



USAID Title II Food Security Program
Opportunities Industrialization Centers International (OICI)/Guinea

Final Evaluation
August 10, 2009



Volume I: Report



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**USAID Title II Food Security Program
Opportunities Industrialization Centers International (OICI)/Guinea
Food and Livelihood Security in Pita and Telimele (FLSPT) Project**

**Final Evaluation
Volume I**

August 10, 2009

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Executive Summary

Project Overview

This report summarizes the principal findings for the external evaluation of the Food and Livelihood Security in Pita and Telimele (FLSPT) Project in Guinea, which was funded by the United States Agency for International Development (USAID) and executed by the Opportunities Industrialization Centers International (OICI). The evaluation was conducted over a 21-day period from May 20-June 13, 2009 by a five-person team of three external consultants and two external USAID evaluators.

The five-year project (FY04-FY09) was awarded a budget of \$6,081,938 in monetized commodities, 3,941 tons of commodities for direct distribution (DD) and Food for Work (FFW), \$1,222,200 in 202(e) funds, and \$1,007,145 in ITSH funds (Table 1.1). Under the terms of the cooperative agreement, Africare was responsible for the initial monetization (FY04-FY06); starting in FY07 OICI monetized its own products.

The project intervenes in six *sous-préfecture* (counties) of two of the most food insecure of Guinea's 33 rural prefectures outside the capital of Conakry—Pita and Telimele. The anticipated impact of the project's integrated strategy, which was organized into two strategic objectives (SOs) and six intermediate results (IRs), was expected to be a measurable increase in:

- **Food availability and access** as reflected in the project's impact indicators (average Months of Adequate Household Food Provisioning [MAHFP], Household Dietary Diversity Score [HDDS], crop productivity, technology adoption, and improved food conservation) and
- **Food utilization** based on the project's impact indicators for infant malnutrition and vulnerability to diarrhea diseases.

The baseline measurements, life of activity (LOA) targets, and achievements for these indicators are outlined in the project's IPTT (Indicator Performance Tracking Table) (Annex 1).

Summary Conclusions on Impact

The evaluators found there is widespread quantitative and qualitative evidence from the project's own internal monitoring and evaluation (M&E) system and government data indicating that the OICI FLSPT Project made measurable progress on every one of the IRs and SOs in the original Development Activities Proposal (DAP). Specifically, the project has achieved or surpassed (Annex I):

- Every one of the original targets for its monitoring indicators except those where there was a problem with the formulation of the indicator or those whose target was never adjusted after the mid-term and
- Every one of the original targets for its impact indicators except the indicator for MAHFP that had a completely unrealistic target of 12 months. If a more reasonable target of 8.5 months (similar to the ones set for other Title II programs

in West Africa and Guinea) had been used, the project would have been assessed as achieving over 100 percent of its impact indicator targets for MAHFP.

The impact of these activities is all the more remarkable given that:

- The OICI FLSPT Project intervened in far more villages than envisioned in the original DAP and DAP budget (see Chapter 1) (119% of the original target villages for agriculture [173 versus 150 villages] and 192% of the original number of target villages for health [289 versus 150 villages]) and
- The project's field activities were shut down for more than 12 months of the five-year project due to an eight-month delay in the transfer of the monetization proceeds during FY05 and a four-month national strike in FY07.

The project also developed a number of new activities not envisioned in the original DAP that targeted vulnerable groups. These included:

- Innovative uses of FFW on private fields to help vulnerable households adopt some of the technologies pilot-tested on the collective fields;
- Innovative uses of small distributions of food assistance to encourage women from the most isolated, vulnerable villages to participate in the district-level health activities; and
- A rotating livestock credit program to help the most vulnerable households strengthen their livelihood base.

Cross-Cutting Challenges

Despite the positive impacts, the project faces three major groups of cross-cutting challenges for its SO1 (agriculture and natural resource management), SO2 (health and nutrition) and commodity (i.e., FFW, DD, and monetization) activities.

- **Intra-Project Variation in Impact:** There are major measurable differences between some health districts and agricultural *groupements* in terms of participation in and benefits from project-initiated programs.
- **Critical Public-Private Partnerships:** The public-private partnerships the Guinea Government envisioned and supports as tools for sustaining these activities differ greatly in the agricultural versus health communities.
- **M&E:** Some of the indicators in the IPTT are difficult to measure and include the original targets from the DAP that were never modified once the need for modification was identified. These unrealistic indicators and targets have:
 - Given a false impression the project has underachieved many of its targets when in fact it has overachieved in most areas including the total number of households and villages affected and
 - Limited the project's ability to track its substantial impact on household and community-level vulnerability.

Priority Actions Needed to Address Constraints/Challenges and the Potential Value-Added Impacts of Addressing these Constraints

Based on the final evaluation analysis, the team identified (see recommendations for priority action follow-up on critical constraints to sustainability and impact, Chapters 2 through 4 and Table 5.1):

- A number of priority recommendations to be applied during the time remaining on the current project and
- A series of recommendations for future OICI (and USAID) programming in Guinea and other countries.

The short-term impact of addressing the 18 priority constraints for the duration of the FLSPT Project (second column, Table 5.1) would result in substantial value-added to the existing USAID investment in the project. Specifically, it would enable the project to:

- Address the crop extension constraints that impede food availability and access in about 40 percent of the villages that are less suitable for the proposed agricultural package (because of their physical isolation and/or land constraints);
- Build the basic capacity of the 30 percent of Village Health Committees *Comité villageois de santé or CVSSs*) that are still vulnerable; and
- Build the capacity of the CVSSs and their health-center partners to better sustain the project achievements in 100 percent of the 31 districts, given the weak ability of CVSSs and the Ministry of Public Health and Hygiene's limited capacity to sustain these at the present time.

To achieve this better targeting, the project needs to strengthen the capacity of its M&E system to target vulnerable groups. The project also needs to adjust some of its targets and indicators since a high percentage of the higher-achieving communities will graduate and some of the indicators have been set at unrealistic targets that will undoubtedly result in negative public and governmental opinion of what has been and promises to be a project with substantial and real positive impacts in the lives of people in Pita and Telimele.

List of Acronyms

ACDI/VOCA	Agricultural Cooperative Development International & Volunteers in Overseas Cooperative Assistance
ADRA	Adventist Development and Relief Agency
AER	Annual Estimate Request
APS	<i>Agents Promoteurs de Sante</i> (Health Promotion Agents)
AV	<i>Accoucheuses Villageoises</i> (Village Birth Attendants)
B/L	Bill of Lading
CCMT2	<i>Comite Consultatif pour la Monétisation du programme Titre II</i> (Consultative Committee for Monetization and Title II Programming)
CPN	Consultation Pré-Natal (Antenatal consultation)
CRD	<i>Communauté Rurale de Développement</i> (CRD) or Rural Development Community
CVS	<i>Comité Villageois de Santé</i> (Village Health Committee)
CS	Cooperating Sponsor
CSP	<i>Consultation en Soins de Santé Primaire</i> (Primary Health Consultation)
CSR2	Cooperating Sponsor Results Report
DAP	Development Activities Proposal
DD	Direct Distribution
DPS	<i>Direction Préfectorale de la Santé</i> (Prefecture Health Department)
FANTA	Food Aid and Nutritional Technical Assistance
FARN	<i>Foyer d'Apprentissage et de Récupération Nutritionnelle</i> (Hearth Model for Nutritional Rehabilitation)
FARN-E	<i>Foyer d'Apprentissage et de Récupération Nutritionnelle des Enfants</i> (Hearth Model for Nutritional Rehabilitation of children)
FARN-G	<i>Foyer d'Apprentissage et de Renforcement Nutritionnel des Gestantes</i> (Hearth Model for Nutritional Training and Reinforcement of Pregnant Women)
FLSPT	Food and Livelihood Security in Pita and Telimele
FFP	Food for Peace
FFW	Food for Work
FY	Fiscal Year
FSCCI	Food Security Community Capacity Index
GnFSI	Guinea Food Security Initiative (Africare Title II Project)
GNF	Guinea New Francs
Ha	Hectare
HDDS	Household Dietary Diversity Score
HQ	Headquarters
IARC	International Agricultural Resource Center
ICB	Institutional Capacity Building
IGAS	Income Generating Activities
IPTT	Indicator Performance Tracking Table
IR	Intermediate Result
ITSH	Internal Transportation, Storage and Handling
LDC	Less-Developed Countries
LOA	Life of Activity

M&E	Monitoring and Evaluation
MAHFP	Months of Adequate Household Food Provisioning
MD	Doctor of Medicine
MOU	Memorandum of Understanding
MS	Master of Science
MT	Metric Tons
MYAP	Multi-Year Assistance Program
NARC	National Agricultural Centers
NGO	Non-Governmental Organizations
NRM	Natural Resource Management
OICI	Opportunities Industrialization Centers International
PAVE	Profitable Agriculture & Village Extension
PEV	<i>Programme Elargi de Vaccinations</i> (Extended Immunization Program)
PhD	Doctor of Philosophy
SO	Strategic Objective
S/P	<i>Sous-Préfecture</i> (Sub-Prefecture or County Administrative Unit)
TBD	To Be Determined
USAID	United States Agency for International Development
USDA	United States Department of Agriculture
WFP	World Food Programme

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The team would also like to thank the various members of the team who made a major contribution to the mission—either in terms of a background chapter or special interviews and tables.

- BARRY Mohamed Lamine, the FLSPT monetization coordinator prepared a number of detailed pre-evaluation documents on monetization and warehousing.
- BARRY Mody Sory, the FLSPT commodity coordinator prepared detailed pre-evaluation documents and tables on the project's Food for Work (FFW) and distribution activities.
- Aliou BAH, the FLSPT health and nutrition coordinator helped coordinate the field visits for health and was critical to the team's ability to conduct the health and nutrition vulnerability analysis.
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Our own work would not have been possible without the assistance of various individuals:

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Chapter One Introduction

This report summarizes the principal findings for the external evaluation of the Food and Livelihood Security in Pita and Telimele (FLSPT) Project in Guinea, which was managed by Opportunities Industrialization Centers International (OICI). The evaluation was conducted over a 21-day period from May 20-June 13, 2009 by a five-person team of three external consultants and two external USAID evaluators. This chapter provides a brief overview of the background and goals of the project and its intervention area, the principal goals of the evaluation, and the evaluation methods. Chapters two and three provide overviews of the principal conclusions from the evaluation for the project's agricultural and health activities, respectively. Chapter four reviews the organization and impact of the project's commodity management including Food for Work (FFW), direct distribution (DD), and monetization. Chapter five summarizes the major conclusions and lessons learned for OICI and USAID. The annexes are included in a separate volume (Volume II). Annex I presents the most recent project Indicator Performance Tracking Table (IPTT). Annexes II through IV present additional background information on the project activities and administration. Annexes V through VIII include a list of the people interviewed, the revised scope of work, research tools, and the bibliography used during the evaluation, respectively.

1.1. The FLSPT Project

1.1.1. Project Background

Since 2005, OICI has coordinated a major Title II program that intervenes in the Pita and Telimele prefectures, which are two of the most food insecure of Guinea's 33 rural prefectures outside the capital of Conakry. Severe poverty, combined with the lack of other large-scale donors intervening in the area, compelled the Guinea government to develop a new Title II program in the region. The FLSPT Project is currently the largest and most successful bilateral and multilateral donor-funded initiative in both prefectures.

The five-year project was awarded a budget of \$6,081,938 in monetized commodities, 3,941 tons of commodities for direct distribution and FFW, \$1,222,200 in 202 (e)¹ funds, and \$ 1,007,145 in ITSH funds² (Table 1.1). Under the terms of the cooperative

¹ P.L. 480 Title II Section 202(e), requires the Office of Food for Peace (FFP) to make cash available to eligible organizations in support of Title II programs in order to: 1) assist them in establishing new programs under Title II and 2) help in meeting specific administrative, management, personnel, and internal transportation, and distribution costs for carrying out Title II programs (including monetization programs) in foreign countries.

² ITSH (Internal Transportation, Storage, and Handling) funding is available for in-country costs directly associated with the movement, management, and monitoring of P.L. 480 Title II commodities in all emergency programs and in non-emergency programs in less-developed countries (LDCs). A budget request for ITSH funds is submitted with the program proposal along with a justification of the need for items and services requested.

agreement, Africare was responsible for the initial monetization (FY04-FY06); since FY07 OICI has monetized its own products.

The project has two strategic objectives (SOs) and six intermediate results (IRs) (Table 1.2). The project was also expected to develop the basic capacity of local community organizations to design and execute food security activities in conjunction with the project, as well as to sustain these activities once project funding ended. The anticipated impact of the project's integrated strategy was expected to be a measurable increase in:

- **Food availability and access** as reflected in the project's impact indicators (average Months of Adequate Household Food Provisioning [MAHFP], Household Dietary Diversity Score [HDDS], crop productivity, technology adoption and improved food conservation) and
- **Food utilization** based on the project's impact indicators for infant malnutrition and vulnerability to diarrhea diseases.

The baseline measurements for these indicators and life of activity (LOA) targets for these indicators are outlined in the project's IPTT (Annex I).

1.1.2. Project Intervention Area

The original proposal outlined a progressive expansion of a series of project health and agricultural activities into the most vulnerable villages in six *Sous-préfectures* or counties—three in the prefecture of Pita and three in Telimele (Maps 1 and 2). However, due to the intervention model used, the project's health and agricultural activities did not always intervene in the same villages. Specifically:

- 139 villages (40% of the project villages and 30% of the villages in the two *prefectures*) benefited from the full range of project activities under SO1 and SO2;
- 40 villages (11% of the project villages and 9% of the villages in the two *prefectures*) benefited only from the project's agricultural activities under SO1;
- 173 villages (49% of the project villages and 37% of the villages in the two *prefectures*) benefited from only the health activities (e.g., growth monitoring, assisted vaccination, *foyer d'apprentissage et de récupération nutritionnelle* [FARNs]) that the project supported through the district-level *comité villageois de santé* or CVSs (village-level health committees); and

Another 116 villages (25% of the total villages in the two prefectures) did not benefit from any project interventions.

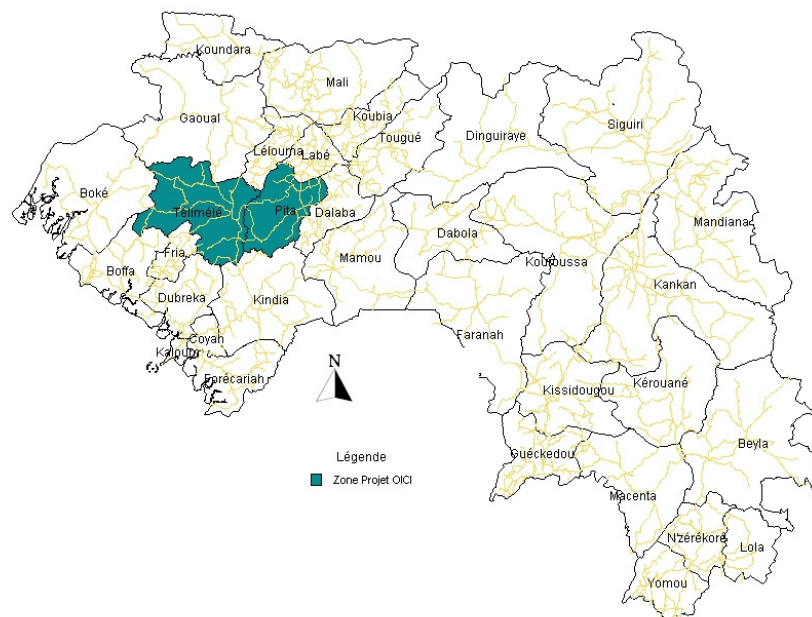
Table 1.1: Summary of FLSPT Resources Provided by USAID

Fiscal Year	Total Approved for Program					
	Direct Distribution (MT)	Monetization (MT)	Total Tonnage (MT)	Equivalent Monetization (US\$)	202(e) (US\$)	ITSH (US\$)
2005	470	1,960	2,430	1,559,760	145,295	149,733
2006	953	1,420	2,373	1,066,208	135,559	231,112
2007	918	1,410	2,328	1,201,120	168,700	205,400
2008	850	1,000	1,850	1,415,600	460,200	208,900
2009	750	650	1,400	839,250	312,446	212,000
Total Approved to Date	3,941	6,440	10,381	6,081,938	1,222,200	1,007,145

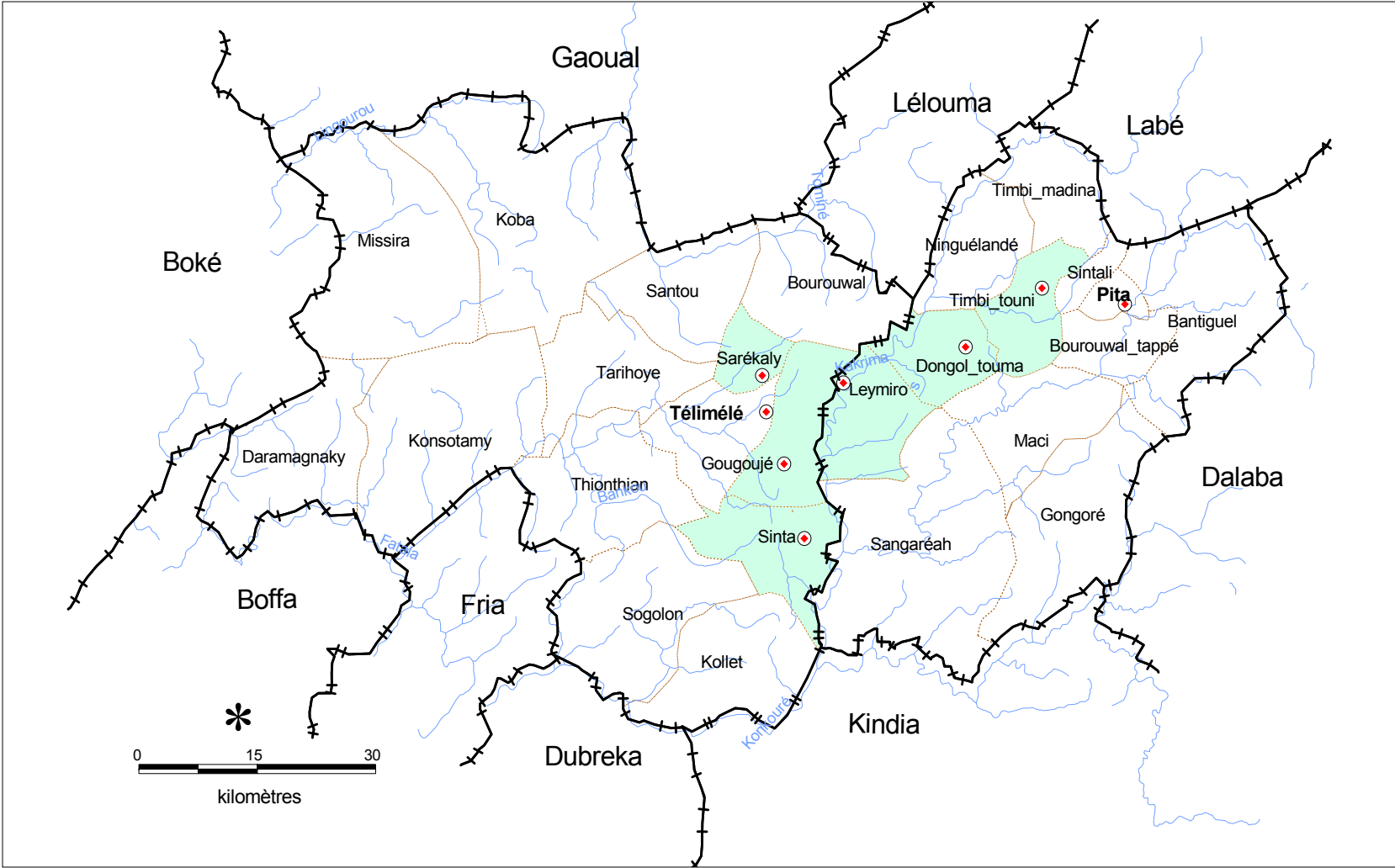
Table 1.2: Strategic Objectives and Intermediate Results of the FLSPT Project

SO1: Households in Telimele and Pita prefectures reduce chronic vulnerability through sustainable increases in food access
IR 1.1: Farmers reduce vulnerability through sustainable increases in food production and productivity
IR 1.2: Households enhance food access by reducing food and crop losses
IR 1.3: Improve economic access for poor households through infrastructure development
SO2: Communities enhance human capacity through improved health and nutritional practices
IR 2.1: Communities implement mother-focusing health and agent practices for vulnerable households
IR 2.2: Communities increase access to safe potable water
IR 2.3: Awareness of HIV/AIDS prevention/mitigation strategies reduce risk

CARTE DE LA GUINEE AVEC LES PREFECTURES DE PITA & TELIMELE

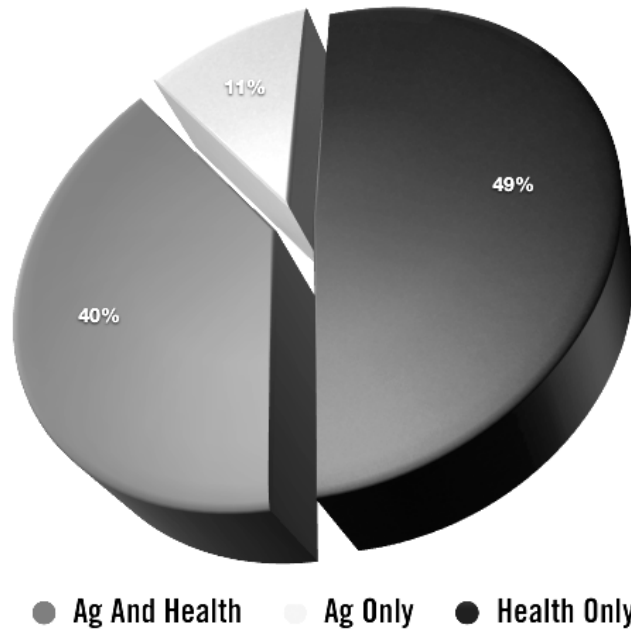


Map 1: Map of Guinea Showing the Prefectures of Telimele and Pita



Map 2: The Six Sous-préfectures where the FLSPT Project Intervenes

A. Percentage of FLSPT Project Villages with Different Patterns of Intervention



B. Percentage of Villages in the Six *Sous-préfectures* with Different Patterns of FLSPT Project Activity

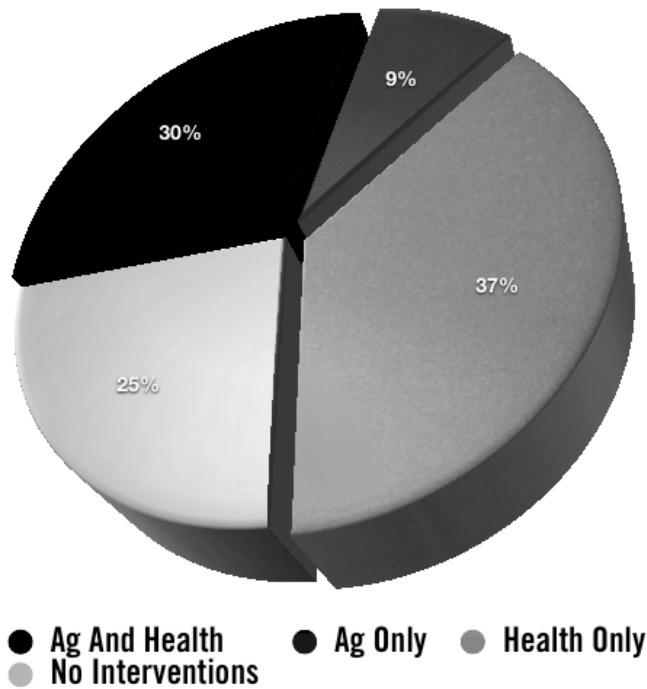


Figure 1.1: Percentage of Villages in the Six *Sous-préfectures* where the FLSPT Project Intervenes with Different Categories of Intervention

1.2. Final External Project Evaluation

1.2.1. Evaluation Objectives and Team Composition

In keeping with USAID/FFP regulations, the principal objectives of the final evaluation were as follows:

- **Project Strategy, Results, and Impacts:** Assess the population-level impacts of the project-supported activities, both direct and indirect, and any links between inputs and impacts based on the official indicators, as well as other qualitative and quantitative evidence;
- **Challenges for Sustainability:** Examine the potential for the target population and the local/national government or their agencies to sustain achievements of the program covered under the activities scheduled in the FLSPT Project;
- **Recommendations for Priority Actions to Increase Sustainability and Impact:** Make recommendations for short-term (i.e., duration of the project) activities that could strengthen project impact and likelihood of sustainability; and
- **Major Lessons Learned (for USAID and OICI):** Identify major lessons learned to be used by both OICI and USAID/FFP in future programming (based on an analysis of factors that contributed to and detracted from the project achieving anticipated results and impacts).

To fulfill these objectives, the evaluators conducted field interviews and collected additional data in the six *Sous-préfectures* where the project intervened to supplement the project's quantitative final survey, which was completed in May 2009. The members of the five-person external evaluation team were:

- US-based Team Leader Della E. McMillan with 10 years of experience in the design and evaluation of Title II field programs and 30 years of experience in design and evaluation of other types of development planning;
- Guinea-based Agricultural Engineer Mamadou Conte with eight years of experience in the execution of Title II programming in Guinea and 20 years of experience in the Guinea government's extension service with assistance from Agro-Transformation Specialist Alpha Amadou Barry, who has five years of experience in the execution and monitoring of Title II programming in Guinea;
- Guinea-based Medical Doctor Robert Tolnaud with field experience in the design and evaluation of community-based preventative health programs with the assistance of Dr. Mamadou Pathé BAH, head pediatrician for the DPS (*Direction Préfectorale de la Santé*) of Pita;
- Ibrahima Camara, a USAID/Guinea representative with 20 years of experience in agriculture and rural credit in Guinea; and
- Lori Du Trieuille a USAID/FFP representative from Washington, D.C. with over 10 years of experience in Title II programming, both prior to and during her affiliation with USAID.

The internal evaluation managers were OICI Country Representative Alpha Oumar Camara and FLSPT Monitoring and Evaluation (M&E) Coordinator Mohamed Lamine Yattara.

1.2.2. Evaluation Methods

The final evaluation was conducted through six main steps.

1.2.2.1. Step One: Pre-Evaluation Document Review

The evaluators reviewed project documents, including results of the recently completed quantitative final survey and the project's baseline and mid-term quantitative surveys, and worked with individual team members to develop "briefing" papers and tables that summarized the major project achievements for agriculture/natural resource management (NRM) (SO1); health and nutrition (SO2); monetization, FFW, and DD; and project management.



Left to Right: Lori Du Trieuille, USAID/FFP representative from Washington DC with Alpha Oumar Camara, OICI Guinea country representative and Dr. Robert Tolnaud during the background sessions that provided the basis for determining which sites to visit during the field portion of the evaluation.
(Source: D. McMillan)

1.2.2.2. Step Two: Initial Categorization of Villages by Level of CVS and Groupement Organizational Capacity as a Basis for Choosing the Site for the Final Evaluation Field Visits

As part of the pre-planning process, the evaluators worked with the FLSPT agricultural and health supervisors to divide the *groupements* and CVSs into three categories based on qualitative assessment of their organizational capacity that measured: (a) level of involvement in project activities, (b) collective funds mobilized, (d) planning capacity; and (e) participation in wider unions (for the agricultural *groupements*). These categories were:

- **Capacity 1:** Strong Capacity;
- **Capacity 2:** Average Capacity; and
- **Capacity 3:** Weak Capacity.

Based on this initial assessment, the evaluators then asked the project coordinators to pick one district CVS and one *groupement* in each of the three categories for each of the six *Sous-préfectures* (i.e., a total of 18 districts and 18 *groupements*). From each of these two groups of 18 the evaluators picked:

- Six health districts (each district covering a group of between 8 to 20 villages) for community-level field visits to evaluate health activities and impacts and
- Six *groupements* for field visits to evaluate agricultural activities and impacts.

Given the variation in project interventions (i.e., both agricultural and health activities were implemented in 40 percent of the project villages, only agriculture activities were implemented in 11 percent of project villages, and only health activities were

implemented in 40 percent of the project villages), the evaluators stratified their village sampling within the districts using these three categories.

1.2.2.3. Step Three: Field Visits and Interviews

Over 400 persons were interviewed either individually or in focus groups during the course of the evaluation field visits (Annex V).

Step 3.a. Stakeholder Interviews (Agriculture/Health): The external evaluation team conducted in-depth interviews in six health districts (20% of the total districts where the project intervenes) and six *groupements* (5% of the total covered by the project). The interviews were conducted by the two external evaluation experts on health and agriculture, respectively. Each expert organized focus group discussions with beneficiaries to supplement information gathered by the project's quantitative final survey, as well as more focused one-on-one interviews with key government and elected officials, including the national government-appointed representative (the *Sous-Préfet*), various representatives of the government's decentralized structures for agriculture, traditional religious and local leaders, teachers, and health and private service/input providers (e.g., seed merchants and livestock auxiliaries). When possible each expert interviewed the same categories of beneficiaries mentioned above at each location using the same standard interview guide (Annexes VI.A.1 and VI.B.1) to ensure more comparable interview data.

Step 3.b. Qualitative Vulnerability Assessments

Agricultural and Health Vulnerability Assessments: To gain a better understanding of these categories of impact, the evaluation team worked with each of the project's agricultural and health extension agents to categorize each of the *groupements* (in the case of agriculture) and each of the CVSs (in the case of health/nutrition) into three categories based on the response to a series of questions in two standardized questionnaires: one for agriculture (Annex VI.A.2) and one for the health CVS (Annex VI.B.3). This is in contrast to the ranking (1-3) that was done during the pre-evaluation (explained above). Each agent was also asked to identify some of the critical follow-on actions that were needed to sustain achievements for the project's remaining timeframe. Based on these criteria, each extension agent was asked to classify each of her/his *groupement* or CVS into three categories based on the responses to questions in the vulnerability assessment questionnaires (Annexes VIA.2 and VI.B.3):

- **Category C:** Still Vulnerable (little improvement)
- **Category B:** Situation Improved but Still Vulnerable
- **Category A:** Situation Improved and Strong Prospects for Sustaining FLSPT Supported Achievements.

Step 3.c. Site Visits to Interview Project Beneficiaries Affected by the Project's Rural Roads and Credit Component: Given the importance of the rural roads funded through FFW for achieving the project goal of increasing market access, team member Ibrahima Camara conducted a series of site visits and interviews concerning credit and road and

bridge building in each of the same villages where the team conducted the stakeholder interviews and visits to road segments.

Step 3.d. Site Visits to Interview Project Beneficiaries and Staff Associated with the Project's Food for Work and Direct Distribution Activities: Team member Lori Du Trieuille conducted random site visits to food storage facilities and interviewed stakeholders and food distribution committees in a sample of villages where stakeholder interviews were conducted.



1.2.2.4. *Step Four: Initial Analysis and Discussion with Project Staff*

Once the interviews were completed, the evaluation team spent three days drafting the results of the health and agricultural interviews and discussing these initial analyses with project staff.

Although most vulnerability assessments were conducted with project extension agents, evaluators tried to conduct a parallel assessment with the most relevant government partners when possible. One of the six Health Center directors, Dr. Amadou Sara Bah (Sarekaly, Telimele) (left), conducting vulnerability assessment of the district level CVS under his administration. His classification was identical to a separate assessment that was conducted with the FLSPT health extension, Mamadou Péthé Diallo (right). (Source: D. McMillan).

1.2.2.5. *Step Five: Preparation of Initial Conclusions and Debriefing at USAID*

Based on this analysis, evaluation Team Leader Della E. McMillan reviewed the results of the stakeholder interviews for health and agriculture and prepared an initial debriefing on the evaluation's findings and major lessons learned. These initial findings and lessons were discussed with three officers of the regional USAID/FFP: Senegal FFP Team Leader Zema Semunegus and Senegal FFP Food Aid Specialists Dramane Mariko and Kisma Wague.

1.2.2.6. *Step Six: Preparation of Draft and Final Report*

The team prepared a draft report that was reviewed and discussed with OICI project field staff including the representative for Guinea, the project coordinator and M&E supervisor in Guinea, as well as OICI food security staff in Philadelphia.

Chapter Two

Improved Food Availability and Access and Decreased Vulnerability (SO1)

2.1. Agriculture and Natural Resource Management Strategy

2.1.1. Intervention Site Context and Relevant Characteristics

The project intervention area is characterized by a uni-modal rainfall pattern with one distinct four-month rainfall season (June-September) and a shorter eight-month dry season (October-May). The area includes two major agro-ecological zones (Table 2.1):

- A flatter, higher rainfall plain with greater potential for irrigated counter-season gardening and
- A higher altitude, mountainous zone with greater competition for arable land with good potential for either rain-fed or irrigated agriculture, but also good opportunities for commercial livestock production.

Isolated, with limited access to major markets, the prefectures of Pita and Telimele have high rates of rural poverty and limited export production. Outside investment in agriculture and agro-forestry has been limited to a few isolated projects in the Timbi Plain. The most significant one was the PNUD/FAO GUI86012 (*Programme des Nations Unis pour le Developpement/Food and Agriculture Organization*) Agro-forestry (tree plantation) project that intervened in the Timbi Plain from 1981-1985 and 1986-1991. This project successfully reforested 2,715 hectares in the *prefectures* of Pita, Labe, and Delaba.

Table 2.1: Major Agro-Ecological Characteristics of the Project Intervention Area

Agro-Ecological Zone	Average Elevation and Rainfall	Rainy Season Cultivation	Counter Season Cultivation Potential	<i>Tapades</i> (Household Gardens)	Livestock Potential
Timbi Plain	Elevation: 1000 m Average rainfall: 2000mm	Food crop: maize, cassava Cash crop: potatoes	-Options for irrigated gardening -Large bush fields suitable for commercial crop production	Important source of family food and income that complements bush fields	Good potential for livestock during the dry season, but limited areas suitable for free-range grazing
Mountain Zone	Elevation: 1000-2000m Average rainfall: 1500 mm	Food crop: rice, cassava Cash crop: peanuts, cassava	-Livestock -More limited access to bush fields -Need to develop high value cash crops (like pepper) that can be grown under intensive cultivation practices on house fields	Critically important to household production due to mountainous terrain that limits bush fields	Good drainage and lower incidence of animal disease than the plains

Source: FLSPT Agricultural Unit. June 2009.

2.1.2. Core Strategy for Agriculture and Natural Resource Management

To address the project's identified agricultural assistance needs the project developed a three-pronged strategy to achieve the main strategic objective (SO1: households reduce chronic vulnerability through sustainable increases in food access). The three intermediate results (IRs) included:

- Promoting new crop and agro-forestry technologies to increase food and cash crop production (IR1.1),
- Improving crop storage facilities to reduce food losses (IR1.2), and
- Improving food security and dietary diversity for poor (i.e., vulnerable) households by addressing food access issues related to infrastructure development and rehabilitation (IR1.3).

A number of specific interventions were implemented by the project to achieve these three aims.

2.1.2.1. Groupement Capacity Building

The FLSPT Project activities under all three IRs of SO1 (IR1.1-1.3) were designed to be executed through *groupements* or farmer extension groups (Table 2.2). Therefore, facilitating the formation and providing training to these *groupements* was a principle focus. The project policy was to keep *groupements*' memberships between 25 and 30 and to encourage groups to split once the membership surpassed 30. Thus, a single village could have more than one *groupement*.

Once a village was nominated for participation in the FLSPT Project's agricultural activities,³ OICI conducted a series of basic public information sessions on the project to determine the villagers' level of interest in working with the project and to develop a legally recognized *groupement*. The final choice of intervention villages was based on identified need as well as level of interest. OICI refused to intervene unless both criteria were satisfied, and several of the nominated villages were rejected based on lack of interest. Once a village was accepted for the program, the project helped the village form an initial *groupement* and elect *groupement* leaders (e.g., president, vice president, secretary, and treasurer).

All *groupements*, irrespective of their official status, participated in project trainings that emphasized: (a) good government; (b) gender equity; (c) financial transparency; (d) the democratic election of management committees (*comités de gestion*) to oversee the *groupements* financial accounts and transactions; and (e) the importance of keeping judicial and administrative documents and financial records up-to-date. Since FY08, the basic training (as well as all retraining) has also emphasized the importance of creating unions that group together the *groupements* working in a specific *sous-préfecture* in order to sustain project activities and facilitate lobbying.

³ This initial nomination was made by the *sous-préfect* and/or the president of the Rural Development Community or (CRD or *Communauté Rurale de Développement*).

Once *groupements* received basic training, the project worked through them to:

- Demonstrate a host of new varieties of higher yielding seed and multi-use forest products for rainy season and counter season cultivation;
- Develop improved crop storage, cereal bank, food transformation, and conservation technologies; and
- Identify other constraints such as roads and bridges that reduced food availability and access, which the project could address through Food for Work (FFW).

The FLSPT Project provided twelve agricultural extension agents to assist in the development and training of the *groupements*. The extension agents lived in houses they rented at the district or *sous-préfecture* headquarters level, which located the agents close to the *groupements* they served. The extension agents were supervised by two supervisors⁴ with bachelor's-level training in forestry and agronomy (one in Telimele and one in Pita) and the OICI agricultural coordinator (BS, agronomy; MS, soil science). To supplement this core staff of extension agents (12), supervisors (2) and the agricultural coordinator (1), the project signed a series of contracts with national agricultural research centers and training centers, as well as various international and national consultants to supply seeds, training, and technical assistance.

2.1.2.2. *Technology Demonstration Trials*

More than 19 new varieties of crops and 13 new varieties of multi-purpose agro-forestry products were pilot tested under the project (Annex II, Table 1).

New Seed Varieties and Technologies for Dry Season and Irrigated Gardening: The initial contacts to obtain the higher yielding crop seeds were made by the OICI through the national agricultural centers and schools and the Tropical Sem seed company in Senegal (Annex II, Table 1). Starting in 2007, the project began ordering seed through local seed dealers for the *groupements*. The *groupements* organized payment and credit. Since then, some individual farmers and *groupements* in the project and some *groupements* that formed outside of the project have started to buy improved seeds directly from local seed dealers' collective and individual fields. Once the *sous-préfecture* level unions are formed, the project will no longer organize seed purchases for *groupements*.

OICI's ability to identify promising new crop varieties (heretofore never tested in this part of Guinea) from the major national and international agricultural research centers and seed companies, as well as its ability to develop the new system for composting (discussed in detail below), was facilitated by the fact that the agricultural coordinator is a MS-level trained agronomist and soil scientist with over 10 years of experience in agricultural research. To support these activities, OICI has (through the coordinator) signed various short-term contracts for seed provisions, training of staff and farmers, and technical services (e.g., special irrigation development activities and mango grafting).

⁴ Both supervisors started with the project and were promoted from field positions.

By the end of FY06, many *groupements* had built their capacity to the point that they were able to initiate their own activities to improve food security and agricultural production. One of the best examples of this were the large number of *groupements* who requested the project's assistance with the development of small, irrigated vegetable gardening plots in villages with access to dry-season irrigation. This is an activity that enables farmers to produce food and income during the six-month dry season, January-June, if they have access to an agricultural well.

Although not envisioned in the original DAP design, the project decided to embark on a modest program in FY07 to help farmers develop appropriate collective and individual plots for irrigation. This assistance included providing FFW for the development of composting and paying for the imported materials (cement, etc.) that the *groupements* needed to build or rehabilitate irrigation wells. In conjunction with this development of the site, the project used the extension agents as well as contractors to train the *groupements* in:

- Well construction⁵ and maintenance;
- Seed bed preparation and pest management control using locally available biological techniques (tobacco powder, powdered chili peppers (*piment*), etc.);⁶
- Marketing;
- Product conservation and transformation techniques; and
- Improved agronomic technologies, including the project's recommended system for above ground composting and improved seeds.

New Seed Varieties and Technologies for Agro-Forestry: The same high-quality staff, with strong links to the major national training and research centers, helped the project develop a highly innovative model for community-based agro-forestry. The original DAP envisioned the creation of small community forests on collective land of 1.0 hectare (ha) each. Fairly quickly, OICI discovered the *groupements* had almost no interest in developing community forests. Most villages have very little free land suitable for agricultural cultivation. Even when land was available, farmers feared they would lose their land tenure rights if they lent the land for a community forest, based on past experiences with the Guinea forestry service. Therefore, it was extremely difficult for any *groupement* to gain even temporary title to an area they could use for community forests.

For this reason the project quickly shifted the focus of its NRM activities from the promotion of community-based agro-forestry to a series of activities designed to promote individual farmer's adoption of a group of integrated systems of agro-forestry technologies that include:

- Planting *haies vives*, or living hedge rows, using fast growing trees such as acacia as wind breaks around the house fields and larger fields away from the house that

⁵ To date, the FLSPT Project has constructed or rehabilitated 22 agricultural wells. All wells were constructed or rehabilitated on existing communal irrigation plots or borrowed land (if the *groupement* could show at least 10 years of continuous occupation of the site) to avoid land tenure disputes.

⁶ Biological protection is critical for vegetable and tree seedling production.

- serve multiple purposes including windbreak as anti-erosion cover, mulch from the leaves, fuel wood, and construction timber;
- Planting fruit trees for household food and sale in association with the *haies vives*; and
- Planting high value wood crops for sale in association with the *haies vives*.

Working through the established *groupements*, OICI extension agents encouraged individual farmers to adopt this integrated system on both their small, very intensive house fields (0.25 ha), as well as their larger “bush” fields both on their house plots and fields and in public places such as cemeteries, health center, schools, and outdoor mosques that were already clearly delineated as collective land (i.e., not subject to any land tenure disputes).

The initial demonstration trials of the integrated agro-forestry system, including *haies vives*, fruit trees and high value woods, were organized in 2006 with a small number of farmers (about 10) in each of 20 *prefectures*. The project tracks the number of seedlings produced by each *groupement* for each plant variety and where these are planted (i.e., private nurseries, private forest, *brise vent* (wind break), *haie vive* (live fences), and hillside erosion control and reports this in its quarterly reports.

By 2007, the *groupements* and individuals within the *groupements* were demanding more sophisticated, higher-yielding, and more profitable fruit technologies. In an especially important development, they were requesting new techniques for grafting which better protected plants from diseases that plague oranges, avocados, and mangoes.

2.1.2.3. *Agricultural Loans and Savings*

Given the weak development of micro-credit institutions in both *préfectures*, OICI offered the new seed to farmers for their individual plots as no-interest loans. One condition of farmers receiving credit was their agreement to adopt some of the new technologies for intensifying compost production. Loans were repaid after the harvest, which is in November/December for rainy season crops and in May/June for dry season crops.

The harvest from the group fields was then stored, often in a project constructed storage unit, and eventually sold when market conditions were optimum. The revenue from the crop sales was returned to the *groupement*'s *caisse*, or savings, which was then used to provide project inputs for the following season. Under normal circumstances (i.e., without a crop failure or price collapse that prevented *groupements* from making a profit on their collective fields) most *groupements* were able to self-finance their agricultural inputs after the second year.

2.1.2.4. *Post-Harvest Loss Management and Marketing*

Given the critical problem of farmers selling for a low price immediately after harvest, the project emphasized new methods of reducing post-harvest loss and improved

marketing starting in the first year. This was done both through better “hardware” (i.e., the construction or rehabilitation of storage units) as well as “software” (i.e., better systems for managing stored crops, food processing, and transformation techniques). Over time, as *groupements*’ capacity and production increased and they embraced a wider range of products (such as vegetable and fruit products as well as cereals), the project helped develop an ever-expanding sophisticated slate of technology options.

2.1.2.5. *Food for Work*

Food for Work (FFW) was used to:

- Compensate workers involved in development and rehabilitation of 208.5 kilometers of roads and 33 bridges that the village level *groupements* identified as major impediments to economic development,
- Facilitate vulnerable people’s willingness and ability to pilot test the project-endorsed composting and agro-forestry techniques on their collective and private fields, and
- Provide temporary compensation for the project-trained livestock auxiliaries and community-based literacy teachers.

2.1.2.6. *Special Programs Targeting Vulnerable Groups*

In addition to the core development program, the project developed a series of activities designed to build the livelihood systems of the most vulnerable households. These included:

- The use of FFW to enable the most vulnerable households, including female-headed households and disadvantaged groups such as potters and former servant groups without access to land, to invest in new labor-intensive soil conservation measures (most notably the new technologies for above-ground rapid composting and agro-forestry) and
- A system of rotating livestock credit whereby women from vulnerable groups were given access to a seed herd of goats and/or chickens for one to two years that they passed on once they had reconstituted a core herd for their personal use.

2.1.3. Anticipated Evolution of the FLSPT Project Strategy

The project model envisioned a progressive strengthening of *groupement* capacity over a five year period that would facilitate more and more independent technology trials and extension, self-financing of agricultural inputs, and improved post harvest marketing and transformation from group savings, or *caisses* (Table 2.2). The plan was that these activities could eventually be sustained by the *groupements*, who at that time would be organized into unions and sub-unions, through the network of public and private sector agricultural services in the area (see Phase IV, Table 2.2).

Table 2.2: The Anticipated Evolution of the OICI/FLSPT Project SO1 Capacity Building Model for the *Groupements* and Villages

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
<i>Groupement Capacity Building</i>				
<i>Groupement</i>	<p>Basic organizational capacity of the <i>groupements</i></p> <p>OICI facilitates <i>groupements</i> registering with the government</p>	<p><i>Groupements</i> are able to operate independently and begin to build the size of their <i>caisses</i> and activities</p> <p><i>Groupements</i> are registered and have organized <i>Comités de gestion</i></p>	<p><i>Groupements</i> are able to operate independently, manage <i>caisses</i> and initiate contacts to form unions</p>	<p><i>Comité de gestion</i> (management committee) provides the principal contact between the <i>groupement</i> and (in collaboration with the union): (a) the <i>sous-préfecture</i> unions; (b) the government livestock and agricultural services (in the <i>sous-préfectures</i>); (c) private an public sector seed supply; and (d) OICI and other partners</p>
Training themes	<p>Basic organization (including good governance) and financial management of a <i>groupement</i></p>	<p>-Retraining on basic themes (good governance, management)</p> <p>-Retraining introduces the concept of unions</p>	<p>-Retraining on basic themes (good governance, management)</p> <p>-Facilitate the registered <i>groupements</i> organizing themselves into <i>sous-préfecture</i> -level unions that might eventually be organized into <i>préfecture</i> level federations</p>	<p>OICI works through unions to organize additional <i>groupement</i>-level training in the basic principles of <i>groupement</i> organization for new <i>groupements</i> and the process of organizing and maintaining unions for more established <i>groupements</i></p>
<i>Groupement unions (Sous- préfecture)</i>			<p>Concept is introduced and inter-<i>groupement</i> contacts are facilitated</p>	<p><i>Sous-préfecture</i>-level unions become the principal mechanism for contacts between the <i>groupements</i> and public, non-governmental organizations (NGOs) and private sector partners</p>

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
IR 1.1: Technology Trials, Extension, and Support				
Rainy-season crops (food and cash) & new intensive composting techniques (in field and house plots, or <i>tapades</i>) multipurpose agro-forestry (soil protection, fruit trees, and high value trees for sale, fuel wood) counter season gardening (with and w/o) wells	Extension agent managed on collective field	Intensive extension agent monitoring of farmer-managed trials on group and individual plots and identification of other constraints to increased production (storage, marketing, etc.) and solutions to these problems		- <i>Paysan</i> (Farmer) leaders are the principal contact between the project, with government for technology development (research, extension) - <i>Comité de gestion</i> plays a lead role in managing all partner contacts that involve money or managing contracts
Farmer leaders (leader <i>paysans</i>) & farmer-level technical training		Identification, capacity building and formal training of individual farmer leaders (<i>paysan</i> leaders, 1-2 per <i>groupement</i>) as the key contact points for demonstration trials and other activities		
IR 1.1: Agricultural Loans and Savings (<i>Caisses</i>)				
<i>Caisses</i> (Savings)	-Basic concept introduced with farmer contributions -Initial development <i>caisses</i>		-Use of contributions and cash earned from crop sales on collective fields to expand the size the <i>caisses</i> -Encourage to make small production loans	Encouraged to make small loans members
Input Loans	Project provides inputs	Input loans	Input loans	No more input loans
Micro credit and banks			Encourage <i>groupements</i> to work through unions to put their <i>caisses</i> in banks and to establish linkages with micro-credit institutions	Through unions, <i>groupements</i> are aware of local opportunities for micro credit with minimal transition support from OICI

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
IR 1.2: Post-Harvest Management and Marketing (Food Access)				
Storage units/cereal banks	Identification of needs for post-harvest management and conservation and construction of most urgently needed group storage units	Initial project support for: -Village has at least one improved storage unit -Farmers trained in improved storage management and marketing techniques -Systems for independent management of storage units established	-Additional project and <i>groupement</i> /individual funded expansion of improved storage units -Village has a cereal bank	Sustainable management of existing units by <i>groupements</i> with minimal transition support from OICI
New technologies for conservation and processing	Extension-agent managed trials	Extension agent supervision of farmer-managed trials	Individual farmers become experts on specific technologies, create small business (enterprises) and deal through the project with private sector dealers for replacement parts and new technology	Individual farmers and groups of farmers are able to sustain existing technologies and identify new technologies to assist them with minimal transition support from OICI
Special Programs Targeting Vulnerable Households within <i>Groupements</i>				
IR 1.1 (Improved Food Availability for Vulnerable Groups): Use of FFW to support labor-intensive investments on private fields				
--Distribution of FFW to vulnerable women (identified by their <i>groupement</i>) ⁷ to enable them to build above ground rapid composting on their house fields		Initial construction of the above ground technology for rapid composting on a house field		
--Distribution of FFW to vulnerable women (identified by their			Introduction of complementary technologies (improved poultry and small	

⁷ These vulnerable women were identified by the *groupements* based on personal knowledge (i.e. qualitative information). Although some of the initial women chosen for this program were probably not the most vulnerable in the women, their choice was justified based on the need to build grassroots support. The team's general impression is that after the initial distributions, the *groupements* did target the most vulnerable women.

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
<i>groupement</i>) to enable them to adopt new agro-forestry techniques on their house fields			ruminant production systems, etc.)	
IR 1.2 (Improved Food Access for Vulnerable Groups): Rotating livestock credit program for vulnerable women				
-- <i>Groupements</i> receive an initial allocation of animals for a small number of vulnerable women		Interested <i>groupements</i> are encouraged to identify vulnerable women to benefit from rotating livestock credit program	The initial group that received the animals pass the progeny and/or progenitors on to other vulnerable households in their <i>groupement</i>	
--Diffusion of improved animal races				
--Project trains additional livestock auxiliaries with the expectation that these will give priority to backstopping the rotating livestock credit programs		<i>Groupements</i> work with livestock auxiliaries to ensure regular vaccination and health care		
Food for Work and Direct Distribution (IR 1.1-1.3)				
IR 1.3: Use of FFW and project resources to build roads and bridges		<ul style="list-style-type: none"> -Identification of needs for isolated villages for roads and bridges -District level: Election of food distribution committees to collaborate with the project on the allocation of FFW connected with village infrastructure projects. -Village level: Creation of two committees: <ul style="list-style-type: none"> ----<i>Comité de gestion</i> to help organize the work -- i.e. identification of activities, preparation of a list of eligible workers, distributing food to the workers once completed; and ----<i>Comité d'entretien</i> to help with maintenance. 		<p>FFW possible for additional infrastructure maintenance and construction if resources exist</p> <p>Community-level (i.e., non-project) leadership on any additional FFW activities through the management committee (<i>Comité de gestion</i>) based on the established guidelines of OICI or WFP (World Food Program) (depending on donor source)</p>

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
IR 1.1: Use of FFW to promote new higher yielding labor intensive technologies		See “Use of FFW to Support Labor Intensive Investments on Private Fields” above		
IR 1.1: Use of FFW to compensate the “volunteer” literacy teachers		Use of FFW to compensate teachers in <i>groupements</i> who created literacy centers		

Source: FLPST Final Evaluation Interviews, May-June 2009.

2.2. Measured Impact of the Project and Final Evaluation Findings

2.2.1. Monitoring Indicators

Although training activities for SO1 began on time during the first year, there was a year delay in project funding for the SO1 field activities. In addition, major disruptions occurred for all project activities in the third year due to the national strikes. Despite these interruptions in project activities, the project seems likely to achieve (i.e., is within 75% of the original targets) or over-achieve on all but three of the 14 official monitoring indicators (Table 2.3).

The project achieved impressive results in many of the monitoring indicators. The most notable are:

- Number of farmer committees formed and functional (i.e., official registered) (126% of target);
- Number of farmers who adopted new technology (211% of target);
- Number of nurseries installed (200% of target);
- Number of soil improvement recipients (186% of target);
- Number of demonstration plots (374% of target); and
- Number of *Tapades* (house fields) improved with the proposed model for intensive agro-forestry cultivation (including composting, agro-forestry, and small-scale livestock production (310% of target).



Impact: Accelerated Uptake of New Higher Yielding Crop and Forestry Technologies. Irrigated area cultivated by the Windekali Groupment at Gougoudjè (Télimélé).

Source: OICI, 2nd Quarterly Report FY09

Another important achievement that isn't tracked in the IPTT was the successful execution of the livestock rotating credit program (Annex II, Table 3). To date this program has distributed 2180 animals (254 small ruminants [sheep and goats], 926 hens, and 800 improved roosters).

The three monitoring indicators for which the project does not seem likely achieve the anticipated results are:

- Hectares of community forests installed,
- Number of improved storage units installed, and
- Number of bridges built or rehabilitated.

Table 2.3: FLSPT Project Results Based on the Official Project Monitoring Indicators (FY01-FY05)

Indicator	Baseline	FY05		
		Target	Achieved	% Achievement vs. Target
IR 1.1: Farmers reduce vulnerability through sustainable increase in food production and productivity				
# Farmer committees formed and functional (i.e. officially registered)	2	115	145 ⁸ (officially registered) 219 working with project	126% (officially registered)
# Farmers adopt new technology	27	2277	4810	211%
Ha. Under sustainable management	28	553	780.96	141%
# Nurseries installed	0	92	184	200%
% Tree survival	n/a	95%	77.49%	82%
# Soil improvement recipients	0	2000	3728	186%
Ha. community Forests	0	650	153	24%
# Demonstration plots	0	125	467	374%
# <i>Tapades</i> (house fields) improved	0	600	1858	310%
IR 1.2: Households enhance food access by reducing food and crop losses				
# Improved storage units installed	0	150	80	53%
# Women trained in food processing and preservation	0	1525	2142	140%
# Community cereal banks installed	0	120	96	80%
IR 1.3: Improve economic access to food for poor households through infrastructure developed				
Road rehabilitated (km)	0	310	208.5 (as of June 2009—258)	67% (as of June 2009 89%)
# Bridges built/rehabilitated	0	75	33	44%

Source: Annex I, FLSPT IPTT and updates from YATTARA Mohamed Lamine, OICI Guinea M&E coordinator, May-June 2009.

