

While PRRO 10192 is the first PRRO in the post-1999 Eritrea portfolio, it does not necessary reflect a recent shift by the CO from relief to recovery. Many of the activities nominated as recovery activities were commenced, or planned to commence, under earlier EMOPs (including school feeding, adult literacy, supplementary and therapeutic feeding and FFW).

1.5 Implementing partners

WFP's main partner in Eritrea at an operational level is the Eritrean Relief and Refugee Commission (ERREC). ERREC is in charge of all food commodity storage, logistics and distribution from the point of commodity arrival in Eritrea. For general feeding, ERREC develops the distribution plans for food distributions to sub-zobas and final delivery points (FDPs). Recently, the CO strengthened its engagement at a policy level with the newly established Ministry of National Development (replacing the Office of Macro Policy).

With its expansion into other more development-oriented support, WFP has developed partnerships with a range of other agencies. These include: in the area of health, the Ministry of Health and the NGOs CONCERN, the Eparchy of Keren, the Evangelical Church of Eritrea, BIDHO and the Eritrean Social Marketing Group; and, in education, the Ministry of Education and National Union Eritrean of Women (NUEW). Additional implementing partners will be required if FFW activities get underway.

2. Evaluation process and methods

2.1 Objectives of the review

At the time of the approval of the current EMOP 10261, it was agreed between the Office of Evaluation (OEDE) and the Eritrea Country Office that an independent evaluation of the WFP Eritrea relief portfolio should be conducted. It was seen as an exercise to review the portfolio particularly the recent and current operations and, where appropriate, propose recommendations and lessons for future operations.

An independent evaluation team was engaged and tasked to evaluate:

- The relevance, appropriateness and coherence of the **portfolio design/strategy**;
- The **implementation processes** (including their adequacy, efficiency, effectiveness, coverage and targeting, and coordination); and
- The **results/outcomes** achieved to date, or their likelihood of achievement (in terms of their effectiveness, efficiency and connectedness).

The detailed terms of reference for the evaluation mission are provided at Annex 1.

2.2 Evaluation methods

An independent evaluation team was recruited by WFP comprising three international consultants and one locally recruited consultant.⁵ The terms of reference for the evaluation mission were finalised in a participatory workshop with WFP staff and selected Government of Eritrea (GOE) stakeholders, identifying priority questions to guide the mission. The team devoted most of its time in consultations with direct beneficiaries but also held discussions with

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key implementing partners (IPs) and NGOs both in Asmara and at the *zoba* and sub-*zoba* levels. Brief discussions were held with Country Office (CO) management and focal persons in Asmara, and with key stakeholders in WFP's Rome office before arrival in Eritrea.

In the limited time available, the team visited 15 villages or camps, conducted in depth interviews with 60 households receiving relief rations, met with representatives from 33 Relief Committees (RCs), and visited 5 schools, 4 therapeutic feeding sites and 2 sites where supplementary feeding was taking place. The team employed a variety of methods to collect primary information including wealth ranking; proportional piling; transect walks; seasonal calendars; kebabi and community mapping; MUAC measurements; group discussions with RCs, village leaders, kebabi administrators, school teachers, members of Parent Teacher Associations, pupils and health professionals; key informant interviews with local Eritrean Relief and Refugee Commission (ERREC) and IP staff; and informal interviews with 60 households benefiting from general feeding and 20 mothers of children receiving therapeutic or supplementary feeding. Villages and sites were chosen by the CO and sub offices (SOs) to cover a variety of beneficiary types, agroecological zones and ethnic groups while balancing travel time with time available for consultation. Within any one community, households were purposively selected to explore the range of wealth and vulnerability. The findings of the team should in no way be considered statistically representative of households or beneficiaries. Household and school information was entered into simple databases to assist with analysis.

Outcome indicators were identified to guide information collection by the evaluation team. These were developed by, first, identifying anticipated outcomes from project and program objectives (primarily referring to the to original project documentation) and, second, assessing indicators and associated means of information collection feasible for a rapid evaluation mission. The matrix generated in this process is presented at Annex 2.

The following findings are based predominantly on information from beneficiaries with emphasis on the results of portfolio activities. Secondary sources of information, predominantly documentation from the CO and its IPs, coupled with discussions with CO and IP staff, formed the basis of the team's assessment of the portfolio strategy and implementation processes.

2.3 Itinerary and persons met

The team met in Rome for two days of initial consultations with key WFP managers and interested parties before travelling on to Eritrea. The team was in country from the 1st to the 25th of November, 2003 and in that time travelled to all six *zobas* in Eritrea. The itinerary and list of persons consulted is provided at Annexes 3 and 4.

3. Strategy and design issues

While the initial emphasis of portfolio support was on food relief to meet household food deficits for war- and drought-affected populations, in mid 2001 WFP commenced two EMOPs (10049 and 10052) with objectives that began to consider recovery activities. Their objectives included enhancing the capacity for self-reliance through 'pilot targeted skill training and income activities'. The shift towards a recovery focus was given further emphasis with the commencement of the first PRRO in July 2003, one principal objective of which was to increase access of the target communities to physical assets, knowledge and skills.

The increased emphasis on recovery raises several issues: