

696 PLO2

PL 480-670
NA 696

CLASSIFICATION
PROJECT EVALUATION SUMMARY (PES) - PART I

Report Control
Symbol U-447

1. PROJECT TITLE PL 480, Title II Section 206 Program			2. PROJECT NUMBER NA 696	3. MISSION/AID/W OFFICE OAR/Rwanda
			4. EVALUATION NUMBER (Enter the number maintained by the reporting unit e.g., Country or AID/W Administrative Code, Fiscal Year, Serial No. beginning with No. 1 each FY) RWA-EVA-83-	
			<input type="checkbox"/> REGULAR EVALUATION <input checked="" type="checkbox"/> SPECIAL EVALUATION	
5. KEY PROJECT IMPLEMENTATION DATES Project will terminate within FY 84		6. ESTIMATED PROJECT FUNDING		7. PERIOD COVERED BY EVALUATION
A. PRO-AG or Equivalent FY 80	B. Obligation Expected FY 80	C. Input Delivery FY 84	A. Total (250 MT Vegoil) B. U.S. \$ 370,000	From (month/yr.) 3/80 To (month/yr.) 6/83 Date of Evaluation Review 6/83

B. ACTION DECISIONS APPROVED BY MISSION OR AID/W OFFICE DIRECTOR

A. List decisions and/or unresolved issues; cite those items needing further study. (NOTE: Mission decisions which anticipate AID/W or regional office action should specify type of document, e.g., telegram, SPAR, PIO, which will present detailed request.)	B. NAME OF OFFICER RESPONSIBLE FOR ACTION	C. DATE ACTION TO BE COMPLETED
See attached Executive Summary and Evaluation Report.		

<p>9. INVENTORY OF DOCUMENTS TO BE REVISED PER ABOVE DECISIONS</p> <p><input type="checkbox"/> Project Paper <input type="checkbox"/> Implementation Plan e.g., CPI Network <input type="checkbox"/> Other (Specify) _____</p> <p><input type="checkbox"/> Financial Plan <input type="checkbox"/> PIO/T _____</p> <p><input type="checkbox"/> Logical Framework <input type="checkbox"/> PIO/C <input type="checkbox"/> Other (Specify) _____</p> <p><input type="checkbox"/> Project Agreement <input type="checkbox"/> PIO/P _____</p>	<p>10. ALTERNATIVE DECISIONS ON FUTURE OF PROJECT</p> <p>A. <input checked="" type="checkbox"/> Continue Project Without Change</p> <p>B. <input type="checkbox"/> Change Project Design and/or <input type="checkbox"/> Change Implementation Plan</p> <p>C. <input type="checkbox"/> Discontinue Project</p>
<p>11. PROJECT OFFICER AND HOST COUNTRY OR OTHER RANKING PARTICIPANTS AS APPROPRIATE (Names and Titles)</p> <p>Alan V. Getson Health Development Officer</p> <p>Alexis Kanyarengwe Minister of Interior</p> <p>AID 1330-18 (3-78)</p>	<p>12. Mission/AID/W Office Director Approval</p> <p>Signature _____</p> <p>Typed Name Norman L. Olsen</p> <p>Date _____</p>

Executive Summary

PL 480 Title II - Section 206 Program

1. What constraints does this project attempt to overcome?

Consistent with the provisions of Section 206 of the PL 480 Title II program, the projects undertaken in Rwanda contributed to alleviating the causes of the need for food assistance and increased the effectiveness of local level food distribution. More specifically, the projects financed by Section 206 funds improved food storage activities through silo construction, nutrition education through the construction of several nutrition centers, and primary health care through health center construction/renovation.

2. What technology did the project promote to relieve this constraint?

This project promoted the development of modern food storage techniques, improved nutrition education and primary health care services.

3. What technology did the project attempt to replace?

Since there is a lack of modern food storage facilities, and nutrition/health centers in Rwanda, this project, on a limited scale, provided some of these needed facilities.

4. Why did project planners believe the intended beneficiaries would adopt the proposed technology?

Project planners had prior experience with similar projects in Rwanda to believe that the intended beneficiaries would readily accept the technologies being promoted by this project.

5. What characteristics did the intended beneficiaries exhibit that had relevance to their adopting the proposed technology?

Project beneficiaries did not have available to them the kinds of services and resources provided by the facilities constructed under this project. As a result there were inadequate grain storage practices and a generally poor nutritional/health status among project beneficiaries.

6. What adoption rate has this project achieved in transferring the proposed technology?

This project financed the construction of four nutrition centers (two of which were subsequently used as dispensaries), two silos (one new construction and one extension) and one health center renovation. At the time of the evaluation two nutrition centers and one silo had not yet become operational.

7. Has the project set forces into motion that will induce further exploration of the constraint and improvements to the technical package proposed to overcome it?

The facilities financed under this project are part of a GCR long-term construction plan to provide similar facilities and resources in all prefectures of the country. In this sense the project did not set forces in motion but contributed to forces that had already been set in motion.

8. Do private input suppliers have an incentive to examine the constraint addressed by this project and to come up with solutions?

For one of the silos constructed under this project (Tare), there is some local level interest in having it become a "private enterprise" by establishing a community cooperative.

9. What delivery systems did the project employ to transfer technology to intended beneficiaries?

Basically 250 MT of vegetable oil was provided by the U.S. Government to the GOR. The oil was sold by a local marketing organization, OPROVIA. The funds generated, less OPROVIA's overhead costs, were placed in a special communal development fund designed to finance local level projects.

10. What training techniques did the project use to develop the delivery system?

Training was not a major element of this project since private entrepreneurs were used for the construction of project facilities supplemented by voluntary community labor (umuganda). In addition, government staff provided for the new facilities were already trained prior to the development of this project. There is some interest in training a silo manager for the Tare silo but this will be done with GOR financing.

11. What effect did the transferred technology have upon those impacted by it?

The evaluation noted that all of the facilities constructed by this project were needed and desired by the communities involved. One can presume that the overall effects have been quite positive. Nutrition and health services are being provided in some of these facilities and agricultural products are being properly stored in others. These services have intrinsic value and have been well-received by project beneficiaries.

PL 480 Title II - Section 206 (Communal Development Fund)

Evaluation Report

Prepared for USAID/Kigali

by M. Reintsma

June 1983

TABLE OF CONTENTS

Background	1
Present status of the projects	3
(2) Rwaza (Ruhondo) nutrition center	3
Gatagara (Kigoma) nutrition center	3
Nyagahanga (Bwisige) nutrition center	5
Muhororo (Kibilira) nutrition center	7
Extension of Kabuye Health center	8
Silo at Tare	8
Summary	9
Use of funds	10
Construction	12
Use of buildings	12
Beneficiaries	13
Conclusions	14
Recommendations	14

List of Acronyms and Abbreviations used:

CDF	Communal Development Fund
CRS	Catholic Relief Service
GOR	Government of Rwanda
MININTER	Ministry of the Interior
MINISANTE	Ministry of Health
OPROVIA	The national marketing organisation for food crops and animal products.
PMI	Immunisation program for mothers and children.

PL 480 Title II - Section 206 (Communal Development Fund)

Evaluation Summary

In accordance with the Provisions of P.L. 480 Title II - Section 206, 250 tons of vegetable oil was transferred to Rwanda in late 1979. This commodity was sold by OPROVIA, the national food marketing organization, and the sales proceeds were deposited in a special account of the Communal Development Fund (CDF), which is administered by the Ministry of the Interior and used to finance development projects in the communes.

The Section 206 Program has, in general, been quite successful. It has been particularly efficient in two respects. Firstly, in the actual channelling of funds through OPROVIA and the CDF to the local administrative authorities in the communes; and secondly, in the use of these funds by the local authorities themselves to undertake specific projects, primarily the construction of health and nutrition centers, which benefited the most needy sectors of the population.