2.2.1.1. Monitoring Indicator: Hectares of Community Forests Installed

The chief area where the IPTT suggests that the project is seriously behind in achieving its original targets for SO1 is in the development of community forests (240 ha versus the target of 650 ha or about 36 percent of the original DAP target). This is because the project never modified the DAP targets after the project strategy was changed (see section 2.1.2.2. above).

⁸ If this figure included the total number of *groupements* with which the project works (i.e., those registered as well as non-registered) the total would be 219 *groupements* which would represent 151% of achievement of the original target figure.

Instead of modifying the original DAP indicator—which focused on the creation of community forests (in terms of the number of ha planted)—the project divided the total number of trees distributed⁹ to individuals and *groupements* for sowing on their individual fields by the density of trees recommended for community forests. This is how the project arrived at the LOA figure for achievement—153 hectares or 24 percent of target (Table 2.3).

Given the shift in strategy, a more realistic indicator would have been “number of households participating in the agro-forestry activities that have adopted the minimum recommended system” (i.e., 5 fruit trees and 50 agro-forestry trees planted in hedge rows) for both *tapades* (house fields) and bush fields. If this indicator had been used, it would have tracked the project’s progress from “0” households practicing the system to the current levels achieved, which was estimated to be around 80% of the 1858 households (who have adopted the intensive *tapade* system), which is a major achievement in the short space of four years.¹⁰ Unfortunately, the staff did not change indicator during the mid-term evaluation which is a major lesson learned that OICI needs to monitor more closely in future projects.

2.2.1.2. *Monitoring Indicators: Number of Improved Storage Units Installed and Number of Community Cereal Banks Installed*

The first storage silos constructed by the project and tracked through this indicator (“number of improved storage units installed,” 53% of target, Table 2.3) had a direct positive impact in terms of protecting community seed stock and food stock and increasing food access by enabling farmers to reduce their cash expenditure for food during the lean months (just before harvests) when prices spike. Due to budget shortages which made it difficult to achieve both targets for indicators that addressed storage facilities (this indicator and “number of community cereal banks installed”).



Impact: Reduced Storage Losses. Storage Silo.
Source: OICI/G, 2nd Quarterly Report FY09

Therefore, the project chose to emphasize the lower cost option of cereal banks over silo storage units. As a result, the IPTT shows

- Low achievement on the indicator “number of improved storage units installed” (53% of target) compared to
- Better achievement (80%) of the indicator “number of community cereal banks installed.”

⁹ Since 2005, the project has facilitated individual farmers planting over 600,000 seedlings in household and bush fields and collective public places.

¹⁰ Estimate made by the Agricultural Coordinator, May 2009.

Although this strategy shift was clear by mid-term, the LOA target for the first indicator (“number of improved storage units installed”) was never modified.

2.2.1.3. *Monitoring Indicators: Number of Bridges Built/Rehabilitated and Kilometers of Road Rehabilitated*

Unfortunately, the original budget underestimated the cost and technical complexity of building and rehabilitating bridges. Unlike the roads rehabilitation activity (which has achieved 67% of target and is likely to achieve 89% of target by the end of FY09), a lower portion of the cost for bridges was financed through FFW, meaning the project had to invest more of its grant and monetization funding into bridge construction than originally anticipated. Although the budget problem was discovered early on and well documented, the LOA target for bridges was never modified in the official IPTT.

Even with these budget problems, the road and bridge construction activities have been greatly appreciated by project beneficiaries both in terms of market access (via repaired or newly constructed roads and bridges) and through the opportunity to receive food for working on this construction. Elected and non-elected government officials and villagers interviewed during the final evaluation field work were also greatly appreciative and provided anecdotal evidence of the positive impact of this component of the project.

Based on the project’s pre-evaluation matrix for SO1 (which plotted project activities by *groupement*):

- Twenty-one (29%) of the 72 FLSPT facilitated *groupements* (covered by the matrix) in Pita and eight (13.1%) of the 61 FLSPT facilitated *groupements* were directly involved in road rehabilitation and reconstruction (i.e., received FFW in return for the work) (Annex II, Table 8) and
- More than half of the project villages (roughly estimated at 67%)¹¹ have benefited directly or indirectly from the development of roads using FFW.

Based on the final evaluators’ random interviews with project beneficiaries and government officials, it is clear that this component of the project:

- Had a direct and measurable impact on food production in some villages by reducing the cost of inputs and facilitating new technology adoption,
- Improved food access by facilitating farmers’ access to more competitive markets with higher prices, and
- Improved food utilization by making it easier for some villages to access both government- and project-sponsored health services.

Unfortunately, the FLSPT Project IPTT did not include any indicator to track the wider impact of the roads or bridges, nor was there any attempt to study this impact in the quantitative baseline survey. This was a missed opportunity and a lesson learned for future OICI and USAID/FFP funded projects that use FFW for road and bridge construction and rehabilitation.

¹¹ Estimate based on calculations using the activity matrices by the OICI Guinea M&E Coordinator with input from staff, personal communication July 24, 2009.

2.2.2. Official Impact Indicators

Overall, FLSPT achieved impressive results on every one of its SO1 impact indicators except those with unrealistic targets (Table 2.4). This includes:

- A substantial increase in yields for the two principal crops:
 - Rice (from 400 kg at baseline to 1,830 kg in FY09, 89% of the LOA target) and
 - Maize (from 600 kg at baseline to 2,400 in FY09, 82% of the LOA target),
- An important increase in dietary diversity¹² (from four products at baseline to seven in FY09, 100% of target),
- High rates of technology update (221% achievement of the target for the indicator “number of farmers adopting new technology”), and
- Reduced storage losses (75% achievement of the target for the indicator “percent reduction in crop loss during storage”).

The one measured impact indicator that indicates poor achievement was “Months of Adequate Household Food Provisioning (MAHFP)”; a fourth indicator (“percent increase in marketed production”) was never measured (Table 2.4).

2.2.2.1. Impact Indicator: Months of Adequate Household Food Provisioning

Although the global record of the FLPST Project in achieving its SO1 impacts based on the project’s official impact indicators is very positive, the project’s achievement on the one of the most important of these indicators, the Months of Adequate Household Food Provisioning (MAHFP), appears sub-standard at 50 percent of target (although in reality the impact was much more impressive than the impact indicator demonstrates). The LOA target for this indicator (12 months, when it was measured as 5 months at baseline) is completely unrealistic in this area of Africa. A far more reasonable indicator, based on a comparable Title II project in the Dinguiraye region of Guinea (the Africare Guinea Food Security Initiative or GnFSI), would have been 8 months (0.5 months higher than what Dinguiraye project used as a reasonable LOA target in an area with lower rainfall). If the target for this indicator had been revised to this more reasonable level after the mid-term, the rate of achievement would have been 106 percent of target versus 50 percent. As it stands the best way to read impact on this impact indicator (given the unrealistic target that was set) is to report that the project improved household food access by adding an average of 3.5 months of adequate household food provisioning for the beneficiary population (Table 2.4).

2.2.2.2. Impact Indicator: Percentage Increase in Marketed Production

The project never managed to measure one of the indicators (“percentage increase in marketed production”) and as far as the final evaluation team could tell the project never requested nor received permission to delete the indicator from the IPTT.

¹² Using the standard FANTA guidance based on a random sample of households in villages that benefited from the project’s agricultural interventions.

Table 2.4: Baseline and FY09 Measures for Official Impact Indicators for the FLSPT SO1 Activities (Note: rows in blue indicate new data added for comparison)
(Note: bolding added for emphasis on targets)

Indicator	IPTT vs. Raw Data	Baseline Measures	FY09		
			Targets	Achieved	% Achieved against Target
Increase in # months food provision per year (MAHFP)	Indicator	5.0 months	+7.0 months (12 months)	+3.5 months (8.5 months)	50%
Comparable data on the Title II GnFSI Project in Dinguereye Guinea	Indicator	Original ¹³ villages (4.9 months) New villages: (4.38 months) ¹⁴	Original: .7.5 months (total) New Villages 6.5 months (total)		If FLPST is measured against this more reasonable target: 106% (of 8 month target) 113% (of 7.5 target)
# of different foods in diet (Dietary Diversity Index)	Indicator	4	7	7	100%
# increase in rice yields (T/ha)	Indicator	0.4	1.6	1.43	89%
# increase in corn yields (T/ha)	Indicator	0.6	2.2	1.80	82%
# farmers adopt new technology	Indicator	27	2277	4810	211%
% increase in marketed production	Indicator	Never measured			0%
% reduction in crop loss during storage	Indicator	25% ¹⁵	4%	3%	75%

Source: Annex I, FLSPT IPTT and Project Records.

2.3. Other Evidence of Impact

Based on stakeholder interviews during the final evaluation field work and project records, the evaluation team identified a number of other areas where the FLSPT Project has had a major impact on food availability, access, and utilization that was above and beyond what could be documented by the official M&E data in the IPTT (Table 2.5).

¹³ Villages where the project had already intervened for periods ranging from three to five years.

¹⁴ Based on an average of the three baseline measurements in the GnFSI IPTT: 4.9 months, 3.77, and 4.46.

¹⁵ This indicator was not measured during the project's quantitative baseline survey which made it difficult to establish reliable targets and measurements.

Table 2.5: Other Evidence of Impact of SO1 Activities on Household Food Security and Household and Community Level Vulnerability

FFW Activity Impact	Improved Food Availability	Improved Food Access	Improved Food Utilization	Reduced Community Level Vulnerability	Reduced Household Level Vulnerability
Accelerated uptake of new higher yielding crop and forestry technologies	X	X	X (greater dietary diversity and new medicinal plants)	X	X
<i>New higher yielding crop and tree varieties</i>					
<i>New high speed composting technology</i>					
More diversified agricultural calendar and production	X	X	X (greater dietary diversity)	X	X
Enhanced rural savings and credit capacity	X	X		X	X
Stronger rural organizational and financial capacity	X	X		X	X
Greater capacity to backstop small-scale livestock production		X			X

Source: Final evaluation interviews. June 2009.

2.3.1. Accelerated Uptake of New Higher Yielding Crop and Forestry Technologies

One major indirect impact of the project has been to accelerate the diffusion and adoption of new crop and soil fertility technologies that had been developed by Guinea’s National Agricultural Centers (NARC) and national agricultural education institutions in collaboration with various International Agricultural Research Centers (IARCs).



2.3.1.1. New Higher Yielding Crop and Tree Varieties

Four of the best indicators of the success of the new seed varieties promoted by the project are: (a) the high levels of demand for the improved seed despite its price no longer being subsidized, (b) the fact that several private sector input suppliers now sell the improved seed varieties, (c) use of

Impact: Private Sector Distribution of Tree Varieties Introduced by the Project. Village merchant at Madina Telico selling a seedling that was sold to him by one of the members of a FLSPT groupement who created his own commercial tree nursery.

Source: D. McMillan

higher yielding varieties of crops and trees by farmers outside project,¹⁶ and (d) that a growing number of the farmers are developing their own commercial tree nurseries (Annex II, Table 1). Based on farmers' enthusiasm for the new system and the high rates of tree survival, every one of the active OICI *groupements* requested a nursery and on-site training in FY07. Today the *groupements* operate 119 nurseries, some of which serve two or more villages, and a growing number of individuals have started their own nurseries from which they grow seedlings for themselves and for sale to others.

2.3.1.2. *New High Speed Composting Technology*

Even with high demand for improved seed, in the absence of improved soil fertility techniques it is highly unlikely that a "seeds alone" approach would have had a major impact in crop production in the area villages. A second major impact that was widely appreciated by the beneficiaries, as well as area extension services, was the introduction of a radical new system of rapid/high speed (17 day) composting and the use of FFW to help farmers pilot test the new technology. This new technology, combined with the improved seed, is responsible for the higher yields that farmers have experienced on their house and bush fields. Even when considering the higher labor inputs, the technology "update" has been dramatic (310% of target for improved *tapades* [intensively farmed house fields]; 374% of target for demonstration fields) in villages with access to FFW to jumpstart the labor requirements for the composting technology and profitable cropping systems [i.e., irrigated gardening and/or high yielding cash crops].¹⁷

2.3.1.3. *Rapid Extension of Irrigated Gardening*

Prior to the project, irrigated farming was minimal. Today, 179 of the 219 *groupements* with which the project works practice irrigated farming. Project data show that access to irrigation was a major factor that contributed to development of internal *groupement caisses* (savings) that farmers use to develop income generating activities (IGAs) (Table 2.6). The food produced was also a major contributor to dietary diversity of the

¹⁶Other non-associated farmers (i.e., farmers from outside the project villages) have adopted the seeds and very often place orders through the project extension agents. Although the project continues to provide seed on loan many varieties are available from local input dealers. One female merchant based in Pita traveled to Senegal every two weeks to fill orders placed by local seed dealers, the project, and local farmers for many of the varieties that OICI introduced. The emerging capacity of private sector dealers in Pita and Telimele to supply project beneficiaries with new seed is a major factor that makes it highly likely that the project impact on new variety development will be sustained and increased over the next 10 years. The chief exception is potatoes, where current demand already outstrips the ability of a federation to supply the demand. One possible solution being considered by the project is to facilitate one or more *groupements* and/or individuals, such as a retired extension agent with experience in potato cultivation and seed production, to develop a local business producing potato stock. If the supply constraint is resolved, potato production in the plains could take off and revolutionize agricultural production in the entire zone given the ever-growing producer demand from within Guinea and some adjacent countries including Senegal, Sierra Leone, and Liberia.

¹⁷As discussed in the next section on sustainability, the evaluation's clustering of *groupements* by level of agricultural output shows the seed-composting package was not equally successful in all villages. Especially important, the seed package was less well adopted in the mountainous villages. These same villages in the mountains were less able to benefit from FFW both on cooperative and private fields.

Table 2.6: Agricultural Calendar for *Groupements* Before and After the Project Intervention (Note: X=activity existed before project; #=new activity introduced and expanded under the FLSPT Project)

Activity	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Bush field cultivation					X	X	X	X	X	X		
<i>Tapades</i> (house fields)				X	X	X	X	X	X	X		
Irrigated vegetable gardening	#	#	#	#	#	#				#	#	#
Agro-forestry	Seed beds #	Seed beds #	Seed beds #	Seed beds #	Seed beds #	Plant #	Plant #	Plant #			Seed beds #	Seed beds #
Labor migration	Levels have decreased											

Source: FLSPT Final Evaluation Interviews. June 2009.

members. This is a critical impact of the project that was not envisioned in the DAP nor tracked in the IPTT. The use of irrigated gardening has also lengthened the agricultural season from six months to 12 months by the development of dry season vegetable gardening in villages with access to small-scale hand irrigation (Table 2.6).

2.3.1.4. *Successful Introduction of Commercial Tree Grafting:*

Since 2007, the project has trained 84 individuals in 60 *groupements* who have grafted 42,000 trees to date. This impact, which was not envisioned in the DAP has been especially attractive to young men who see the higher yielding fruit trees as an alternative to migratory wage labor.

2.3.1.5. *Successful Introduction of New Improved Breeds of Poultry*

Another major impact was the introduction of a new more hearty and disease resistant line of poultry through the distribution of 800 improved roosters.

2.3.2. Stronger Rural Organizational and Financial Capacity

The project had a substantial impact on the capacity of local people to analyze problems and work with partners to develop solutions in the six *sous-préfectures* where the project intervenes. In particular, the project expanded the traditional concept of the *groupement* in this part of Guinea to include the mobilization of internal financial resources (*caisses*) and promoted *groupements* working together to develop multipurpose *groupement* unions at the *sous-préfecture* level.¹⁸

¹⁸While this model does not preclude *groupements* working with micro-credit institutions outside the project, it emphasizes the importance of *groupements* mobilizing internal resources and avoiding dependence on either the project or any outside credit institution for activities.

This successful impact can be measured by the following.

- The project currently works with 219 *groupements*, 145 of which are officially registered with the government.
- An increasing number of new *groupements* are formed annually as old *groupements* expand in number and activity or as older *groupements* divide due to membership size.
- The growth of *groupement* savings accounts (*caisses*), which enable *groupements* to self-finance activities and even small loans (Table 2.7).
- The growing number of *groupements* that belong to and/or are trying to form unions.¹⁹

Although the monitoring indicator “number of farmer committees formed and functioning” captures the number of *groupements*, it does not capture evolution of the *groupements*’ core capacity or the impact that this development in core capacity has on their activities and the prospect for sustaining these activities. This information is critical to assessing both project impact and sustainability, in addition to which *groupements* are still in need of additional capacity building in order to sustain their interventions.

To address this issue, the evaluators worked with the FLSPT supervisors to divide the *groupements* into three categories based on qualitative assessment of capacity that measured: (a) level of involvement in project activities, (b) collective funds mobilized, (c) planning capacity, and (d) participation in wider unions. This analysis, which was conducted during the pre-evaluation planning process, showed that while half the *groupements* had learned many of the core capacities they needed to execute the activities, they lacked certain organizational capacities (most notable was the



Impact: Stronger Rural Organizational and Financial Capacity. Regular meeting of the agricultural groupement at Ley miro (Pita). Source: OICI, 2nd Quarterly Report FY09

organization into unions) they would need to sustain these activities once funding ended (Table 2.8). The same analysis showed the majority of these advanced *groupements* tended to be concentrated in the plains where the opportunities for income growth were greater. A second set of *groupements* were classified as having average capacity and a third group were assessed as lacking basic functional capacity.

¹⁹The *groupements* in one *sous-prefecture* are already organized into a legally recognized union. Some of the *groupements* in two other *sous-prefectures* have already formed multipurpose sub-unions. The *groupements* in the three *sous-prefectures* are talking about forming *sous-prefecture* level unions.

Table 2.7: Size of the Pooled *Caisses* (Savings) for *Groupements* in the 12 FLSPT Agricultural Extension Zones (March 2009) (Note: Light shading indicates FLSPT extension areas considered to be highly vulnerable based on the level of pooled *caisses*; darker shading indicates FLSPT areas considered to have average vulnerability based on the level of pooled *caisses*.)

Préfectures	<i>Sous-préfectures</i> (2 extension agents per <i>Sous-préfecture</i>)	Size of the Pooled <i>Caisses</i>	Priority Follow-up Actions Needed to Build Size of <i>Groupement</i> Savings (<i>Caisses</i>) in <i>Préfecture</i> Where the <i>Caisses</i> are Low
Télimélé	Sarekaly (ext. agent 1)	6,255,450	-Infrastructure investment to develop low lying areas for counter season irrigated gardening -Encourage development of rainy season cash crops that can be grown on house fields
	Sarekaly (ext. agent 2)	22,713,300	
	Gougoudjè (ext. agent 1)	20,560,050	..
	Gougoudjè (ext. agent 2)	15,876,600	
	Sinta (ext. agent 1)	6,693,000	Intensify production systems on the house fields (<i>tapades</i>) by introducing iron fencing and promoting rainy season cash crops that can be grown on house field
	Sinta (ext. agent 2)	1,824,000	
	<i>Total Télimélé</i>	73,922,400	
Pita	Timbi Tounni (ext. agent 1)	31,912,000	
	Timbi Tounni (ext. agent 2)	31,339,000	
	Donghol Touma (ext. agent 1)	10,064,400	-Consider subsidizing the cost of potato seed (which is very high) for vulnerable households and villages - Intensify production systems on the house fields (<i>tapades</i>) by introducing iron fencing and promoting rainy season cash crops that can be grown on house field for vulnerable
	Donghol Touma (ext agent 2)	11,835,200	
	Ley Miro (ext agent 1)	21,082,500	
	Ley Miro (ext agent 2)	18,726,500	
	<i>Total Pita</i>	124,959,600	
TOTAL GENERAL		198 882 000	

Source: OICI 2009. 2nd Quarterly Report: 2009. Conakry: OICI. Pg. 18 and Project Records

Table 2.8: Characteristics of FLSPT Agricultural *Groupements* with Different Levels of Capacity and Approximate Percentage of *Groupements* in Each Level of Capacity

Classification of <i>Groupement</i> Capacity	%	Characteristics
<p>Capacity 1: Strong Capacity <i>Groupements</i> with sufficient capacity to sustain their activities and to maintain or increase their current levels of food production and access without project intervention</p>	<p>50%</p>	<p>--Tend to be located in plains and/or with easy access to <i>bas fonds</i> (low lying areas) suitable for irrigation. --Tend to be villages with good agricultural potential. A high percentage of these villages are in the potato growing area, currently the most profitable cash crop with established marketing and input networks. --<i>Groupements</i> in this category tend to have the largest average cash revenues (30 million GNF for a four month season) and the possibility of four harvests per year. --Most <i>groupements</i> in this category belong to unions or sub-unions</p>
<p>Capacity 2: Average Capacity <i>Groupements</i> with average organizational capacity with average capacity to sustain current levels of food production and access</p>	<p>27%</p>	<p>--Villages in the mountain area with at least two years in the project. --Villages with lower potential for irrigated gardening and only one year in the project. --Extension groups with an average capacity for cash revenue (20 million GNF [Guinean Francs] per four month season) and the possibility of two harvests per year.</p>
<p>Capacity 3: Weak Capacity <i>Groupements</i> with weak organizational capacity to build and/or improve either food production or access</p>	<p>23%</p>	<p>--Mountainous villages with very limited agricultural potential. --Land access issues make it necessary to identify new technologies in order to: (a) improve their production systems, (b) fight erosion, (c) increase soil fertility, and (d) promote reforestation. --Extension groups with a weak capacity for cash revenue of 10 million GNF per year or less and the possibility of two harvests per year.</p>

Methods: Based on extension supervisors assessments during Step Two: Initial Categorization of Villages by Level of CVS and *Groupement* Organizational Capacity as a Basis for Choosing the Site for the Final Evaluation Field Visits (see section 1.2.2.2 above). The percentage of *groupements* identified as being at each level of capacity provided the basis for determining the initial choice of villages to visit for the agricultural focus groups. A more fine tuned analysis of these categories was conducted with the extension.

2.3.3. Greater Capacity to Backstop Small-Scale Livestock Production

Another impact of the FLSPT Project was to strengthen the regional systems for supporting small-scale livestock. Although para-veterinarians, who delivered basic veterinarian services (i.e., livestock drugs, vaccinations, and nutritional counseling) under the guidance of a trained veterinarian, had existed in that part of Guinea, the systems were focused on larger livestock. One strength of FLSPT Project was to train and equip (through financing their basic stocks) 12 additional para-veterinarians on the condition that they give priority to the small livestock herds being developed by the project’s rotating livestock credit program that targeted vulnerable rural women. The same training helped build the FLSPT Project-facilitated *groupements*’ understanding of how to plan a regular system for herd vaccinations. Although the net impact of project support on small-ruminant and poultry systems has been positive, the final evaluation

focus groups revealed a number of important gaps that need to be addressed. Of particular importance is the high incidence of disease, continuing to be a major constraint on small ruminant and poultry production in certain villages. This appears to be due to:

- Women who benefit from the rotating credit system not understanding how or under what conditions to contact the para-veterinarian;
- Others failing to understand the role of preventative vaccination (i.e., incorrectly thinking vaccines are used to cure sick animals); and
- The livestock auxiliaries' poor refrigeration systems, which in many cases break the cold chain that is critical to maintaining the quality of the small ruminant and poultry vaccines. In contrast, the vaccines for cattle are less vulnerable to a broken cold chain.

2.4. Impact on Vulnerability

2.4.1. Household Level Vulnerability and Gender Impacts

While there is a great deal of anecdotal evidence that the FLPST Project decreased household and community-level vulnerability—and quantitative evidence that over 80 percent of the members of the *groupements* served by the project were women—this impact is difficult to document with the project's existing monitoring and evaluation indicators.

Future OICI programs in Guinea and elsewhere should consider adding:

- The indicator “percentage of households classified as highly food insecure” (based on the MAHFP) to their tracking table to assess this²⁰ and
- Indicators that track the percentage of female participants.

These are major impacts of the FLSPT Project that are virtually invisible in the project's official reporting under the IPTT.

2.4.2. Community Level Agricultural Vulnerability Assessment (based on Participation in and Impact of the Project's Agricultural Activities)

While there is clear evidence that the aggregate situation has improved in all the villages where the project has intervened, it was evident that some villages have benefited less directly from the SO1 project interventions than others. Had the MAHFP been calculated for a broader range of beneficiary households,²¹ the evaluators could have used “percentage of households classified as highly food insecure” (based on the MAHFP) as a basis for identifying the percentage of project villages still classified as highly vulnerable.

²⁰ For examples of the use of the MAHFP to track project impact on vulnerable groups see <http://www.africare.org/news/tech/ASFR-intro.php>

²¹ The MAHFP was calculated for only 20% of the 179 villages where the project intervenes in agriculture as part of the FLSPT quantitative final survey.

To gain a better understanding of these categories of impact, the evaluation team worked with each extension agent to categorize her/his *groupements* into three categories based on a questionnaire that ranked villages in terms of nine criteria (Box 2.1). Each agent was also asked to identify some of the critical follow-on actions that were needed to sustain project achievements in the time remaining on the project. Based on these criteria, the extension agent was asked to classify each of her/his villages into one of three categories:

- **Category C:** Still Vulnerable;
- **Category B:** Situation Improved, but Still Vulnerable; or
- **Category A:** Situation Improved and Strong Prospects for Sustaining these Achievements.

Box 2.1: Criteria Used to Classify FLSPT Communities and *Groupements* into Vulnerability Groups
(Based on participation in and impact of the project's agricultural activities)

1. Year *groupement* created
2. Mastery of agricultural technologies
 - 2.a. Cereals
 - 2.b. Irrigated gardening
 - 2.c. Livestock
3. Natural Resource Management—Soil conservation technologies
4. Natural Resource Management—Agro-forestry technologies
5. Product storage, transformation, and management technologies
6. Income generating activities
7. *Groupement* savings (*Caisses*): Level and ability to manage
8. Agricultural Loans: Level and reimbursement record
9. *Groupement* organization (capacity)
 - 9.a. Management committee and control commission
 - 9.b. Integration into and/or interest in being integrated into sub-unions
 - 9.c. Basic literacy
10. Recommendations for sustaining project achievements

Source: Annex VI.A.2.

Based on this classification (Table 2.9)²²:

- **Category C: 39%** of the villages were classified as “Still Vulnerable” (42% in Telimele and 35% in Pita);
- **Category B: 32%** of the villages were classified as “Situation Improved, but Still Vulnerable” (35% in Telimele and 27% in Pita); and
- **Category A: 29%** of the villages were classified as “Situation Improved and Strong Prospects for Sustaining these Achievements” (23% for Telimele and 38% for Pita).

²²To facilitate follow-up a transcription of the actual interviews was written up (in French) but is not included in the annexes of this report.

