

Evaluation of the African Development Bank Group's Support to Its Regional Member Countries in Response to the COVID-19 Pandemic

Summary Report

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List of Acronyms and Abbreviations

ADB	African Development Bank	GDP	Gross Domestic Product
ADF	African Development Fund	IDEV	Independent Development Evaluation
AfDB	African Development Bank Group	IFI	International Financial Institution
Africa CDC	Africa Centers for Disease Control and Prevention	IMF	International Monetary Fund
AHAI	Agriculture and Agro-Industry Department	IPR	Implementation Progress and Results Report
AHHD	Human Capital, Youth, and Skills Development Department	IsDB	Islamic Development Bank
APVAX	Asia Pacific Vaccine Access Facility	M&E	Monitoring and Evaluation
AsDB	Asian Development Bank	MCS	Multiple Country Case Study
ATRS	Activity Time Recording System	MDB	Multilateral Development Bank
AU	African Union	NASSCO	National Social Safety-Net Coordinating Office
BPRD	Business Process and Results Department	NGO	Non-Governmental Organization
COVID-19	Novel Coronavirus 2019	NSO	Non-sovereign Operation
CRBS	Crisis Response Budget Support	OpsCom	Operations Committee
CRF	COVID-19 Rapid Response Facility	PAR	Project Appraisal Report
CSO	Civil Society Organization	PBA	Performance Based Allocation
DRC	Democratic Republic of Congo	PBO	Program Based Operation
ECCE	Country Economics Department	PCN	Project Concept Note
ECGF	Governance and Economic Reforms Department	PCR	Project Completion Report
ESW	Economic and Sector Work	PGRF	Group Risk Management Function
FAREC	Feed Africa Response to COVID-19	PFM	Public Financial Management
		PICU	Infrastructure and Urban Development Department
		PINS	Non-Sovereign and Private Sector Support Department

PPDR	Project Portfolio Document Review	SNFI	Fiduciary Services and Inspection Department
PPE	Personal Protective Equipment	SNOQ	Operations Committee Secretariat and Quality Assurance Department
RBF	Results Based Financing	SPRP	Strategic Preparedness and Response Project
REC	Regional Economic Community	SRF	Special Relief Fund
RDGE	AfDB East Africa Regional Hub	TA	Technical Assistance
RDGN	AfDB North Africa Regional Hub	TSF	Transition Support Facility
RDGS	AfDB Southern Africa Regional Hub	TYS	Ten-Year Strategy
RDVP	Regional Development, Integration and Business Delivery Complex	WB	World Bank
RMC	Regional Member Country	WHO	World Health Organization
SEFA	Sustainable Energy Fund for Africa	UA	Unit of Account
SME	Small and Medium Enterprise	UN	United Nations
SNDR	Delivery Performance Management and Results Department	UNDP	UN Development Programme
		UNHCR	UN High Commissioner for Refugees

EXECUTIVE SUMMARY

Background

As part of its approved work program for 2021, the African Development Bank Group's (AfDB or the Bank) Independent Development Evaluation (IDEV) function has conducted an evaluation of the Bank's support to its Regional Member Countries (RMCs¹) in the face of the COVID-19 crisis. This summary report presents its results.

The novel coronavirus (COVID-19) outbreak was first announced in December 2019 in Wuhan, China, eventually spreading rapidly to the rest of the world. Faced with this situation, the Bank, similar to several other International Financial Institutions (IFIs), introduced a package of measures to help its RMCs to mitigate the multifaceted impact of the pandemic.

The AfDB launched the COVID-19 Rapid Response Facility (CRF)² and other initiatives, including support to the World Health Organization (WHO), the Feed Africa Response to COVID-19 (FAREC), and a US\$3 billion Social Bond, to provide fast and flexible support to RMCs through sovereign and non-sovereign operations. As the primary channel for the Bank's efforts to combat the crisis, the CRF was intended to provide a flexible range of support within a UA 7.4 billion envelope, including UA 6.4 billion of financing directly to RMCs (up to UA 4.1 billion for sovereign operations for African Development Bank (ADB) countries and up to UA 2.3 billion for sovereign and regional operations for ADF countries), and up to UA 1 billion for ADB non-sovereign operations (NSOs) in all African countries. Over 70 percent (UA 4.75 billion) of the financial support was to be provided through quick-disbursing Crisis Response Budget Support (CRBS) operations. The AfDB identified three immediate priorities: (i) supporting the RMCs' health response and health capacity; (ii) social

protection of vulnerable populations and small businesses; and (iii) economic resilience and recovery. Between March and December 2020, the Bank approved 25 CRBS operations, of which five were multinational, and 12 Investment Operations (IOs) for 43 RMC and 9 institutions, of which six were multinational, as well as non-lending interventions such as Policy Dialogue, coordination with other partners, and analytical and advisory work.

Purpose and scope of the evaluation

This evaluation aims at providing the Board of Directors and Bank Management, as well as the RMCs, with an assessment of the design, implementation, and results of the Bank's COVID-19 response. The evaluation is both summative and forward-looking. It aims to identify the key lessons and innovations from the Bank's COVID-19 response that can strengthen future responses to comparable shocks and crises. It addresses the following core questions (see Annex 2):

- How prepared was the Bank to respond and provide resources commensurate to the magnitude of the pandemic, building on the lessons of its support for combating the Ebola Virus and other previous epidemics? How could its preparedness be improved?
- How adequate and strategic was the support provided by the Bank to enable an effective response to the pandemic at continental, regional, and national levels during the period under review?
- To what extent was the Bank's COVID-19 response coherent with other sovereign and non-sovereign operations of the Bank and with other development partners' COVID-19 response interventions?
- How well have the Bank operations funded under the COVID-19 response achieved, or

¹ Regional Member Countries (RMCs) are the 54 Member Countries of the AfDB that are located in Africa.

² ADB/BD/WP/2020/72/Rev.3/Final

are likely to achieve, their objectives at continental, regional and RMC levels?

- Were institutional arrangements, organizational resources, processes, and procedures adequate, streamlined and efficient?
- To what extent did the Monitoring and Evaluation (M&E) system applied to the Bank's response provide the necessary information and analyzes to draw lessons from this experience and prepare the Bank to address future pandemics?
- What are the key lessons drawn from the Bank's COVID-19 response that can strengthen future responses to shocks and crises?

The evaluation covers all of the Bank's lending and non-lending activities, processes and procedures that are part of its support package to help RMCs and regional organizations to mitigate the consequences of the COVID-19 pandemic over the period from March 1 to December 31, 2020.

Methodology

The evaluation is theory-based, guided by the Theory of Change (TOC) of the CRF (Annex 1), which constitutes the foundation of the Bank's response to the crisis. The evaluation used a selected mix of methods (quantitative and qualitative) to draw a complete picture of the performance and results of the Bank's response to the crisis in RMCs. It employs a 4-point rating scale going from 4-Highly Satisfactory to 1-Unsatisfactory (see Annex 3).

This evaluation builds on two complementary components. The first focuses on the strategy and implementation of related interventions and their results, guided by the above evaluation questions, which focused on relevance, coherence, effectiveness, and efficiency. The second analyzes the institutional functioning of the Bank, addressing questions about the adaptation of its corporate processes to the emergency response required by the crisis context. The first (Results) component is based on evidence from: (i) a

Portfolio Review; (ii) a Project Portfolio Document Review (PPDR); and (iii) Multiple Country Case Studies (MCS) covering 10 RMCs and one institution. The second (Institutional) component is based on evidence from: (iv) a Corporate Process Review; and (v) a Benchmarking Exercise with three Multilateral Development Banks (MDBs) responding to the same crisis, namely the Asian Development Bank, the Islamic Development Bank, and the World Bank.

The report relies on triangulation of the five main sources of evidence to answer the evaluation questions. The findings were validated by both internal and external peer reviewers, and by the evaluation reference group, comprising experts from relevant departments at the Bank. Further information on the methodology is presented in Technical Annex 1.

Main Findings

Relevance

The evaluation assessed the preparedness of the Bank to address the effects of the pandemic, and the strategic and operational alignment, as well as the adequacy of its response. In addition, the quality of the design of the Bank's support and how it adapted to the evolution of the crisis are also assessed.

Preparedness: The evaluation found that the Bank's system, like that of other MDBs, was not well prepared to respond at the scale and scope of the COVID-19 crisis. Although it had gained experience with the Ebola crisis of 2014–2016, being an institution focused on long-term development, the Bank's processes and procedures, financial instruments and skills mix were not prepared for large-scale crisis response, particularly in the health sector, which was not a priority in the Bank's corporate strategy. Also, the size and complexity of the COVID-19 crisis far exceeded that of previous events. Nevertheless, the Bank reacted quickly and approved the COVID-19 Rapid Response Facility (on April 8, 2020), together with other initiatives. This enabled to Bank to set out three priority areas of support

(namely, health, social and economic support), and streamlined processes to provide support to RMCs in a quick and flexible manner.

Strategic and Operational Alignment:

Strategically, social and economic support were among the priorities identified in the Bank's corporate strategy, although support to the health sector was not. Operationally, the Bank's approach was to provide financial support to countries' own national strategies to combat the COVID-19 pandemic, and the three complementary fields of intervention identified by the CRF were in line with national COVID-19 strategies of RMCs. All the CRF operations reviewed were very well aligned with the strategy outlined in the Bank's CRF document and the priorities of the RMCs. The Bank's approach, mainly based on standardized and streamlined crisis response budget support aligned with the respective countries' national COVID-19 response plans, provided flexibility in the use of funds, as well as quick disbursement.

Adequacy: Under the CRF, the Bank has approved a total of 25 CRBS and 12 Investment Operations for a total amount of UA 2,485 million for 43 RMC and 9 institutions, which represents only 33 percent³ of its initial ambition of UA 7.4 billion. This shortfall was due in part to: (i) the challenges resulting from a deterioration in the Bank's risk capital utilization ratio due to credit rating downgrades of a number of the Bank's RMCs shortly after the approval of the CRF; and (ii) an over-estimation of the level of cancellations of outstanding operations. As a result, the Bank was unable to fully meet the demand of some RMCs. Also, priority was accorded to (sovereign) CRBS operations, and the planned support through NSOs was not pursued. Nevertheless, other forms of support to assist private firms to remain solvent, such as: payment in instalments of VAT, payroll and withholding tax; extension of payment deadlines; suspension of tax enforcement proceedings; and credit guarantee schemes were

provided to NSO clients in the context of the CRF program.

Quality of Design: The CRF was found to be well designed. The objectives targeted and the modalities of Bank intervention through the CRF are clear. Similarly, sources of financing have been identified even if, as indicated above, the assumption on the volume of cancellations proved to be too optimistic. Furthermore, the CRF document itself contained a well elaborated TOC explaining causal pathways to targeted outputs and results, which contributed to the evaluability of the intervention. As concerns the CRF operations, the evaluation found that: (i) the eligibility criteria were applied; (ii) fiduciary risk assessments were carried out; (iii) good quality results frameworks were included in 75 percent of the Project Appraisal Reports (PARs); and (iv) cross-cutting issues were generally given an adequate level of attention, especially gender. However, the rationale for the use of CRBS was not included in half of the PARs, and a lack of Technical Assistance (TA) for countries in a fragile situation also constituted a shortcoming.

Adaptation: The Bank adopted a short term and static approach compared with other MDBs. The Bank did not extend the validity of the CRF beyond December 31, 2020, despite the possibility of doing so. Under the CRF, the response remained the same over the course of the crisis, i.e., it did not adapt to the evolution of the pandemic, nor did it address the needs of post-pandemic recovery within the response framework. In contrast, comparators adopted a flexible, multistage approach which enabled them to adjust their responses and their support to the evolution of the pandemic. They also started with a lower initial committed amount and expanded the size of their programs as more resources became available.

On balance, the relevance of the Bank's COVID-19 response has been rated as satisfactory, while noting some important shortcomings.

³ This amount excludes non-CRF General Budget Support operations for Egypt (UA 180 million) and Namibia (UA 94 million), as well as the FAREC operations, which amounted to a total of UA 95.5 million,

due to the lack of documentation for the restructured components. Bank Management reports a total figure of UA 2,868 million, representing 38.6 percent of the total amount indicated.

Coherence

The evaluation assessed the extent to which the Bank's COVID-19 response was coherent with other sovereign and non-sovereign operations within the Bank and with its development partners' COVID-19 response interventions.

Internal coherence: The Bank's COVID-19 response objectives were in line with the ascribed response plans of the countries. However, these actions were not always synergetic with the active Bank portfolio in the beneficiary RMCs, due to the urgent nature of the interventions and because health sector support—a major component of the COVID-19 response—was not a strategic priority for the Bank⁴ and had thus not been included in country strategies and programs.

External coherence: The alignment of the CRBS operations with the national COVID-19 response programs included discussions with other development partners, especially the International Monetary Fund (IMF), the World Bank (WB), and the World Health Organization (WHO), most frequently under the leadership of the Ministry of Finance, although sometimes under the Ministry of Health. In some countries, the Bank also held discussions with the private sector. However, the level and the form of government leadership was found to be to be a critical success factor in the coherence between development partners' interventions. In some cases, governments worked as an integrated and consistent body, while in other cases, the Ministry of Finance related unevenly to the line ministries and was isolated as the Bank's counterpart for the CRBS-related dialogue. In many cases, the coordination platforms were mainly used for information-sharing. As such, existing country coordination mechanisms were used when needed. Efforts to coordinate interventions with non-state actors were more limited.

Overall, the Bank's COVID-19 response demonstrated a satisfactory level of coherence.

Effectiveness

The effectiveness of the Bank's COVID-19 response was assessed by examining how well the CRBS operations and other non-lending activities achieved, or were likely to achieve, their objectives.

The performance of the Bank's COVID-19 response through the three priority areas was found to be mixed. In many cases, the programs supported by the Bank met and even exceeded their targets for the health and social support components. These two components can therefore be considered more successful than the third—economic support—for which it was difficult to assess the results of the economic support because the time span of CRF operations and the data provided by monitoring was less reliable and the results identified were uneven. The Bank's response enhanced countries' capacity to respond to health emergencies and put in place measures to mitigate the impact of the crisis on vulnerable households. Furthermore, the Bank's support also protected some small and medium enterprises (SMEs) from bankruptcy and saved jobs and livelihoods. Nevertheless, the low capacity of key national institutions and limited incentives to adhere to agreed covenants, coupled with lack of enthusiasm to implement certain reforms in some RMCs, were found to have led to delays in the implementation of the governance- and accountability-related outputs, such as audits.

The results of the support provided by the Bank through the WHO in certain RMCs were found highly satisfactory, as the WHO's efficient purchasing system made it possible to exceed planned results.

Non-lending activities (policy dialogue; advisory & analytical work; and TA) provided another opportunity for the Bank to contribute to the RMCs' COVID-19 response. Its policy dialogue in the context of COVID-19 operations built on pre-existing dialogue between the Bank and RMCs, which enabled the Bank to advise countries on their response measures. Thus, its policy dialogue

⁴ The Bank approved its Strategy for Quality Health Infrastructure in Africa 2022–2030 (SQHIA) only in February 2022.

was effective from the beginning, focusing on the national COVID-19 response plans in line with the priority policy options agreed with other partners and the preconditions for effective implementation of Bank-supported operations.

Analytical work was also found to have supported the achievement of results, although to a lesser degree. In three out of the 10 country case studies (Djibouti, Madagascar, and the Democratic Republic of Congo, DRC), interventions were based on economic studies conducted by the Bank or jointly with other partners. This enriched the Bank's response beyond financing alone. However, none of the CRBS operations was supported by TA or capacity-building interventions—a missed opportunity in terms of deeper impact.

Finally, the level of resources made available by the Bank, which was modest compared with RMCs' needs and other development partners' support, combined with other factors such as lack of Technical Assistance, limited the Bank's contribution to the recorded results.

Overall, the effectiveness of the Bank's response was found to be satisfactory.

Efficiency

The assessment of efficiency focused on the institutional arrangements and the streamlined processes and procedures for the design, implementation and monitoring of COVID-19 operations, and the use of the Bank's financial and human resources.

Timeliness: The CRF introduced accelerated procedures that the evaluation found were applied efficiently and shortened the approval process. Of the 43 CRF operations approved in 2020, 33 were approved by end-July, enabling rapid support to RMCs. On average, the time from approval to signature for all operations was 2.09 months, 2.73 months to entry into force and 3.7 months to the first disbursement. CRBS operations had a quicker process compared with investment projects and results-based financing (RBF) projects under the CRF. CRBS disbursement timeliness, generally in one single tranche,

depended on the nature of the Bank's support (grant or loan) and on country-specific administrative constraints. RMC representatives considered this acceleration of the Bank's pre- and post-approval processes to be a positive feature of the Bank's intervention.

Time management efficiency: The Bank was also found to have improved the overall efficiency of operations management. The streamlining of the procedures and processes, coupled with joint work between the Bank's Governance and Economic Reforms Department (ECGF) and sector staff (under the One Bank model), allowed for saving 23 percent of the staff weeks for the preparation and implementation of CRBS operations in 2020, compared with the time dedicated to PBOs in 2019, and 24 percent in the case of the IOs. However, the workload to prepare and implement the CRF-related interventions was unevenly distributed. Staff from ECGF, regional/country offices, the Human Capital, Youth, and Skills Development Department (AHHD) and the Fiduciary and Inspection Department (SNFI) accounted for 74 percent of the preparation effort and 82 percent of the implementation effort. Task Managers, who provided 55 percent of the staff weeks dedicated by the Bank staff to the CRBS operations, did not always feel as supported by the Bank "ecosystem" as they had been expecting. They pointed specifically to constraints in health, legal and procurement planning support. The perception of the availability of the Bank's staff varies widely between RMCs, from "very accessible" in Somalia and Djibouti to "totally overstretched" in South Africa. Only 14 percent of the Bank staff time dedicated to CRF operations was devoted to supporting implementation.

Similar to most comparable MDBs, the AfDB did not develop a dedicated institutional setup to manage its COVID-19 response programs. However, the Asian Development Bank (AsDB) allowed for more flexibility to organize collaboration and redeployment of human resources and the use of external consultants, and the World Bank (WB) intensified corporate support. The Islamic Development Bank (IsDB)

set up working groups and a specific task force to streamline decision-making.

Monitoring and Reporting: In contrast to the importance given to the results frameworks, monitoring and monthly and quarterly reporting of results proposed in the CRF document and the PARs, actual reporting to the Board and other stakeholders was delayed. This was due to RMC capacity constraints, the lockdown measures and lack of dedicated resources for implementing the monitoring framework. Indeed, only the first quarterly report was prepared in a timely manner. Subsequent reports faced delays, and the fourth quarterly progress report covered a period of more than three quarters and was finalized in mid-March 2022. The quality of the reports was found to be uneven. This is explained by the mixed timeliness and limited reliability of the monitoring and quality of implementation progress reports for individual CRF operations.

The monitoring of the national programs supported by CRBS operations was carried out by the national governments, in most cases under the responsibility of the Ministry of Finance, where monitoring data were centralized. The rhythm of the production of monitoring data was irregular and often not compatible with the Bank's requirements.

There is little evidence to indicate that the Bank proactively supported national monitoring processes associated with CRF operations. In the majority of CRBS cases the Bank wholly relied on national monitoring systems led by respective ministries. Limited on the ground supervision by Bank staff reduced opportunities for data quality control checks. To explain this situation, one should note that, once the CRBS operations were 100 percent disbursed, the Bank had little influence on the implementation of these programs and, therefore, on their effectiveness and efficiency. In addition, there were limited incentives on the part of governments to comply with the covenants, since failure to do so had no implications for disbursements. Moreover, insufficient harmonization of the development partners' monitoring requirements increased the burden/transaction costs faced by governments, especially for countries in fragile situations.

Despite these shortcomings, the efficiency of the Bank in implementing its COVID-19 response was rated as satisfactory overall.

Conclusions

Overall, although the Bank was not well prepared to deal with a crisis of such an unprecedented magnitude, its rapid reaction helped to strengthen its image as a partner of choice with the RMCs. Despite making positive contributions, particularly in the health and social components, the Bank's contribution to results was limited by the modest resource envelope, which fell short of its initial ambitions and which in the end only supported sovereign operations. While efficient procedures were appreciated by the RMCs, the workload was spread unevenly within the Bank, and the monitoring and reporting on implementation and results had major shortcomings.

Lessons

The following are the key lessons from this evaluation.

- 1. Responding with a single quick-disbursing short-term instrument may be relevant but is not sufficient in the context of a crisis the evolution of which is uncertain.** Adopting a multi-stage and multi-instrument approach allows for adjustment of the intervention to country specificities and the evolution of the crisis. When financial conditions are uncertain or volatile, it is also prudent to express a realistic initial financial ambition, which can be scaled up as more financial capacity becomes available.
- 1. In a context of crisis response, the Bank's "delivering as One" model makes it possible to improve its operational efficiency to respond quickly to the urgent needs of RMCs.** However, due attention should be paid to the distribution of the workload across the institution.
- 2. Country ownership and leadership are critical to success.** Country ownership and government leadership are necessary conditions to ensure coherence and strong coordination among development partners.

3. **In a crisis situation where the Bank lacks comparative advantage**, such as the area of health service delivery, it can effectively intervene via collaboration with specialized agencies such as the Centers for Disease Control (CDC) and the WHO.
4. Beyond a robust monitoring, evaluation and reporting framework during the design stage, **the monitoring capacity of RMCs and the availability of timely and reliable data are of paramount importance** to ensure the interventions' responsiveness to country needs and their effective delivery and reporting.
 - Ensuring strong analytical work, including thorough scenario analysis of the Bank's financial capacity and associated risks, during the design stage.
 - Adopting a dynamic approach and a range of instruments (program-based operations, non-sovereign operations, investment operations, technical assistance, etc.) tailored to the nature of the crisis and to RMCs' capacities, needs and strategies at different stages of the crisis. This would enable the Bank to set a realistic level of initial ambition, to adapt to the evolution of the crisis, and to scale up funding commitments if more resources become available.

Recommendations

IDEV makes the following recommendations:

1. **Capitalize on the lessons and experience from previous crises to improve the Bank's institutional preparedness for crises.** The Bank could for example undertake a reflective exercise to consider whether any Bank policies, processes, procedures, financial instruments and/or its skills mix require any adjustments to better prepare it for future crises. Then, it could agree agile standard operating procedures for response to crises, with a view to streamlining processes and procedures, templates and other tools to enable rapid response.
2. Improve the design and implementation of the Bank response to future crises, as and when they occur. Priority areas of action to consider include.
 - Ensuring that future crisis response includes fast-tracked TA for improving the quality of the monitoring of the Bank's interventions and their results, depending on RMC capacity and country context.
 - Pursuing continued collaboration with other development partners to harmonize (simplified) results monitoring and reporting requirements for future crisis response.
3. Enhance the Bank's results monitoring, reporting and learning throughout the response cycle. Priority areas of action to consider include:
 - Ensuring that future crisis response includes fast-tracked TA for improving the quality of the monitoring of the Bank's interventions and their results, depending on RMC capacity and country context.
 - Pursuing continued collaboration with other development partners to harmonize (simplified) results monitoring and reporting requirements for future crisis response.

1. INTRODUCTION

1.1. Background and Rationale

As part of its approved work program for 2021, Independent Development Evaluation (IDEV) launched an evaluation of the African Development Bank Group's (the AfDB or the Bank) crisis response support to Regional Member Countries (RMCs⁵) in the face of the COVID-19 pandemic.

The novel coronavirus (COVID-19) outbreak was first announced in December 2019 in Wuhan, China, eventually spreading rapidly to the rest of the world. This led to the World Health Organization (WHO) declaring the virus outbreak as a pandemic on March 11, 2020. Faced with this situation, the Bank, similar to several other International Financial Institutions (IFIs), delivered a package of measures to help its RMCs to mitigate the multifaceted impact of the pandemic.

There are three main reasons why such an evaluation is useful and timely. First, although not its first experience in crisis management against a threat to health, livelihoods, food supplies and, more broadly, the economy of the continent, the Bank, by virtue of its long-term development mandate, is not necessarily equipped to quickly respond to the consequences of such a pandemic. Consequently, it is interesting to assess the quality of the Bank's response and, in particular, its ability to adjust to better support RMCs in coping with the consequences of the pandemic and to draw lessons for future crises. Second, as the crisis continues, albeit abating, the Bank has the opportunity to learn from the experience to date to improve its support to its RMCs. Third, the results of this assessment will inform the ongoing work of the COVID-19 Global Evaluation Coalition,⁶ of which IDEV is a member.

1.2. Evaluation Purpose, Scope and Questions

The purpose of the COVID-19 response evaluation is to provide the Board of Directors, Bank Management, and RMCs with an assessment of the design, implementation and results of the Bank's COVID-19 response and to draw lessons that the Bank could consider in strengthening its response to the ongoing pandemic and to future crises.

The main objectives of the evaluation are to:

- Assess the strategic readiness and **relevance** of the Bank's support to the RMCs' crisis response in the face of the COVID-19 pandemic.
- Assess the adequacy of the institutional arrangements, processes and procedures, and **efficiency**.
- Assess the early results (**effectiveness**) and prospects of the Bank's response in delivering its outputs and reaching its expected outcomes, and to identify factors that have influenced (enabled or hindered) implementation and the achievement of results.

⁵ Regional Member Countries (RMCs) are the 54 Member Countries of the AfDB that are located in Africa.

⁶ The COVID-19 Global Evaluation Coalition is a network of the independent evaluation units of countries, United Nations organizations, international NGOs, and multilateral institutions. Participants work together to provide credible evidence to inform international co-operation responding to the COVID-19 pandemic, helping to ensure that lessons are learned and that the global development community delivers on its promises.

- Assess the consistency (**coherence**) and coordination of the Bank's support with its own policies, strategies, and operations, with the actions of national governments, and other development partners, such as International Financial Institutions (IFIs), including the International Monetary Fund (IMF), humanitarian response agencies, non-governmental organizations (NGOs) and United Nations (UN) specialized agencies, including the WHO.
- Generate useful lessons, good practices, and recommendations to inform the Bank's response to future crises.

The evaluation covers all the Bank's lending and non-lending activities, processes and procedures that are part of its support package—including the COVID-19 Rapid Response Facility (CRF), emergency assistance to the WHO, and a US\$3 billion Social Bond—to help RMCs, private sector entities, and regional organizations to mitigate the consequences of the COVID-19 pandemic over the period from March 1 to December 31, 2020.

To deliver on the above objectives, the evaluation is both summative and forward looking, to draw lessons for the future while also looking at early results.

This evaluation seeks to answer the seven main evaluation questions derived from the COVID-19 coalition strategic questions⁷ and their associated sub-questions/evaluation criteria adapted to the context and nature of the Bank's support.

1. How prepared was the Bank to respond and provide resources commensurate to the magnitude of the pandemic, building on the lessons of its support for combating the Ebola Virus and other previous epidemics? How could its preparedness be improved?
2. How adequate and strategic was the support provided by the Bank to enable an effective response to the pandemic at continental, regional, and national levels during the period under review?
3. To what extent was the Bank's COVID-19 response coherent with other sovereign and non-sovereign operations of the Bank and with other development partners' COVID-19 response interventions?
4. How well have the Bank operations funded under the COVID-19 response achieved, or are likely to achieve, their objectives at continental, regional and RMC levels?
5. Were institutional arrangements, organizational resources, processes, and procedures adequate, streamlined, and efficient?
6. To what extent did the Monitoring and Evaluation (M&E) system applied to the Bank's response provide the necessary information and analyzes to draw lessons from this experience and prepare the Bank to address future pandemics?
7. What are the key lessons drawn from the Bank's COVID-19 response that can strengthen future responses to shocks and crises?

1.3. Structure of the Report

The report is structured as follows. Section 2 presents the methodology used for the Evaluation. Section 3 provides an overview of the Bank's response, specifically: its strategies, how it adapted the processes, interventions, and non-lending activities it implemented. Section 4 presents the overall analysis of the response based on the main evaluation questions and the evaluation criteria of relevance, coherence, effectiveness, and efficiency. Section 5 summarizes conclusions and lessons drawn from the evaluation and provides recommendations for the Bank to consider in response to future crises.

⁷ Annex 4 presents the detailed evaluation questions and sub-questions and maps them to the evaluation criteria.

