WFP continues to manage under trust fund 200771. WFP should also advise Government on possible approaches to targeting of pre-school support. | Capacity development is the key component of the school feeding programme handover process. However additional resources will be needed as capacity development has proven to be a sensitive, delicate and long process that requires special technical skills which are not currently available in Lesotho. | the ongoing national capacity strengthening and hand over processes of the primary school feeding programme through the following actions; <ul style="list-style-type: none"> • Conduct a capacity needs assessment for the ECCD unit and develop a capacity development plan of the MoET • Conduct key trainings for ECCD unit staff; including M&E and computer literacy trainings • Develop an implementation framework for the handover process • Conduct resource mobilization activities towards the implementation of the capacity development plan • Monitor the implementation of the capacity development plan | feeding & M&E | 2017 Dec 2015 – March 2016 Jan – Mar 2016 Dec 2015 – Feb 2015 Ongoing ongoing | |

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| Recommendation 5: Use the remaining 2.5 years of the CP to make operational improvements and strengthen management systems: WFP should focus on improving key operational and qualitative aspects of pre-school support for the remainder of the CP so that the management and monitoring systems eventually handed over to Government are more robust and sustainable than is currently the case. Attention needs to be given to: reviewing numbers (inclusion, exclusion, attendance) through regular and spot checking data quality assurance procedures; tightening commodity management post extended delivery point (EDP); inclusion of relevant nutrition outcome indicators; strengthening the M&E system and its use in management decisions; introducing relevant and timely operational reporting; looking at ways to address gender imbalance; and reviewing both the suitability of commodities in the food basket, and the food basket itself. | Accepted: The CO will strengthen the monitoring and reporting of the programme in order to make operational and qualitative improvements. It will also encourage the government to allocate resources and participate in the monitoring process. | -Review existing monitoring tools to incorporate nutrition indicators for ECCD; -Facilitate the establishment of a national robust school feeding monitoring system within the Ministry of Education and Training by. -Developing capacity of ECCD Unit staff to effectively monitor the feeding programme -Use programme data and results to inform decision making on the programme | M&E and school feeding | Oct2015 to June 2016 Oct – Nov 2015 Oct – Dec 2015 Nov – 2015 – Jan 2015 Ongoing | yes |
| Recommendation 6: Promote inter-sectoral coordination, especially with Health and Nutrition, at the pre-school level: WFP, with its strong presence at the district and community levels, should place more emphasis on promoting, and advocating for, inter-sectoral coordination so that pre-school children receiving free meals, also maximise their benefit from other sectors, especially health, as intended under the IECCD programme, but not strongly evident to the evaluation. The inclusion of a nutrition indicator will also be of strategic value in strengthening the linkages of component 2 objectives with health and nutrition, although it is acknowledged that it may | Accepted: WFP will play its role mainly from the advocacy angle. The Ministry of Education has an IECCD policy and strategic plan in place which states that multi-sectoral coordination and integrated IECCD services will involve two or more of the following sectors: health, nutrition, sanitation, education and protection. | - Advocate for implementation of IECCD policy and strategy, at all government levels, jointly with other stakeholders (e.g. UNICEF). - Through the capacity building for School feeding component, facilitation of multi-sectoral coordination platforms at district level | School feeding/nutrition | 2015 to 2016 Oct – Nov 2015 Jan – Dec 2015 | no |

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| only be possible to do so on a pilot level within the duration of the CP. | | will be effected - Inclusion of appropriate corporate and project indicators to better reflect the nutrition outcomes will be explored with RB and HQ, as current guidance is limited and data collection should be feasible.. -in collaboration with Ministry of Health and other actors, ensure proper sanitation within the ECCD centres | | Jan – Dec 2015 | |
| Recommendation 7: Provide more coherent capacity building with greater contact time to those managing moderate acute malnutrition. WFP's current training support is being suppressed by an overburdened health system, and therefore needs redesigning in line with the realities of health facilities. During the remainder of the CP, WFP, in partnership with UNICEF, should increase numbers of trainers trained so that contact time at each health facility can be maximised, and, ideally, the agencies may consider longer-term placement of staff to help with MAM programming in a similar way to UNICEF's support to the health system in Ethiopia. ¹ The support | Partially accepted There is a need for a coherence capacity building, strengthening the collaboration with UNICEF to ensure a continuum of MAM and SAM treatment through government HF services; however the core issue is not about increasing the number of trainers but rather related building the skills of the existing ones and enhance (their) commitment to on the job supervision. Also there is the need for | - Conduct advocacy with government management level for the acute malnutrition treatment continuum capacity strengthening in Health Facilities - In collaboration with government organize motivation and training activities to enhance the | Nutrition | Oct2015-Dec2017 | yes |

¹ In Ethiopia UNICEF has contracted partners to place monitors at health facility level on a temporary basis. The monitors role is to work with the staff responsible for recording SAM cases to inter alia i) To provide mentoring and on-the-job trainings to health workers and health extension workers to strengthen and immediately fix the area for improvement identified during the assessments as per the national protocol; ii) To assess the correct distribution/ requests and use of the Ready-to-Use Therapeutic Food (RUTF). iii) To ensure healthy supply pipeline through close collaboration with UNICEF regional logistics officers and CMAM logistics specialist at Addis Ababa level and iv) To monitor the implementation of community based nutrition programme, tools and check list will developed and pretested by UNICEF. They also build capacity at higher levels in the health system. The monitors spend 1-2 weeks at each health facility at a time. Adopting such an approach with UNICEF or alone in Lesotho would help to install the MAM approach more thoroughly, and given the size of the country would require fewer resources.