Table 2.9: Percentage of FLSPT *Groupements* Classified into Different Vulnerability Categories of Vulnerability Based on Extension Worker Assessments (based on participation in and impact of the project's agricultural activities)

<i>Prefectures</i>	<i>Sous-Prefectures</i>	Number of <i>Groupements</i> in Each Category						Total communities included in the analysis
		C	%	B	%	A	%	
TELIMELE	All	49	42%	41	35%	27	23%	117
	Sinta	22	47%	17	36%	8	17%	47
	Gougoudje	15	41%	11	30%	11	30%	37
	Sarekaly	12	36%	13	39%	8	24%	33
PITA	All	28	35%	22	27%	31	38%	81
	Leymiro	8	33%	5	21%	11	46%	24
	Doghol Touma	13	38%	9	26%	12	35%	34
	Timbi Tounni	7	30%	8	35%	8	35%	23
TOTAL		77		63		58		198*
		39%		32%		29%		100%

*Although extension agents report that the project is currently working with 219 *groupements* (145 of which are officially registered) this analysis was based on the 198 *groupements* that extension workers discussed during this survey. It is possible that the 21 missing *groupements* are *groupements* that have officially split but were counted as part of the original *groupement* from which they split.

Source: FLSPT Final Evaluation Interviews (Annex VI.A.2) with additional data analysis by, YATTARA Mohamed Lamine, OICI Guinea M&E Coordinator, May-June 2009.

Although a few of the *groupements* classified in Categories B and C were there because they had only recently joined the program, most *groupements* were characterized by some strong impediment to increasing food production and access with the existing technology package. Most extension workers and supervisors felt that the single most important barometer of sustainable impact was the level of the *groupement caisses* (savings) (Table 2.10).

- **Category A (29%)** was distinguished from the other groups by the strong level of technology uptake of the existing package of agricultural innovations. On average these groups had large *caisses* and were already self-financing routine agricultural inputs like seeds as well as new technologies such as food processing units.
- **Category B (32%)** was distinguished by fewer opportunities for income generating activities from rainfed and irrigated agriculture. Most of these villages require some additional investment (such as *bas fond* improvement) and/or development of an alternative source of income in order to higher yielding cropping systems and the larger *caisses* (savings) that *groupements* needed to sustain their development over time.
- **Category C (39%)** was considered highly vulnerable at several levels. Although a limited number of households in this group were newly integrated and therefore likely to develop and move into Categories B and A in the next year or two, a high percentage of these communities were in mountainous areas with limited

access to land. Several villages were socially disadvantaged groups (such as potters and former servitor groups) with little more than house fields (*tapades*). Many were isolated by poor roads that reduced their contact with the FLSPT extension agents and their ability to use FFW to reduce their infrastructure constraints.

Table 2.10: Classification of *Groupements* into Different Vulnerability Categories (based on participation in and impact of the project’s agricultural activities) and the Principal Constraints to Achieving Greater Impact and Sustainability (SO1)

Number of <i>Groupements</i> that Extension Supervisors Classified in this Group	Technology Uptake by the <i>Groupements</i>	Level of <i>Caisses</i> (savings) managed by the <i>Groupements</i>	Critical Constraints to Greater Impact and Sustainability	
			Constraints specific to this Category	Transversal Constraints (Shared by All Categories)
<p>Category A (29% villages)</p> <p>Situation Improved and Strong Prospects for Sustaining these Achievements</p>	Extensive	<p>Large <i>caisses</i> based primarily on income from <i>groupement</i></p> <p>IGAs (income generating activities) (Capable of self-financing)</p>		<p>Unions:</p> <p>-Although the process of creating unions that link the <i>groupements</i> is under way, it is not fully developed.</p> <p>As of June 2009 the project has facilitated the formation of:</p> <p>-1 <i>sous-préfecture</i> level (S/P) union; &</p> <p>-2 S/P sub-unions (doesn’t cover the hold S/P)</p> <p>-3 S/P’s in the process</p> <p>--<i>Caisses (Savings):</i></p> <p>All <i>groupements</i> need to strengthen the management of their <i>Caisses</i> and to deposit them in insured bank accounts</p>
<p>Category B (32% <i>groupements</i>)</p> <p>Situation Improved but Still Vulnerable</p>	Moderate	<p>Average <i>caisses</i> based primarily on member contributions (fees)</p>	<p>--Limited IGAs (from agricultural and non-agricultural activities)</p> <p>--Less access to land suitable for irrigated gardening and/or land requires <i>bas fond</i> improvements to be suitable</p>	
<p>Category C (39% <i>groupements</i>)</p> <p>Still Vulnerable (little improvement)</p>	Limited	<p>Very small due to irregular member contributions (fees)</p>	<p>-Older project villages tend to have extremely limited access to land for rainy season agriculture and almost no access to land for irrigated gardening</p> <p>--A few newer project villages in this category</p>	

Source: FLPST Final Evaluation Interviews using Annex VI.A.2. June 2009.

2.4.3. Link between *Groupement* Capacity, Project Impact, and Vulnerability

In order to study the link between *groupement* capacity, project impact and vulnerability, the evaluators asked that the information from the initial classification of the *groupements* in terms of their core organizational capacity (see section 1.2.2.2 above²³) (Table 2.8) be entered into the project data base. This information provided the basis for a re-analysis by the FLSPT M&E coordinator²⁴ of some of the tracking indicators that covered all of the project villages as part of the final evaluation method (Table 2.11). This analysis showed a clear difference between the *groupements* classified as strong and those classified as weak based on (Table 2.11):

- The average MAHFP was 7.98 (8.72 MAHFP for the strong and 6.75 for the weak *groupements*),
- Average dietary diversity was 7.24 (7.46 for strong *groupements* versus and 4.6 for the weak *groupements*),
- Average yield for rice was 1.90 tons/ha (2.50 tons/ha for the strong *groupements* and 1.0 tons/ ha for the weak *groupements*) and corn was 2.50 tons/ha (3.5 tons/ha for the strong and 1.09 tons/ha for the weak *groupements*), and
- Household minimum technology adoption overall was 50 percent of households (73% for strong *groupements* and 40% for the weak *groupements*).

Only the indicator “reduction in crop loss during storage” was higher for the weaker *groupements* which meant that the new technologies helped them reduce their crop losses even more than the other two groups (Table 2.11). This is probably because this group had the largest losses to begin with.²⁵

2.4.4. *Sous-préfecture* Level Vulnerability

Many of the same factors that affect community level vulnerability affect vulnerability levels within specific *sous-préfectures*. The extension supervisors, for example, agreed that one of the best indicators for vulnerability was the level of the pooled *groupement caisses* since these cash results were both the result of the *groupements*' agricultural production and sales as well as critical input (through self-financing) into these activities. Based on this classification (Table 2.8 above):

- Three of the FLSPT extension areas in mountainous areas (Sarakely 1, Sinta 1 and 2) were considered to be highly vulnerable due to the lack of development of higher yielding agricultural and non-agricultural income generating activities (IGAs) that they need to build their collective *caisses* (savings) and
- One extension area (Donghol Touma 1) was considered to have average vulnerability due to the larger size of its *caisses*, although the size of the pooled *caisses* was considered to be insufficient to sustain project activities over time.

²³ Step Two: Initial Categorization of Villages by Level of CVS and *Groupement* Organizational Capacity as a Basis for Choosing the Site for the Final Evaluation Field Visits.

²⁴ YATTARA Mohamed Lamine, OICI Guinea M&E coordinator.

²⁵ This issue needs further investigation by the project team.

Table 2.11: Average Indicators for FLSPT in Different Levels of Organizational Capacity based on the Extension Supervisor’s Assessment of the Core Organizational Capacity

Impact Indicators	Source of Data	Average (All)	Groupement Organizational Capacity		
			A (Strong)	B (Average)	C (Weak)
% communities in this category		100%	50%	27%	23%
MAHFP	Final Quantitative Survey	8.5 MAHFP	8.72 MAHFP	7.98 MAHFP	6.75 MAHFP
Dietary diversity (food groups)	Final Quantitative Survey	7 food groups	7.46 food groups	7.24 food groups	4.6 food groups
Rice yields	Stratified random sample of fields in villages with agricultural innovations	1.43 T/ha	2.50 T/ha	1.90 T/ha	1.0- T/ha
Corn yields	Final Quantitative Survey	1.80 T/ha	3.50 T/ha	2.50 T/ha	1.09 T/ha
Rate of technology adoption	Final Quantitative Survey	211% over target	73% of households	50% of households	40% of households
Reduction in crop loss during storage	Final Quantitative Survey	3%	3%	5%	7%

Source: Annex I, FLSPT IPTT (for “Average All”) and reanalysis of the project’s quantitative final survey data by YATTARA Mohamed Lamine, OICI Guinea M&E coordinator, based on categories identified during the FLSPT Final Evaluation Pre-Evaluation planning. May 2009.

2.5. Major Challenges and Priority Actions Needed to Strengthen Project Sustainability and Impact

2.5.1. Sustainability Issues

To summarize, despite major agricultural impacts that can be tracked by the indicators in the project IPTT:

- Only thirty percent (30%) of agricultural *groupements* are ready to graduate,²⁶

²⁶ Although 30 percent of the villages/*groupements* have high capacity, there are undoubtedly households within these villages that may be highly food insecure and very vulnerable. If this project receives follow-on funding one essential activity would be to conduct at the very least an MAHFP-PRA to detect the most vulnerable households within all the villages. It is important to identify households who are still very vulnerable and to conduct a constraints analysis to determine if there are specific barriers for these households to participating in what are successful interventions for the rest of the households in the villages. The project team should consult the guidance on MAHFP-PRA the calculating the quantitative MAHFP (required by USAID) (<http://www.africare.org/news/tech/ASFR-intro.php>).

- Seventy percent (70%) of the agricultural *groupements* require some additional support to develop higher earning income generating activities (IGAs) from agriculture and livestock in order to be sustainable, and
- One-third (33%) of the extension zones covered by the twelve zones covered by the FLSPT extension worker are considered “vulnerable” or “very vulnerable” based on the size of their pooled *caisses* (savings), which is the principal mechanism that they have for self-funding agricultural inputs over the long-run.

Although some *groupements* still need help in addressing some of the basic constraints that hinder food availability and access, the private-public partnerships needed to sustain the activities are developed and fully functioning (unions, private sector seed supply, self-financing of inputs from *caisses*, savings, etc.). Given this situation the project’s follow-on activities need to focus on better targeting the existing package to the most vulnerable villages and graduating the more developed villages. With better targeting of vulnerable *groupements* (sub-regions) it is likely that 100 percent of the impacts can be sustained and expanded in a short time frame (1 to 2 years).

2.5.2. Priority Actions Needed

Challenge #1: *The impact of the project is much lower due to infrastructure constraints and isolation in 40% of the villages (Category C).*

Summary Observations: Although the FLPST project has had a major impact on food security through out the zone, some communities have benefited less than others from the proposed package of agricultural and agro-forestry innovations (Figure 2.1). These are typically communities that are less adapted (due to terrain) to the project’s initial package of high yielding cash crops that can be sold through local markets (potatoes and irrigated vegetables). However, given the existing base of *groupement* capacity, these technology issues could be addressed and sustained within the relatively short span of one or (preferably) two years for the following reasons.

- Better adapted technologies, such as the extremely profitable pepper (*piment*) and intensive production of livestock, have been identified and tested and are ready to “scale up.”
- The project has experience in the types of small *bas fond* (low lying area) developments that some villages need to develop irrigated gardening.
- The public and private sector services (veterinarians, para-veterinarian services, private input suppliers, and local and regional markets) needed to sustain these innovations are in place and fully developed.
- The concept of agricultural unions that link individual *groupements* to government and private sector extension and supply services is well developed in Guinea.

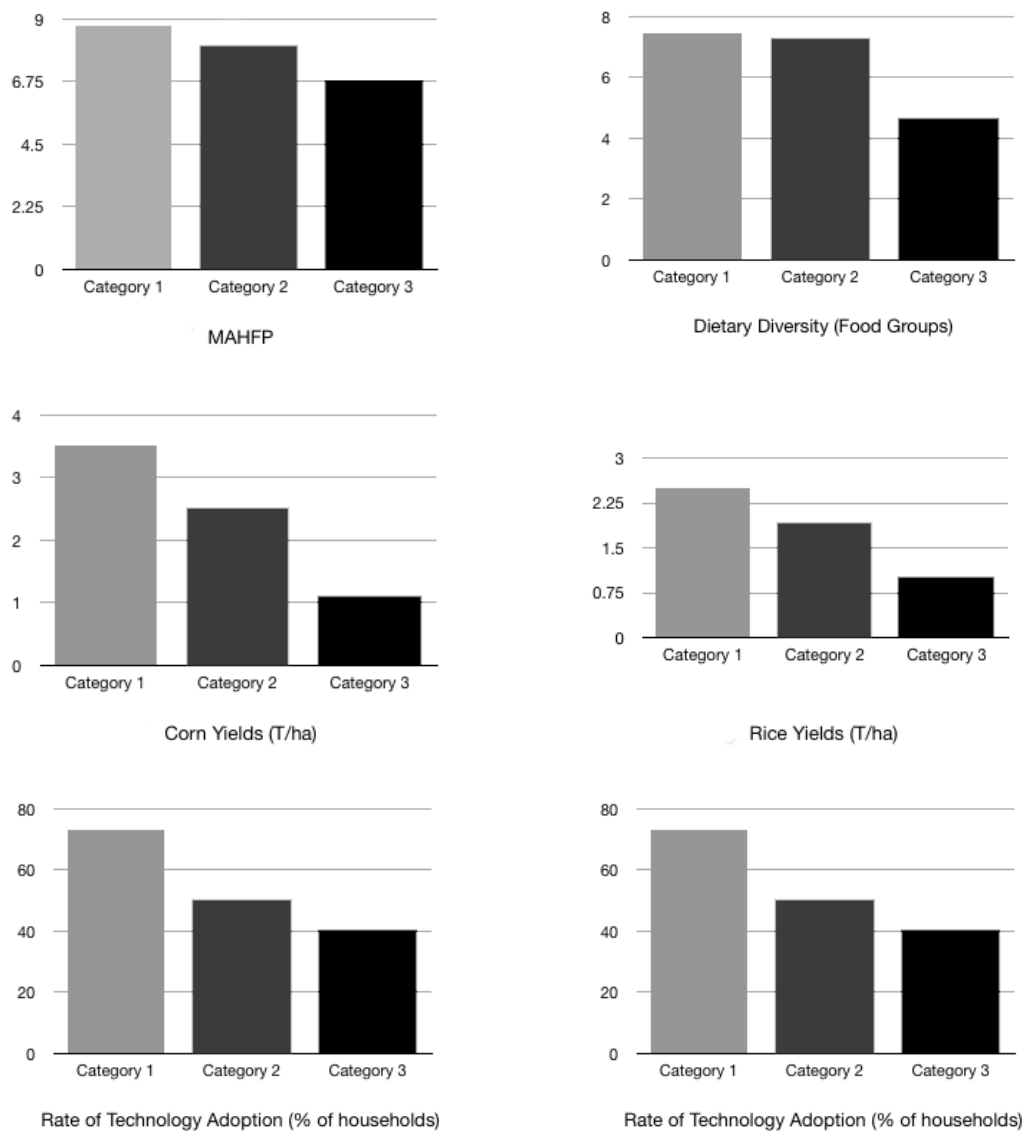


Figure 2.1: Average Indicators for FLSPT in Different Categories of Groupement Capacity

Source: Table 2.11

Recommendations:

Priority follow-on actions for the remainder of the grant include:

- Work with *groupements* to develop the types of *sous-préfecture* level unions that they need to better communicate their long-term access to inputs and agricultural markets and
- Graduate the more developed *groupements* in Category A (ideally after an MAHFP-PRA assessment has been conducted to verify readiness to graduate as discussed above) and concentrate the project’s applied research, extension, and FFW activities on the most vulnerable *groupements* (i.e., those in Category C, Tables 2.8 and 2.9).

- Develop appropriate guidance to the *groupements* about pesticides in order to minimize and mitigate their impact.²⁷

Challenge #2: *The project never developed an indicator to track project impact on community capacity or vulnerability even though these are two areas that seem to be strongly correlated with other project impacts.*

Summary Observations: Given the commitment of the USAID/FFP Office and OICI to reducing household and village-level vulnerability, OICI needs to develop better standardized systems for targeting vulnerable groups (*groupements*, health committees, and communities) and tracking project impact on these groups.

Recommendations:

- Future Title II grants in Guinea and other countries need to train OICI project staff and *groupement* leaders how to use the FSCCI (Food Security Community Capacity Index)²⁸ self-assessment tool in order to help:
 - *Groupement* leaders better identify their strengths and weaknesses,
 - OICI have a more informed (and standardized) basis for the design and execution of its exit strategy (i.e., better determine which communities are ready to graduate), and
 - OICI have a more informed (and standardized) basis for assessing its impact on core community capacity).
- Future Title II grants in Guinea and other countries need to train OICI staff to incorporate the FSCCI tool in baseline surveys and final surveys as a basis for examining the link between core capacity development and Title II program impacts (as recommended by the current Title II FFP strategy).
- Future Title II grants in Guinea and other countries need to train OICI to use the MAHFP quantitative measure that is currently mandated by USAID (and used in the FLSPT IPTT) to track household impact on vulnerable groups in new projects and follow-on projects in Guinea and to analyze the patterns of participation and impact of future projects on vulnerable groups during baseline and final surveys.

²⁷ Although OICI did not support the use chemical products, the final evaluation found clear evidence that many of the assisted women associations are using some pesticides in the storage room without adequate protection measures. These pesticides can negatively affect both their handlers and the stored products such as potatoes.

²⁸ The current USAID/FFP strategy identifies this indicator which has been extensively developed and used by Africare as an example of best practice.

Chapter Three

Improved Food Utilization (SO2)

3.1. Health and Nutrition Strategy

3.1.1. Intervention Site Context and Relevant Characteristics

The background food security assessments (FSAs) that were conducted during the project design identified the urgent need to address health and nutrition in the region. Some of the major challenges cited in the DAP included (OICI 2004):

- A high infant mortality rate of 100 per 1,000 births,
- Thirty percent of infants under 60 months with chronic malnutrition (stunting), and
- An eight percent female literacy rate.

In addition, virtually none of the sampled households in the FSA had access to safe, potable water or to adequate sanitation facilities. Supporting this finding, the DAP reported that water-borne disease (diarrhea, skin infections, and intestinal worms) was the leading cause of morbidity and mortality in children under five years of age in the region (OICI 2004). According to key informants, half of the infant and juvenile deaths can be attributed to poor water and sanitation.

Although government records showed low HIV/AIDS infection rates except in mining towns, the areas where the project intervenes were considered at risk because only a small proportion (9% of rural women and 4% of rural men) believed that there was anything that can be done to prevent transmission of the disease. Most men and women understood how to use condoms, but only a small percentage used condoms during sexual intercourse.

3.1.2. Core Project Strategy for Health and Nutrition

To address these issues, the project adopted a three-part strategy under SO2 (communities enhance human capacity through improved health and nutritional practices) that focused on:

- Enabling local communities to implement maternal and child health programs for vulnerable households in collaboration with the Ministry of Public Health and Hygiene's Advanced Strategy for Health (IR 2.1),
- Increasing local communities' access to clean potable water (IR 2.2), and
- Building HIV/AIDS awareness and prevention (IR 2.3).

3.1.2.1. Community Health Structure Capacity Building

To build community capacity to address health and nutrition needs the FLSPT strategy for SO2 focused on recruiting and training volunteer workers to assist in the execution of the Ministry of Public Health and Hygiene's district level health programs (Box 3.1 and Figure 3.1).

Box 3.1: Overview of the Guinea System of Decentralized Health Structures in Pita and Tilelele Prefectures

Since 1986, Guinea has worked to implement an advanced strategy for basic health designed to decentralize health structures and increase rural people's access to basic services. The strategy is developed around a health pyramid within each *prefecture* (or province) (Figure 3.1).

- **DPS** (one DPS for each *prefecture*): The pinnacle of the health pyramid in each province in Guinea is the *Direction Préfectorale de la Santé* or *DPS (Prefecture Health Department)* associated with the major reference hospital for the *prefecture*.
- **Health Center** (one health center for each *sous-préfecture*): The next level is the Health Center (*Centre de Santé*), which oversees health services for a *sous-préfecture*. Each health center is under the direction of a *Chef de Santé* and a staff of technical health personnel who oversee the minimum health package (Table 3.1).
- **Health Districts** (one district encompasses eight to 20+ villages): Each health center oversees a series of health districts. The advanced strategy envisions the creation of a *Poste de Santé* (Health Post) under the direction of an *Agent Technique de Santé* (health agent) at the hub of each district that provides a location for coordination of services for surrounding villages. The districts are designed so the majority of villages are within 15 kilometers of the health district headquarters village/town. All health posts are directly under the supervision of the health centers.
- **Village or Hamlet**: At the base of the health pyramid is the individual village. The advanced strategy envisioned that each village and hamlet would have a series of health volunteers who could help mobilize the villager's participation in the government's minimum health package (the Expanded Program for Vaccination [PEV], Antenatal Consultation [CPN], Primary Health Care [CSP], and HIV/AIDS awareness).

Although the DPS and Health Centers are always operational, if not fully staffed, this is rarely the case of the health posts. Out of the 31 districts where the FLSPT Project intervenes today, only six have health post buildings and only three of these health posts have staff and are either partially or fully operational.

Given the fact most of the district-level health posts are either non-existent or non-functioning, most rural people depend on the *sous-préfecture* level of Health Centers for basic health care and services. To facilitate health access, the health center personnel travel to the health district headquarters (those with and without health post buildings) in order to provide the basic vaccination and maternal and child health services mandated by national health policies.

When the project started, however, community level participation in almost all the critical health services (PEV vaccination and CPN Antenatal consultation services included) was very low.

Source: FLSPT Final Evaluation Interviews. May-June 2009.

Once a district was chosen for the project's intervention based on need, the project health extension agent worked with all the villages in a health district to (Table 3.1):

- Recruit and train three health promotion agents (APS or *Agents Promoteurs de Santé*) from the villages that comprise a health district (a male and female APS and a village birth attendant (AV),
- Recruit and train two peer educators (PE) for HIV/AIDS (one female and one male), and
- Develop a small *kit de médicaments* (medical kit), which includes condoms and basic medicines, for purchase.

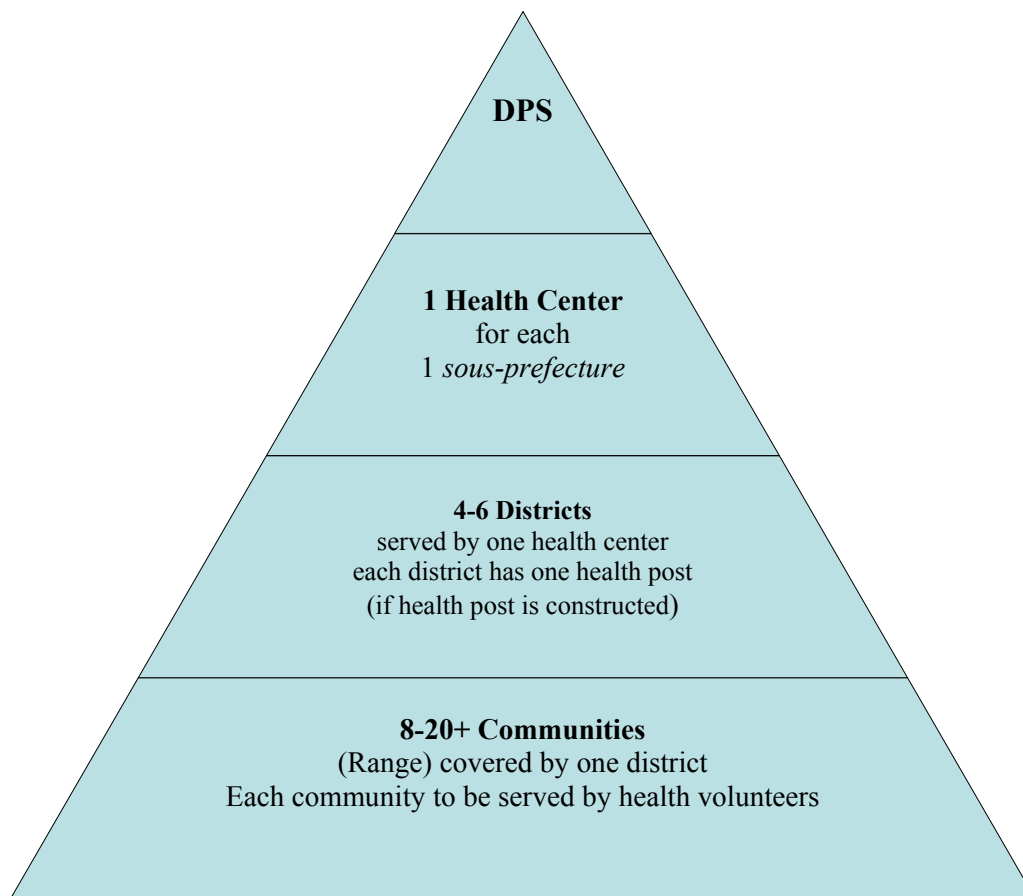


Figure 3.1: Health Pyramid Proposed by the Guinea Advanced Strategy for Health

Source: FLSPT Final Evaluation Interviews. June 2009.

In addition to health volunteers, the project worked with all the villages in each of the beneficiary districts to create one *Comité Villageois de Santé* (CVS) per district (Table 3.1). Each CVS is composed of six members: a president, vice-president, secretary, treasurer, and two representatives of social affairs (*affaires sociales*). Treasurer was the only non-elected post, which was instead chosen by nomination from the other members of the committee based on his or her reputation for financial responsibility.

Table 3.1: Ministry of Public Health and Hygiene and Project Volunteer Health Structures and Staff at the *Sous-préfecture*, District and Village Levels

Primary Agency Backstopping Activity (Ministry of Public Health and Hygiene vs. OICI FLSPT)	<i>Sous-préfecture</i> Level Health Service	District Level Health Services	Village Level Health Services
Ministry of Public Health and Hygiene Supported/Facilitated	Health Center (paid structures): -- <i>Chef de Centre de Santé</i> (Health Center Head) --CPN Agent --PEV Agent --Sales Agent --Birth Attendant (AV) --Building Manger Health Center (volunteer structures): COGES: Committee that oversees the finances of the Health Center (volunteer)	<i>Poste de Santé</i> (if one exists) --Building -- <i>Agent Technique de Santé</i> (Health Agent) either paid for by the Ministry of Public Health and Hygiene or by the community (through an independent contract)	
OICI/FLSPT Facilitated		CVS (<i>Comite Villagois de Santé</i>) composed of 6 members (volunteer): --President --Vice President --Secretary --Social affairs (2 persons) --Treasurer	Health Volunteers (for each district) trained by the FLSPT Project: -- 2 Health Promoter volunteers (APS) (1 Female & 1 Male) --1 Birth Attendant (AV) --2 HIV/AIDS Peer Educators (1 Female and 1 male)
Pharmaceutical Stock		Pharmaceutical Stock	Village level medicine kit

Source: FLSPT Final Evaluation Interviews. June 2009.

The roles of the CVSs were to:

- Mobilize the local villages’ support for the Ministry of Public Health and Hygiene’s activities in their district,
- Mobilize support for the community based volunteers that the FLSPT recruited and trained to support, and
- Oversee management of the stock (e.g., drug purchases and sales) and funds generated by the district level *kit pharmacie* (pharmacy kit) (Table 3.1).