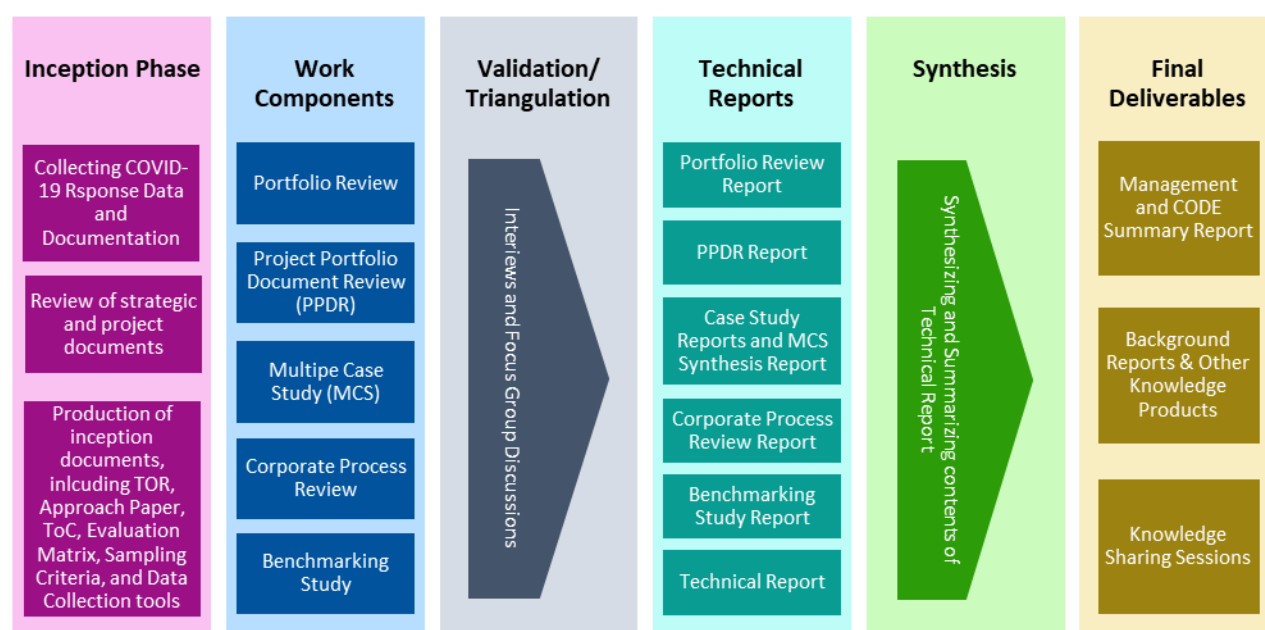
2. METHODOLOGY, SOURCES OF EVIDENCE AND LIMITATIONS

2.1. Methodological Approach and Sources of Evidence

The evaluation focuses primarily on learning but also looks at results achieved, if and where such results are present. The evaluation is theory-based, guided by the Theory of Change (TOC) of the CRF (Annex 1), which constitutes the core of the Bank's response to the COVID-19 crisis in Africa.

The evaluation has drawn evidence from five separate and complementary sources or components (Figure 1), allowing for wide triangulation of most findings. These data have been systematically organized, using appropriate classification and ranking systems, so as to permit a range of cross-tabulations and analyzes. The conclusions and recommendations were validated by the Evaluation Reference Group.

Figure 1. Evaluation of the Bank's COVID-19 Response – Main Components and Steps



The Portfolio Review covered all Bank operations in response to the COVID-19 pandemic, and the Multiple Country Case Studies (MCS) covered 10 RMCs⁸ and one institution, selected based on defined criteria (Technical Annex 1) providing a reasonable coverage of different regions. The Project Portfolio Document Review (PPDR) covered 84 percent (21 out of 25 of approved CRBS operations), including all case studies and all five eligible investment operations). The Corporate Process Review analyzed the adaptation of Bank procedures, and the Benchmarking Study compared the Bank's COVID-19 response with responses by similar multilateral development institutions that implemented similar programs, namely the Asian Development Bank (AsDB), the Islamic Development Bank (IsDB), and the World Bank (WB).

The evaluation used a mixed-method approach employing analysis of project-level and staff time data, document review of project and other relevant documents, and interviews and focus group discussions (conducted both in-person and remotely). Eight of the 10 case studies were accompanied by field visits carried out by teams made up of evaluators from IDEV and the Consulting Firm. Technical Annex 1

⁸ In person case countries: Cameroon, DRC, Ghana, Kenya, Madagascar, Nigeria, South Africa, and Tunisia, and two virtual case studies: African CDC and Djibouti/Somalia

further discusses the data collection methods used by the various components of this evaluation and the selection criteria used to identify the PPDR sample, the MCS case countries, and the comparator Multilateral Development Banks (MDBs) for the Benchmarking Study.

These components are used to address the evaluation questions. A more explicit representation of how this was done is shown in the evaluation matrix in Annex 2.

In accordance with the IDEV evaluation manual, a four-point rating scale was used for each criterion, namely: highly satisfactory - 4, satisfactory - 3, partly unsatisfactory - 2 or unsatisfactory - 1. To apply this four-level scale, a scoring grid was developed to define how to rate each evaluation criterion (Annex 3).

2.2. Challenges and Limitations

The design and implementation of this evaluation faced a number of challenges and limitations.

The main challenges and limitations were as follows:

- The main challenge for the evaluation is the assessment of the effectiveness of the Crisis Response Budget Support (CRBS) interventions, due to the fungibility of budget contributions and the limited size of the Bank's contribution to the national response programs, which were also supported by numerous other development partners.
- The timing of the evaluation did not allow for assessing the results of the investment operations (IOs), since it is too early for most of these projects to have achieved results or to report on them. No results monitoring data were available for these IOs, except for the support to a regional organization, namely the Africa Center for Disease Control and Prevention (Africa CDC).
- FAREC operations (agriculture projects repurposed with the aim of improving food security and scaling up food production in response to the COVID-19 pandemic) could not be assessed due to the lack of documentation of their restructuring, contributing to reducing the IO sample to five operations.

The use of triangulation of various sources of evidence mitigated these limitations as much as possible (Technical Annex 1).

3. THE BANK'S COVID-19 RESPONSE

The Bank identified up to UA 7.4 billion (US\$10 billion) in financial resources and simplified its rules and processes, while providing guidance to its staff to provide rapid, flexible, and effective support to RMCs to mitigate the health and socio-economic consequences of the COVID-19 pandemic.

3.1. Strategy, Processes, and Guidance

The aim of the Bank's COVID-19 response was to help RMCs contain the spread of the virus and mitigate the impact of the pandemic on African societies and economies. Therefore, the Bank adopted a package of measures, including emergency assistance to WHO-led measures to curb the spread of the disease, and established a COVID-19 Rapid Response Facility (CRF, approved by the Board of Directors on April 8, 2020). The Bank Group proposed the CRF based on a fast, flexible, and effective response to be provided through sovereign and non-sovereign operations using a mix of instruments, with more than half the financial support (UA 4.75 billion) to be provided through quick-disbursing CRBS operations. The funds were to be deployed for: (i) rapid, cost-effective, and targeted emergency budget support through a fast-tracked approval process; (ii) liquidity support to RMCs; and (iii) support to RMCs and the private sector.

The AfDB clearly identified three immediate priorities: (i) supporting the RMCs' health response and health capacity; (ii) social protection of vulnerable populations and small businesses; and (iii) economic resilience and recovery. In this context, it should be noted that the health sector is not identified as a priority in the Bank's Ten-Year Strategy (TYS), and the Bank had very few operations in this sector at the start of the pandemic. The proposed response included plans for coordination with development partners, particularly the IMF and the WB, and also partnership with the UN High Commissioner for Refugees (UNHCR) and UN Office for the Coordination of Humanitarian Affairs (OCHA) to ensure the inclusion of the most vulnerable, including women, youth, and refugees.

In terms of resource mobilization, the AfDB had identified up to UA 7.4 billion (US\$10 billion) in resources to be made available in 2020 to help RMCs and their private sector enterprises respond to the COVID-19 crisis. These resources were to come from the ADB window of the AfDB, from the Africa Development Fund (ADF) window (both unutilized ADF-14 resources and frontloaded ADF-15 resources), and repurposed resources of cancellable loans. Also, and in addition to ongoing project restructuring, other outside resources such as Global Agriculture & Food Security Program (GAFSP) were to be mobilized in the framework of the Feed Africa Response to COVID-19 (FAREC). A US\$3 billion "Fight COVID-19" Social Bond was successfully marketed to make immediately usable resources available. To be eligible for the CRF, each operation had to meet certain specific criteria defined by Bank Management in the *Guidance Note on selection and processing of CRF operations*. Sovereign operations (Investment projects and Program Based Operations [PBOs]) had to meet three eligibility criteria related to: (i) project purpose; (ii) consideration of vulnerability; and (iii) demonstration of the added value of the Bank's support. The areas of interest identified for CRF investment projects were: (i) the health crisis; (ii) water, sanitation and hygiene (WASH) interventions; (iii) the food crisis; (iv) investments to support farm input supply systems; and (v) energy services. Management also defined specific eligibility criteria, terms, and conditions for each of the three types of proposed NSOs (CRF debt service deferral, CRF liquidity facility, and CRF trade finance).

As the primary channel for its efforts to combat the crisis, the CRF was intended to provide a flexible range of support within the UA 7.4 billion envelop, including: (i) UA 6.4 billion of financing directly to RMCs, with up to UA 4.1 billion for sovereign operations for ADB countries; (ii) up to UA 2.3 billion for sovereign and regional operations for ADF countries; and (iii) up to UA 1 billion for ADB NSOs in all African countries.

The proposal to provide the bulk of CRF resources in the form of budget support required adjustments. Bank Management raised the ceiling on budget support operations financed by the ADB window from 15 percent to a maximum of 50 percent of the 2020 UA 5.5 billion lending envelop. On the ADF side, following discussions and agreement with ADF Deputies, a cap of 25 percent of the three-year Performance Based Allocations (PBA) was captured in the ADF-15 Report and approved by the Board. Therefore, the CRF operated with this cap.

The CRF framework was intended to apply until the end of 2020, with any extension being subject to a decision of the Board of Directors.

3.2. Guidance to Staff

The guidance provided to staff was covered in the *Guidance Note on selection and processing of CRF operations*, which was issued in mid-May 2020. The guidance aimed to cover the three types of operations that were part of the CRF, namely sovereign program-based operations, sovereign investment operations and NSOs. The guidance generally focused on the selection of operations, as well as the preparation and processing stages. It did not extend to the implementation phase. The guidance included a dedicated section on monitoring and reporting on CRF operations through a relatively detailed quarterly reporting template.

The Bank was innovative and also provided guidance focused on results and results tools to guide CRF operations through the paper on *Results Tools for the COVID-19 Rapid Response Facility*,⁹ shared with the Board for information. The guidance included a conceptual framework and TOC, and was intended to maximize effectiveness through better results planning and to increase the consistency and quality of results monitoring and measurement. The Operations Committee Secretariat and Quality Assurance Department (SNOQ) also developed, in collaboration with the sector departments, a list of indicators for CRF operations, which was subsequently updated and shared with staff. In the CRF period, SNOQ (now SNDR3) conducted a number of awareness-raising sessions on the use of the Results Tools, provided training sessions, and reviewed all CRF-related operations using a streamlined checklist, which was shared with the task team.

3.3. Fast-Tracking the Response

With the establishment of the CRF, the Bank improved its capacity to provide fast, flexible, and effective responses to lessen the severe economic and social impacts of the COVID-19 pandemic on RMCs, including the private sector. The Facility included the provision and a commitment to ensure that the operations were fast-tracked to enable swift and timely response to RMCs. Streamlined, fast-tracked processes were a clear and strong feature of the proposed response.

In contrast to the general simplification/streamlining measures, the provisions for transparency and accountability were more stringent than for normal budget support operations. Special provisions for CRF

⁹ African Development Fund ADF/BD/IF/2020/102, May 15, 2020.

operations included a requirement for a Flow of Funds Audit, an Annual Financial Audit, and a Procurement Value for Money Audit. Similarly, the need for quarterly progress reports was included in loan agreements.

4. FINDINGS

4.1. Relevance

The evaluation assessed the preparedness of the Bank to address the effects of the pandemic, and the strategic and operational alignment, as well as the adequacy of its response. In addition, the quality of the design of the Bank's support and how it adapted to the evolution of the crisis are also assessed.

Although the Bank's systems were not adequately prepared to respond to the scale, scope and nature of the COVID-19 crisis, the Bank reacted quickly. The three complementary fields of intervention identified by the CRF, namely health, social and economic, were in line with national COVID-19 plans. All operations reviewed were aligned with the Bank's CRF and the national response plans of RMCs. In terms of design, the quality of operations was considered adequate despite some shortcomings. However, the Bank's resource mobilization fell far short of its goal. In addition, in contrast to comparator organizations, the Bank opted for a static approach oriented towards short-term objectives, which was not adapted to the evolution of the pandemic. On balance, the relevance of the Bank's COVID-19 response has been rated as satisfactory, while noting some important shortcomings.

4.1.1. Preparedness

The evaluation found that the Bank's systems—similar to those of other MDBs—were not well prepared to respond to the scale and scope of the COVID-19 crisis. Although it had gained experience with the Ebola crisis of 2014–2016, the type of instruments used in the Ebola response and the scale of the crisis were not the same. In addition, being an institution focused on long-term development, the Bank's processes and procedures, financial instruments and skills mix were not prepared for a large-scale crisis response, particularly in the health sector, which was not a priority in the Bank's corporate strategy. Also, the size and complexity of the COVID-19 crisis were unprecedented and far exceeded that of previous events. Nevertheless, the Bank reacted quickly and approved the COVID-19 Rapid Response Facility (on April 8, 2020) and other initiatives. This enabled the Bank to set out three priority areas of support (namely health, social and economic support), and streamline processes to provide support to RMCs in a quick and flexible manner.

4.1.2. Strategic and Operational Alignment

Strategically, social and economic support were among the priorities identified in the Bank's corporate strategy, although support to the health sector was not. Operationally, the Bank's approach was to provide financial support to countries' own national strategies to combat the COVID-19 pandemic, and the three complementary fields of intervention identified by the CRF (health, social and economic) were in line with national COVID-19 strategies of RMCs. The flexibility enabled by the budget support instrument facilitated alignment with national plans and quick disbursement. In this emergency context, timeliness/rapidity of response was considered an element of relevance. In addition, all the operations reviewed were found to be very well aligned with the strategy outlined in the Bank's CRF document and the priorities of the RMCs. However, the following points should be taken into consideration:

- The CRF is a short-term response strategy and, therefore, all the objectives selected in the national programs as part of the Bank's interventions were short-term objectives. That was not the case for the approach of comparable institutions.
- The programs supported by the Bank (or the objectives agreed upon with the Bank) were sometimes criticized for not adequately considering the potential contribution of non-governmental stakeholders, such as the private sector or civil society organizations (CSOs), in the response to the pandemic and its impacts.