The major problems encountered were the time lags in implementation, and the use of some of the buildings constructed for purposes other than those originally agreed to by MININTER and AID. Regarding the former problem, the major cause of delay was that negotiations between the GOR and AID on the projects to be undertaken did not begin until the commodity sales had been completed. In any future program, this problem could be significantly reduced by carrying on negotiations concurrently with the delivery and sale of the commodity. Regarding the problem of the change in the planned use of the buildings, in general there were sound reasons for the changes, and in all cases the alternative uses directly serve the needs of the local populations.

Evaluation Report

The purpose of this report is to evaluate the use of funds generated by the sale of 250 metric tons of vegetable oil, supplied to the Rwanda Government under the provisions of Title II, Section 206 of Public Law 480.

BACKGROUND

The Section 206 program was approved in June 1979, and in March 1980 an Agreement was signed by the Governments of Rwanda and the United States of America, under the terms of which it was stipulated that the U.S. Government would supply 250 MT of vegetable oil, and pay transportation costs to Kigali, and the GOR, through OPROVIA, would be responsible for in-country transport, storage and marketing of the commodity.

OPROVIA, after deduction of its overhead costs, was to deposit the proceeds of the sale in a special account of the Communal Development Fund (CDF). This Fund, which is administered by the Ministry of the Interior (MININTER), finances small scale projects which the communes undertake themselves, often using "umuganda" labor contributions, and commune taxes to cover recurrent costs. The money in the special account was to be used for specific projects proposed by the Communes and agreed to by USAID and the GOR. Under the provisions of Section 206, the projects undertaken had to contribute to A) alleviating the causes of the need for food assistance, or B) increasing the effectiveness of food distribution and the availability of food commodities provided under Title II to the neediest individuals in recipient countries (Cable ref: STATE 70920).

The consignment of oil was cleared through customs in early 1980, and sold by OPROVIA during the course of the year at prevailing market prices.

The total revenue generated was 33,811,768 FRW, out of which a deduction of 10,143,529 FRW was made to cover overhead costs incurred by OPROVIA. It is worth noting that the amount of this deduction, almost 30% of sales revenues, is considerably higher than the margin allowed to private importers/wholesalers, who are legally allowed only a 15% margin on the C.I.F. value of their imports. (1)

The proceeds from cash sales, 17.9 million FRW, had been deposited by December 1980, and by August 1981 the full amount of 23,668,236 FRW was in the CDF account.

In June 1981, MININTER proposed the following projects :

<u>Projets</u>	<u>Locality</u>	<u>Commune</u>	<u>Cost</u>
1. Nutrition Center	Nyagahanga	Bwisige	4.000.000
2. Nutrition Center	Rwaza	Ruhondo	4.000.000
3. Nutrition Center	Gatagara	Kigoma	4.000.000
4. Storage Silo (Extension)		Rushashi	1.100.000
5. Storage Silo (new)		Tare	1.810.000
6. Storage Silo (new)		Mutura	1.627.000
7. Storage Silo (new)		Mubuga	761.000
			<u>17.298.000*</u>
			=====

Of these, the nutrition centers were approved, as well as the extension of the Rushashi silo. (Letter ref: AID-175/81). AID did not approve the construction of the three new silos at Tare, Mutura, and Mubuga on the grounds that the technical and managerial

1) Retailers are allowed a 25% margin.

* At this time only receipts from cash sales has been deposited.

skills required to run the silos were not available. Alternative projects, including soil conservation and reforestation, were suggested by AID.

In March 1982, however, a further letter from MININTER proposed to use the remaining funds (23.6-17.3=6.3 million FRW) to finance the following projects:

<u>Project</u>	<u>Locality</u>	<u>Commune</u>	<u>Cost</u>
Nutrition Center	Muhororo	Kibilira	4.000.000 (1)
Health Center Extension	Kabuye	Rutongo	2.360.000 (2)
			<u>6.360.000</u>
			=====

This letter did not propose alternatives to the silos which had not been approved, and in fact no acknowledgement was ever made that these were not approved and a silo at Tare was subsequently constructed.