Once volunteers were trained, they became ad hoc members of the CVS and the FLSPT Project worked through the volunteers to execute a series of activities that supported five of the basic components of the Ministry of Public Health and Hygiene’s advanced health strategy (Table 3.2). In addition to the activities aligned with the national health strategy, the FLSPT Project health extension agents worked through the volunteers to report to the

FLSPT Project and the *sous-préfecture* level health centers regarding community-based health activities.

Each member of the CVS and each health volunteer were entitled to a small amount of FFW twice a year in recognition of his or her volunteer activities. It was also anticipated that the CVS president would organize other activities (e.g., collective labor on their fields and house repair) to “encourage” the health volunteers.

Table 3.2: Health Activities by IR for the FLSPT Project (FY05-FY09)

No.	Activities	Fiscal Year				
		2005	2006	2007	2008	2009
IR 2.1: Communities implement mother focused health and nutritional practices for vulnerable households						
1	Growth Monitoring		X	X	X	X
2	Promotion of Exclusive Breast-Feeding		X	X	X	X
3	Community-Based Health Information System		X	X	X	X
4	Promotion of Personal and Environmental Hygiene		X	X	X	X
5	Latrine Construction		X	X	X	X
6	Community-Based Rehabilitation of Moderately Malnourished Children (FARN-E)		X	X	X	X
7	Community-Based Rehabilitation of Moderately Malnourished Pregnant and Nursing Mothers (FARN-G)		X	X	X	X
8	Anti-Parasite Campaign and De-worming		X	X	X	X
9	Nutritional Monitoring of Pregnant Women		X	X	X	X
10	Nutritional Monitoring of Nursing Women		X	X	X	X
11	Micro-Nutrient Supplements		X	X	X	X
12	Vaccination Promotion		X	X	X	X
13	Referrals to the <i>Sous-préfecture</i> Health Centers		X	X	X	X
14	Food Distributions to Vulnerable Households (elderly and handicapped persons without support) and to women whose children are participating in the project's growth monitoring program		X	X	X	X
IR 2.2: Communities increase access to safe potable water						
15.a	Construction of improved wells (including FFW for construction materials)		X	X	X	X
15.b	Use of FFW to compensate villagers for gathering the raw materials for wells			X	X	X
16	Well maintenance (through the formation of well maintenance committees)		X	X	X	X
17	Community level trainings on new technologies for treating potable drinking water		X	X	X	X
IR 2.3: Awareness of HIV/AIDS prevention/mitigation strategies reduce risk						
18	Public Awareness Campaigns	X	X	X	X	X
19	Anti-Prejudice Training		X	X	X	X
20	Condom Distribution		X	X	X	X
21	Family Planning				X	X

Source: FLSPT Project, Health Pre-evaluation Document, May 29, 2009.

3.1.2.2. *Maternal and Child Health*

The project model for maternal and child health focused on the design and execution of a monthly growth monitoring program during which children under five years of age were weighed. This activity was organized by the health volunteers with support from the CVS at the district level headquarters under the direction of the FLSPT health extension agent.

The genius of the FLSPT Project's emphasis on growth monitoring was that it provided a forum for the *sous-préfecture* level Health Center workers to execute the activities that were envisioned under the national program in collaboration with the newly recruited and trained community health workers. These community based initiatives that were supported under the national government's advanced strategy are referred to as:

- SIAC (*Système d'Information à Assise Communautaire* or community based health information system),
- PEV (*Programme élargie du vaccination* or expanded vaccination program), and
- CPN (*Conseil pre-natal* or Antenatal consultation).

SIAC: The project's SIAC included the promotion of various Information, Education and Communication (IEC) themes related to the promotion of exclusive breastfeeding; the improved treatment of infant illnesses (especially diarrhea and malaria); and the promotion of better nutrition using local foods, clean water, and improved sanitation. Mothers were encouraged to bring the children for monthly weigh-ins organized by trained health volunteers. Once the child's weight was taken it was compared to the Ministry of Public Health and Hygiene's "normal" weight curve. The children identified as severely malnourished were referred to the health center hospitals for more extensive treatment. To better serve the needs of the children identified as "moderately malnourished," the project trained *maman lumieres* (Positive Deviance Mother) to rehabilitate these children using local food products. These community based rehabilitation programs were known as FARN/E or *Foyer d'Apprentissage et de Récupération Nutritionnelle des Enfants* (*Community Based Hearth for Nutritional Training and Rehabilitation of Children*).

PEV: The Health Centers made use of the growth monitoring sessions to organize their vaccination campaigns. The vaccinations were conducted by the Health Center PEV worker during and/or after the district-level growth monitoring sessions several time a year.

CPN: In addition to providing a forum for the dissemination of health messages, the project helped support the Ministry of Public Health and Hygiene's initiatives to improve maternal health through the distribution of micro-nutrients (iron and vitamin A), as well as promoting the importance of safe birthing practices (using trained birth attendants) and antenatal consultations. To support these practices, the health volunteers (with support from the FLSPT health workers) organized a special program to promote good nutritional practices for pregnant women two weeks after the monthly growth monitoring program at the same location. These half-day sessions which targeted pregnant women are called

FARN/G (*Foyer d'Apprentissage et de Renforcement Nutritionnel des Gestantes* [Hearth Program for Nutritional Training and Reinforcement of Pregnant Women])

3.1.2.3. Potable Water

The DAP anticipated the construction or rehabilitation of wells in 150 villages. During the first year it became apparent that the original budget had underestimated the cost for this component. However, given the critical nature of water for achieving the broader impacts of the project, the project moved forward with the construction and rehabilitation of 125 wells using a lower cost construction model than what was envisioned in the DAP. In FY09 the project decided to use the funds designated for new construction/ rehabilitations to improve the sanitation standards of the wells constructed during FY06 and FY07. This is why the project's achievement for FY09 is only 33 percent of target, but over 100 percent for each of the three preceding years (FY06-FY08).



Impact: Increased Access to Potable Water. Formal installation of the Village Well Management Committee at Donghol Touma.

Source: OICI/G. 2nd Quarterly Report FY09

One major innovation of the project was to introduce the concept of well management committees. These committees were trained (by the FLSPT health workers) in basic sanitation and well maintenance.

3.1.2.4. HIV/AIDS

The project strategy for HIV/AIDS awareness focused on the recruitment and training of two *pairs éducatrices* or PE (peer educators) per district—one male and one female. The HIV/AIDS peer educators were usually young school leavers (i.e., attended school, but did not graduate) or graduates in their late teens or early twenties. After an initial project sponsored training at the prefecture level districts centers, the PEs were expected to travel from the district level headquarters (on bicycle) to conduct community level training sessions. Their remuneration was a bicycle and a small, twice a year donation of food aid.

3.1.2.5. Special Programs Targeting Vulnerable Groups

To encourage participation in the growth monitoring and FARN/E activities, the project made modest food distributions to women who participated actively twice a year. The same food distribution was made to households that the CVS identified as “extremely vulnerable” (e.g., elderly people without children to support them). These distributions were made during the *soudure* (lean period) pre-harvest months and the month of Ramadan fasting.

3.1.3. Anticipated Evolution of the FLSPT Project Strategy

The project model envisioned a progressive strengthening of *CVS health committees'* capacity over a five year period that would facilitate more and more independent execution of the community based maternal and child health, water resource development and maintenance, and HIV/AIDS awareness in collaboration with the Health Centers (Table 3.2). The plan was that these activities could eventually be sustained by the CVS and the Ministry of Public Health and Hygiene once project funding ended (see Phase IV, Table 3.3).

3.2. Measured Impact of the Project and Final Evaluation Findings

The final revision of the FLSPT DAP envisioned the training of at least one volunteer per village and organizing village level FARNs. However, the health component only received 25 percent of their proposed budget. As a result, only six health agents were funded by the project as opposed to 12 for agriculture. This low number of health workers combined with other consequences of the budget shortages for health forced the project to shift the focus of almost all its health activities from individual villages to the health district, each of which groups an average of 10-20 villages/hamlets. Under the new strategy most activities (FARNs, vaccination, and public information campaigns) were executed at a shared site (usually the hangar where they executed growth monitoring and the FARNs). Unfortunately, the IPTT was not amended to reflect the change in budget resulting project strategy.

The strength of this forced realignment was that it enabled the project to:

- Execute a full array of health and nutrition services in all 31 health districts where it intervene by FY07 (Annex III, Table 1) despite a much, lower ratio of project extension agents to communities served than for the project's agricultural activities²⁹ and
- Cover a larger number of villages than the agricultural activities since one health district could serve anywhere from eight-twenty communities (289 communities were served by the project's health activities versus 173 for the project's agricultural activities).

The realignment weakened the direct contacts between the FLSPT health workers and the communities (since there were only six as opposed to the recommended 12) and most communities had to travel a greater distance to participate in the FLSPT facilitated activities than they would have had to if these activities had been organized in each community as envisioned in the DAP.

²⁹ The current ratio is one agricultural extension agent per 18 registered and unregistered *groupements* (roughly one extension agent per 18 communities based on 219 *groupements* with which the project works) and one supervisor per 73 registered and unregistered *groupements* (since agriculture has two supervisors and one coordinator). The ratio for health is one health agent per five districts which translates into one agent per 105 villages (based on the 319 villages served by the CSV with which the project currently works) and one supervisor per 319 villages (since health has only one coordinator and no supervisors).

Table 3.3: The Anticipated Evolution of the OICI/FLSPT Project SO2 Capacity Building Model for the CVS

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
CVS	<p>Identification of the CVS and volunteers</p> <p>Basic training of the CVS and community actors</p>	CVS and volunteers become operational with the technical and financial support of OICI and collaboration with the Health Centers and (when districts have them) health posts	The CVS demonstrate their independent capacity to oversee the maternal child health, water resource management and HIV/awareness activities	The community based activities are organized by the CVS and the Ministry of Public Health and Hygiene without support from the project
CVS Training	Basic organization (including good governance) and financial management of a CVS	Technical training of the CVS and volunteers on priority themes (Annex III).	FLSPT and Health Center volunteers train new volunteers and CVS officers and retrain existing volunteers and CVS officers	Health Centers continue to train and retrain volunteers
CVS <i>Caisses</i>	OICI helps CVS create <i>caisses</i> (rotating savings) linked to the sale of basic drugs	Intensive FLSPT supervision of the <i>caisses</i> and on-site capacity building of CVS in the management of the <i>caisses</i>		CVS are able to manage the <i>caisses</i> on their own with minimal oversight from the Health Centers
Community Based Reporting (Health Statistics)	FLSPT health extension workers train health volunteers to collect basic statistics which the extension agents report to the Health Centers	Joint reporting by FLSPT health extension workers and the volunteers to the Health Centers		Health volunteers are expected to provide the health center with basic health statistics
CVS unions (<i>Sous-préfecture</i>)³⁰			Health Center chiefs help CSV organize into sous-préfecture level unions and to establish the rules, regulations and internal statutes for these unions	The Health Centers continue to support these community based activities without external assistance

³⁰ The concept of CVS was not envisioned in the DAP. Currently, however, both the Health Centers and the CVS consider it to be an essential addition to the strategy to ensure the sustainability of the CVS activities and their communication with the Health Centers.

Project Activities under Specific IRs	Phase I: Introductory Capacity	Phase II: Basic Capacity	Phase III: Operational Capacity	Phase IV: Sustainable Capacity
IR2.1: Maternal and Child Health Activities	-Basic training of the volunteers and <i>mamans lumieres</i> to execute growth monitoring, FARN/E, and FARN/G -Distribution of food (twice a year) to encourage participation	-Intensive FLSPT supervision of the community based maternal and child health activities. FLSPT facilitates the Health Center employees' participation in these activities as part of their routine SIAC, PEV, and CPN activities -Distribution of food (twice a year) to encourage participation		-CVS and volunteers are the principal contact between the Health Centers and the community for these activities -No more food distributions
IR 2.2: Potable Water	Identification of communities with most serious drinking water issues	Construction/rehabilitation of wells in villages with most serious drinking water problems through contractors (communities contribute building materials) Communities elect and FLSPT trains water point management committees	Continuous training of water point management committees in basic maintenance, sanitation and hygiene and water treatment	Communities are able to maintain the drinking water points and sanitation standards on their own
IR 2.3: HIV/AIDS Awareness	Basic training of the volunteers and <i>mamans lumieres</i> to execute growth monitoring, FARN/E, and FARN/G	Intensive FLSPT supervision of the community based maternal and child health activities. FLSPT facilitates the Health Center employees' participation in these activities as part of their routine SIAC, PEV, and CPN activities		CVS and volunteers are the principal contact between the Health Centers and the community for these activities

Source: FLPST Final Evaluation Interviews, May-June 2009.

3.2.1. Monitoring Indicators

Even with this major shift in the execution of the strategy and a one year delay in start-up funds (due a delay in the transfer of monetization proceeds), the project was able to achieve (i.e., is within 75% of the original targets) or over-achieve for all but three of the 12 official monitoring indicators (Table 3.4).

The project achieved impressive results in many of the monitoring indicators. This includes (Table 3.4):

- Number of latrines installed (92% of target),
- Number of children de-wormed (175% of target),
- Number of wells constructed and rehabilitated and number of water management committees functioning (both 83% of target),
- Number of HIV/AIDS community awareness workers trained (219% of target); and
- Number of HH reached with the HIV/AIDS awareness messages (116% of target).

The three monitoring indicators for which the project does not seem likely achieve the anticipated results are (Table 3.3.):

- Number of village health promoters trained,
- Number of *Mamans Lumieres* functioning, and
- Trainings conducted in hygiene practices.

3.2.1.1. Monitoring Indicator: Number of Village Health Promoters Trained

The below target achievement on this indicator (53% of target) is related to the project's forced shift in strategy away from training one community health promoter (APS) per village to training two community health promoters (APS) per district due to budget constraints. Once this shift in strategy occurred, the project should have informed USAID/FFP and requested that the target for this indicator be revised to one that reflected the revised strategy. Unfortunately, the target was never revised since neither the country representative nor the project coordinator was aware that they had the right to do so. Since the target was never revised, it gives a false impression that the project under achieved on this important indicator (Annex I and Table 3.4).

3.2.1.2. Monitoring Indicator: Number of Maman Lumieres (model mothers)

The same shift in strategy that was imposed by the budget constraints meant that most of the project's health activities (like the FARNs) were organized at the district-level health quarters for the all the surrounding villages, rather than one or two villages as envisioned in the DAP. This resulted in the less than anticipated achievement for the number of model mothers trained for the FARN (62% of target) (Table 3.4). This is another target that should have been revised downward once it was clear that the project was not going to apply for a budget amendment to increase the number of health extension agents.

Table 3.4: FLPST Project Results based on the Official Project Monitoring Indicators for SO2 (FY01-FY05) (Note: Shaded areas are areas where the reported achievement was 75% or less of the target reported in the IPTT)

Indicator	Baseline	FY05		
		Target	Achieved	% Achievement vs. Target
IR 2.1. Communities implement mother-focused health and nutritional practices for vulnerable households				
# Village health promoters trained	0	175	93	53% ³¹
# <i>Maman Lumiere</i> (model mothers heading up FARNs) functioning	0	200	124	62% ³²
# HH receiving supplemental food	0	5075	5705	112%
# Latrines installed	0	60	55	92%
# Children de-wormed	0	7625	13340 (total) 4842 children affected by this activity	175%
# Children with ORS (oral re-hydration salts) treatment	Not measured	1950	1974	101%
# Trainings (subjects) in hygiene practices	0	175	72	41% ³³
IR 2.2. Communities increase access to safe potable water				
# HHs members with safe water	Not measured	45,000	37,5000	83%
# Wells constructed or rehabilitated	0	150	125	83%
# Water management committees functioning	0	150	125	83%
IR 2.3: Awareness of HIV/AIDS prevention/mitigation strategies reduce risk				
Community awareness workers trained	0	26	57	219%
#HHs reached with awareness message	0	2500	3402	136%

Source: Annex I. FLSPT IPTT.

Note: #=Number.

³¹ Caused by a shift in project strategy from villages to districts; indicator target should have been modified at mid-term.

³² Caused by a shift in project strategy from villages to districts; indicator target should have been modified at mid-term.

³³ This figure gives a false impression that the project has underachieved on hygiene training since it reports on “training subjects” not people (i.e., as subjects) trained. This problem was raised during the FLSPT mid-term evaluation but never corrected.

3.2.1.3. *Monitoring Indicator: Number of Trainings (Subjects) in Hygiene Practices*

In contrast to the other unattained targets, the below-targeted performance of the project on the monitoring indicator used to track the project's performance on hygiene in training (41% of target) is related to the bad formulation of the indicator text, not anything related to the project or its performance or the shift to a district-level strategy.

Part of the problem could be the translation of the English formulation of the indicator in the DAP into French. The team interpreted the indicator's discussion of "subjects" to mean health educational themes. This is how they reported on the indicator. It is quite possible, however, that the consultant who finalized the DAP IPTT had in mind the number of communities in which "subjects" received hygiene training. Since the project envisioned the training of 175 health promoters, this latter explanation is the most likely.

Had the indicator been interpreted in the second sense (i.e., in terms of the number of villages in which the "subjects" were trained in hygiene themes), the project would have overachieved its indicator since hygiene themes were a major focus of the project's IEC programs in all the health districts and the communities served by these health districts.

Here again, OICI was fully within its rights to request that USAID/FFP accept their revision of this indicator and its targets. Unfortunately neither the field team nor the OICI headquarters office was aware that they had the right to request that the indicator be reworded.

3.2.2. Official Impact Indicators

The FLSPT project achieved impressive results on every one of its three impact indicators for SO1 (Table 3.5):

- Percent reduction in diarrhea rates (101% of target),
- Percent reduction in malnutrition <36 months in Pita (119% of target), and
- Percent reduction in malnutrition < 36 months in Telimele (123% of target).

Table 3.5: Baseline and FY09 Impact Indicators for the FLSPT SO2 Activities

Indicator	IPTT vs. Raw Data	Baseline	FY09		
			Targets	Achieved	% Achieved against Target
Official IPTT Impact Indicators for SO2 (all IRs)					
% reduction in diarrhea rates	Indicator		85%	85.7%	101%
	Raw data	30.5%		4.3%	
% reduction in malnutrition <36 months in Pita	Indicator		45	53.6%	119%
	Raw data	22.0%		10.2%	
% reduction in malnutrition < 36 months in Telimele	Indicator		36%	44.3%	123%
	Raw data	22.3%		12.4%	

Source: Annex I. FLSPT IPTT and Project Records.

This included: (Table 3.5):

- A major decrease in the number of children that reportedly suffered from cases of diarrhea from 31 percent at baseline to four percent in FY09 and
- A decrease in malnutrition rates of children between zero and 36 months of age from 22 percent to 10 percent at Pita, and from 22 percent to 12 percent of children at Telimele.

3.3. Other Evidence of Impact

3.3.1. Internal Project Tracking: Stunting and Wasting

As early as FY07, the project's health coordinator signaled the difficulty of calculating the official indicators and the fact that the IPTT included neither wasting nor stunting, which are the standard USAID/FFP indicators of malnutrition. To address this issue, the project implemented its own tracking system for these two indicators. Although the sampling framework (a random sample of project beneficiaries) does not conform to USAID/FFP standards for measuring wasting and stunting (i.e., a census based random sample), the data show project impact on direct beneficiaries. These internal data (i.e., data that were not reported in the official project IPTT submitted to USAID) show a major decrease in the rates of wasting and stunting (wasting from 23% to 14% and stunting from 29% to 22%) (Table 3.6).

3.3.2. Health and Hygiene Behaviors

The project's quantitative final survey showed a number of important changes in health, nutrition and sanitation behaviors including HIV/AIDS awareness and prevention (Table 3.6).

Table 3.6: Internal FLPST Monitoring and Impact Indicators for the Project's Health and Nutrition (SO2) Activities

Internal Indicators	Baseline	FY09
Internal monitoring indicators		
% of women practicing exclusive breast-feeding six months after birth	33.9%	71.2%
% of assisted births	21.1%	78.5%
% of home births	78.9%	32.5%
% of births in health centers	21.1%	67.6%
% of women having a pre-natal consultation	26.5%	85.7%
% of children vaccinated	24.6%	82.5%
Rate of use of latrines	5.1%	65.4%
Internal Impact Indicators		
Stunting	33.7%	14.1%
% of women who report consuming iron rich foods	25.0%	11.1%
% of women who report consuming foods rich in vitamin A	37.8%	85.2%
% of households who report adopting the demonstration model for latrines	0%	61.8%

Source: FLSPT Project, Health Pre-evaluation Document, May 29, 2009.

3.3.2.1. *Sanitation Behaviors*

One notable area of behavior change was a substantial increase in household demand for and use of latrines, which was demonstrated by:

- A reported increase in mothers reportedly using latrines (five to 65% in FY09) and
- The number of households who reportedly tried to adopt the project's demonstration model for latrines in their own household (nine to 60% in FY09).

3.3.2.2. *Maternal and Child Health Behaviors*

The final survey showed:

- An important increase in the practice of exclusive breast feeding (from 34% at baseline to 71% in FY09),
- A major increase in the number of women who sought help from a trained birth attendant (from 21% to 79% in FY09),
- In the number of women who had at least one antenatal consultation (from 27% to 86%),
- In the number of women who reported consuming iron rich and Vitamin A rich foods (from 38% to 74% in FY09 for iron and from 3% to 74% in FY09 for Vitamin A), and
- The percentage of children vaccinated (from 25% to 83%).

3.3.2.3. *Greater Awareness of HIV/AIDS*

Although the official impact indicators did not include measures of impact of project activities related to increasing HIV/AIDS awareness, which were firmly on track according to the two monitoring indicators used to track them (Table 3.4), a separate quantitative survey showed wide levels of comprehension of the causes of HIV/AIDS (which was translated by the project into a public education message on the means of prevention):

- Sexual partners (81%),
- Needles and contaminated objects (94%),
- Blood transfusion (45%), and
- Mother to child during birth (52%).

Unfortunately, there is neither baseline data nor non-project (i.e., outside the intervention area) data against which to measure these achievements other than the national level figures mentioned in the DAP.

3.3.3. Major Community Health Capacity Impact

Guinea's advanced strategy for basic health services has existed since 1986; however, the community-based volunteer strategy envisioned had never been executed in either *prefecture*. One of the greatest achievements of the project was to establish the first model for the recruitment, training, and supervision of these community-based volunteers through the CVS.

3.3.4. Increased Access to Ministry of Public Health and Hygiene Services

Another direct impact of the project's formal training and technical supervision of CVSs was to increase local people's ability to access the government health services being delivered through the *sous-préfecture*-level health centers. This increased access to health services was reflected in a much higher rate of vaccination coverage and antenatal consultation for the districts covered by the project than what was recorded for the districts not covered by the project.³⁴

3.3.5. Local Capacity Building (gender impacts)

Although women had a tradition of organizing across village lines to lobby on behalf of agricultural issues, this was the first time they had been brought together to lobby on behalf of health issues. Many women cited this as one of the principal impacts of the project during the stakeholder focus groups.

3.3.6. Intra-Project Variation

Although the final evaluation team found that the overall project impact on health was very positive, the team also found a number of important differences between districts when the CVSs were classified into categories based on the quality of their collaboration with the health centers for vaccinations and antenatal care, the level of understanding of their role and how they should be organized, and the size of the CVS *caisses* (savings) and the committees' ability to manage these *caisses* to provide basic services such as medications for the villages that they serve (Table 3.7).

- **Category A:** Based on interviews with the project extension agents, the districts in Group A (58% of the districts supported by the project in the two *prefectures*) appear to have sufficient basic capacity to graduate. Graduation is based on a well-organized office, the regularity with which the CVS volunteers and elected officers meet, good capacity to document what they do, and the size of their *caisse* (saving) based on the sale of pharmaceuticals and health cards.
- **Category B:** A second group (24% of the districts) is considered to have only average capacity. The CVSs in this group were generally less organized, particularly in relation to their collaboration with the state health structures on key issues like vaccination and antenatal consultation. These same districts are characterized by smaller *caisses*.
- **Category C:** A third group (24% of the districts) is considered weak, both in terms of core organizational capacity and collaboration with the health centers. Most of the districts in this category have a large number of villages in isolated mountain areas.
- **No Intervention:** Eighteen percent of the districts had no project intervention.

³⁴Vaccination rates in the districts where FLSPT does not intervene tend to be about one third to one half of vaccination rates in villages where the project intervenes and where the CVS has basic or above average capacity (36-41% in non-project versus 66-86% in project villages with basic or above average capacity). For example, in Sinta vaccination rates are between 28 and 37 percent in non-project villages; in Doughol Touma between 61 and 74 percent in project villages with basic capacity or above (Annex 3, Table 4).

3.4. Challenges and Priority Actions Needed to Strengthen Project Sustainability and Impact

3.4.1. Sustainability Issues

In the case of health the critical constraint to sustaining the FLSPT Project's impact is NOT the core organizational capacity of the community based institutions (the CVSs) that it helped develop, train, and support. Far more pressing and in need of immediate follow-up are the two cross-cutting "transversal" constraints and challenges that affect the capacity of the CVS and Ministry of Public Health and Hygiene to sustain the FLSPT health initiatives once project funding ends (Table 3.7). Specifically³⁵:

- Challenge 1: CVSs have not developed sustainable systems for compensating, reviewing, and training volunteers that are essentially to the functioning of the CVS and
- Challenge 2: The weak capacity of the Health Centers to Collaborate with Community Based Health Structures.

Unless these challenges are addressed, it is likely that 100 percent of the CVSs—irrespective of their level of capacity (A, B, or C)—will be vulnerable once project funding ends. Even those CVSs who ranked very high in capacity (Category A) will have difficulty keeping the volunteers that are responsible for this high capacity unless they are provided some compensation once the project's compensation ends.

3.4.2. Priority Actions Needed

Based on the analysis the team identified eleven (11) priority actions that could help address these constraints and strengthen project impact and sustainability.

Challenge # 3: *Lack of sustainable systems for improving and maintaining CVS activities once project funding ends.*

Summary Observations: Despite project efforts to develop a compensation program for CVS volunteers to be paid by communities almost no compensation had ever been paid. In addition, while many of the health volunteers are hard working, some are not. To date, neither the project nor the Health Centers have developed a system for reviewing the performance of health workers. A more structured system will be needed in order to better link training and compensation to performance.

Another constraint to sustainability is the lack of any formal structure for communication between the CVSs other than through project staff despite the current expectation (supported by the project) that the CVSs would regularly submit their reports to the health centers. This lack of any formal structure that links the CVSs to their health centers makes it difficult for them to communicate with each other and to ensure any sort of broad-based harmonization of the CVS structures and norms.

³⁵ The project challenges identified in each chapter are numbered sequentially (1-10) and summarized in the final chapter.