4.1.3. Adequacy

Under the CRF, the Bank has approved a total of 25 CRBS and 12 IOs for a total amount of UA 2,485 million for 43 RMC and 9 institutions, which represents only 33 percent¹⁰ of its initial ambition of UA 7.4 billion. The percentage of planned operations actually approved was much higher for CRBS operations, at 47 percent, compared with 14 percent for IOs. ADB IOs were limited to a single results-based financing operation for Morocco. It is notable that no NSO was approved compared with planned approvals of UA 1 billion. This shortfall was due in part to: (i) challenges resulting from a deterioration in the Bank's risk capital utilization ratio due to credit rating downgrades of a number of the Bank's RMCs shortly after the approval of CRF; and (ii) an over-estimation of the level of cancellations of outstanding operations. As a result, the Bank was unable to fully meet the demand of some RMCs. Also, priority was accorded to CRBS operations, and the planned support through NSOs was not pursued. Nevertheless, other forms of support to assist private firms to remain solvent, such as: payment in instalments of VAT, payroll and withholding tax; extension of payment deadlines; suspension of tax enforcement proceedings; and a Pro-Garante credit guarantee scheme for MSMEs and tourism and hospitality firms, were provided to NSO clients in the context of the CRF program. Table 1 shows the resources used for the CRF compared with what was planned in 2020.

Table 1. Sources of CRF Funds (UA million)

Sources of Funds		Plan	Actual	Actual/Planned (%)
ADB	2020 Lending Program	4,000	810	20%
	Possible Cancellations	1,100	674	61%
	Total	5,100	1,484	29%
ADF	ADF-15	1,341	855	57%
	Unused ADF-14	153		
	Possible Cancellations	832	146	18%
	Total	2,326	1,001	43%
AfDB	Total	7,426	2,485	33%

Source: Fourth Quarterly Progress Report 2022, validated by the evaluation team.

The CRF was approved during the transition period between two cycles of the ADF. Although the replenishment of ADF-15 was concluded in December 2019, the cycle did not become operational until June 30, 2020, due to the condition of receipt of 30 percent of development partners' subscription instruments. Thus, between December 2019 and June 2020, the ADF-14 cycle remained active to avoid an operational vacuum. Part of the resources from the ADF-14 regional envelope financed some regional emergency responses to the COVID-19 crisis, and the rest of the financing was provided by ADF-15

¹⁰ This amount excludes non CRF General Budget Support operations for Egypt (UA 180 million) and Namibia (UA 94 million) as well as the FAREC operations which amounted to a total of UA 95.5 million, due to the lack of documentation for the restructured components. Bank Management reports a total figure of UA 2,868 million, representing 38.6 percent of the total amount indicated.

resources, available as of July 2020. In this context, a US\$3 billion “Fight COVID-19” Social Bond was successfully marketed to provide immediate resources.

The CRF operations are covered in detail in Technical Annex 2 (overall composition), Technical Annex 3 (financial details), and Technical Annex 4 (timeline).

4.1.4. Quality of Design

As indicated above, the three areas of intervention of the CRF were aligned with the priorities of the RMCs in the context of the pandemic. The CRF was found to be well designed: the objectives targeted and the modalities of Bank intervention through the CRF are clear, and sources of financing have been identified even if, as indicated above, the assumption on the volume of cancellations proved to be too optimistic. The CRF document itself contained **a well-elaborated Theory of Change (TOC)** explaining causal pathways to targeted outputs and outcomes, which contributed to the evaluability of the intervention.

The quality of design of the Bank’s COVID-19 response operations was deemed adequate, with some shortcomings. This shows that the simplifications introduced by the Bank to reduce the preparation time for operations did not significantly compromise their quality.

At the operational level, about half (52 percent) the operations reviewed provided an adequate justification for the use CRBS. Half of PARs did not explicitly explain why a CRBS operation was more relevant than another type of operation. It simply mentions that a CRBS is justified on humanitarian and economic grounds, in line with the PBO guidelines.

All operations reviewed (100 percent) fulfilled the relevant eligibility criteria.¹¹ While these criteria were not addressed in a separate section and were sometimes only addressed implicitly, all operations aimed to tackle the COVID-19 pandemic’s negative effects; their purpose is thereby aligned with the CRF. All PARs contained satisfactory elements on vulnerability and added value.

Less than half of the reviewed CRBS operations (47 percent) and the majority (80 percent) of reviewed IOs used lessons learned from previous crises adequately. However, lessons learned were not always clearly articulated with operation design and were sometimes rather generic (for example: keep a flexible approach, coordinate with other partners, and consult with beneficiaries, etc.).

A large majority of operations reviewed (95 percent of CRBS and all IOs) included sufficient updated country Procurement and Fiduciary Risk Assessment as part of eligibility criteria, and all CRBS operations detail the fiduciary assessment. However, it was not always clear when or whether the fiduciary risk assessment had been updated for the operations’ needs. Procurement aspects were also covered. Strategies to mitigate the risks identified were laid out.

The quality of results frameworks of most operations reviewed operations (76 percent of CRBS and 80 percent of IOs) was deemed sufficient. For most operations, there were only minor shortcomings in the causality chain with credible contribution of outputs to outcomes. Significant shortcomings in causality chains were noted for five CRBS (Cabo Verde, Kenya, Tunisia, Africa CDC, and multi-country Djibouti-Somalia). The existence of a TOC (which is not required in streamlined format of PAR) could help to further reduce these shortcomings.

¹¹ These include: the COVID-19 PAR meets the identification criteria for CRF supported operations and satisfies the requirements for Purpose, Vulnerability and Added Value. The purpose of the operation was to provide support to the RMC to address the short-, medium- and long-term effects of the COVID-19 pandemic. Alignment to Bank’s objectives, strategies and operations: The COVID-19 operation contributes to securing jobs, is aligned to current Bank strategies including High-5s, ADF-15 and GCI-VII. Alignment to Priority Sectors: The COVID-19 operation is aligned to at least one of the priority sectors (health; water, sanitation & hygiene; the food crisis; and energy services).

The mainstreaming of cross-cutting issues was adequate in the majority of operations reviewed (62 percent of CRBS and 60 percent of IOs) with an adequate level of attention given to gender. All operations had a section addressing the specific impacts of COVID-19 on women, and at least two PARs included a gender plan, one of them budgeted (Guinea Bissau). Gender-disaggregation of indicators was satisfactory although more indicators could often have been disaggregated, especially regarding economic resilience components such as support to Micro, Small and Medium Enterprises (MSMEs). Other vulnerable populations were less systematically identified and targeted, although a number of operations had as a main objective to target the most vulnerable.

Regarding mainstreaming of environmental and climate issues, more than 75 percent of PARs (CRBS operations and IOs) provide brief and generic information. Nevertheless, 44 percent of operations reviewed neither included a climate section nor provided information on links with climate change. PARs provided little information on environment.

When climate change is discussed in PARs, it is generally to make a simple link between the impact of the COVID-19 crisis and resilience. Climate change is only mentioned once as a subject of policy dialogue. While here again the nature and the context of the operations reviewed partly explain why climate change is not addressed extensively, there seems to be a missed opportunity regarding exploiting synergies between CRBS operations and climate adaptation and mitigation.

The availability of Technical Annexes only for a minority of the projects hindered a full assessment of whether operations addressed the fragility of some RMCs. For most countries in a fragile situation, the PARs included an analysis of fragility factors, sometimes mentioning the country's Country Fragility Assessment Report (e.g., Zimbabwe) and generally providing more details in an annex. However, PARs did not always provide any evidence of adaptation of the interventions to these specific conditions.

The review did not identify any operation that included a Technical Assistance (TA) component. In some cases, TA implemented as part of projects of other development partners was mentioned as contributing to the COVID-19 operation. In the case of Madagascar, the absence of TA is surprising given the high fiduciary risk identified; the lack of TA was noted in the PCR.

Articulation of policy dialogue was well presented in 81 percent of the 21 CRBS reviewed. All PARs for CRBS operations had a section on policy dialogue. However, some aspects necessary for an effective policy dialogue were not clearly defined in some cases, including: (i) definition of roles and responsibilities within the Bank to conduct the dialogue; (ii) the expected frequency of policy dialogue; (iii) the different mechanisms for policy dialogue, including existence of joint budget support through Sector Wide Approaches (SWAPs); (iv) clearly identified future opportunities for analytical works to inform the dialogue; and (v) opportunities for broad consultations with stakeholders, including the private sector and civil society organizations.

The core scope of policy dialogue is consistent throughout the CRF CRBS operations reviewed: in the short term, the focus was on the policy responses needed to deal with the COVID-19 crisis, including its social and economic effects, while in the medium to longer term the focus was on economic stabilization and recovery. A focus on governance and transparency is noted. This is in line with the CRF document. The broader scope of policy dialogue varies depending on the country, with inclusion of gender (seven countries), agriculture (three countries), climate (one country) or other subjects depending on local specificities.

4.1.5. Adaptation of Strategies, Procedures and Processes to the Emergency Situation

Once a pandemic had been declared by the WHO, the Bank quickly started to work on a COVID-19 response strategy designed to accelerate the delivery of flexible, quickly disbursing support to the RMCs' efforts to slow down the COVID-19 virus diffusion by reinforcing the health services and their equipment and mitigating the COVID-19 crisis's social and economic impacts. Operational guidelines were made available later. Prioritizing health and social and economic impacts proved to be relevant, and the Crisis Response Budget Support instrument was adopted to facilitate alignment with national COVID-19 responses. The Bank approved the CRF strategy document on April 8, 2020, i.e., within one month of the identification of the crisis as a global pandemic by the WHO. The guidance note on the selection and processing of CRF operations was made available to the staff in May 2020, potentially too late to be helpful for a number of operations that were already approved in May and early June. This included results tools to guide CRF operations through the paper on *Results Tools for the COVID-19 Rapid Response Facility*, also communicated to the staff in May 2020.

The evaluation team compared the strategic choices of the AfDB with those of the AsDB, the IsDB, and the WB. As presented in Table 2, it appears that the Bank's approach is relatively static, while the three comparator institutions opted for a dynamic approach by adapting their strategies twice during the period and increasing the related financial envelopes to better adapt them to the evolution of the pandemic. The AfDB CRF is mainly built on the short-term contribution of the CRBS operations, essentially disbursed in 2020, and marginally on IOs. Comparator institutions integrated longer-term priorities such as "restructuring and resilient recovery" for the WB or "Restore and Restart" for the IsDB.

Table 2. Comparison of Overall Strategy, Policy Framework and Operational Guidance

AfDB	AsDB	IsDB	WB
<p>Identified US\$10 billion to be made available in 2020 for sovereign (US\$8.6 billion) and non-sovereign operations (US\$1.4 billion):</p> <ul style="list-style-type: none"> - Rapid, cost-effective and targeted emergency budget support - Liquidity support to RMCs - Support without deepening debt burden - Support to RMCs and Private sector <p>The response was built upon engagement in policy dialogue based on the Bank Group's comparative advantage – legitimacy as an African institution.</p> <p>An underlying principle was to provide support without deepening the debt burden of RMCs.</p> <p>The crisis response budget support (CRBS) component of the program relied on the crisis response provision of the Bank's 2012 PBO policy.</p> <p>Guidance provided to staff through Guidance Note and note on Results Tools.</p>	<p>Initial commitment of US\$6.5 billion extended in April 2020 to a total package of US\$20 billion (US\$18.2 billion for sovereign (US\$1.8 billion for non-sovereign) for operations</p> <p>In December 2020 ADB established the Asia Pacific Vaccine Access Facility (APVAX) with a resource envelope of US\$9 billion</p> <p>The ADB program relied heavily on number of adaptations of existing programs and policies</p> <ul style="list-style-type: none"> - Establishment of a COVID-19 Pandemic Response Option under the Countercyclical Support Facility for budget support - Expanded Scope of Contingent Disaster Financing under Policy-Based Lending to include Health-Related Emergencies - Expanded scope of ADF Disaster Response Facility - Expanded ADB Support to Private Sector for COVID-19 Response. - The Bank provided guidance, including on results frameworks, 	<p>Indicative financing of US\$2.3 billion from across the IsDB Group, increased to US\$3.07 billion in December 2020, US\$3.55 billion in January 2021 and US\$3.64 billion in March 2021. Strategic Preparedness and Response Program (SPRP):</p> <p>(R1) Respond: quick support to mitigate the immediate life-threatening health and socio-economic effects of the crisis</p> <p>(R2) Restore: protecting enterprises and household assets to support the resilience of the socio-economic fabric</p> <p>(R3) Restart: longer-term support to relaunch economic growth</p> <p>The total amount of financing of US\$2.4 billion approved by the IsDB Group by March 2021 represents 65% of the committed amount.</p>	<p>US\$12 billion facility proposed in early March, extended to US\$14 billion shortly thereafter and then greatly expanded in June. The ambition of the WB crisis response was to help client countries assist at least 1 billion people impacted by the COVID-19 crisis and to restore momentum on the Twin Goals of fighting poverty and promoting shared prosperity.</p> <p>3 stages:</p> <ul style="list-style-type: none"> - Relief - Restructuring - Resilient Recovery <p>4 thematic pillars:</p> <ul style="list-style-type: none"> - Saving lives - Protecting poor and vulnerable people - Saving livelihoods and jobs and - Strengthening policies, institutions and investments for rebuilding better <p>No new policies were put in place, but the Bank made use of provisions of existing policies that had never been used before:</p> <ul style="list-style-type: none"> - The MPA used earlier for multiple phases of a single country operation was extended to multiple countries - The WB Capital Package provided for a buffer for crises, and was triggered for the first time - WB asked for a shortening of the IDA cycle

<p>The guidance included a dedicated section on monitoring and reporting</p> <p>The guidance generally focused on preparation and processing stage and did not extend to implementation phase</p>	<p>through a number of memoranda.</p>		
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Source: Documents of respective institutions and interviews with managers/staff.

Streamlined and fast-tracked processes were a clear and strong feature of the AfDB proposed response. With a view to flexibility and speed of delivery of support, while being fully accountable to the Board of Directors, approvals were delegated to lower decision levels. Bank Management waived the need for a Project Concept Note (PCN) for all CRF operations, with a provision to move directly to the PAR stage. Different review steps of the PAR were also simplified/streamlined and, in many instances, combined. SNOQ put in place a procedure to review CRF operations from a results perspective against a checklist that was shared with task teams. CRBS operations, by their very nature, provided governments with certain flexibility in using resources. Many CRF operations, including CRBS operations, were exempted from standard environmental and social due diligence. The possibility of preparing multi-country CRBS operations also contributed to reducing transaction costs and accelerating the Bank's response to RMCs.