PRESENT STATUS OF THE PROJECTS.

At the time of this evaluation, May - June 1983, 3 of the 4 proposed nutrition centers have been built, and the fourth is under construction. The extension to the health center at Kabuye has been completed as well as the silo at Tare. A summary of the status of each of these projects is given below.

1. Rwaza (Ruhondo) Nutrition Center.

This center was built on mission land under the direction of the local priest. Some minor adaptations to the standard plan provided by MINISANTE were made in the interests of security, specifically higher walls and bars on the windows. Construction was completed in September 1982, at a total cost of 4,317,440 RWF (See Annex I), of which 4,000,000 was from the CDF account and the remainder from the parish.

(1) Later revised to 3,600,000

(2) Revised to 2.399.271

The staff of the center consists of 1 sister responsible for administrative matters, 1 sister and 5 "monitrices"⁽¹⁾ who run the nutrition program, and 2 gardeners. A total of 1,190 families are registered, from the communes of Ruhondo and neighboring Cyabingo, with up to 60 participants on any given day. The very large number of persons registered at Rwaza is undoubtedly due in part to the fact that it is a long established center, having been in existence for over 40 years. Attendance at the centre has been steadily growing as the local population has become aware of the services provided and the benefits to be gained.

Two complaints were voiced concerning this center. The first referred to the size of the rooms, which comfortably hold about 30 people, whereas in the old building classes of 60 were the norm. In fact, 30-35 is probably the maximum desirable size for a nutrition class. A second complaint, also heard from other centres, was that the plan did not provide for toilet facilities.

This center is financially self-sufficient, with the participant contributions covering the costs of salaries and other incidental expenditures. It participates in the CRS nutrition center program and receives flour, oil and milk from CRS.

2. Gatagara (Kigoma) Nutrition Center

The initial request for a nutrition center in Kigoma had been for a building to replace that at the Gatagara Mission*. When we arrived in Kigoma, however, we were informed that the Bourgemeister had decided to use the funds to finance a medical center for the commune instead.

(1) Where a title refers to a qualification gained locally, i.e. in Rwanda, the local (French) term will be used.

* We later visited the Gatagara mission and learned that they planned to transfer their nutrition center to a convent which was being vacated and which would be repaired, providing more than adequate facilities. They were aware that the new center was to have been for the mission, but accepted the fact that the Bourgemeister had the final authority in the allocation of communal funds.

11

The building at Kigoma followed the standard plan for a nutrition center, although it was actually being used as a dispensary and maternity center. The Bourgemeister had decided that the dispensary was in far greater need of new quarters than the nutrition center, and after looking at both buildings, that seemed a reasonable decision, the roof having almost fallen in on the former dispensary. The question remained why a nutrition center had been requested and not a new dispensary, but no satisfactory answer was obtained. Possibly, the Bourgemeister, offered a nutrition center by MININTER, and not realizing alternatives were available, accepted it and adapted it to the most pressing needs.

The new center was crowded at the time of our visit. One of the three major rooms was used as a labor and delivery room and the other two were used as wards. The kitchen was used as a laboratory, and the store room was used for medical supplies. The Bourgemeister had allocated 500,000 RWF out of the 4,000,000 RWF grant, to finance electrification of the centre. The staff of the centre included 2 midwives 1 "assistante médical", 1'aide infirmière," and 1 laboratory technician.

Meanwhile, the commune nutrition center was housed in a small building with little equipment and almost no furniture. It was staffed by 3 "monitrices communal" (paid by MININTER) and 1 "animatrice communale". Begun in 1980, the centre now had 700 families enrolled, with about 30-40 persons visiting the center per day. This center also participates in the CRS nutrition program.

3. Nyagahanga (Bwisige) Nutrition Center.

This new center was inaugurated in July 1982, and as of June 1983 was not in use. It had been requested as a replacement for the existing center, which was administered by the parish.