Table 3.7: Classification of CVS in Terms of their Ability to Sustain the Current Programs and the Principal Group Specific and Transversal Constraints to Achieving Greater Impact and Sustainability (SO2)

Number of Districts that Extension Supervisors Classified in this Group	Core Organizational Capacity of the CVS	Level of <i>Caisses</i> (savings) Managed by the CVS	Critical Constraints to Greater Impact and Sustainability	
			Constraints Specific to this Group	Transversal Constraints (Shared by All Groups) ³⁶
<p>Category A: 19 districts (58% of the project districts)</p> <p>Situation Improved and Strong Prospects for Sustaining FLSPT Supported Achievements</p>	<p>-Strong capacity to support MoH and FLSPT Activities</p> <p>-CVS meet regularly</p> <p>-Good documentation of activities</p>	<p>-Large</p> <p>-Capable of self-financing some of the costs of activities</p> <p>-Emerging interest in <i>mutuelles</i> (group insurance plans sanctioned by the state) linked to the <i>caisses</i></p>	<p>--A small but growing number of the CVS are not respecting the original organizational model</p>	<p>Weak capacity of the CVSs to execute their activities without project support (no systems for compensating, training or evaluating CVS or unions linking CVS)</p>
<p>Group B: 8 districts (24% of the project districts)</p> <p>Situation Improved but Still Vulnerable</p>	<p>-Average capacity to support the Health Center and FLSPT Activities (not as organized as Group A)</p> <p>-CVS meet less regularly</p> <p>-Weak documentation of health activities</p> <p>--Some Health Volunteers not performing/not well trained</p> <p>-Not all villages in the district participate</p>	<p>--Average</p> <p>--Insufficient to self-finance activities (without project support)</p>	<p>Weak capacity and activities of the 40% of the CVSs that are still weak Groups B and C).</p> <p>--These groups are not as capable of organizing their collaboration with the Health Centers and of Managing their Group savings</p> <p>--A high percentage of these villages are located in mountainous areas which limited their participation in the FLSPT health activities at the district headquarters</p>	<p>Weak capacity of the Health Centers to Collaborate with Community Based Health Structures (no administrator charged with responsibility and no systems for compensating, training or evaluating CVS)</p>
<p>Group C: 6 districts (18% of the project districts)</p> <p>Still vulnerable (little improvement)</p>	<p>-Lack basic capacity to support Health Center and FLSPT (very little advance organization of FLSPT or Health Center activities)</p> <p>-A high % of villages don't participate due to difficult</p>	<p>-Very Limited</p>	<p></p>	<p></p>
<p>0 No intervention OICI health 14 districts</p>	<p>0</p>	<p>0</p>	<p>0</p>	<p>Basic development of CVSs (depending upon resources)</p>

³⁶ See section 4.0 of this chapter.

Recommendations:

- Strengthen CVS's capacity to develop IGAs such as district-level boutiques that can generate funds CVSs can use to compensate the health volunteers;
- Build the capacity of the Health Centers to review the performance of the health volunteers and to develop appropriate training; and
- Assist CVSs in forming unions (such as the unions that have long been used to unite agricultural *groupements*) in order to make it easier for the six *sous-préfecture*-level health centers in the areas where the project intervenes and the provincial-level DPS that oversees them to facilitate long-term training, communication and oversight of their community-based activities, including the new IGAs being proposed to support the community based volunteers.

Challenge # 4: *Weak capacity of the Health Centers to collaborate with and support community-based health structures.*

Summary Observations: Although the project achievements fit directly within the goals and organization of the two DPS and the six Health Centers with which it collaborates, the FLSPT Project has never signed a formal agreement with the Ministry of Public Health and Hygiene. There is also no formal written explanation, guidance or norms, outside the project training records, of the roles and function of the CVS and the various elected offices within the CVS. The lack of written records and norms made it difficult for new Ministry of Public Health and Hygiene core and contractual staff (i.e., staff hired as contractors in the health posts) to understand the role of the CVS and how they were expected to collaborate.

For this type of innovative rethinking of community-based health systems to be successful, it needs a broad base of administrative support, as well as a high level of support from the Ministry of Public Health and Hygiene, which it already has. One major result of the final evaluation was to show that most of the public officials interviewed had never seen any of the FLSPT Project health activities or met any of the community agents responsible for executing them other than the OICI health agents. The two principal reasons for this seem to be that:

- Most reporting for the project's health activities was mainstreamed into the Health Centers' own reporting since these activities were fully compatible with and owned by the Health Centers (therefore it was not shared widely across sectors) and
- Most of the field visits to the project sites coincided with the inauguration of project infrastructure which meant that the focus of the field visits was the project's agricultural activities under SO1.

Recommendations:

- Care must be taken to establish clear written norms for the project's intervention structures, *groupements* and CVSs in the case of this project, and their roles to ensure broad-based harmonization of the basic organizational model and partner (i.e., Ministry of Public Health and Hygiene and civil authorities) support for the model;

- Strengthen the capacity of the Ministry of Public Health and Hygiene in the two *prefectures* to support community-based systems by encouraging the ministry to appoint one individual within the DPS to oversee these activities as is already recommended in the advanced health strategy;
- Sign a formal MOU (memorandum of understanding) with the health *directorates* (DPS) for the two *prefectures* in order to clarify the roles of the different actors (project and Ministry of Public Health and Hygiene) in sustaining the project's community-based health structures;
- Work with the Health Centers to simplify the forms that the Health Promotion Agents (APs) use to report on the community-based health activities (i.e., move in the direction of a community-based M&E system);
- Project supervisors and field agents should supplement the information on project norms and reports by encouraging key government partners (from the *sous-préfecture* office and the Health Centers) to conduct site visits, particularly at the beginning of project activities. These field visits are especially critical to health given the novelty of the community-based health volunteers. Official recognition of the community-based volunteers validates their role and increases the chance that the administrators and leaders will facilitate their sustainability;
- Combine the inauguration of project infrastructure (e.g., roads and bridges built through FFW)—which typically attracts lots of important political and administrative figures to local communities—with CVS meetings in order to help the visiting dignitaries identify and understand CVS's role. Whenever possible, CVS leaders should consider organizing field days to isolated districts that include at least one village that is not a district level headquarters in order to show these activities in remote areas.

Challenge # 5: *Need for capacity-building of the 40 percent of the CVSs that are still weak.*

Summary Observations: Even if the other constraints to sustainability are addressed, about 40 percent of the CVSs (Groups B and C) still lack the basic institutional capacity to execute the community-based activities on their own. A high percentage of these weaker CVSs are located in mountainous areas, which impede people from these communities coming to the district centers for the bi-monthly project activities (e.g., FARNs and growth monitoring). The same mountainous terrain reduces the health extension workers' ability to access these villages regularly for community-based activities and home visits that are needed to mobilize community support.

Recommendations:

- Focus project support for activities and supervision by FLSPT health agents and health supervisors) on the most vulnerable districts and graduate the less vulnerable districts.
- Strengthen OICI staff capacity to develop more sustainable health systems by adding two supervisor positions to focus on institutional development and sustainability issues. Currently there is only one supervisor (the health coordinator) to cover the six agents, the 31 health districts, and 319 communities

served by the project's health activities. In contrast, the supervision ratio is much better (one supervisor per 73 communities) for the project's agricultural activities, which are managed by three supervisors (two regional supervisors and one coordinator).

Chapter Four

Food for Work, Direct Distribution, and Monetization

To date the FLSPT project has (Table 4.1):

- Monetized and/or participated in the monetization of 6,440 MT of vegetable oil; and
- Distributed 3,941 MT of corn meal (semolina), canned peas, and vegetable oil as FFW (Food for Work) and DD (direct distribution).

Table 4.1: Summary of FLSPT Resources Provided by USAID

	Direct Distribution (MT)	Monetization (MT)	Total Tonnage (MT)	Equivalent Monetization (US\$)
2005	470	1,960	2,430	1,559,760
2006	953	1,420	2,373	1,066,208
2007	918	1,410	2,328	1,201,120
2008	850	1,000	1,850	1,415,600
2009	750	650	1,400	839,250
Total Approved to Date	3,941	6,440	10,381	6,081,938

Source: A. Camara, Resident Representative, OICI/Guinea and Abiba Konate, Senior Accountant, OICI/Philadelphia. July 2009.

The monetization proceeds were used to fund the cash costs of all the activities outlined under SO1 and SO2 (Chapters 2 and 3). The programming and execution of these project FFW and DD activities occurred as part of the routine programming of the activities under SO1 and SO2 (Table 4.2). For this reason, the indicators used to track the results and impact of these activities are tracked as part of the monitoring indicators for the respective SOs and IRs (Annex I).

One important role of the FLSPT was to ensure that these monetization, FFW, and DD activities complied with USAID expectations for commodity management.

- *FFW and DD*: The minimum expectations for FFW and DD are to minimize storage and transportation losses associated with the commodities received and to show the project systems for targeting vulnerable households, assessing a reasonable ration size, and minimizing “double dipping” (i.e., households benefiting from multiple distributions from different sources).³⁷
- *Monetization*: The minimal expectation for monetization is to minimize storage and transportation losses and to maximize the prices received for commodities while doing “no harm” to the local market system and/or incentives.³⁸

³⁷ See USAID/FFP. Commodities Reference Guide Module 2-FFW Programs. Module 2.

³⁸ For a description of monetization and the first phase of monetization under this project see http://www.usaid.gov/gn/gn_new/news/2000/001031_pl480/monetization.htm

The role of the FLSPT food commodity coordinator was to oversee these compliance and storage issues for the activities supported with FFW and DD; the role of the FLSPT monetization coordinator was to oversee any issues with the products being monetized.

This chapter provides a brief overview of OICI's design and execution of FFW, DD and monetization in the context of this project. Similar to the other chapters, the analysis examines:

- The evolution of the project strategy;
- The strategy's results, in terms of the amount distributed and compliance with USAID expectations, as well as a brief overview of the impact of these activities in achieving the project's broader goals for food security; and
- Challenges for future programming on future OICI projects in Guinea and other countries based on lessons learned from the current project.

These topics are covered first for FFW and DD in sections 4.1, 4.2, and 4.3 and then for monetization in section 4.4, 4.5., and 4.6.

4.1. Food for Work and Direct Distribution Project Strategy

In 2004, the year the FLSPT proposal was first developed, USAID/FFP announced the decision that all Title II programs should use 25 to 30 percent of the project food aid for DD and FFW. With this new USAID requirement, OICI incorporated into the DAP the use of direct food distributions: (1) to strengthen the impact of the project's SO2 maternal and child health activities and (2) to assist vulnerable groups by providing food rations necessary to improve household food security and jump-start their participation in agricultural extension activities under SO1.

The original DAP outlined six major categories of FFW support to their proposed activities: (1) construction and rehabilitation of roads and bridges, (2) production of organic fertilizer, (3) establishment of tree nurseries, (4) promotion of reforestation, (5) initial support for livestock auxiliaries, and (6) initial support for the health volunteers (APS) (Table 4.3). Two additional types of FFW, one focused on wells and one focused on latrines, were added in FY07. In addition, the community-based literacy instructors received small amounts of FFW as partial compensation for their efforts.

4.1.1. Commodity Management

OICI/Guinea's only prior experience with food distribution was with providing 100 to 150 MT of food from the World Food Programme (WFP) for complementary FFW activities associated with its earlier Title II Profitable Agriculture & Village Extension (PAVE) Project in Mamou, Guinea. Therefore, the staff had little experience with the kinds of logistical details and planning needed to successfully store and distribute food at the scale expected for this project. To address this issue, the project hired a national WFP staff member to serve as the OICI Food Distribution Coordinator. His role included the tasks of calculating the level of rations and determining the caloric value of food distributed. The project developed seven steps to manage the project food commodities (Box 4.1). Once the first commodities arrived in FY06, the project hired four additional

Table 4.2: Types of FFW Used to Strengthen the FLSPT Activities under Specific SOs and IRs

SO/IR	Food for Work						Direct Distribution		
	Roads & Bridges	Agriculture (Composting)	Agro-Forestry (Tree Nurseries, Reforestation)	Latrines & Wells	Health Volunteers (APS and PE)	Livestock Auxiliaries	Literacy Instructors	Growth Monitoring	Vulnerable Groups ³⁹
SO1: Households in Telimele and Pita <i>prefectures</i> reduce chronic vulnerability through sustainable increases in food access									
IR1.1: Farmers reduce vulnerability through sustainable increases in food production and productivity		X	X		X	X	X		
IR 1.2: Households enhance food access by reducing food and crop losses									
IR 1.3: Improve economic access for poor households through infrastructure development	X								
SO2: Communities enhance human capacity through improved health and nutritional practices									
IR 2.1: Communities implement mother-focusing health and agent practices for vulnerable households				Latrines				X	
IR 2.2: Communities increase access to safe potable water				Wells					
IR 2.3: Awareness of HIV/AIDS prevention/mitigation strategies reduce risk					X				

Source: FLSPT Final Evaluation Interviews. June 2009.

³⁹ The direct distribution to vulnerable groups—i.e. elderly and handicapped without support—is not programmed under a specific IR.

food commodity staff members to help with the seven-step process it developed for commodity management (Table 4.4 and Box 4.1):

- Two food monitors in charge of monitoring the actual distribution of food in connection with field activities and
- Two warehouse managers responsible for overseeing the physical stocking and management from OICI's two rented warehouses (one each in Pita and Telimele).

Starting in FY08, the activities of the food monitors were executed by the project extension agents (for health and agriculture) in association with the village distribution committees. The original plan was to create one village distribution committee per district that would cover all FFW and DD activities in the member villages. Based on extension agent feedback, it was decided that this was too much work for one committee, and separate committees were set up for health (SO2) and agriculture (SO1) in 2008 (Table 4.4, Box 4.2).

4.1.2. Specific Food for Work Strategy

The initial identifications of the public works (roads, latrines, and wells) and individual and *groupement* (field rehabilitation and agro-forestry) projects were almost always by the project extension agents in collaboration with local leaders and beneficiaries. Once the projects were proposed, OICI worked with various technical partners like the Ministry of Agriculture (see second column, Table 4.3) to set priorities and ensure good technical designs that were then executed as part of the project's agricultural and health activities (Chapters Two and Three). The actual food distributions for FFW were timed for June and July, which is the height of the *soudure* (lean) period when farmers start rainy season cultivation and food stocks, and energy levels are typically at their lowest level, especially in the most food-insecure households.

Certain types of FFW, most notably large, labor-intensive works like the roads and bridges, targeted able-bodied men who received a ration that was a wage equivalent payment. A high percentage of the beneficiaries for the less labor-intensive collective FFW activities (such as composting pits, tree nurseries, agricultural and agro-forestry demonstration fields) were women, especially those who were vulnerable. After 2007, the project added a new sub-component of activities that facilitated vulnerable women adopting some of the more labor-intensive new technologies such as compost pits and tree nurseries on their private household fields.



Impact: Household Level Vulnerability and Gender. Mme. Aisseta Bailo Ba with the FLSPT agricultural extension agent (Amadou Petty Diallo). The initial development of her tapade (housefield) where she is standing was funded through FFW; with compost from this investment she was able to increase her animal, food, and tree production. She has planted over 100 trees on the plot. Source: D. McMillan.

Table 4.3: FLSPT/OICI Food for Work Activities, Major Partners, and Selection Criteria (FY05-FY09)

Activity	Government Technical Partners	FY05	FY06	FY07	FY08	FY09	Total
SO1: Households in Telimele and Pita <i>prefectures</i> reduce chronic vulnerability through sustainable increases in food access							
1. Rehabilitation/construction of roads (km)	<i>Section route rurale</i>	0	48.5	80	80		208.5
2. Bridges constructed or repaired (units)		0	10	0	17	6	33
3. Organic fertilizer made (m ³) on collective and private fields	<i>Developpement rurale</i>	500	860	1200	1400	1010	4970
3. Agro-forestry nurseries (units) created on collective and private fields	<i>Cantonment forestier</i>	18	28	46	27	65	184
4. Reforestation done (ha) on collective and private fields	<i>Cantonment forestier</i>	2	60	68	23		153
-- <i>Haie vivres</i> (live fences)	“						
--Biological barriers	“						
--Rehabilitation of eroded land for forestry	“						
5. Adult literacy promoters supported (# supported) ⁴⁰	<i>Direction de l'éducation, Section alphabétisation a la base</i>			12	12	12	36
6. Livestock health promoters (<i>auxilieres villageois</i>) supported (# supported) ⁴¹	<i>Service d'élevage</i>			12	12	12	36
SO2: Communities enhance human capacity through improved health and nutritional practices							
1. Health-promotion agents supported (<i>Agents Pomoteurs de Sante</i> or APS) ⁴²	<i>Direction prefectorale de la sante</i>	57	57	93	93	57	357
2. To facilitate the collection of local materials for:							
--The construction and rehabilitation of wells (# WELLS)	-SNAPE (SNAPE: <i>Service National d'Aménagement des Points d'Eau</i>) (for locating the wells within the national hydraulic map and policy) --3 commercial enterprises that signed contracts with OICI to execute the wells	0	36	39	40	10	125
--The construction of the project's improved model for latrines (# LATRINES)	-The Parent-Teacher Association (<i>Association des Parents et Amis d'Ecole</i> or APAE) -Directly executed by community under the supervision of the OICI agent	0	12	25	11	7	55

Source: Barry Mody Sory, Food Distribution Coordinator. Pre-Evaluation Briefing Papers. May-June 2009.

⁴⁰ They receive 50 kg of corn meal (simolina), 5 Kg of peas, 5 liters of vegetable oil every three months (quarter) since 2006.

⁴¹ Same as above.

⁴² Same as above.

Box 4.1: Steps Developed by OICI for Commodity Management for FFW and DD

Step 1. Identify storage facilities and equipment needed (warehouses, pallets, scales, and tarps for covering commodities in the event of rain).

Step 2. Prepare working documents (transit letters for cars, stocking notes, registration and sales notebooks, distribution cards, empty sacks, and jerry cans for reconditioning).

Step 3. Recruit a security firm.

Step 4. Acquire reconditioned stock.

4.1. Prepare the AER and call forward according to tracking of annual budget.

4.2. At the reception of the bill of lading, submit a proposal for a tax free releasing of the commodities to the National Direction for Cooperation and after several days of monitoring, prepare a letter requesting that the customs office authorize the release.

4.3. Submit letter and original bill of lading to the company or transit office for the customs declaration and release.

4.4. Submit letter to the supervision society and contract.

4.5. Organize coordination meeting with the company to organize products' release and receipt in the project warehouse.

4.6. Mobilize a security team to the warehouse, release commodities, receipt and recondition torn sacks and pierced jerry cans.

4.7. Complete monitoring report.

4.8. Review supervision report (*rapport du surveillant*) and send original to FFP through OICI/HQ.

Step 5. Transfer products to project site.

5.1. Advertise bid for transportation and complete a contract for transportation.

5.2. Transport products to Pita and Téliélé.

Step 6. Quarterly site visits and inventory.

Step 7. Complete commodity reports for USAID and OICI/HQ.

Source: Barry Mohamed Lamine. Pre-Evaluation Briefing Papers. May-June 2009.



Impact: Decreased Community Vulnerability by Improving Bridges. Food for Work was used to compensate community members who worked on bridge construction and rehabilitation. This bridge was created by the project at Missira (Sinta- Téliélé) and reduced community vulnerability by improving access to markets and services.

Source: OICI/G. 2nd Quarterly Report FY09.

Table 4.4: FLSPT/OICI/Guinea Project Commodity Management and Monetization Employees, Local Committee Structures and Project-Sponsored Training (FY05-09)

Project Staff, Warehouses, Community Structures, & Trainings	FY05	FY06	FY07	FY08	FY09
Food Distribution Coordinator (<i>Coordinateur de Distribution des Vivres</i>)	1	1	1	1	1
Food Monitors					
--Pita		1	1		
--Télimélé		1	1		
Large Warehouse Managers					
--Pita		1	1	1	1
--Télimélé		1	1	1	1
Security Guards					
--Pita		3	3	3	3
-- Télimélé		3	3	0	0
Village Distribution Committees					
--Combined			0		
--SO1 (agriculture)				38	38
--SO2 (health)				31	31
Community Warehouses					
--Combined	1	1	1		
--Pita	1	1	1	1	1
--Télimélé			1	1	1
Trainings					
--Food Monitors (5 days)		2	2		
--Warehouse Managers (5 days)		2	2		
--Guards		6	6		
--Field agents (health and agriculture) (3 days)			18		
--CVSs (1 day)				69	

Source: Barry Mody Sory, food distribution coordinator. Pre-Evaluation Briefing Papers. May-June 2009.

Box 4.2: The Four-Step Process for Creating Food Distribution Committees

Step 1. *Extension worker training during regular project meeting:* Prior to choosing the committee, the project director worked with extensions agents during the weekly project meetings to help them understand the committees' roles.

Step 2. *Community outreach and public awareness building:* Agents were then asked to discuss the concept of the committees with the communities and local authorities and to identify the criteria for participation in the committees.

Step 3. *Election of the committees:* Once the agents felt that their understanding was adequate, the village elected a committee.

Step 4. *Food distribution committee training:* The committees then attended a one day workshop at the *sous-préfecture* level.

Source: Barry Mody Sory, Food Distribution Coordinator. Pre-Evaluation Briefing Paper. May-June 2009.

4.1.3. Specific Direct Distribution Strategy

Although the targeted population for DD food aid was vulnerable individuals, neither the DAP or OICI had developed criteria with which to identify or target these vulnerable groups. The first distribution in FY06 quickly revealed the project would need to develop more specific and transparent criteria to classify individuals as vulnerable in order to avoid discord within the village, thereby making distributions virtually impossible. The project developed criteria targeting three types of individuals in households that OICI health agents and local leaders identified as food insecure (Table 4.5). Starting in 2008, the process of identifying and tracking the distribution of food to these vulnerable groups was made much easier by the creation of the trained village distribution committees (*comités villageois de distribution*) (see section 4.1.1, Table 4.4).

Table 4.5: Categories of Vulnerable Households Targeted by the FLSPT Project's DD Program

Categories of Vulnerable Individuals	FY05	FY06	FY07	FY08	FY09	Total
1. Pregnant and lactating women participating in the growth monitoring and pre-natal counseling activities co-sponsored by FLSPT and the Health Centers		6607	14775	8841		30,223
2. Handicapped persons without support			142	86		228
3. Elderly persons without support			304	182		486

Source: Barry Mody Sory, Food Distribution Coordinator. Pre-Evaluation Briefing Paper. May-June 2009.

4.2. Results and Impact (FFW and DD)

4.2.1. Commodity Management (Warehousing)

Even though the project was relatively inexperienced with food commodity management, the project's commodity management (or warehousing) losses were minimal with one major exception. The largest loss⁴³ occurred when OICI's Telimele warehouse was looted over a two-day period during a two-month general strike (January and February 2007). After this looting, the entire storage system was reviewed. Instead of having one warehouse at Telimele, the project created community warehouses in Sinta, Gougoudjè, Sarèkali, and Leymiro. The reasoning behind this strategy was individuals in the area would be less likely to pillage food aid warehouses in their own communities since their communities would receive fewer food rations as a result. The current system includes one large warehouse in the town of Pita and four community warehouses in the *sous-préfecture* headquarters of Sarèkali, Gougoudjè, Sinta, and Leymiro. This shift in strategy was successful as it did increase community involvement in protecting the food stores. Today, the Pita warehouse is the only warehouse for which the project still needs to hire guards.

Despite low average (i.e., annual) loss rates, one of the principal conclusions of the site visits by the USAID/FFP/HQ officer during the final evaluation was OICI needs to

⁴³ 266 MT of corn semolina, 29 MT of green peas, and 27 MT of vegetable oil.

strengthen staff understanding of and compliance with USAID norms and regulations concerning warehouse management.

4.2.2. Food for Work Impact

The project kept records on the work done under the FFW component (Table 4.5). These activities, which were programmed as part of the SO1 and SO2 activities of the project (Chapters 2 and 3), had a direct and measurable impact on food availability, access, and utilization, as well as household and village level vulnerability (Table 4.6).



Impact: Decreased Community Vulnerability by Improving Rural Roads. Rural road improved with FFW linking Donghol Touma to Douki (Doghol Touma).

Source: OICI/G. 2nd Quarterly Report FY09.

4.2.2.1. *Roads and Bridges*

The project's M&E department estimated that 67 percent of the *groupements* participated in (i.e., received FFW) or were affected by the project's rehabilitation or construction of 208.5 kilometers of roads and 33 bridges (figure as of May 2009). This component of the project had a direct impact on food availability and access in many of the adjacent villages (Box 4.3) by:

- Increasing community access to the project's crop extension services (including demonstrating trials) and
- Making it easier for these communities to get products to market centers with better prices.

Several political leaders also emphasized the political impact the roads had in facilitating local people's participation in elections and election campaigning. To the extent that the roads addressed these constraints, they also helped reduce community-level vulnerability to risk.

4.2.2.2 *Latrines and Water Points*

The use of FFW⁴⁴ to facilitate demonstration of the project's new model for latrines combined with the project's huge emphasis on promoting latrine use through IEC sessions, as well as in connection with the project-sponsored growth monitoring sessions, FARN-E and FARN-G, contributed to:

- A 60 percent increase in the rate of latrine use (from five to 65%, Table 3.4) and
- An 85 percent reduction in diarrhea rates (101% target versus achievement for this impact indicator [Annex I]).

⁴⁴Although the actual construction work was usually performed by a contractor (for the wells) or contract laborer (for the latrines), the project used FFW to reward farmers for contributing the materials used to construct the new project model for latrines and improved water points.

Box 4.3: Impact of the Djalba Bantan Road Rehabilitation which Facilitated Access to Seven Villages in the *Sous-prefecture* of Gougoudje

Food Utilization/Health Service Access: Now our sick can be sent to the closest health center in Gougoudje by cars or motorcycles that specialize in this sort of transport. Before we transported them in hammocks. We no longer have to do this.

Habitat: Before the road was completed, our houses were constructed in *banco* (non-fired brick). After the road, we began to construct in cement because the imported materials needed for this can be transported by vehicles.

Food Access and Dietary Diversity: In the seven villages affected by the road rehabilitation, six villagers have purchased two wheel motorcycles in order to coordinate transportation to the urban centers and transportation of certain goods like sugar, oil, soap, salt and even dried fish which are sold in these villages.

Political Integration: Thanks to the road, the administrative authorities of Gougoudje—the *sous-prefet* and the president of the *Communauté Rurale de Développement* (CRD or Rural Development Community)—are able to travel and see the reality of our villages and demand that we pay the annual minimum development tax more regularly.

Education: Once the road was open we got more support from the Direction of Primary Schools. We are currently awaiting the construction of a community school for 35 children.

Food Availability: The price of agricultural products like rice, peanuts, and millet has increased. This is because we are now able to sell our products a little at a time like people in town. The higher prices have also encouraged many young people to produce in the last two years, which has increased rice and peanut production.

Food Utilization/Drinking Water: Once the road was open, OICI was also able to help us develop three improved wells, which has increased our access to clean water.

Difficulties:

The road segment has two sections that continue to be problematic: (a) a steep hilly part (for which there were no machines or equipment with which to reduce the steepness) and (b) a large flat rocky area just before the arrival in the village that is subject to seasonal flooding.

Most of the land owners in this locality live in the neighboring *sous-prefecture* of Sinta and have come here to cultivate rice and peanuts in the last two years and to transport their rice and peanut harvest by vehicles.

Source: Final Evaluation Interviews. June 2009.

Table 4.6: Impact of FLSPT FFW Activities on Food Security and Vulnerability
(X=Measurable impact on activities linked to project impacts)

Activity	Availability	Access	Utilization	Village Level Vulnerability	Household Level Vulnerable
FFW					
Rural Roads and Bridges (construction and rehabilitation)	X	X	X	X	
Composting on collective and individual plots	X	X		X	X
Tree planting on individual plots		X		X	X
Tree nurseries on individual plots		X		X	X
Literacy training (trainers)				Limited impact to date due to small number of people trained	
Latrines				X	
Wells				X	
DD					
Maternal and child health programs (for pregnant and lactating women)			X		
Other vulnerable groups (the handicapped and elderly without support)					Major short term impact on these households, but cannot be tracked through M&E system

Source: OICI/FLSPT Final Evaluation Interviews and Document Review. June 2009.