The other institutions also streamlined their procedures to accelerate the preparation and approval of their interventions, as shown in the Table 3. Unlike the AfDB, which supported national programs without directly participating in procurement procedures, the IsDB was deeply invested in that activity with the support of a Global Coordination Platform and specialized UN Agencies present in the field. The AsDB and the WB were also involved in procurement programs. Unlike the AfDB, the World Bank showed more flexibility with respect to procurement.

The AsDB relied heavily on the adaptation of existing programs and policies, the IsDB relied on selected Sharia'h compatible instruments and offered capacity development support, and the WB adapted existing policies and proposed a mix of projects and programs.

Table 3. Comparison of Process Streamlining to Support Rapid Response

AfDB	AsDB	IsDB Group	WB
<p>Streamlined, delegated approval:</p> <ul style="list-style-type: none"> - Delegated up to UA 30 million - Lapse of Time Basis (LOTB) up to UA 100 million <p>Waiver of PCN step, normal ESG due diligence</p> <p>Single document/ approval for multiple countries</p> <p>Features to apply until end of year</p> <p>In contrast to these measures, the provisions for transparency/accountability measures were more stringent than for normal budget support operations</p>	<p>Permitted omission of Program Concept paper and related attachments and of inter-departmental review if One ADB team formed</p> <p>Board consideration period shortened to 1 week</p> <p>Streamlined preparation and approval of new TA projects, or increases in TA budget amount for existing TA projects</p> <p>Expedited Procurement of Critical Medical and Other Equipment and Supplies for COVID-19 Response</p> <p>Variations proposed for a period of 15 months</p>	<p>Creative 6-4-24 approval process:</p> <ul style="list-style-type: none"> - Relevant working group accountable for processing package in 24 hours - Standard contracts, a fast-track process, a maximum reliance on local shopping, advance contracting, and advance payment were used to expedite procurement. - Memorandum of Understanding with selected UN agencies with field presence - Global Coordination Platform for financing, purchasing, fulfillment and replenishment - "Reverse Linkage" mechanism to promote cooperation among RMCs <p>Fast-track procurement arrangements were adopted for all SPRP projects using simplified procurement modalities</p>	<p>The WB introduced flexibility through a number of measures:</p> <ul style="list-style-type: none"> - Flexibility to enable Management approval of individual projects under the COVID-19 Strategic Preparedness and Response Plan (SPRP) - Flexibility in application of Anti-Corruption Guidelines to Bank-financed procurement where retroactive financing is used. - Limited waiver with respect to the application of Anti-Corruption Guidelines - A waiver of the Crisis Response Window (CRW) eligibility criteria, to allow CRW financing to flow directly - Multiple waivers for projects in areas where the Bank does not have a physical presence

Source: Documents of respective institutions and interviews with managers/staff.

Overall, the Bank's system was not adequately prepared to respond to the scale, scope and nature of the COVID-19 crisis. Despite this, the Bank reacted quickly. The Bank response was aligned with national COVID-19 plans. However, its resource mobilization fell far short of its proposed ambitious plans, and support was provided only through sovereign operations. In addition, the Bank opted for a static approach oriented towards short-term objectives without considering the evolving nature of the crisis. It adopted the CRF for a period of validity up to December 31, 2020, with the possibility of extension, which did not happen. This suggests that, in its response, the Bank focused only on the short term and did not include in its response in the medium and longer term those aspects that would have allowed it to adjust its response according to the evolution of the pandemic, and to address the needs of post-pandemic recovery within the same framework. The comparative analysis introduced above shows that the comparators adopted a flexible approach, which enabled them to adjust their responses and their level of financial support according to the evolution of the pandemic. The evaluation team's review of the Bank's 2021 approvals (not part of the CRF) identified continuing COVID-19 recovery support programs for the benefit of some RMCs.¹² These actions were not carried out within a coherent framework, which limited the visibility of the Bank's actions.

4.2. Coherence

Coherence was assessed by examining the extent to which the Bank's COVID-19 response was coherent with other sovereign and non-sovereign operations of the Bank and with other development partners' COVID-19 response interventions.

Internal coherence with other Bank operations was limited because the health sector was not among the Bank's strategic and operational priorities. However, alignment of Bank support with the national COVID-19 response programs, government leadership, and increased coordination with other development partners, resulted in strong external coherence. The Bank participated in development partner cooperation frameworks in each RMC when present. But efforts to engage with non-state actors were rather limited. Overall, the Bank's COVID-19 response demonstrated a satisfactory level of coherence.

4.2.1. Internal Coherence

The emergency nature and scale of the pandemic entailed some weaknesses in the internal coherence of the COVID-19 operations with the Bank's existing sovereign and non-sovereign operations. The development and application of the CRF guidelines ensured that the COVID-19 operations were broadly aligned to the priority areas identified in the CRF document, and the Bank's COVID-19 response objectives were in line with the response plans of the RMCs. However, the operations were not always consistent with the active Bank portfolio in the beneficiary RMCs, not only on account of the urgent nature of the interventions but also because health sector support—a major component of the COVID-19

response—was not a strategic priority for the Bank¹³ and had thus not been included in country strategies and programs.

All PARs for COVID-19 operations contained satisfactory elements on vulnerability and added value, as well as alignment with the Bank's TYS and sector strategies, in particular WASH and increasing access to energy. The synergy with agriculture interventions supported by the Bank was uneven and mostly indirect across different RMCs as envisaged through FAREC operations. However, the COVID-19 operations addressed the food crisis through the provision of emergency food support packages for vulnerable households.

4.2.2. External Coherence

The Bank's response was complementary with the overall larger response financed by other development partners. The Bank's assistance was found to be aligned with national COVID-19 response programs and was also coherent with interventions of major development partners (IMF and WB) and the WHO.

A major point of congruence with other development partners was on the choice of priority policy measures to be implemented as part of the COVID-19 response, which were based on agreements with RMC governments in consultation with major development partners. These priority policy measures were clearly outlined in all PARs. In some countries, for example Kenya, the Bank also held discussions with the private sector. Evidence corroborated through various evaluation methods including the review of documents, the PPDR, in-depth interviews, discussions with key informants and case studies indicate that all CRBS operations but one (Mauritius) demonstrated consultations between the Bank and other key development partners. As a result, this indicated the amounts that other development partners committed to supporting the country response.

The level and the form of government leadership was found to be a critical success factor in assuring the coherence between development partners' interventions. In Ghana, for instance, the Government of Ghana worked as an integrated and consistent body, ensuring the coherence of the support provided by development partners and the implementation of programs at the central, regional, and local levels. In Kenya, the Government of Kenya exercised clear leadership facilitating the coherence and the coordination between development partners' interventions. In other cases, such as Madagascar, the DRC, Cameroon and, to some extent, South Africa, however, inter-ministerial coherence and coordination was inadequate and proved to be an obstacle. The Ministry of Finance, sometimes related unevenly with the line ministries and was isolated as the Bank's counterpart for the CRBS-related dialogue, while other ministries and public institutions faced challenges communicating their needs and accessing the necessary resources to implement the program activities in their charge. Where government leadership was weak, multi-donor coordination technical groups were utilized.

4.2.3. Coordination with RMCs, Development Partners and Stakeholders

Whenever there was a coordination framework, the Bank worked jointly with other development partners, allowing for regular consultation with other partners and avoiding duplication of efforts. The existence of formal frameworks and national COVID-19 plans, as well as government leadership, proved to be a critical success factor for coordination of development partners' interventions. The Bank's presence in RMCs was also found to help its coordination with other development partners. However, efforts to

¹³ The Bank did not have a health strategy until February 2022 when the Strategy for Quality Health Infrastructure in Africa 2022–2030 was approved by the Board.

coordinate interventions with non-state actors and to harmonize the reporting requirements were found to be limited.

The Bank was involved in relevant coordination groups in the country of the operation, allowing for regular consultations with other partners. An illustration of this coordination is the Bank's contribution to impact assessments of COVID-19 together with other development partners (mostly the IMF, the UNDP, and the WB), which contributed to countries' response plans and informed the design of operations.

Existing and, in some cases, new and innovative country coordination mechanisms in most of the RMCs studied were found to have been used to strengthen and coordinate interventions at the regional and national levels. The Bank's presence in RMCs helped collaboration both with other development partners and with the WHO, which facilitated coordination on health issues. Coordination was found to work well in countries where in-person coordination was possible and where the governments' leadership was strong. The leadership of national authorities facilitated the division of labor and roles according to the comparative advantages of development partners, which reinforced the complementarity and synergy of support. However, practical challenges were found relating to differences in the timing of loan preparation/approval and reaching an agreement on a common policy matrix. However, these coordination frameworks in most cases did not involve non-state actors. It should, however, be noted that several non-state actors have actively participated in the implementation of the national COVID-19 plans with the support of certain development partners. Note also that the existence of national COVID-19 plans to which all development partners have agreed to support has facilitated coordination. In the context of fragile and conflict-affected situations, the Bank Group relied on its longstanding relationship with the African Union, the Regional Economic Communities (RECs), and UN Agencies to leverage its engagement and facilitate coordination with civil society, the private sector and other development, humanitarian, and peace-building actors. It should be noted, however, that one country, Tunisia, opted to deal bilaterally with partners, forcing them to limit themselves to informal exchanges of information.

Different reporting requirements of development partners increased the transaction costs for RMCs, especially burdening those with limited capacities. This also led to weaknesses in the joint accountability framework involving all concerned development partners for budget support operations. At the level of the Bank in terms of the overall management of the CRF program, there was no dedicated overarching institutional setup put in place to facilitate coordination at the institutional level.

4.3. Effectiveness

The effectiveness of the Bank's COVID-19 response was assessed by examining how well the CRBS operations and the non-lending activities achieved or were likely to achieve their planned objectives.

The performance of the Bank's COVID-19 response through the three priority areas was found to be mixed. The support to health services and capacities and to mitigating the social impact of the crisis was found to be effective, while the support provided to protect economies' resilience was assessed as less effective. Policy dialogue and, to a lesser degree, analytical work, helped to support the achievement of results. However, the lack of any TA was a missed opportunity. Overall, the Bank's contribution to the results of national response programs was limited mainly because of the modest resource envelope. Despite this, the effectiveness of the Bank's response was found to be satisfactory.

4.3.1. Lending Activities

Table 4 provides a picture of the relative performance of the different components of the response. On average, the programs supported by the Bank met their targets, particularly the health and social support components. These two components can therefore be considered more successful than the third—economic support—economic support—for which it was difficult to assess the results of the economic support because the time span of CRF operations and the data provided by monitoring was less reliable and the results identified were uneven.

Table 4: Relative Effectiveness of the Three Components of Bank-Supported COVID-19 Response Programs¹⁴

	Percent Achievement
Component 1: Health response and health capacity	63%
Component 2: Social protection of vulnerable populations and small businesses	67%
Component 3: Economic resilience and recovery	54%

Source: AfDB COVID-19 Evaluation multiple case study, documentary analysis and interviews.

Health Response and Capacity: In many cases, the programs supported by the Bank met and even exceeded their targets for the health component. Based on the analysis of reports from 10 case study countries, overall, 63 percent of the targets under the component were achieved. The focus was on increasing the number of tests and improving health service equipment and infrastructure.

The support that the Bank provided to certain RMCs through the WHO performed very well for all operations reviewed (DRC, Cameroon and Madagascar). These operations leveraged efficient WHO systems, which contributed to their positive performance. In these instances, Bank-funded support through the WHO contributed to the provision of personal protective equipment (PPE), test kits, and other necessary medical equipment through WHO country offices. These operations were often accompanied by capacity-building measures by the WHO as well. The efficient WHO systems made it possible to make savings, the use of which was quickly authorized by the Bank to reinforce the achievements or meet the new urgent needs of the RMCs. However, in some countries, the Bank's Country Offices were not fully informed and involved in operations implemented by the WHO with the support of the Bank. In addition, the Bank was not always perceived as associated with its support provided through the WHO.

Due to the short-term focus of the response, there were also challenges to effectively adapt the health support as the crisis evolved, with priorities continuously evolving from testing and isolation in medical facilities, to testing and home-based isolation with follow-up, and later to vaccinations. Furthermore, recent objectives such as vaccination-related targets appear to take longer to achieve, notably due to logistical issues and cultural resistance factors and distrust among some populations.

Social Protection of Vulnerable Populations and Small Businesses: The second of the three components of most CRBS—the "social impact mitigation" component—mainly materialized through targeted cash transfers or other forms of social protection, such as school feeding, national health insurance, food distribution and free access to utilities. This is identified by most country teams as evidence of at least a partial focus of the Bank's interventions on vulnerable groups. Evidence from the

¹⁴ Based on a detailed analysis of the ratio observed outcomes/targeted outcomes presented for the 10 countries covered by the multiple case study in Annex 15.

analysis of the Bank's COVID-19 operations in 10 countries sampled for the MCS indicate that, overall, 67 percent of the results targets were achieved, making this the best-performing component.

However, in some cases, the targeting of the most vulnerable remained challenging, not only for technical reasons but also due to the behavior of some decision-makers and intermediaries. The targeting issue also hampered the effectiveness of the support given to SMEs and informal economic activities. In Kenya, the identification of targeted beneficiaries was sub-optimal, in part due to digitization of the targeting instruments. In contrast, the National Social Safety-Net Coordinating Office (NASSCO) in Nigeria established a database of transient vulnerable and poor populations, as a result of the COVID-19 response using digital tools with the support of the private mobile telecommunications companies and the Communication Authority. Here, digitization proved to be very effective, more transparent and allowed for real-time monitoring but, at the same time, this made it less accessible to the poorest and those people living in remote areas with limited access to electrical power or data communication infrastructure. The limited involvement of CSOs in the programs weakened the focus on the most vulnerable groups (Cameroon). Finally, little information is available about how the interventions were adapted to different vulnerable groups (Africa CDC).