The major problem appeared to have been a conflict between the local Cure and the former Bourgemeister who had been responsible for the construction of the building near a commercial centre, and on commune land and not parish land. The newly appointed Bourgemeister, after trying unsuccessfully to negotiate with the Priest, had decided to request permission to use the building as a medical center, primarily for the PMI immunization program.

The priest was not available when we went to the Parish nutrition center, but the sister in charge explained that the location of the new building, which was near the commune office and a small commercial center, posed 2 problems, as they had previously learned when they ran the nutrition center in a building in that area.

In the first place, the local merchants provided a ready outlet for the food belonging to the center, and thus thefts were common, often by centre staff. And secondly, mothers coming to the centre, after weighing their children and having them checked, would go to the shops and "cabarets" during class time, returning only to collect the food allocations provided to the center as part of the CRS nutrition program. Because of these problems, the nutrition center activities were relocated inside the mission compound in 1979 and the building they had formerly used was turned into a dispensary. The present location of the nutrition center, in the mission, is too far away from the commercial center for these distractions to be a problem.

The parish nutrition center which is run by a staff of 4, actually has 640 families registered, and serves all of Bwisige, as well as parts of 4 neighboring communes.

4. Muhororo (Kibilira) Nutrition Centre.

This center was requested as a replacement for the dilapidated building which had formerly been employed as a nutrition center. As of 9/6/83 the foundation and walls of the new building were constructed following the standard plan. The roof, floor, windows and plastering remained to be done. A request had been made to MININTER for the third and final tranche funds, upon receipt of which construction could be completed.

The site of the new center was adjacent to the old, and the older building was also being repaired (apparently also with CDF financing). According to the Bourgemeister, both will be used as part of a new nutrition center complex.

The commune had 3 nutritionists (2 "monitrices sociales", and 1 "aide") who had been working in the commune since 1976 and who were presently working in the hospital, while the nutrition center was being repaired. These were paid by MINISANTE. There was also a nutritionist who had completed training at Ruhengeri and who would be available to work in the new center, if the commune found the means to pay her salary.

According to the Bourgemeister, there is no other nutrition center in this commune, and in fact, the center also serves parts of several neighbouring communes, with over 500 persons coming for consultations.

It appears that there is a need for this center and that the basic equipment and a core staff are available. The question of participation in the CRS program was brought up and the Bourgemeister will present a formal request to CRS when the building nears completion.

14

5. Extension of Kabuye Health Center

The health center of Kabuye consists of a 16 bed maternity unit, a pediatric unit which has just been completed with the help of Belgian Aid, and a dispensary which includes two small buildings, containing 4 rooms each. One of these buildings was built in 1982 with funding from this project. This new building houses only 1 patient at present but will accomodate 12 when furniture is obtained. The medical assistant in charge of the centre had requested permission from the Bougemeister to purchase equipment with the funds which remained after construction was completed. (1)

The centre is staffed by 1 medical assistant, 3 nurses, 2 "assistants sociaux", and 1 laboratory technician, and serves à large area including Rutongo and parts of 3 neighbouring communes. The medical assistant informed us that all the beds in the dispensary (i.e. the first building) were always occupied and the maternity unit handled approximately 30 deliveries per month.

6. Silo at Tare

The request for a silo for the Commune at Tare, was appoarently instigated by the former Bourgemeister, who was replaced in August 1982. The silo, which has a capacity of approximately 80 tons is situated next to the Communal Center and, although it was inaugurated in July 1982, is still unused.

(1)

The figure of 129,000 RWF was given.

There is no question that this silo is needed by the commune, which is now sharing that of a neighboring commune. In addition to providing storage facilities for local farmers, the silo could be used by traders who are presently storing beans and sorghum at Rushashi and Musasa and who have already asked the Bourgemeister if they can use the Tare silo.