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| needs to be better coordinated with each health facility, however, so that it doesn't appear an imposition, and WFP should engage both the district nutritionist, the health facility head, and as many nurses as possible in monthly facility meetings to re-establish the relationship, set training schedule, and monitor the results. | the government to invest more in nutrition from an upstream and policy perspective. | skills and commitment of the health providers and their supervisors, as this will also enhance the impact of the stunting prevention programming. | | | |
| Recommendation 8: Assess options to reduce beneficiary travel for food collection. The CO should look into options for distribution of food at a more decentralised level than the health facility for PLW and children under-five. The best options would include working with existing institutions, such as the more established ECCD centres and with local church-run hospitals that are performing nutrition monitoring services. More decentralised distribution should be gradually introduced, and only within the catchment areas where the nurses produce reliable lists of beneficiaries under the current model. It also requires better liaison between the VHW and the health facility. If established with a strong coordination system, the CO would likely reach greater number of beneficiaries for MAM, slow rates of new acute malnutrition case as people present sooner, and increase the beneficiary's satisfaction. To maintain the contact that PLW and children under-five have with the health facility, the food support should be distributed with ANC, PNC and under-5 clinic advice, with key contact points when the patient is required to attend the health facility clearly define. However, the CO should be careful in creating decentralised provisions for HIV/TB patients as doing so could have negative consequences on adherence/testing rates. | Partially accepted This recommendation can be applied only to stunting and nutrition and HIV activities, where nutrition supplementation and food distribution by the Cooperating Partner is separated from the nutrition assessments at the health facilities. It is not applicable to treatment of MAM for children aged 6-59 months as the CO has made the decision to phase out the food based activities within this component (based on the latest DHS results and the 2013 DEV 200169 evaluation), and any counseling and assistance would need to be channeled through the Health Facilities. | Conduct stakeholder analysis to inform the potential distribution mechanisms at more decentralized distributions; -Foster partnerships with the eligible partners to implement decentralized distribution | Nutrition | Sep2015-Mar2016 | yes |
| Recommendation 9: Expansion of the Blanket Supplementary Feeding Programme to address stunting: Stunting remains a significant problem in Lesotho – despite reductions, many of the | Partially accepted This is due to funding constraints. This activity will cover only four districts. | | Nutrition | Ongoing | yes |

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| non-BSF districts have high prevalence rates and one has moved into the very high category between 2009 and 2014. The levels warrant an expansion of BSF programme to replicate the CO's positive results in the current implementation areas. The expansion could be funded in part by re-targeting of the MAM for under-five (and potentially PLW if the full DHS2014 confirmed similarly low prevalence levels) to hotspot areas, rather than nationwide support, and should be staged, with the next highest prevalence areas targeted first. The expansion should be combined with an expansion of the PD approach, and with research into the drivers of stunting and effectiveness of the PD components or its modality from the implementation area so the CO is clear what PD messages and communication methods have the highest impact in reducing the causes of stunting. The CO should monitor the levels of MAM in under-five in the expansion areas as the current implementation areas have seen decreases that may be attributable to the project. | However, comments on the expansion and the strengthening of the PD to increase effectiveness will be addressed | | | October – December 2015 Ongoing | |
| Recommendation 10: Strengthen information collection, quality, management, and analysis across the CP: Information management systems were seen to be weak and fragmented across the CP components resulting in incomplete, and sometimes unreliable, information. The CO needs to focus on the timeliness, quality, and systematic analysis of data collected to build a much stronger evidence base to support both strategic planning and improve operational decision making and efficiency. As the CP comes to a close at the end of 2017, the CO will need a strong evidence base from the CP to justify not only the scope and nature of any follow on interventions, but also the progressive handover of various CP activities to the Government. The upcoming WFP staffing review will be critical in ensuring that the CO has the correct skill sets in place to meet | Accepted: The CO commits to strengthening the information management system and to enhancing the quality and the analysis of the data collected in order to improve and demonstrate results. | -Develop an M&E Strategy that the Government will gradually adopt and own; Activities will include: - Support in development of monitoring tools - Data collection and analysis trainings - Support on development of a data management system - Training through mentorship and coaching in data analysis and report | M&E M&E/CO Management/HR M&E/Program me | Oct 2015 – June 2016 Oct – Dec 2015 | no yes no |

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| the challenges ahead. | | writing | | | |
| | | -Review staffing levels in the M&E unit both at CO and FO levels; | | | |
| | | -Strengthen oversight support to WFP FOs, Government counterparts and NGO partners in the districts to improve on the quality of data and minimize data gaps; | Program me/ M&E | Ongoing | no |
| | | -Strengthen the M&E Unit capacity to analyze and produce timely monitoring reports; | | | |
| | | -Strengthen linkages with Government counterparts and provide support on data collection including mobile real time data collection | M&E/ Program me | Jan – Dec 2016 | yes |
| | | | | Ongoing | |
| | | | | Ongoing | |