Economic Resilience and Recovery: The support provided by the Bank to RMCs was aimed at protecting private companies, especially MSMEs, from bankruptcy with a view to preserving jobs of vulnerable populations. The resources provided by the Bank went towards business relief credit and grants. The results vary widely across the 10 country case studies; the analysis of the performance of the Bank-supported programs on this component indicates that the performance was modest overall, with only 54 percent of the targets achieved. The main reasons for underperformance include over-ambitious targets against limited resources, and the limited involvement of private sector actors in the identification of the actions and modalities of support. Moreover, some RMCs struggled to establish transparent and efficient systems for identification, support and monitoring, except in countries that had already established programs prior to the COVID-19 crisis. It should be noted that the results of this component take longer to materialize than those of the previous components. In addition, assessing these results requires more resources.

Tables 1 and 20 of Technical Annex 6, respectively, give the performance ratings of the Bank's CRBS in each of the 10 countries studied, and the level of achievement of outputs and outcomes. Furthermore, the Portfolio Review based on the 18 PCRs for COVID-19 operations validated by IDEV showed good performance by countries, indicating that 80 and 71 percent of the COVID-19 operations had achieved satisfactory or higher ratings for the achievement of outcomes and development objectives, respectively.

As noted in the efficiency section, while the approval process was generally fast, the disbursement process was sometimes very slow, hampering the achievement of some results or the Bank's contribution to these results, which in these cases were reached by the program thanks to the resources of other contributors (Africa CDC, Madagascar). Sometimes, resources never reached the institutions that they were meant to support (DRC) or were spent on projects outside of the scope of the COVID-19 response (Madagascar) and, therefore, did not contribute to the effectiveness of the program. The project supporting Africa CDC had only disbursed 20 percent of its committed budget by the time the evaluation was undertaken. This is partly due to administrative delays and limited capacity to implement projects. The only output delivered is the recent nomination of the Project Coordinator, while other components were mainly financed by other development partners.

There were challenges in identifying targeted beneficiaries due to limitations in the identification process, especially in having correct information on the average numbers of beneficiaries, whoever they are. This meant that the effectiveness of the program with respect to the most vulnerable (often women) is probably over-estimated, even for the health and social components (Ghana, Cameroon). In the case of

Ghana, the provision of free water and electricity and the distribution of cooked and uncooked food was targeted for all households, regardless of actual need of the intervention. The targeting issue also hampered the effectiveness of the support given to SMEs and informal economic activities (Cameroon).

The effectiveness of activities leading to qualitative results, such as adapted legislation/regulation or formulation of new strategies, is less positive. In most cases, governance- and accountability-related expected outputs, such as audits, are much delayed and still expected. The low capacity of key national institutions and limited incentives to adhere to agreed covenants, coupled with a lack of enthusiasm to implement certain reforms in some RMCs, were found to have led to delays in the implementation of the governance- and accountability-related outputs, for example audits.

4.3.2. Non-Lending Activities

Non-lending activities (policy dialogue; advisory & analytical work; and TA) provided another opportunity for the Bank to contribute to the RMCs' COVID-19 response. These non-lending activities, mainly consisting of policy dialogue, analytical work which, among others, included economic and sector work, as well as specialized TA, were intended to enhance the Bank's advisory capacity to RMCs during these unprecedented times and help position it better as a knowledge-based institution across the African continent.

Policy Dialogue: The Bank Group policy dialogue up until the end of December 2020 centered around the formulation and the subsequent implementation of national COVID-19 response plans, with a focus on ensuring that these plans not only covered the health dimensions of the crisis but also responded to the social and economic fallout. The policy dialogue also dealt with the preconditions that had to be met before the start of the program, such as institutional or legal reforms, as well as on changes in the results framework. The success of policy dialogue during the COVID-19 response was directly influenced by the scale of pre-pandemic dialogue. Policy dialogue in the context of COVID-19 operations built on pre-existing dialogue between the Bank and the RMCs, which enabled the Bank to advise countries on their response measures. However, the lack of experts in the health sector was found to have limited the influence of the Bank in this area.

Box 1: Case Highlights - Policy Dialogue

The policy dialogue in the sampled countries.

In Kenya, the policy dialogue focused on tax-cut measures, improved targeting of social protection schemes, the health-care system, economic recovery, governance, and transparency.

In DRC the dialogue, which involved other partners, was nearly permanent. It started with a participation in the design of the national response to the crisis and continued during program implementation, notably to address practical issues such as mistrust of vaccines or a strike by health workers.

In Ghana, the dialogue included non-state actors and focused on the effectiveness of the program, on the support of the most vulnerable and on gender mainstreaming. Mitigating the fiduciary risk was also an important topic covered.

In Tunisia, the policy dialogue was limited due to lack of a government-led multi-partner dialogue framework due to the Government's preference for bilateral engagement with development partners.

The Bank gave high priority to safeguarding the transparency and accountability of COVID-19 expenditures and programs. The 4th Quarter Progress Report indicated that the Bank gradually broadened the policy dialogue under the leadership of Director Generals (DGs), Deputy Director Generals (DDGs), and Country Managers to address the medium-term implications of the pandemic. The focus was on the reforms for post-COVID-19 economic recovery, both building on areas of reform in which the Bank was engaged prior to the COVID-19 crisis and in alignment with ADF-15 and the General Capital Increase (GCI-VII), such as domestic resource mobilization, debt management, private sector development, infrastructure development, and governance. However, the evaluation did not find much evidence of this broadening of the dialogue towards post-COVID-19 considerations, and many interviewed stakeholders considered, without necessarily criticizing the fact, that the CRBS and the related dialogue were mainly focused on short-term objectives.

The analysis of staff effort and capacity through the Corporate Process Review indicates that Bank staff dedicated only a small number of staff-weeks to support implementation of the CRBS interventions. This suggests that the policy dialogue after disbursement was most likely limited as well.

Analytical Work: Analytical work was also found to have supported the achievement of results, although to a lesser degree. The Country Economists and Sector Specialists at the regional and country levels prepared several analytical reports to guide the country-level policy dialogue on the COVID-19 response. The key Economic and Sector Work (ESW) outputs delivered to support the policy dialogue included studies of the impact of the pandemic and measures to address/mitigate it or to inform COVID-19 recovery programs for Angola, Comoros, Djibouti, Egypt, Ethiopia, Rwanda, Seychelles, Somalia, Sudan, and Uganda. This proved essential for some RMCs (e.g., countries in fragile situations) for the implementation of certain complex measures, especially during the preparation of the CRBS. A list of ESW outputs, available in the 4th Quarter Progress Report dated March 16, 2022, is provided in Technical Annex 7.

In addition, case studies have shown that some countries' interventions were based on economic studies conducted by the Bank or jointly with other partners (Djibouti, Madagascar and DRC) but, in most cases, the Bank did not directly assess the needs of the RMCs. It should be noted, however, that the existence of a national COVID-19 response plan as a condition for the intervention of the Bank and other partners encouraged most RMCs to quickly adopt their plans early in 2020.

Technical Assistance: In contrast to the Bank's usual PBOs, none of the CRBS operations was supported by TA or capacity-building interventions. This was a missed opportunity to achieve deeper impact, particularly in countries in fragile situations with limited capacity.

4.3.3. Bank Contribution to the Results of the National COVID-19 Responses

The Bank's contribution to results was assessed through: (i) the existence of analytical work to inform the preparation of RMC's national COVID-19 response plans; (ii) the existence of TA to support the RMCs in the preparation and implementation of their national COVID-19 plan; (iii) the volume of the Bank's financial contribution in relation to the RMCs' needs; and (iv) the existence of an effective policy dialogue.

The proportion of the 2020 budget deficit of the 10 countries reviewed financed by the Bank was often limited. In addition, Table 5, which compares the Bank's contribution to the 2020 financing need of the 10 countries to the support provided by the WB and the IMF to these programs, gives an idea of the relative weight of the Bank's support. The IMF and the WB are the most important, but not the only contributors to these programs' budgets.

Table 5: Comparison of AfDB Assistance to Case Country National COVID-19 Response Programs with COVID-19 Response Operations of the WB and IMF

Comparison of AfDB COVID-19 Response Assistance with WB and IMF COVID-19 Assistance (UA million)					
	AfDB	WB	IMF	AfDB/(WB+IMF)	AfDB coverage of country financing
Cameroon	69.8	744.5	759.0	4%	10%
Djibouti	30.0	42.0	37.8	27%	13%
DRC	80.0	875.9	1,332.5	3%	11%
Ghana	49.5	978.1	738.0	3%	5%
Kenya	150.4	2,313.9	2,197.8	3%	9%
Madagascar	30.0	395.4	485.8	3%	11%
Nigeria	210.0	1,071	2,454.5	1%	5%
Somalia	18.3	246.4	292.4	3%	4%
South Africa	210.0	551.1	3,051.2	6%	1%
Tunisia	144.0	1,131.4	545.2	8%	4%
Source: Project PARs, World Bank Interactive Map-COVID-19 Operations <i>(https://maps.worldbank.org/projects?active=1&closed=1&covid19=true), IMF COVID-19 Lending Tracker</i> <i>(https://www.imf.org/en/Topics/imf-and-COVID19/COVID-Lending-Tracker)</i>					

Overall, the combined effect of several factors limited the contribution of the Bank to the results recorded. These include: the short-term focus of the Bank's response; the limited financial contribution of the Bank compared with RMC needs and the contribution of other partners; the limited number of studies to inform the preparation of COVID-19 plans and the policy dialogue; and the absence of TA accompanying the CRBS operations.

4.4. Efficiency

The assessment of efficiency focused on the institutional arrangements and streamlined processes and procedures for the design, implementation and monitoring of COVID-19 operations, and the use of the Bank's financial and human resources.

The CRF introduced accelerated approval procedures, which were applied efficiently, and the approval process was significantly shortened. RMCs considered this acceleration a positive feature of the Bank's intervention. However, the workload to prepare and implement the COVID-19-related interventions was unevenly distributed across the Bank. COVID-19 response operations had an adequate framework for monitoring and reporting but reporting during implementation fell short of plans. Overall, despite shortcomings, Bank efficiency is rated satisfactory.

4.4.1. Timeliness

Streamlining and fast-tracking processes with a view to flexibility, and speed of delivery of support, while remaining fully accountable to the Board of Directors, were found to be clear and strong features of the CRF. The Guidance Note on selection and processing of COVID-19 operations included several measures adapted to emergency interventions, including: (i) delegation of project approval to lower decision-making levels; (ii) exemption from usual steps of the project preparation process such as the

PCN and the environmental and social due diligence; and (iii) preparation of multi-country COVID-19 Response Budget Support interventions coupled with joint work between the Bank's Governance and Economic Reforms Department (ECGF) and sector staff (under the One Bank model). This allowed for an acceleration of the process and improving efficiency in terms of the staff weeks required for preparation. However, implementation-related procedures were not changed.

Despite its relatively small size, the Bank's support to RMCs' national COVID-19 response was particularly timely. It was utilized for the implementation of national programs immediately upon its quick disbursement, before more significant funding was made available by other development partners. This, however, was not universal, as there was some slowness in Madagascar and the DRC (2nd tranche). The main reasons for slow disbursement were liquidity issues under ADF-15, which required some of the CRBS disbursements to take place over two tranches, and national approval particularities (parliament ratification), as was the case for Uganda and Madagascar, among others.

Table 6: Elapsed Times Post Approval (months)

From Approval to:	COVID-19 Operations		Non-COVID-19 Operations	
	CRBS	Investment	PBO	Investment
Loan Signature	1.0	2.7	1.2	2.8
Entry into-force	2.0	2.7	2.6	4.8
Effectiveness for 1st disbursement	2.5	4.1	3.0	8.7
Actual 1st disbursement	3.0	9.0	3.8	13.2
Source: Development Impact and Results Department (SNDR).				
Note: The elapsed time to 1st disbursement for the single COVID-19 RBF operation was 6.7 months.				

Streamlining measures were applied with some success. Overall, data demonstrate the rapidity of the Bank in providing support to countries in the fight against the pandemic. Of the 37 COVID-19 response operations approved in 2020, 33 (84 percent) were approved by end-July, enabling rapid support to RMCs. On average, the time for all operations is 2.1 months from approval to signature, 2.7 months to entry into force and 3.7 months to first disbursement. CRBS operations have a quicker process than investment operations, and COVID-19 operations were implemented more quickly than non-COVID-19 operations.

4.4.2. Resource Use Efficiency and Implementation

The CRF introduced accelerated approval procedures which, the evaluation found, were applied efficiently, and the approval process was significantly shortened. This acceleration was perceived by RMCs as an important and positive feature of the Bank's intervention. Overall, disbursement for CRBS operations, generally in a single tranche, reached 99 percent by end 2020, while the disbursement rates for IOs were only 34 percent. Investment projects were slower to disburse due to the nature of the instrument but also, in the highly relevant project to support Africa CDC, due to initially underestimated administrative difficulties. Given the small volume provided through IOs (9 percent), the overall disbursement rate was impressive, at 93 percent.

The CRF-streamlined procedures, coupled with joint work between the Bank's Governance and Economic Reforms Department (ECGF) and sector staff (under the One Bank model), allowed for improving the efficiency of the preparation of the COVID-19-related operations. Table 7 compares the

number of staff weeks dedicated to these tasks for COVID-19 operations and for non-COVID-19 interventions. The streamlining of the procedures and processes allowed for saving 23 percent of the staff weeks for the preparation and implementation of CRBS operations in 2020, compared with the time dedicated to PBOs in 2019, and 24 percent in the case of the IOs. At the same time, Bank staff devoted little time to support the implementation of COVID-19 operations.¹⁵

Table 7: Average Time Devoted to Preparation and Implementation of Operations, 2019 and 2020 (staff-weeks)

	Preparation	Preparation and implementation
Operations in 2019		
PBO	11.4	12.4
Investment	9.9	11.1
COVID-19 Operations in 2020		
CRBS	8.6	9.7
Investment	6.5	8.4
COVID-19/2019 Time Savings (%)		
CRBS/PBO	25	23
Investment	34	24
Source: ATRS data. Staff-week assumes 40-hour week. Numbers are calculated using the component parts of Multinational and Multi-country Operations rather than the aggregate for the entire operation to allow for comparison with 2019. Preparation includes Appraisal, Approval, Identification, Negotiations, and Project Preparation. Implementation includes Disbursement, Follow-up & Monitoring, Project Procurement, and Supervision.		