In June 1983, the Bourgemeister had already spoken to officials in MINASODECO, which will finance the training of a silo manager. He planned to run the silo as a cooperative venture, which will take some time as there is not even a pre-cooperative existing at present. A possibility which should be explored is the use of the silo initially as a "private" enterprise of the commune. Since there is already a demand for its use, and arrangements have been agreed upon for the training of a manager, it may be possible to purchase the required equipment and rent out the storage facilities. Assuming use of 25% of capacity, i.e. 20 tons, and a rate of 5 FRW per kilo (5 to 7 is the average rate), 100,000 FRW would be generated, adequate to pay the salary of the manager as well as incidental expenses.

SUMMARY

The major activities undertaken under the section 206 programme were the sale of 250 tons of vegetable oil, and the use of the funds thus generated for construction projects in the communes. The following discussion summarises the effectiveness of these activities.

Use of Funds

The financial status of the project is illustrated in TABLE I. With the exception of the Kibilira and Rutongo centres, the amount allocated to each project did not differ from the original cost estimate. For the Rutongo centre, the amount allocated was 40,000 FRW more than the estimate, and for Kibilira it was 400,000 RWF less. There was some variation in the actual costs of the nutrition centres, however, despite the fact that they were built to the same specifications. The priest at Rwaza, for instance, added some 317,000 RWF to the 4,000,000 grant, while the Bourgemeister of Kigoma had constructed the building for 3.5 million and used the remainder to finance electrification. Differences in transportation costs, and the time of purchase, (in the dry season building supplies are in greater demand and more expensive), may have contributed to these differences.

Assuming that the allocation for Kibilira will be fully utilized, the funds remaining in this project are 3,838,583 RWF presently allocated by MININTER as follows :

<u>Amount</u>	<u>Allocation proposed by MININTER</u>
1,100,000	Extension of Rushashi silo
761,000	New silo at Mubuga
1,627,860	New silo at Satinskyi
369,723	Comprising the difference between the total funds deposited by OPROVIA, and the amount MININTER proposed for specific projects i.e. 23,668,236 - 23,298,513 = 369,723.
<hr/> 3,858,583	

The extension to the Rushashi center, which was approved in 1981, has apparently not been started because the original cost estimate was inadequate to complete the work. During the course of the evaluation it was agreed verbally that part of

USE OF FUNDS GENERATED BY
SECTION 206 SALES AS OF 25/05/1983

Financed Projects	Communes	Project Cost	Total Aid Allocated	Expenditures	Remainder	Remarks
Nutrition Center	Kigoma	4.000.000	4.000.000	3.996.000	4.000	Completed
Nutrition Center	Kibilira	3.600.000	3.600.000	2.100.000	1.500.000	In process
Nutrition Center	Ruhondo	4.000.000	4.000.000	4.000.000	-	Completed
Nutrition Center Extension of Health	Bwisige	4.000.000	4.000.000	4.000.000	-	Completed
Centre at Kabuye	Rutongo	2.399.271	2.399.271	2.399.271	-	Completed
Silo	Tare	1.810.000	1.810.000	1.810.000	-	Completed
Silo (Extension)	Rushashi		1.100.000	-	1.100.000	
Silo	Mubuga		761.382	-	761.000	
Silo	Satinskyi (1)		1.627.860	-	1.627.860	
			23.298.513	18.305.271	4.993.242	

(1) This silo was proposed as a replacement for Mutura.

Source: MININTER.

the allocation for Satinskyi could be used for this purpose. If this was done, approximately 2,000,000 RWF would remain in the fund.

Construction

The construction of all the buildings except Rwaza was undertaken by private entrepreneurs, with the preliminary preparation of the site being carried out by "umuganda". Most of the buildings were completed in a 3-6 month time period, and adequately meet the needs for which they are employed, with the exception of the lack of toilet facilities in the nutrition centers.

The efficiency of this stage of the program can be attributed primarily to 2 factors. In the first place, the provision of a standard plan for the nutrition centers eliminated the need for the commune to undertake planning and cost estimates. Secondly, the use of a private entrepreneur reduced the demands on the scarce commune resources of labor and organisational skills.