4.2.2.3 *Agricultural and Agro-Forestry Innovations*

FFW had a major impact on food access and availability by reducing the risk associated with *groupements* and individuals adopting the two most important improved agricultural technologies being promoted by the project and tracked in the project IPTT:

- The new higher-yielding crop seeds promoted through project-sponsored demonstration plots developed by Guinea's major agricultural research and training facilities (374% of target, Annex I) and
- The intensification of food and agro-forestry production, including fruit trees and trees for fuel wood and sale, on farmer's cultivated house fields (*tapades*) (310% of target, Annex I).

The principal constraint to both technologies was the high up-front labor investment during the dry season. In the case of the demonstration trials to promote new higher-yielding seeds, this initial investment involved significant labor for field clearance and construction of above-ground or below-ground bins for composting. The project's willingness to give *groupements* and individuals (after FY07) a FFW ration that was prorated to the amount of time devoted to the activity helped reduce the risk associated with

this initial investment. In the case of seedling nurseries, the principal constraint was the substantial delay between the planting and harvesting of the first tree seedlings. The use of FFW to encourage both *groupements* and individuals to start tree nurseries helped overcome this initial constraint. Most of these collective and individual household activities were self-sustaining after the first year and required no additional FFW to encourage technology adoption.

4.2.2.4. *Livestock Auxiliaries and Health and Literacy Volunteers*

A relatively small percentage of the total volume of FFW was used to encourage and reward the 12 livestock auxiliaries, who were recruited and trained by the project, and the community-based health and literacy volunteers. The food aid was intended to be used until more permanent sources of compensation could be developed. The project planned to develop a compensation system for livestock auxiliaries based on sales of livestock veterinary products and services (e.g., vaccinations) and for health and literacy volunteers based on investment of community resources.

Although exact figures are lacking, the results of a FLSPT-sponsored evaluation⁴⁵ and the final evaluation interviews with auxiliaries suggest that most of the project-sponsored livestock auxiliaries are now self-supporting through these sales. In contrast, the evaluation found very few cases in which the local communities had organized even the minimum base of support for the health and literacy volunteers. In the case of the literacy workers, the basic strategy may be flawed as there is little evidence (based on either the project or the Ministry of Education's figures) that it is achieving the expected impact (i.e., widespread increases in basic literacy), which makes it difficult to drum up support for use of community resources to compensate literacy volunteers.

4.2.3. Direct Distribution Impact

4.2.3.1. *Maternal and Child Health Programs*

The DAP envisioned pregnant and lactating women as one category of vulnerable households. Rather than developing a way to distinguish between very vulnerable and less vulnerable pregnant and lactating women, the project distributed a small amount of food⁴⁶ to all women who were either pregnant or lactating, while disallowing a few notable exceptions such as the wives of civil servants (like teachers and the *sous-préfet*). Despite the project and the evaluators' concern about creating dependency, the global impact of this direct distribution appears to have been very positive for three reasons.

- It encouraged women from the more isolated villages and hamlets to make a monthly (and some times a bi-monthly) trip to the district-level headquarters to participate in the FLSPT-sponsored growth monitoring sessions since receiving the food distribution was linked to their regular attendance. In the absence of a major, highly visible incentive, it would have been difficult to convince the

⁴⁵ OICI. 2007. Le rapport d'évaluation des auxiliaries d'élevage. Pita : OICI/FLSPT.

⁴⁶ 50 kg of maize meal (simolina), 5 kg of canned peas, and 2.5 liters of vegetable oil per beneficiary.

women to attend these sessions with any greater frequency than they had attended the district-level vaccination and prenatal counseling sessions that the health centers had sponsored before the project began. One of the best measurements of this impact is the higher rates of participation in routine health services, such as vaccinations and pre-natal counseling in the FLSPT-assisted versus non-assisted health districts (see Chapter 3).

- Although the women reported coming initially for the food, the results of the visits (in terms of improved child health) are now their principal motivation.
- The actual amounts distributed (small amounts of food twice a year) were insufficient to discourage households trying to better their food self-sufficiency.

4.2.3.2. *Other Vulnerable Groups*

Since there was no specific intermediate result that targeted vulnerable groups in a general way, nor any indicator (internal or official in IPTT) that tracked the project's impact on these groups, it is difficult to assess the impact of the project's direct assistance to the second and third category of vulnerable people (i.e., handicapped and elderly persons without support). Although the short-term impact of this food assistance was no doubt positive by increasing their food security and reducing morbidity and mortality, this is unlikely to have a major impact since this assistance was not situated within a more broad-based initiative to develop community support for these vulnerable groups.

4.3. **Sustainability Challenges and Priority Recommendations for Strengthening Sustainability and Project Impact (FFW and DD)**

Challenge #6: *Thirty-nine percent of the project villages (vulnerability Category C for agriculture) have not increased food production and access to the desired levels, often because of their isolation in mountainous areas.*

Summary Observations: Although the impact of FFW had a sustainable impact on food availability and production in most project villages, there are a core group of villages (the 39% of *groupements* classified in vulnerability Category C, Chapter 2) that are the most vulnerable. Many of the villages in Category C are located in isolated mountainous areas where it was more difficult to transport commodities. The lower level of assistance for development of organic fertilizer and forest nurseries has negatively affected food availability and access for this very vulnerable group.

Recommendation:

- Focus FFW support for activities and supervision by FLSPT health agents and health supervisors on the most vulnerable districts and graduate⁴⁷ the less-vulnerable districts, except in cases when roads and or bridges are in the middle of construction and cannot be finished with community involvement only.

⁴⁷ Noting the need for a household vulnerability assessment, such as MAHFP-PRA to identify very vulnerable households that may still need targeted assistance (discussed above).

Challenge # 7: *Some warehouses lacked clearly written protocols for warehouse management, and the project still lacks clear method for targeting vulnerable households.*

Summary Observations: Two of the principal findings of the final evaluation were:

- Protocols for warehouse management were not being respected in some warehouses, especially the large warehouse at Pita and
- The project never developed clear guidelines for targeting DD to, and monitoring the impact of this assistance on, the three vulnerable groups identified as the principal beneficiaries (Table 4.5).

For this type of targeting to be successful, it needs to be supported by local officials. Based on the final evaluation interviews, it appears few officials understand the criteria the project uses to determine which groups are eligible and if and how these criteria differ from other area actors like the World Food Programme.

Recommendations:

- Develop clear protocols for warehouse management with input from stakeholders, such as local community officials, and work with these community officials to develop a sustainable way to monitor adherence to these protocols and
- Develop clear guidelines for targeting vulnerable households with input from local officials and technical ministry representatives and better methods for assessing project impacts on vulnerable households.
- Increase local officials' and technical ministries' understanding of the project norms and guidelines.
- Develop appropriate guidance to the *groupements* about pesticides in order to minimize and mitigate their impact.⁴⁸

Challenge # 8: *Food assistance to very vulnerable groups, such as the elderly and handicapped persons without support, is unlikely to continue once the project funding ends.*

Summary Observations: Although project assistance to very vulnerable groups probably increased their short-term living standards, there is no possibility this will continue once the project funding ends. Any future distributions, either under the current program or future programs, should require communities to first develop an action plan that situates this assistance within a more long-term plan for addressing chronic food insecurity within their communities. Based on the experience of other Title II programs in Guinea,⁴⁹ this type of vulnerability analysis could be easily added to the current training programs to build local food security community capacity.

Recommendations:

⁴⁸ As mentioned in Chapter 2, although OICI did not support the use chemical products, the final evaluation found clear evidence that many of the assisted women associations are using some pesticides in the storage room without adequate protection measures. These pesticides can negatively affect both their handlers and the stored products such as potatoes.

⁴⁹Most notably the Guinea Food Security Initiative (GnFSI) in Dinguiraye.

- Require communities that receive direct distribution for vulnerable groups to situate this assistance within a more broad-based, long-term action plan to reduce food insecurity within their community and
- Anticipate the need to adjust current technologies and programs and/or develop new sub-programs (small-scale trade, petty manufacturing, and small scale livestock) that are adapted to the labor constraints of vulnerable groups so that they can support themselves in the long run without food aid and with the community assistance outlined in action plans.

Challenge # 9: *Project activities that rely on compensating volunteers with FFW are unlikely to continue once the project funding ends.*

Summary Observations: Based on the project's own tracking numbers and our interviews with project supervisors and field staff, there appears to be a strong argument for moving away from the FLSPT volunteer system for literacy training (Annex II). Few volunteers have received any additional compensation from the people they serve and the food aid they receive is insufficient for them to live on. One option that may be more successful would be to offer the types of consistent instruction that villages need to raise literacy levels in a more formal classroom instruction model for shorter periods of time (e.g., 45 days). This formal classroom model with paid professional teachers has been used successfully in other Title II programs in Guinea, such as Africare's Guinea Food Security Initiative (GnFSI) project.

There is also an urgent need, as discussed in Chapter 3, to move away from using FFW to compensate health volunteers. Until more sustainable community-based systems for compensating volunteers are developed, there is very little likelihood the achievements of the FLSPT for health can be sustained even though mothers are now very motivated to participate and support these activities, even without food aid.

Recommendations:

- Consider using an alternative model for basic literacy training in future Title II programs that OICI develops in Guinea and other countries and
- Help communities develop better models for compensating health volunteers (i.e., models that are less based on FFW), such as the district-level boutiques currently being discussed by Ministry of Public Health and Hygiene and FLSPT Project officials.

4.4. Project Strategy: Monetization

OICI/Guinea's first monetization program was in 1997 in support of its Title II PAVE Project in Mamou. This project was functioning at the same time as the Africare Title II Project in Dinguiraye, Guinea. Given the extensive experience of Africare with monetization, and based on the recommendation of USAID/FFP, Africare was chosen as lead agent of a monetization consortium in Guinea. Vegetable oil was selected as the commodity to be monetized instead of flour or wheat. Adventist Development and Relief Agency (ADRA) joined the consortium in 1999.

Based on the memorandum of understanding (MOU), the OICI team was tasked with assisting Africare in receiving each shipment in order to better understand their method. A consultative committee was created with representatives from the Ministry of Cooperation (*Ministère de la Coopération*), the Ministry of Commerce (*Ministère du Commerce*), the National Direction of Imports (*Direction Nationale de la Douane*), a representative of USAID, resource advisor Ousmane Diop who has extensive experience in Title II monetization, and representatives of the three Title II Cooperating Sponsors (CSs): Africare, OICI, and ADRA.

When OICI received FLSPT Project funding in 2005, the same monetization consortium was charged with monetizing products designated for the FLSPT Project. It was decided that the committee would serve this role through at least 2006, at which time it was the hope that OICI would have the capacity to manage its own monetization. At the end of its mandate in 2007, Africare offered to continue monetizing for OICI, but the agency declined the offer. With rare exception, all monetization followed the same 17-step monetization process (Box 4.4).

4.5. Evaluation Findings on Impacts of Monetization (2007-present)

To date, OICI has managed monetization on its own (i.e., without oversight from Africare) for:

- 860 MT in the second part of 2007,
- 1000 MT in 2008 (two sales), and
- 650 MT in 2009 (one sale).⁵⁰

In terms of cost recovery (i.e., the average price per ton of the products sold), OICI has been as successful as Africare. “Price \$/MT,” which represents getting a good average price per MT for the commodity (see column “operator” and “Price \$/MT” in Table 4.7). This speaks to the most dramatic impact of the monetization activities of this project, which is the capacity building of OICI to manage their own monetization. The initial partnering with an experienced organization undoubtedly facilitated this capacity building and the resulting successful handoff of monetization activities. In the end OICI did a comparable, if not better job, as the other, more-experienced NGO in managing the monetization component.

Despite the success of the monetization component, there were a few problems over the course of the grant. The first was an incident in which the *Transitaire de la Compagnie* (transit company) by accident deposited the check for paying taxes into the account of the *Receveur spécial de la Douane* (special import tax receiver) and the money did not arrive in the counter-party fund.

To solve the problem the OICI monetization coordinator researched the source of the error and prepared a reclamation letter signed by the OICI resident representative and addressed to the National Treasury Direction with supporting documentation. With

⁵⁰USAID/FFP imposes strict guidelines for management and distribution of Title II commodities in order to avoid flooding local markets with foreign food products (through monetization) that could harm local agricultural production.

intensive monitoring, the funds were eventually returned to OICI/Guinea, a credit to the organization's persistence.

Box 4.4: OICI's 17-Step Monetization Process (2007-present)

Step 1: Prepare background information and invitation letter to consultative committee (*Comité consultatif* or *CCMT2*) to a coordination meeting.

Step 2: Develop a plan of action.

Step 3: Prepare letter to customs once the Bill of Lathing is received to request an assessment of the cargo in order to pay taxes.

Step 4: Sign contract with the Maritime Company (*Compagnie Maritime*) to coordinate movement of the boat and send reminder to the company of the terms of the booking note and the lifting information report and its responsibility for transportation of cargo to the OICI warehouse.

Step 5: Advertise for a quotation for a survey company to monitor the cargo; negotiate and sign a contract.

Step 6: Prepare an *appel d'offres* (call for open bids) for the sale (based on the documents elaborated by the consortium when it was under the supervision of Africare).

Step 7: Organize meeting of CCMT2 to review and validate the *appel d'offres*.

Step 8: Advertise an *appel d'offres* in the most frequently read journal, the most listened to private radio stations during the most popular listening times.

Step 9: Put up for sale the notebooks and collect offers.

Step 10: Preparation of material for the sale (a closed box for the collection of the offers).

Step 11: Meeting of the CCMT2 and opening of the public offers in presence of the petitioners and selection of the best offer.

Step 12: Sign contracts and make payment deposits (for the option of paying cash at signature of the contract).

Step 13: Recuperate the custom office's calculation of the tax payments for the cargo in the Center's Funds (*Fond de Centre*) section PL480, Title II (*Fond de Centre partie du PL480 titre II* [FCP PL480TII] at the Central Bank [BCRG]).

Step 14: Transmit original documents and a bank check to the company for finalizing the declaration and withdrawal of the products for sale to purchasers.

Step 15: Coordinate sale to purchaser and monitor work for the transit agents for the company and for the security agency that will prepare the final report.

Step 16: Submit to USAID a payment order and a letter of support for the recuperation of the taxes from the Treasury.

Step 17: Submit report on monetization.

Source: Barry Mohamed Lamine. Pre-Evaluation Briefing Papers. May-June 2009.

Table 4.7: History of Monetization by Africare and OICI the Total Value and Price (\$/MT) for Different Sales

FY	Vessel	B/L ⁵¹	Period	Tonnage	Price \$/MT	Total value US\$	Exchange rate	Operator
2005	American Trader	OIC-JAC-GUI-001	06/12 th	1000	853	853 000	3 492	Africare
	Wilson	OIC-JAC-CON-02	09/21 st	560	728.50	407 960	3 999	Africare
	Maersk Georgia	ADS 201789	12/15 th	400	747	298 800	4 403	Africare
2006	Wilson	OIC-JAC-CON-01	01/18 th	500	732	366 000	4 560	Africare
	Maersk Constellation	OIHOUCON-05	06/25 th	520	745	387 400	4 903	Africare
	CLEVELAND	OIC-JAC-CON-001	10/03 rd	400	782.02	312 808	5 593	Africare
2007	CMA CGM ELBE	NAM 345516	04/30 th	550	750	412 500	4 005	Africare
	Maersk Douala	ADS 202685	10/10 th	860	917	788 620	4 140.16	OICI G
2008	American Trader	OIC-JAC-GUI-001	06/20 th	530	1 240	657 200	4 487.38	OICI G
	Maersk Driscoll	ADS 203004	05/31 st	70	1 240	86 800	4 487.38	OICI G
	Maersk Denver	ADS 203074	08/31 st	250	1 679	419 750	4 629.86	OICI G
	Maersk Douala	ADS 203075	09/27 th	150	1 679	251 850	4 629.86	OICI G
2009	SL/ Commit-ment	ADS 203293	02/16 th	280	1 305	356 400	4 675.30	OICI G
	SL/ Commit-ment	ADS 203294	02/16 th	370	1 305	482 850	4 675.30	OICI G

Source: Mohamed Lamine Barry, Monetization Coordinator from project records.

⁵¹ Bill of lading.

4.6. Priority Recommendations for Strengthening Sustainability of Project Impact Related to Monetization

Challenge # 10: *Although OICI tracks the results of its monetization efforts carefully, they have not developed a policy or system for tracking the wider developmental impacts of monetization.*

Summary Observations: Although OICI tracked market prices regularly in order to monitor the impact of the sale on local markets, it did not track any other direct or indirect market impacts. With increasing pressure from USAID to formalize and track the impacts of monetization, OICI needs to invest in developing good tracking indicators. For OICI to remain competitive in the area of monetization, it needs to consult with NGOs who have experience with monetization and tracking its impact. Both Africare and ACDI-VOCA developed tools under their Title II Institutional Capacity Building (ICB) grants that facilitate tracking the impact of monetization in the market, particularly for small traders.

Recommendations:

- Future Title II project proposals need to anticipate and track the wider developmental impact of monetization and
- OICI/Philadelphia needs to ensure at least two staff members in Philadelphia, the monetization officers, and project coordinators of their new Title II programs are familiar with some of the tools developed by other agencies (ACDI/VOCA and Africare) for tracking the wider development impact of monetization.

Chapter Five Conclusions, Priority Follow-Up Actions, and Major Lessons Learned

5.1. Summary Conclusions--Impact

In conclusion, there is widespread quantitative and qualitative evidence from the project's own internal M&E system and government data sources indicating that the OICI FLSPT Project has made measurable progress on every one of the IRs and SOs in the original DAP. Specifically, the project has achieved or surpassed (Annex I):

- Every one of the original targets for its monitoring indicators except those where there was a problem with the formulation of the indicator or those for which the target was never adjusted after the mid-term and
- Every one of the original targets for its impact indicators (except the indicator for MAHFP that had a completely unrealistic target of 12 months). If a more reasonable target of 8.5 months (similar to the ones set for other Title II programs in West Africa and Guinea) had been used, the project would have been assessed as achieving over 100 percent of its impact indicator targets for that particular indicator.

The impact of these activities is all the more remarkable given the facts that:

- The OICI FLSPT Project intervenes in more villages than envisioned in the original DAP and DAP budget (see Chapter 1) (119% of the original target villages for agriculture [173 versus 150 villages] and 192% of the original number of target villages for health [289 versus 150 villages]) and
- The project's field activities were shut down for more than 12 months of the five-year project due to an eight-month delay in the transfer of the monetization proceeds during FY05 and a four-month national strike in FY07.

The project also developed a number of new activities not envisioned in the original DAP that targeted vulnerable groups. These include:

- Innovative uses of FFW on private fields to help vulnerable households adopt some of the technologies pilot-tested on the collective fields;
- Innovative uses of small distributions of food assistance to encourage women from the most isolated, vulnerable villages to participate in the district-level health activities; and
- A rotating livestock credit program to help the most vulnerable households strengthen their livelihood base.

5.2. Cross-Cutting Challenges for Sustainability and Impact

Despite the positive impacts, the project faces three major groups of cross-cutting challenges for its SO1, SO2 and commodity (i.e., FFW, DD, and monetization) activities that are likely to affect the final impact and long-term sustainability of the FLSPT Project.

- **Intra-Project Variation in Impact:** There are major measurable differences between some health districts and agricultural *groupements* in terms of participation in and benefits from programs that are likely to affect the long-term sustainability of the project's average impacts.
- **Critical Public-Private Partnerships:** The public-private partnerships the Guinea Government envisioned and supports as tools for sustaining these activities differ greatly in the agricultural versus health communities.
- **M&E:** Some of the indicators in the IPTT are difficult to measure and include the original targets from the DAP that were never modified. These unrealistic indicators and targets have:
 - Given a false impression the project has underachieved many of its targets when in fact it has overachieved in most areas including the total number of households and villages affected and
 - Limited the project's ability to track its substantial impact on household and community-level vulnerability.

5.2.1. Intra-Project Variation

Agriculture: While there is little argument that all the villages have improved their aggregate situation, only 30 percent of agricultural *groupements* are ready to graduate.⁵² Seventy percent of the agricultural *groupements* require some additional support to develop higher-earning IGAs from agriculture and livestock in order to be sustainable.

Health: In contrast, 60 percent of district-level CVSs are ready to graduate, leaving only 40 percent requiring additional support for improving basic capacity and services.

5.2.2. Critical Public-Private Partnerships for Sustainability

Agriculture: Although some *groupements* still need help addressing several of the basic constraints hindering food availability and access, the private-public partnerships needed to sustain the FLSPT's agricultural activities and impacts are fully developed or well on their way to developing. Public-sector extension services, private-sector veterinarian services, and public- and private-sector seed supply are up and running; whereas self-financing mechanisms for inputs from *groupements' caisses* (savings), organization of *groupements* into *sous-préfecture*-level unions are still developing.

Given this situation, the project's follow-up activities need to focus on better-targeting the existing package to the most vulnerable villages and graduating the more developed villages. By better-targeting vulnerable *groupements*, it is likely 100 percent of the impacts can be sustained and expanded in a short time frame of one to two years.

⁵² As discussed earlier, this *groupement* capacity assessment does not necessarily mean there are no vulnerable households in the villages served by these *groupements*. It is important to assess household vulnerability with exercises such as MAHFP-PRA to identify extremely vulnerable households that may need additional targeted assistance.

Health: In the case of health, the critical constraint is NOT the basic capacity of the CVSs, but that the private-public partnerships needed to sustain these community-based organizations and their activities. Specifically:

- There are no systems in place to self-finance the compensation, training, or review of the volunteers in collaboration with the Ministry of Public Health and Hygiene,
- None of the CVSs are organized into unions, and
- None of the *sous-préfecture*- or *prefecture*-level health structures currently has either the capacity or designated staff needed to support the new community-based health system without outside assistance.

Therefore, the project's follow-up activities during the remainder of the grant need to focus on developing sustainable systems for creating and supporting the district and *sous-préfecture* level systems needed to sustain these community-based activities once the project ends. Unless a more sustainable system is developed in collaboration with the Ministry Public Health and Hygiene, it is unlikely the achieved positive impacts on health can be maintained.

5.2.3. M&E

While the project has an excellent M&E and reporting system, the staff was ill-informed and ill-trained regarding basic Title II M&E rules and expectations during the first four years. This lack of training had a series of direct impacts on the design and execution of the project as well as USAID's ability to use the project's M&E data for its own routine reporting documented in this report.

5.2.3.1. Project-Level Impacts

Since the OICI/Guinea staff members were not well trained in Title II program rules, OICI was forced to rely on outside consultants to develop basic project documents, the original IPTT, and indicators. This affected staff members' understanding of the link between the project documents and the budget and made it difficult to revise the budget when the text of the proposal was modified to take into account useful comments from USAID/FFP. The unrevised budget created substantial, unresolved problems for the design and execution of the health-sector activities.

The same lack of training meant the staff maintained the original DAP indicators in the IPTT even though they were difficult to calculate and often did not reflect field realities. OICI had the right to request these indicators be changed during the quantitative baseline survey or after the mid-term. Since none of the DAP targets were revised after the baseline, even though many of the project strategies changed in order to take advantage of new opportunities and field realities, this gave a false impression the project underachieved on certain indicators. Given these unrealistic targets and indicators:

- The OICI/HQ and OICI/Guinea offices made little use of the IPTT except as a basis for preparing their annual report to USAID (i.e., the staff did not use the IPTT to help orient project activities and evaluate progress) and

- The FLSPT health staff spent a great amount of time developing and tracking a series of internal indicators they felt represented the project more accurately.

5.2.3.2. *USAID-Level Impacts*

The same lack of knowledge and basic training affected the USAID/FFP office's ability to track the project's activities and impacts as well as its ability to use this information in official reports to the US Congress.

- Some USAID-recommended and required indicators (used by the FFP office in its official report to the US Congress) were not tracked in the IPTT (although the project tracked these internally);
- The baseline and final quantitative surveys did not use the same sampling framework, which reduced the utility of the data for USAID/FFP's reporting requirements; and
- USAID had difficulty understanding the full impact of the project, which far exceeds what was intended in the DAP along several dimensions (i.e., total households and villages affected, impact on vulnerability, institutional impact, and impact on malnutrition).

5.3. **Priority Actions Needed to Address Major Challenges and the Potential Value-Added Impacts of Addressing these Constraints**

Based this analysis, the evaluation team identified (see recommendations for priority action follow-up on critical constraints to sustainability and impact, Chapters 2-4):

- A number of priority challenges that the project needs to address before it ends and
- A series of recommendations for the duration of the project as well as for future OICI programming in Guinea and other countries (Table 5.1).

The short-term impact of addressing the 10 priority challenges for the duration of the FLSPT (second column, Table 5.1) would be a substantial value-added to the existing USAID investment in the project. Specifically, it would enable the project to:

- Address some of the relatively minor constraints impeding food availability and access in the most food-insecure villages (based on the MAHFP, which is 70% of the total); and
- Build the basic capacity of the 30 percent of CVSs that are still vulnerable; and
- Build the capacity of the CVSs and their health-center partners to better sustain the project achievements in 100 percent of the 31 districts (Categories A, B, and C) given the weak ability of CVSs and the Ministry of Public Health and Hygiene's limited capacity to sustain these at the present time.

In order to address these challenges, the project will also need to:

- Strengthen the capacity of its M&E system to target vulnerable groups and (if possible)
- Adjust some of the targets and indicators in its IPTT since a high percentage of the higher-achieving communities will graduate and (as identified in the chapters

of the report) some of the indicators are inappropriate and give a false sense of limited project achievement.

5.4. Lessons Learned (for OICI and USAID): Critical Factors that Affected Project Impacts and Lessons

This final section of the report examines some of the broad cross-cutting lessons learned from this project for USAID and OICI for future projects.

5.4.1. Partner Coordination and Reporting

5.4.1.1. Lessons Learned

Two major strengths of the FLSPT Project that helped increase its impact and enhance the chances its activities will be sustained once project funding ends are:

- The activities were in direct alignment with and supported by the national government strategies and
- The project worked with groups (*groupements*, unions, CVSs, APSs, AVs, and PEs) recognized by the national government structures for the health and agricultural activities.

Another example of best practice that enhanced the project's impact and the likelihood that these impacts can be sustained was the project's commitment to writing detailed quarterly reports with quarterly figures in French that were widely circulated to all of the project's government partners (see Annex VIII, Bibliography). One of the best indicators of this mainstreaming was the government agencies in all six *sous-préfectures* tended to report on these activities as their own.

While this type of mainstreaming is important, it can also reduce officials' understanding of the project and/or specific sectors, such as health, where the project activities are less visible to outsiders during site visits. In the case of FLSPT, for example, all the administrators and elected officials interviewed were far more familiar with the project's agricultural activities than those for health. The reasons for this seem to be:

- Most of the public officials interviewed had never seen any of the project's health activities or met any of the community agents responsible for executing them other than the OICI health agents and
- Most reporting for the project's health activities was mainstreamed into the health centers' own reporting since these activities were fully compatible with and owned by the health centers.