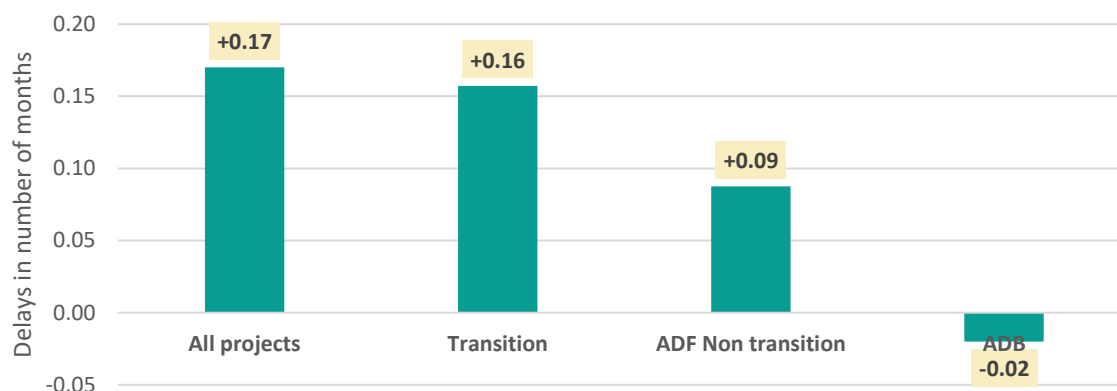
The findings related to implementation depend on a country's situation. Djibouti, Ghana, Kenya, and Somalia found the Bank's response was timely, efficient, and flexible at all levels. Others, such as Cameroon, the DRC, Madagascar, Nigeria, and Tunisia, identified obstacles, such as the need for parliaments to ratify loan agreements, or administrative issues, which considerably delayed disbursement. The Nigeria country case study report identifies the trade-off between quick disbursement and accountability, and notes that the CRBS operations' disbursement in one tranche, while accelerating disbursement, suppressed any incentive for the Government of Nigeria to deliver the promised governance-related audits. Figure 2 shows that, despite the differences in the economic and development contexts of RMCs, COVID-19 operations were completed in time with ADF countries, and especially countries in a fragile situation, which experienced an average delay of 0.16 month (five days). All CRBS operations in ADB countries were completed ahead of time.

Similar to other MDBs (the AsDB, the IsDB and the WB), the Bank did not establish a dedicated overarching institutional setup for coordinating the development and implementation of the COVID-19 response operations. However, other MDBs (the AsDB and the IsDB) allowed for more flexibility to organize collaboration and redeployment of human resources, and the use of external consultants. Within the Bank, the workload to prepare and implement the CRF-related interventions was found to have been unevenly distributed. Staff from ECGF, Regional/Country Offices, the Human Capital, Youth, and Skills

¹⁵ The Corporate Process Review provides a detailed analysis of the distribution of the workload between the organizational units and more specifically at the level of the Task Managers.

Development Department (AHHD) and the Fiduciary and Inspection Department (SNFI) accounted for 74 percent of the preparation effort and 82 percent of the implementation effort. Task Managers, who provided 55 percent of the staff weeks dedicated by the Bank staff to the CRBS operations, indicated that they felt overstretched and not always as well supported by the Bank “ecosystem” as they had been expecting. They pointed specifically to constraints in health, legal and procurement planning support.

Figure 2: Difference between Planned Completion Date and Actual Completion Date in Months



Source: PCRENs and 20 PCRs.

In contrast with the importance given to the results frameworks, their monitoring and their quarterly reporting in the PARs, no Bank resources were dedicated to monitoring, which was delegated to national institutions, and very few to reporting.

The situation with reference to adequacy of staffing is mixed. The Bank’s staff in the field, for example as reflected in the Kenya, Djibouti, Somalia, and Africa CDC case study reports, consider that the staff available at the Bank to manage the interventions was sufficient. However, the Nigeria team, for instance, found that the Bank was too understaffed to be able to participate effectively in policy dialogue and coordination groups, especially in the health sector.

4.4.3. Monitoring and Reporting

The AfDB’s Note on Results Tools provided a strong conceptual framework with clearly articulated goals and outcomes. The note covered the different instruments to be used. The guidance included a simplified project-level results framework adapted to COVID-19 response operations. The Bank also provided a list of results indicators, which was subsequently updated. The Guidance drew on lessons learned from the AsDB and the WB.

The Bank’s results framework was designed to enable the quarterly tracking of results at the level of individual operations, as well as at the level of the overall COVID-19 Response Facility. However, it did not put any special emphasis on the priority cross-cutting issues in either the CRF Board paper or in the accompanying guidance, beyond a passing reference to a focus on the most vulnerable and being gender sensitive. At the same time, all the processes for tracking against the cross-cutting priorities remained in place and the results frameworks for many operations were disaggregated by gender and the most vulnerable.

In line with standard practice for all operations, IPRs and PCRs were to be prepared, and the latter, subsequently validated. The Bank planned on and committed in the CRF Board paper to provide the Board of Directors with 100 percent transparency on CRF activities, including quarterly stocktaking of the

situation on emerging priorities and potential adjustments to the course of action. COVID-19 operations were to be tracked through the Bank's normal monitoring mechanisms, including the weekly lending tracking report reviewed by the Bank's Operations Committee (OpsCom), the Monthly Operations Status (MOS) report, the automated delivery dashboard, as well as the regular Retrospective Performance Review Reports submitted to the Board of Directors.

Management also committed itself to regularly take stock of the situation with the Board of Directors on emerging priorities and challenges. This was to be undertaken on a quarterly basis and/or when the share of ADB budget support operations reached 30 percent of the 2020 UA 5.5 billion lending envelope. A relatively detailed quarterly reporting template—overview followed by details of each instrument—was provided, with reporting to be done in July 2020, October 2020 and then January 2021 to cover the preceding quarter 2022. The report was proposed to be discussed by Bank Senior Management and then shared with the Board. The overall purpose was to track progress, identify bottlenecks, and resolve issues as they arise. Bank Management was also to provide the Board of Directors with a monthly update on the COVID-19 lending program and the Bank Group's key prudential ratios.

However, the actual experience with reporting to the Board fell short of plans. While the first quarterly report was prepared in a timely manner, subsequent reports faced delays; the fourth quarterly progress report covered a period of over three quarters and was finalized in mid-March 2022. The coverage of the reports was not consistent and evolved with each successive report. Regular, monthly updates were not provided. The quality of the reports was also found to be uneven. This is explained by the mixed timeliness and limited reliability of the monitoring and quality of implementation progress reports for individual CRF operations.

The Bank contributed to national programs that were monitored by national institutions. As they appeared in the PARs, monitoring frameworks are usually clear, even if the realism of the targets sometimes raises questions. The MCS demonstrated the existence of different systems and capacities in RMCs and ultimately different abilities to collect data, meet the expected quality standards, and report in a timely manner. The monitoring was in most cases carried out under the responsibility of the Ministry of Finance, where monitoring data were centralized. The rhythm of the production of monitoring data was irregular and often not compatible with the Bank's requirements. There is little evidence to indicate that the Bank proactively supported national monitoring processes associated with CRF operations. In the majority of CRBS cases the Bank wholly relied on national monitoring systems led by respective ministries.

The quality of the data collection was found to be more reliable in the health sector, notably due to the standardization practices and supervision of the WHO. It was also deemed good for the social support component, in which a large part of the operations was digitized, such as cash transfers, or centrally monitored, such as utility cost reductions. This data source usually does not allow for assessing the quality of the targeting of the interventions. Data collection was more challenging in countries in fragile situations, such as Somalia, where government representatives did not have access to part of the territory. The outcomes of economic support seemed more complicated to monitor reliably.

The Bank put in place the provisions for transparency/accountability measures that were more stringent than for normal budget support operations for monitoring fiduciary and other risks. These included: a Flow of Funds Audit; an Annual Financial Audit; and a Procurement Value for Money Audit. While governments accepted these measures during negotiations, many of those audits were not undertaken. There were limited incentives on the part of governments to comply with the covenants, since failure to do so had no implications for disbursement of resources. Furthermore, the challenges brought about by the COVID-19 crisis also affected Bank operations and, therefore, the capacity to monitor (conduct field supervision missions) the CRBS operations effectively.

Finally, insufficient harmonization of development partners' monitoring of requirements increased the burden/transaction costs faced by governments, especially for countries in fragile situations.

Box 2: Country Cases - Monitoring and Evaluation Systems

Results monitoring displayed inadequacies in most cases

In Kenya, the Ministry relied on the feedback from actors including associations and private data collection enterprises. However, the links between private operators and public institutions did not allow for regular information transfer.

In Madagascar, DRC, Cameroon, Somalia and, to a lesser extent, Djibouti the monitoring of the results of the budget support operations is controlled by the Ministry of finance or by the Ministry of Health. These systems do not deliver regular information on program implementation and results.

In Ghana, the Ministry of health supported by the WHO, has a good information system on health accessible by all partners, which allows for monitoring results in that sector. This is less true for the Ministry of Finance. information related to Fiduciary commitments such as expenses audits are not available.

In South Africa, available information on results is not systematically centralized and does not meet the Bank's requirements for quarterly reporting. Moreover, the relative contribution of the Bank in the program is perceived as so small that the Bank faced difficulties to obtain the information it needs.

In Tunisia, program implementation and results were monitored by the corresponding line Ministries, while the financial aspect was monitored by the Ministry of Finance. The Bank faced difficulties in synthesizing the information on a regular basis.

In Nigeria, the Ministry of Finance has set up an effective monitoring system, more oriented on implementation and outputs than on outcomes.

Africa CDC's monitoring system is effective, but the Bank's contribution to the current results is limited due to the low disbursement rate of its project..

5. CONCLUSION, LESSONS AND RECOMMENDATIONS

5.1. Conclusion

Overall, although the Bank was not well prepared to deal with a crisis of unprecedented magnitude, its rapid reaction helped to strengthen its image as a partner of choice with the RMCs. The Bank's response was well aligned with RMCs' national COVID-19 response programs. Despite making positive contributions, particularly in the health and social components, the Bank's contribution to results was limited by the modest resource envelope, which fell short of its initial ambitions and which, in the end, only supported sovereign operations. While efficient procedures were appreciated by the RMCs, the workload was spread unevenly within the Bank, and the monitoring and reporting on implementation and results had major shortcomings.

5.2. Lessons

The following are the key lessons from this evaluation.

- **Responding with a single quick-disbursing short-term instrument may be relevant but not sufficient in the context of a crisis whose evolution is uncertain.** Adopting a multi-stage and multi-instrument approach allows for adjustment of the intervention to country specificities and the evolution of the crisis. When financial conditions are uncertain or volatile, it is also prudent to express a realistic initial financial ambition, which can be scaled up as more financial capacity becomes available.
- In a context of crisis response, the **Bank's "delivering as One" model** makes its operational efficiency to respond quickly to the urgent needs of RMCs. However, due attention should be paid to the distribution of the workload across the institution.
- **Country ownership and leadership are critical to success.** Country ownership and government leadership are necessary conditions to ensure coherence and strong coordination among development partners.
- **If in a crisis situation where the Bank lacks comparative advantage**, such as the area of health service delivery, it can intervene via collaboration with specialized agencies such as the CDC and the WHO.
- Beyond a robust monitoring, evaluation and reporting framework during the design stage, **the monitoring capacity of RMCs and the availability of timely and reliable data are of paramount importance** to ensure the interventions' responsiveness to country needs and their effective delivery and reporting.

5.3. Recommendations

IDEV makes the following recommendations:

8. **Capitalize on the lessons and experience from previous crises to improve the Bank's institutional preparedness for crises.** The Bank could for example undertake a reflective exercise to consider whether any Bank policies, processes, procedures, financial instruments and/or its skills mix require any adjustments to better prepare it for future crises. Then, it could agree agile standard operating procedures for response to crises, with a view to streamlining processes and procedures, templates and other tools to enable rapid response.
9. **Improve the design and implementation of the Bank response to future crises, as and when they occur.** Priority areas of action to consider include.
 - Ensuring strong analytical work, including thorough scenario analysis of the Bank's financial capacity and associated risks, during the design stage.
 - Adopting a dynamic approach and a range of instruments (program-based operations, non-sovereign operations, investment operations, technical assistance, etc.) tailored to the nature of the crisis and to RMCs' capacities, needs and strategies at different stages of the crisis. This would enable the Bank to set a realistic level of initial ambition, to adapt to the evolution of the crisis, and to scale up funding commitments if more resources become available.
10. **Enhance the Bank's results monitoring, reporting and learning throughout the response cycle.** Priority areas of action to consider include:
 - Ensuring that future crisis response includes fast-tracked TA for improving the quality of the monitoring of the Bank's interventions and their results, depending on RMC capacity and country context.
 - Pursuing continued collaboration with other development partners to harmonize (simplified) results monitoring and reporting requirements for future crisis response.

ANNEXES

Annex 1. Theory of Change for the AfDB COVID-19 Response

GOAL	Saving Lives and Livelihoods: Mitigate the impact of COVID-19 on African societies and economies; support economic and social recovery and resilience; improve governance, health and supply systems and preparedness for future crises			
MID-TERM OUTCOMES	<ul style="list-style-type: none"> Jobs protected and poorest household's basic needs provided Reduced risk of infection and strengthened testing and treatment capacity, broader health systems strengthened Medium term macroeconomic stabilization, effective debt management achieved Strong Public Financial Management (PFM) foundations maintained or strengthened, for a rapid response with minimized Fiduciary risk Production and supply systems for essential services and food security maintained or buttressed 			
SHORT-TERM OUTCOMES	Enabled distancing/lock down Urgent health services (incl. testing) Physical and food security maintained Strengthened foundations for PFM Short term macro-crisis mitigated	Urgent health services (incl. testing) delivered Other priority services maintained (incl. food production/supply, water) Vulnerable population supported	Collapse of business avoided Businesses able to recover quickly Supply chains maintained AfDB's NSO-losses minimized Credit rating protected	Countries able to rapidly apply lessons and best practices, effectively deploy additional funds and reduce debt distress
OUTPUTS	Budget allocation to health & social protection Policy actions on public health systems, social protection, business protection Liquidity for unplanned expenditures Fiscal, PFM and transparency-related policy actions	Investment in health-related equipment, capacity, logistics, communication, preparedness equipment, capacity, etc. for other critical sectors (e.g., agriculture, water), including support provided to the World Health Organization (WHO)	Temporary standstills to debt repayments Liquidity for intermediaries (priority: SMEs) and real sector clients, trade finance Protect AfDB's NSO Portfolio	Facilitation of information sharing, debt relief and/or interim measures, access to additional finance enabled
INPUTS	Crisis response budget support (plus redesigned new trenches) (UA 4.75 billion)	Sovereign operations (UA 3.443 billion)	NSO operations (UA 1 billion)	Bank Engagement, policy dialogue, knowledge work and convening power
AfDB's Social Bond (US\$3 billion)				
Assumptions	(i) The Bank has access to sufficient funds, including reallocation of cancelled capital, ability to distribute quickly without affecting the credit rating. (ii) Support provided is flexible, rapid and responsive and leverages/mobilizes funding from development partners; (iii) Support is focused on most relevant country priorities/needs and maximizes complementarity with other partners' efforts, the Bank able to work closely with emergency organizations.; (iv) Mechanisms in place or put in place to guard against fiduciary risks; and (v) the Bank leverages proximity and convening power to deliver dialogue and enable experience sharing.			

Annex 2. Evaluation Questions and Evaluation Matrix

Evaluation Criteria	Overarching Evaluation Question	Area of focus	Sub/Specific Evaluation Question	PPDR	Multiple Case Studies	Corporate Process Review	Benchmarking Study	Other sources
Relevance	EQ1: Against the background of its mandate of long-term development, how prepared was the Bank to respond and provide resources commensurate to the magnitude of the pandemic, building on the lessons of the Ebola Virus Disease support and other previous epidemics? How could its preparedness be improved?	Preparedness	1.1 To what extent was the AfDB prepared to respond to the COVID-19 pandemic before it started based on the lessons from previous responses to epidemics and crises?			Mechanisms were put in place to monitor and report on responses to previous pandemics.		Academic and other institutions studies about the lessons drawn from the responses to Ebola and other epidemics
			1.2 How does the Bank's preparedness to respond to the COVID-19 pandemic compare with selected comparators?			To what extent do the CRF monitoring, and evaluation procedures and actual processes allowed for accumulating and sharing information analyzes and lessons to ensure preparedness to the COVID-19 pandemic? To what extent did these procedures improve during la period under review to prepare for the future?	How were the other MDBs prepared to address the new pandemic? To what extent did their procedures improve during la period under review to prepare for the future?	
			1.3 To what extent was the CRF strategic orientation informed by lessons from the Ebola Response and other previous crises?	Explicit references to lessons learned from previous epidemics observed in projects appraisals.	Project officers have identified and applied lessons from previous epidemics (especially in countries impacted by Ebola)	Explicit references to lessons learned from previous epidemics can be observed in CRF related strategic documents and projects appraisals.		
	EQ 2 How adequate and strategic was the support provided by the bank to enable an effective response to the pandemic at Continental, Regional and National Levels during the period under review?	Alignment	2.1 To what extent do the objectives of the Bank COVID-19 response address the needs of the RMC, private sector entities, development partners and specialized agencies in their response to the pandemic?	Sampled interventions' objectives' alignment with the RMC's relevant strategies and framework is assessed satisfactory	The Bank response is adapted to the specific impacts of the COVID-19 crisis in the countries under review.	The Bank procedures ensure the link between analytical work and strategic design at the CRF and intervention levels.	What policies and strategies were put in place to provide strategic orientations on the COVID-19 Response and on what basis where they designed?	
				Interventions' objectives are designed, based on a systematic analysis of the needs of the targeted stakeholders	The relevance of the CRF interventions is perceived positively by the different stakeholders		What type of preparatory analytical work was performed during the design process of comparable MDBs?	

Evaluation Criteria	Overarching Evaluation Question	Area of focus	Sub/Specific Evaluation Question	PPDR	Multiple Case Studies	Corporate Process Review	Benchmarking Study	Other sources
			2.2 To what extent is the COVID-19 response aligned with the Bank's strategies and other continental, regional and national strategies and frameworks.?	Sampled interventions' objectives' alignment with the Bank strategies is assessed satisfactory.	Bank staff, RMC Officials, private sector representatives and stakeholders consider that CRF-related interventions are aligned on their priorities and needs.	Procedures ensuring alignment of the CRF interventions, and the Bank strategies are adapted to the emergency context and implemented	What type of programmatic and lending approach was adopted during the COVID-19 response of comparable MDBs?	Existing surveys? No survey foreseen for this evaluation.
		Design and adaptation	2.3 What was the quality of the design of Bank's COVID-19 Response in terms of clarity of the objectives and the resources identified, definition of roles and adequacy of monitoring and reporting mechanisms?	The design of the selected interventions in terms of clarity of the objectives and the resources identified, definition of roles and adequacy of monitoring and reporting mechanisms is in line with the Bank's procedures or the specific procedures applied to the CRF-related interventions.		The procedures applied by the Bank to formulate the strategy of its intervention in the face of the COVID-19 crisis and related interventions compare favorably with the benchmark MDBs	What were the procedures applied by the selected MDBs to design their strategies and interventions to address the COVID-19 crisis?	
			2.4 To what extent did the support provided by the Bank under the COVID-19 Response meet the Bank's quality and CRF process standards?	The Bank's quality and CRF process standards are explicit and applied in the design of the interventions under review.				
			2.5 Was there adequate responsiveness and flexibility built into the Bank's COVID-19 Response funding and design arrangements, and how does the bank compare with selected comparators?		The design of the selected intervention proved to allow for adaptation to unexpected evolution of the implementation context		To what extent did the selected MDB strategies and interventions prove to be able to adapt to the evolution of the COVID-19 crisis' impact in different contexts?	
			2.6 To what extent did the Bank's COVID-19 response in collaboration with other development partners facilitate ownership of the COVID-19 responses?		Perception by the country stakeholders of the relevance of the Bank's COVID-19 response and evidence of their willingness to support their implementation			
			2.7 Was the support provided through the Bank's COVID-19 Response relevant and tailored to the needs of fragile and conflict-affected states, as well as	Objectives of interventions operated in fragile, and conflict affected states take the context specificities and relevant international good practices into account	Interventions carried out in fragile, and conflict affected states are implemented in line with good practices adapted to	CRF strategies and procedures are adapted to fragile, and conflict affected states when relevant.	What were the specific differences of comparable MDBs in support provided to MICs and LICs? To countries in fragile situations?	

Evaluation Criteria	Overarching Evaluation Question	Area of focus	Sub/Specific Evaluation Question	PPDR	Multiple Case Studies	Corporate Process Review	Benchmarking Study	Other sources
			vulnerable and marginalized groups?		the specific conditions.			
				Sampled interventions mainstream cross-cutting issues, vulnerable and marginalized groups.	Interventions are perceived as adapted to vulnerable groups			
				Sampled interventions' M&E frameworks to track the effects on vulnerable and marginalized groups are assessed satisfactory				
Coherence	EQ3: To what extent was the Bank's COVID-19 Response coherent with other sovereign and non-sovereign operations within the Bank and with other humanitarian and development Actor's COVID-19 response interventions?	Internal and external coherence and coordination	3.1 To what extent was there synergy and linkage between the Bank's COVID-19 Response and other sovereign and non-sovereign support operations funded by the Bank?		Evidence of synergies or negative interactions between the Banks COVID-19 response and other support interventions funded by the Bank			
			3.2 To what extent was the Bank's COVID-19 response harmonized and linked with other development partners' COVID-19 response interventions?	Evidence of deliberate harmonization of the Bank's COVID -19 response interventions and development partner's COVID-19 responses in the design of the Bank's operations.				
			3.3 To what extent was the Bank's COVID-19 Response coordinated with other development partners and local public and private stakeholders, notably to strengthen COVID-19 supply chains?	CRF operations were designed and implemented in coordination with other development partners	To what extent were there synergy or negative interactions among the Bank's COVID-19 response operations and other related COVID-19 responses by other humanitarian and development partners?	What mechanisms were put in place to take into account actions of other MDIs in the design and implementation of operations, as well as formulation of appropriate policies and strategies?		
				CRF operations were designed and implemented in coordination with other development partners		What mechanisms were put in place to take into account actions of other MDIs in the design and implementation of operations, as well as formulation of		

Evaluation Criteria	Overarching Evaluation Question	Area of focus	Sub/Specific Evaluation Question	PPDR	Multiple Case Studies	Corporate Process Review	Benchmarking Study	Other sources
						appropriate policies and strategies?		
Effectiveness	EQ 4 How well have the Bank operations funded under the COVID-19 response achieved or are likely to achieve the objectives of the COVID-19 response at continental, regional and RMC levels?	Achievement of objectives	4.1 To what extent have the sovereign and non-sovereign operations supported under the COVID-19 response achieved or are likely to achieve planned results? (Outputs or outcomes)		Conclusive and preliminary evidence that the expected project/program outputs and outcomes have been achieved and documented.			
		Contribution of non-lending support to outcomes	4.2 To what extent did the Bank's technical assistance or policy dialogue contribute to the achievement of results?		Evidence of consistent and maintained policy dialogue with national stakeholders throughout the project cycle from origination, implementation, and closure.			
Efficiency	EQ5: Were institutional arrangements, organizational resources, streamlined processes and procedures put in place adequate and efficient?	Institutional arrangements	5.1 To what extent did the Bank streamline and simplify the design and approval procedures of CRF operations to enable quick responses to requests from RMCs and other entities, and did this have the intended result?	Interventions' design, negotiation and implementation of CRF related intervention proved to be accelerated thanks to the CRF fast track procedures.	What was the level of compliance to guidelines put in place to enable efficient and effective preparation and implementation of operations to respond to COVID-19?	Processes are adapted to accelerate CRF interventions design internal approval, negotiation and implementation.	Compare the CRF processes with the ones applied by the sampled MDBs in terms of potential contribution to accelerating intervention's design, approval, implementation, and management.	
		Transaction costs, streamlined processes	5.2 To what extent has the AfDB COVID-19 Response efficiently used the available resources (human, financial, technical, knowledge...) for the implementation of public and private sector responses to the pandemic it supported?		Identify evidence of qualitative or quantitative deficiencies of Human resources in project preparation, management, and monitoring.	How adequate were staff and other resources deployed at various levels to support the COVID-19 response?		
			5.3 To what extent was there adequate rapidity built into the Bank's COVID-19 Response funding design and implementation arrangements				The rapidity of the Bank's COVID-19 response design, funding and implementation procedures compares favorably with the corresponding	

Evaluation Criteria	Overarching Evaluation Question	Area of focus	Sub/Specific Evaluation Question	PPDR	Multiple Case Studies	Corporate Process Review	Benchmarking Study	Other sources
							procedures of comparable MDBs.	
			5.4 Was there continuous learning from global, continental, regional and national experiences and utilization of data and evidence to improve the efficiency and implementation of the Bank's COVID-19 response?		Enablers and bottlenecks consistently identified and sustained or addressed/minimized respectively, to guarantee achieved of results.	Regular reviews of COVID-19 response operations are carried out and their recommendations are approved and implemented.		
	EQ 6: To what extent does the M&E system applied to the Bank's response to the COVID-19 crisis provide the necessary information and analyzes to draw the lessons from this experience and prepare the Bank to address future pandemics?	Monitoring, evaluation, and learning	6.1 What mechanisms were put in place to effectively and efficiently monitor, report on, and learn from COVID-19 operations?	How is the monitoring of implementation and results designed at the intervention level?	How is the monitoring of implementation and results implemented at the intervention level?	What mechanisms were put in place to effectively and efficiently monitor, report on, and learn from COVID-19 operations?		
			6.2 Was the monitoring and evaluation system adequately staffed and equipped and how did it function?			How was the M&E system staffed and organized and how did it function?	What reporting mechanisms were put in place for COVID-19 response support operations at the project and corporate levels? How did it function?	
			6.3 How was the information generated by the M&E system utilized for decision making, course correction measures and enable preparedness for future pandemics?			Information produced by the M&E system is used for decision making and enhancing preparedness for future pandemics	How is information produced by the M&E system is used for decision making and enhancing preparedness for future pandemics?	
	EQ7. What are the key lessons learned, best practices and innovations from the Bank's COVID-19 response that can strengthen future responses to shocks and crises?	Lessons learned for future crisis	7.1 What are the key lessons from the design and implementation of the Bank's COVID-19 Response than can strengthen future responses to shocks and crises, and building resilience among RMCs?		What lessons can help the Bank staff improve the implementation of future operations?	In terms of design what lessons are useful for future crisis operations?	What lessons from the design and implementation of other MDBs COVID-19 projects can benefit the Bank future operations?	
			7.2 What are the best practices and innovations that have been deployed by the Bank and RMCs in response to COVID-19 that need to be replicated and scaled-up in response to future shocks and crises?			What the lessons learned from the Bank innovations in its COVID 19 response?	What innovations were adopted by other MDBs than can be replicated?	

Annex 3. Evaluation Rating Scale

Criteria	Sub-Criteria	Highly Satisfactory-4	Satisfactory-3	Partly Unsatisfactory-2	Unsatisfactory-1
Relevance	Preparedness	The intervention fully addressed all aspects of the criterion as per the evaluation matrix, and demonstrated no weaknesses.	The intervention addressed most aspects of the criterion as per the evaluation matrix, but with some shortcomings.	The intervention addressed some aspects of the criterion as per the evaluation matrix, but with major shortcomings.	The intervention did not address all aspects of the criterion per the evaluation matrix, but with major shortcomings demonstrated and clearly outweigh any strengths presented.
	Strategic and operational alignment				
	Adequacy				
	Quality of Design				
	Adaptation				
Coherence	Internal coherence	The intervention fully addressed all aspects of the criterion as per the evaluation matrix, and demonstrated no weaknesses.	The intervention addressed most aspects of the criterion as per the evaluation matrix, but with some shortcomings.	The intervention addressed some aspects of the criterion as per the evaluation matrix, but with major shortcomings.	The intervention did not address all aspects of the criterion per the evaluation matrix, and demonstrated major shortcomings and clearly outweigh any strengths presented.
	External coherence				
	Coordination				

Effectiveness	Outcomes	The intervention fully achieved or exceeded its intended outcomes as per the Results Framework or are likely to do so	The intervention largely achieved its intended outcomes as per the RF or are likely to do so	The intervention partly achieved its intended outcomes as per the RF or are likely to do so	The intervention barely achieved its intended outcomes as per the RF or are likely to do so
	Outputs	The intervention fully achieved or exceeded its intended outputs as per the Results Framework or are likely to do so	The intervention largely achieved its intended outputs as per the RF or are likely to do so	The intervention partly achieved its intended outputs as per the RF or are likely to do so	The intervention barely achieved its intended as per the RF or are likely to do so
Efficiency	Timeliness	All of the intervention are implemented within the planned timeframe, with no increase in cost	Between 60 and 80% of interventions are implemented within the planned timeframe with no increase in cost	Less than 60% of intervention are implemented within planned timeframe. There are no cost increases.	None of the interventions were implemented within planned timeframe with cost increase for all.
	Use of resources				