Table 5.1: Principal Challenges and Recommended Actions for the Duration of the Grant and Future OICI Title II Grants in Guinea and Other Countries

Principal Challenges and Specific Recommendations	For the Duration of FLSPT	Future Grants or Grant Extensions of FLSPT	
		Guinea	Other Countries
SO1 Improved Food Availability and Access and Decreased Vulnerability			
Challenge #1: <i>The impact of the project is much lower due to infrastructure constraints and isolation in 40 percent of the villages (Category C)</i>			
1. Work with <i>groupements</i> to develop <i>sous-préfecture</i> -level unions	X		
2. Graduate the more developed villages in Category A and concentrate on the most vulnerable villages in Category C ⁵³	X		
3. Develop appropriate guidance to the <i>groupements</i> about pesticides in order to minimize and mitigate their impact	X		
Challenge #2: <i>The project never developed an indicator to track project impact on community capacity or vulnerability even though these are two areas which seem to be strongly correlated with other project impacts</i>			
4. Train OICI project staff and <i>groupement</i> leaders how to use the FSCCI ⁵⁴ self-assessment tool		X	X
5. Train OICI staff to incorporate the FSCCI tool in baseline and final surveys		X	X
6. Train OICI to use the MAHFP to track impact on vulnerable households in new projects and follow-up projects		X	X
SO2 Improved Food Utilization			
Challenge #3: <i>Lack of sustainable systems for improving and maintaining CVS activities once project funding ends.</i>			
7. Strengthen CVSs' capacity to develop IGAs that can be used to compensate the health volunteers (instead of relying exclusively on food aid)	X	X	
8. Build the capacity of the health centers (as institutions as well as the individual health workers employed there) to review the performance of the health volunteers and to develop appropriate training	X	X	
9. Help the CVSs form <i>sous-préfecture</i> -level unions	X		
Challenge #4: <i>Weak capacity of the Health Centers to collaborate with community-based health structures</i>			
10. Establish clearly written norms for the project's intervention structures (<i>groupements</i> and CVSs in the case of this project)	X		X
11. Encourage the Ministry of Public Health and Hygiene to appoint one individual within the DPS to oversee the system of community-based volunteers	X		
12. Sign a formal MOU with the DPS	X		
13. Work with the Health Centers to simplify the forms used to report on community-based health activities	X		
14. Encourage key government partners (government civil administrators as well as the directors of the <i>sous-préfecture</i> -level health centers) to conduct site visits	X		X
Challenge #5: <i>Need to build the capacity of the 40 percent of the CVS that are still weak</i>			

⁵³ It is important to assess household vulnerability with exercises such as MAHFP-PRA to identify extremely vulnerable households that may need additional targeted assistance.

⁵⁴ The current USAID/FFP strategy identifies this indicator, which has been extensively developed and used by Africare as an example of best practice.

Principal Challenges and Specific Recommendations	For the Duration of FLSPT	Future Grants or Grant Extensions of FLSPT	
		Guinea	Other Countries
2. ⁵⁵ Graduate the more developed villages in Category A and concentrate on the most vulnerable villages in Category C	X	X	
15. Add two supervisor positions for health	X		
FFW and DD			
Challenge #6: <i>Thirty-nine percent of the project villages (vulnerability Category C for agriculture) have not increased food production and access to the desired levels, often because of their isolation in mountainous areas</i>			
2. ⁵⁶ Graduate the more developed villages in Category A and concentrate on the most vulnerable villages in Category C	X	X	
Challenge #7: <i>Some warehouses lacked clearly written protocols for warehouse management, and the project still lacks clear method for targeting vulnerable households.</i>			
16. Develop clear norms for warehouse management and monitor them	X		
17. Develop clear guidelines for targeting vulnerable households and better methods for assessing project impacts on vulnerable households	X		X
18. Increase local officials' and technical ministries' understanding of the project norms and guidelines	X		
3. ⁵⁷ Develop appropriate guidance to the <i>groupements</i> about pesticides in order to minimize and mitigate their impact			
Challenge #8: <i>Food assistance to very vulnerable groups (i.e., the elderly and handicapped without support) is unlikely to continue once project funding ends</i>			
19. Require communities receiving DD to situate this assistance plan in the context of longer-term action plans	X		
20. Anticipate the need to adjust current technologies and programs and/or develop new sub-programs for vulnerable groups	X	X	
Challenge #9: <i>Project activities that rely on compensating volunteers with FFW are unlikely to continue once project funding ends</i>			
21. Consider using an alternative model for basic literacy training in future Title II programs OICI develops in Guinea and other countries		X	X
7. ⁵⁸ Strengthen CVSS' capacity to develop IGAs that can be used to compensate the health volunteers instead of relying exclusively on FFW	X	X	
Challenge #10: <i>Although OICI tracks the results of its monetization efforts carefully, they have not developed a policy nor system for tracking the wider developmental impacts of monetization</i>			
22. Anticipate and track the wider developmental impact of monetization		X	X
23. Ensure at least two staff members in Philadelphia and the monetization officers and project coordinators of any new OICI Title II programs are familiar with some of the tools developed by other agencies (such as ACDI/VOCA and Africare) for tracking the wider developmental impacts of monetization		X	X

Source: Chapters Two-Four of this document.

⁵⁵ Same as 2 above.

⁵⁶ Same as 2 above.

⁵⁷ Same as 3 above.

⁵⁸ Same as 7 above.

5.4.1.2. *Recommendations: USAID and OICI*

- Whenever possible, projects should emulate the FLSPT model of aligning their activities with government strategies and using intervention structures (such as the *groupements* and CVS) that are recognized by critical government partners.
- High-quality quarterly reporting (including photographs) on project activities facilitates keeping the government informed on critical project activities. FLPST's use of government-accepted terminology to identify the groups with which it worked supported the development of an intervention model aligned with government strategies. The resulting reports on agricultural and health aligned easily with the sector reporting on these strategies and helped increase both government ownership of the project and the prospects for sustaining its results.
- While mainstreaming is important, project supervisors and field agents should supplement the information on project norms and reports by encouraging key government partners from the *sous-préfecture* administrative offices and the Ministry of Public Health and Hygiene to conduct on-site visits, particularly at the beginning of project activities. These field visits are especially critical to health given the novelty of the community-based health volunteers. Official recognition of the community-based volunteers validates their role and increases the chance administrators and other leaders will facilitate their sustainability.

5.4.2. National Title II Project Staff

5.4.2.1. *Lessons Learned*

Ten years ago a well-known agricultural scientist⁵⁹ wrote a paper about why NGOs should not conduct agricultural extension. This paper presented abundant evidence that NGOs often hire inexperienced generalists to dole out seed and tools with devastating consequences for future trials. FLSPT is the counter-argument for why NGOs can and should do agricultural extension if they hire, deploy, and retain appropriately trained national staff.

The senior staff members of OICI have MS degrees and training in the fields in which they work. In addition, the majority of staffers are from Guinea; the project has hired only one expatriate staff member since it started. These recruitment decisions have had a measurable impact on project effectiveness and outcomes in the two sectors that provided the focus of this evaluation:

- *Agriculture*: The fact that Agricultural Coordinator Ibrahima Tanou Diallo was a soil scientist with a master's degree from North Carolina State University enabled him to negotiate directly with the various NARCs in Guinea to identify and purchase over 20 new higher-yielding seed varieties for field tests. Station staff members were more willing to work with him because they knew that as a trained soil scientist he could conduct the demonstration trials properly, monitor the results, and provide either verbal or written feedback. The agriculture

⁵⁹ Carl K. Eicher, 2003, Flashback: Fifty Years of Donor Aid to African Agriculture, paper presented to the IFPRI conference in Pretoria, South Africa, Dec. 1-3; p. 3.

coordinator's technical background was also critical to FLSPT pilot testing and adapting a new 17-day method for making compost that made possible the tremendous gains in agricultural and agro-forestry. This particular method was the subject of Mr. Diallo's master's degree thesis.

- *Health:* The first health and nutrition coordinator, Alpha Camara, wrote his PhD in epidemiology at Purdue University in 1995. This research involved using and testing the levels of variation involved with different types of anthropometric measurement techniques. This technical background helped Dr. Camara develop and track the impact of FLSPT's health innovations in ways that increased the Ministry of Public Health and Hygiene's willingness and ability to collaborate with the project.

A high percentage of the FLSPT Project's field agents have bachelor's degrees or the equivalent (such as nursing degrees) in an appropriate field, which makes them eligible for internal promotions to supervisory and coordinator positions. This recruitment and promotion pattern lowered staff turnover and helped decentralize project supervision and tracking. Although the project invested in formal training of staff and volunteers (e.g., CVS and *groupement* volunteers and leaders) who in turn instructed many stakeholders, the results of this are hard to track.

5.4.2.2. *Recommendation: USAID and OICI*

- USAID/FFP should require NGOs to honor the technical norms identified for key staff positions in their DAPs and Multi-Year Assistance Programs (MYAPs) for health and agriculture as OICI has done in this project. In addition:
 - (a) Whenever possible, health coordinators should have a technical health background, and at least one member of the supervision team should have an MD to facilitate linkages with the Ministry of Public Health and Hygiene (which are critical to sustainability) and
 - (b) Agricultural coordinators need a minimum of an MS in soil science or agronomy (not economics or sociology) to develop informed collaborative trials with national and international agricultural research centers.
- USAID/FFP should require Title II cooperating sponsors (including OICI) to better document the training given to specific staff, community leaders, community-level volunteers, and partners and any follow-up impacts from Title II-funded training since this is a major category of project expense that requires continual monitoring to be effective.

5.4.3. Local Capacity Building

5.4.3.1. *Lessons Learned*

The new USAID/FFP strategy makes local capacity building a top priority for projects. However, this is an area most Title II cooperating sponsors under-report and under-document; FLSPT is no exception.

One major achievement of this project was to ignite an unprecedented process of community self-help in the villages and districts where it intervened. Both *groupements* and CVSs were trained in the basic organizational principles needed to design and execute community-level interventions. They were also trained to develop action plans. However, the project to date has not developed a systematic method for monitoring the progress of individual *groupements* or CVSs in the execution of their action plans. This is a missed opportunity that could help communities better understand the critical importance of long-term planning and communication with development partners.

5.4.3.2. *Recommendations: USAID and OICI*

- USAID/FFP regional staff and OICI national HQ staff should familiarize themselves with the FSCCI indicator discussed in the USAID/FFP strategy paper and how it has been used to document project impact on local organizational capacity in various Title II programs in West Africa.

5.4.4. FFW and DD

5.4.4.1. *Lesson Learned*

Most Title II programs focus on using FFW to relieve community-level constraints to food security, such as the construction and rehabilitation of access roads. One highly innovative aspect of this program was the use of FFW and DD to help vulnerable households adopt new agricultural technologies and health behaviors that increased their aggregate food security.

Although health officials are concerned that a sudden decrease in food distribution might negatively affect participation, there is no evidence from field interviews that this would be the case. However, the concern expressed by these officials highlights the facts that:

- FLSPT has not made a concerted effort to situate its very modest food-distribution program within a broader context of action plans designed to target and reduce village-level vulnerability and
- Local officials are unclear about the FLSPT criteria for awarding food assistance and the timing of these distributions.

5.4.4.2. *Recommendations: OICI*

Future OICI programming in Guinea and other countries in West Africa should study lessons learned from the FLSPT for the design and execution of FFW and DD activities. Specifically:

- Consider encouraging future projects to develop food-distribution committees to assist project staff in identifying the beneficiary households, ensuring broad-based understanding of the criteria for eligibility, and monitoring compliance (as was done in this project in FY07 based on these criteria);
- Require beneficiary communities to develop action plans after the first (Title II or USDA [United States Department of Agriculture]) food security intervention that

- outlines longer-term development measures needed to reduce vulnerability once project-sponsored food assistance ends; and
- Monitor local administrators' and local officials' understanding of (and support for) the criteria being used to target food assistance to the most vulnerable and the periodicity and donor requirements for this food distribution.

5.4.5. Integration of Health and Agricultural Activities

5.4.5.1. Lessons Learned

In theory, a Title II food security program tries to develop complementary interventions that simultaneously target food availability, access, and utilization. This integration is critical to achieving the type of geographically based impacts USAID/FFP projects are expected to achieve. For a variety of reasons related to OICI's design and execution of the FLSPT Project, the health activities were under-funded. To offset this constraint, the project was forced to refocus its health activities on capacity building of the district-level CVSs as a way to execute the village-level health activities envisioned in the proposal. The same shift created a change in the intervention areas since many of the villages covered by the health districts are not covered by the agricultural project.

5.4.5.2. Recommendations: USAID and OICI

There are a number of lessons learned from the FLSPT's experience given the tendency of most African health ministries to follow the Bamako initiative's recommendations for grouping basic health services by districts or some equivalent units.

- Projects should always base their intervention model on whatever structures are recognized by the national health policy as appropriate, which was done in the FLSPT Project. In the case of Guinea, these were the health districts and the CVSs.
- Given the critical importance of these recognized health structures for sustaining the project's health impacts and ensuring good collaboration with government health structures, more direct overlap of project health activities with the project interventions designed to promote food access and availability should be a focus.
- Since the health structures tend to be grouped (in the case of most Francophone countries) as districts, the health activities should take the lead in determining the choice of agricultural intervention areas within a *sous-préfecture*, not the reverse.
- When a project's health and agricultural activities intervene in different areas (as is the case in the FLSPT), the project should try to analyze the link between these different patterns of participation and project impact. Malnutrition levels, for example, are probably going to be different in a project that has both agricultural and health interventions compared to a project that provided only agricultural support.
- When a project's health activities focus on district-level interventions (as is the case in the FLSPT Project) the project M&E coordinator needs to help the project's health agents and the *sous-préfecture*-level health structures with which they collaborate to develop simple systems for tracking participation in and

benefits from the project for the different villages that comprise the district. Although not currently tracked, this information can usually be tracked with only minor modifications in current tracking forms.

5.4.6. Monitoring, Evaluation, and Reporting

5.4.6.1. Lessons Learned

The ability of OICI staff and USAID to fully understand the project's impact and progress was negatively affected by insufficient training and understanding of Title II M&E and reporting requirements on the part of OICI/Philadelphia and OICI/Guinea staff. This lack of training had a series of direct impacts on the design and execution of the project, as well as USAID's ability to use the project's M&E data for its own routine reporting to the US Congress as outlined in section 5.2.3 of this chapter.

Many of these problems had been observed and commented upon by project staff and USAID/FFP officials during field visits during FY06 and FY07. Unfortunately, the scope of work for the mid-term evaluation did not include a comprehensive review of the IPTT or the indicators as recommended in the Title II guidance and the standard FANTA guidance for developing Title II scopes of work. Had this review been conducted, it would have created a basis for the project to request revisions of some of the project indicators and targets.

5.4.6.2. Recommendations: USAID and OICI

- When consultants are used to facilitate MYAP designs, they should:
 - (a) Familiarize staff with the USAID/FFP strategy and the role of USAID/FFP guidelines for M&E (including recommendations and requirements for indicators and IPTT reporting);
 - (b) Help staff contribute actively to the actual preparation of the documents, as well as any pre-design assessment surveys;
 - (c) Involve staff in the design of project indicators that comply with FANTA standards and other recognized Title II CS standards of best practice (e.g., the Africare FSCCI); and



Recommendation: Work with the Health Centers to simplify the forms used to report on community-based health activities. Currently the FLSPT extension agent (middle) facilitates the transmission of health statistics from the community based health volunteers (right) to the Health Center Directors like Dr. Amadou Bah (left).

Source: D. McMillan.

- (d) When possible encourage projects to review examples of best practice from other Title II programs in their own country (e.g., Africare in Guinea) for useful insights.
- USAID should strengthen its technical oversight of project M&E systems by:
 - (a) Insisting all approved MYAP IPTTs be reviewed by FANTA and the regional FFP offices;
 - (b) Requiring FANTA to train regional FFP staff (and track the impact of training) on Title II requirements for M&E in order to ensure proper supervision and support to the field programs; and
 - (c) Requiring FANTA to regularly update a basic group of soft and hard documents on M&E best practices, which would be comprised of FANTA documents as well as Title II CS activities developed under the Title II funded Institutional Capacity Building (IBC) grants.
- Future programs should develop simple systems for tracking the types of training (number of days and themes) for key project actors, such as health volunteers, birth attendants, village health committees, and *groupement* leaders, as well as project field agents and senior staff. This information is critical to assessing how the money to support training activities and to identify training gaps is spent.
- OICI/Philadelphia should strengthen its capacity to provide the types of focused training Title II staff members need in order to develop better proposals and M&E systems.
- OICI should facilitate field supervisors writing draft sections for the annual report in collaboration with the project director in order to increase their understanding of the project's M&E system and the agency's expectations for assessing field impact. Extra details on the projects (grouped by SO) should be included as annexes, which are not counted in the recommended page limits. Although not described in the guidance, many Title II CSs began using annexes to give greater detail on key areas of project impact about five years ago.
- OICI and USAID should encourage NGOs to develop an outline of critical Title II guidance and program capacities needed to execute a program and monitor access to this guidance and capacities through staff or local consultants annually.

5.4.7. Title II Project Impacts on Vulnerability and Risk Management

5.4.7.1. Lessons Learned

Although reducing risk was a stated objective of the FLSPT Project and one of its strategic objectives, the project did not include any indicator or method for assessing project impact on vulnerability. As a result, there is very little evidence other than qualitative assessments and re-analysis of existing data sets that can show this impact. This is a missed opportunity for OICI and for USAID/FFP.

5.4.7.2. Recommendation: OICI and USAID/FFP

- Future projects should develop a method for assessing project impacts on vulnerable groups prior to conducting the baseline survey. These assessment

methods should be employed at baseline, mid-term, and during the final quantitative impact surveys. Projects like this one that already have the MAHFP in their tracking table, should consider using the “percentage of HHs classified as extremely vulnerable” based on the MAHFP (i.e., households with an MAHFP value less than a specific appropriate limit) as such an indicator. If project activities are successful in reducing the number of vulnerable households in a geographical area, then the percent classified as extremely vulnerable at baseline should decrease in both the mid-term and final surveys. If project activities do not target vulnerable groups or address their constraints, this figure may remain static.

- Some projects may wish to track their impact on vulnerable groups annually (i.e., as a monitoring indicator rather than an impact indicator). In this case, the project might consider using the qualitative guidance for the MAHFP. While this guidance can be used for a monitoring indicator, it cannot be used as the official MAHFP impact indicator that is currently required of all Title II projects.
- Future Title II projects in West Africa might consider adopting some variation of the OICI method used to classify the health districts and the agricultural *groupements* during mid-term and final reviews. This tool identified important differences in project impact and challenges for sustainability in a context that could be easily understood by staff and key partners such as the S/P-level health structures. For this type of qualitative assessment tool to be more useful, it should be converted into a self-assessment tool that would enable CVSs and *groupements* to assess and track their own capacity and needs in critical areas such as planning.

5.4.8. Project Supervision by OICI/Philadelphia and USAID

5.4.8.1 Lessons Learned

One role of the regional USAID/FFP office and the USAID country offices tasked with supervising Title II programs is to facilitate exchange of best practices between Title II programs within specific sub regions and between Title II projects and other types of USAID programming within a country. This is a role the regional USAID/FFP office played very well on this project.

- The initial review of the MYAP design by the USAID/FFP office made recommendations for expanding the project’s health activities that were very positive.
- Almost every one of the deficiencies of the project M&E system identified above—including the difficulties with certain indicators and targets—was identified either verbally or in writing during the USAID supervision mission.
- Both the mid-term evaluation and a USAID supervision mission in 2007 recommended an amendment to the project budget in order to increase the project’s health coverage and to get a more integrated project intervention impact.

Although field visits from USAID were universally appreciated by staff, there was very little structured follow-up to track actions taken to address specific issues by either OICI or USAID. There was also no structured follow-up on mid-term recommendations.

5.4.8.2. *Recommendations: USAID/OICI*

- USAID/FFP should enforce all NGO's compliance with the CSR2 (Cooperating Sponsor Results Report) guidance request that the CSR2 section on M&E include a description (preferably in tabular form) of all recommendations from special studies, mid-term evaluations, and/or supervision reports and the project follow-up (or justification for not following up) on these recommendations. OICI needs to ensure that all of its Title II and non-Title II programs follow this same recommendation.
- USAID/FFP regional office should track the follow-up on key recommendations it makes in supervision missions through a table or some other format that would facilitate communication between staff members.

Annex I: Indicator Performance Tracking Table (IPTT): FLSPT OICI Guinea

Objective/Results Indicators	Baseline	Year 1			Year 2			Year 3			Year 4			Year 5			LOA		
		Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%
SO1 Households in Telimele and Pita prefectures reduce chronic vulnerability through sustainable increase in food access																			
Increase in # months food provision per year (I)	5	1			1,5	1,5	100	1,5	1	67	1,5	1	67	1,5	0	0	7 ⁶⁰	3,5	50 ⁶¹
# different foods in diet (I)	4	5			6	5	83	8	7	88	10	7	70	11	7	64	7	7	100
IR 1.1: Farmer reduce vulnerability through sustainable increase in food production and productivity																			
# increase in rice yields T/ha (I)	0,4	0,8			1,2	1	83	1,5	1,75	117	1,75	1,83	105	2	1,83	92	1,6	1,43	89
# increase in corn yields T/ha (I)	0,6	0,9			1,25	1,75	140	1,6	1,8	113	1,8	2,4	133	2,2	2,4	109	2,2	1,80	82
# farmers committees formed and functional (AM)	2	20	32	160	25	41	164	30	0	0	30	66	220	10	6	60	115	145	126
# farmers adopt new technology (I)	27	527	585	111	1027	859	84	1527	2277	149	2277	2129	94	2277	4810	211	2277	4810	211
Ha under sustainable management (AM)	28	50	27	54	150	113	75	150	142,95	95	100	424	424	75	74,01	99	553	781	141
# nurseries installed (AM)	0	12	18	150	26	28	108	26	46	177	16	27	169	12	65	542	92	184	200
% tree survival (AM)	a/a	75	50	67	85	83	98	85	87	102	90	82,425	92	95	85	89	95	77,5	82
# soil improvement recipient (AM)	0	450	1191	265	850	1212	143	1300	1800	138	1800	3728	207	2000	3060	153	2000	3728	186
Ha community forests (AM)	0	100	2,16	2	175	60	34	175	68	38,84	125	23	18,4	75	0	0	650	153	24 ⁶²

⁶⁰ The Life of Activity (LOA) target of 12.0 months is unreasonable. A more reasonable target such as the one used for the GnFSI Project in Dinguiraye would have been +3 months or (8.0 months MAHFP).

⁶¹ Had the target for this indicator been adjusted to 8.0 months at mid-term, the achievement on this indicator would have been 106 percent.

⁶² This indicator is not an accurate reflection of the project’s activities in agro-forestry, which shifted from “community forests” to “multi-purpose agro-forestry” due to the land tenure problem in the zone. For more details, see Chapter 2.

Objective/Results Indicators	Baseline	Year 1			Year 2			Year 3			Year 4			Year 5			LOA		
		Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%
# demonstration plots (AM)	0	20	38	190	25	83	332	30	83	277	30	86	287	20	177	885	125	467	374
# tapades improved (AM)	0	50	62	124	150	134	89	150	432	288	150	1200	800	100	30	30	600	1858	310
% increased in marketed production (I)																			
IR 1.2: Households enhance food access by reducing food and crop losses																			
% reduction in crop loss during storage (I)	25%													4%	3%	75	4%	3%	75
# improved storage units installed (AM)	0	10	0	0	35	45	129	40	0	0	35	35	100	30	0	0	150	80	53⁶³
# women trained in food processing and preservation (AM)	0	275	0	0	580	473	82	840	1084	129	1525	585	38	1525	0	0	1525	2142	140
# community cereal banks installed (AM)	0	10	0	0	35	21	60	40	60	150	35	15	43	0	0	0	120	96	80
IR 1.3: Improve economic access to food for poor households through infrastructure development																			
% increase in market activity (I)																			
Kms road rehabilitated (AM)	0	45	0	0	60	48,5	81	65	80	123	70	80	114	70	0	0	310	208,5	67
# bridges built/rehabilitated (AM)	0	13	0	0	16	10	63	16	0	0	16	17	0	14	6	43	75	33	44
SO2 Communities enhance human capacity through improved health and nutritional practices																			
% reduction in diarrhea rates (I)	30,3	10		0	20	35	175	35	37,29	107	50	60,4	121	85	85,7	101	85	85,7	101
% reduction in malnutrition <36 m in Pita (I)	29,5	5		0	10	10	100	10	16,94	169	10	9,8	98	10	16,9	169	45	53,64	119
% reduction in malnutrition	30,8	5		0	7	10	100	5	10,29	206	8	12,8	160	8	16,2	203	36	44,29	123

⁶³ The project shifted strategy away from family-based silos to the creation of larger-dimension cereal banks.

Objective/Results Indicators	Baseline	Year 1			Year 2			Year 3			Year 4			Year 5			LOA		
		Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%
<36 m in Telimele (I)																			
IR 2.1: Communities implement mother-focusing health and agent practices for vulnerable households																			
# village health promoters trained (AM)	0	45	57	127	60	57	95	120	93	78	175	93	53	175	57	33	175	93	53 ⁶⁴
# <i>Maman Lumière</i> functioning	0	50	57	114	105	57	54	130	93	72	200	124	62	200	124	62	200	124	62 ⁶⁵
# HH receiving supplemental food (AM)	0	850	0	0	975	2550	262	1050	4753	453	1150	5705	496	1050	0	0	5075	5705	112
# latrines installed (AM)	0	6	0	0	12	12	100	16	25	156	14	11	79	12	7	58	60	55	92
# children de-wormed (AM)	0	1275	0	0	1475	2512	170	1575	4842	307	1725	3062	178	1575	2924	186	7625	13340 ⁶⁶	175
# children with ORS treatment (AM)	-	130	0	0	250	179	72	450	776	172	520	705	136	600	314	52	1950	1974	101
# trainings (subjects) in hygiene practices (AM)	0	20	11	55	50	9	18	30	38	127	25	7	28	50	7	14	175	72	41 ⁶⁷
IR 2.2: Communities increase access to safe potable water																			
# HHs members with safe water (AM)	TBD	4800	0	0	10800	10800	100	10800	11700	108	9600	12000	125	9000	3000	33	45000	37500	83
# wells constructed or rehabilitated (AM)	0	16	0	0	36	36	100	36	39	108	32	40	125	30	10	33	150	125	83
# water management committees functioning	0	16	0	0	36	36	100	36	39	108	32	40	125	30	10	33	150	125	83

⁶⁴ The below-average achievement on this indicator reflects a shift in strategy from the recruitment and training of village-level health promoters to district-level health promoters.

⁶⁵ The below-average achievement on this indicator reflects a shift in strategy from community-level FARNs to district-level FARNs.

⁶⁶ The number of children de-wormed during the life of activity of the project is the sum of children de-wormed during the year. A total of 4,824 individual children were affected by this activity.

⁶⁷ This indicator, which reports on subjects or themes rather than number of people trained, gives a false impression the project underachieved on this indicator. In fact, the levels of achievement for this training closely approximate those for HIV/AIDS.

Objective/Results Indicators	Baseline	Year 1			Year 2			Year 3			Year 4			Year 5			LOA		
		Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%	Target	Achieved	%
(AM)																			
IR 2.3: Awareness of HIV/AIDS prevention/mitigation strategies reduce risk																			
Community awareness workers trained (AM)	0	26	57	219	26	57	219	26	57	219	26	57	219	26	57	219	26	57	219
# HHs reached with awareness message (AM)	0	530	480	91	1300	1197	92	1530	1197	78	2280	3402	149	2500	2333	93	2500	3402	136

Source: YATTARA Mohamed Lamine, OICI Guinea M&E Coordinator, July 2009.