Use of Buildings.

Of the five buildings constructed, two are being used as planned; the Rwaza nutrition center and the extension to the Kabuye health center. A third, the Kigoma nutrition center, is being used as a dispensary and maternity centre. The Nyagahanga Nutrition Centre will be used as an immunisation centre when approval is obtained from MININTER and USAID. And the fifth, the Tare silo, is presently unused, although the Bourgemeister is in the process of trying to establish a cooperative to use and manage it.

The nutrition and health centers are all run by a small,

but qualified staff. Equipment, however, furniture primarily, is lacking particularly in the Kabuye center. The "aide medical" who is responsible for this centre has requested permission from the Bourgmesteir to use funds left over from the construction to purchase additional beds and bedding.

The use of buildings for purposes other than those for which they were designed, reflects primarily a lack of communication between the parties concerned in proposing and implementing the projects. At least four levels of authority are involved, including the local bourgmesteir, the local priest (where parish staff are employed in the project), MININTER personnel, and USAID. In the case of the Tare silo, for instance, there appears to have been a lack of understanding by MININTER that new silos were not approved, only extensions of existing ones. In the case of Nyagahanga, the lack of communication was between the local bourgmesteir and the local priest. This lack of communication has been a major factor reducing the level of efficiency in the implementation of this program.

Beneficiaries.

The primary beneficiaries of this project have been the mothers and children attending the nutrition centers, and the sick who are treated at the dispensaries. Almost 1200 families were enrolled in the Rwaza nutrition center alone. The health centers at Kabuye and Kigoma serve the entire populations of these communes as well as parts of neighbouring ones. And if the Nyagahanga center is used for the PMI immunization program, this will further broaden the range of beneficiaries from this project.

Secondary beneficiaries of the project include the consumers of the vegetable oil and the enterprises marketing it, and the private entrepreneurs who constructed the buildings, as well as their employees and suppliers.

CONCLUSION

From the foregoing description of the projects undertaken under the Section 206 program it is clear that, in general, ⁽¹⁾ the funds have been employed in accordance with the original agreement and to the direct benefit of some of the most vulnerable and needy groups of the population. The practice of directing funds to projects such as nutrition and medical centers where support institutions were already in existence has been particularly successful. The fact that the reforestation and soil erosion projects were not accepted by the communes indicates a realisation that such schemes involve the use of very scarce resources such as organisational skills and umuganda. Despite the relative success of this project, however, there are several areas where further steps could be taken to improve its implementation, and particularly to increase the efficiency of future programs. The following recommendations are designed to address these problems.

RECOMMENDATIONS

I. Relative to the current program:

- A. A Study on the cost-effectiveness of extending the Nyagahanga center should be undertaken. The Bourgemeister has proposed that this building be used as part of the communal health center complex, specifically to accomodate the PMI immunization program. This proposal, which AID has agreed to in principal, is to be put into writing, along with a request to extend the centre. At that time it will have to be ascertained whether the increase in the effectiveness of the center due to the extension, justifies the cost of the investment. If this use of the remaining funds is not cost effective, they should be used to purchase equipment for the Kabuye health center, or other centers as needed.
- B. The possibility of establishing the Tare silo as a "private enterprise", owned and run by the commune, should be discussed with the Bourgemeister. At present the bourgemeister is planning to establish a co-operative. However, a considerable length of time is required to establish such as organisation, time during which the silo will be unused, despite the fact that

(1) The notable exception being Tare, which apparently was never approved.

2

merchants in the area have already expressed a desire to use it for bean and sorghum storage. For larger merchants, an entire chamber could be rented out to reduce handling costs and initial operating costs, while for smaller farmers and merchants the silo could buy the commodity and resell at a margin. This would provide a service to local merchants and farmers, and a source of income to the commune. MINASODECO has already agreed to train a silo manager. Funds would be required for start-up capital, and to purchase scales, sacks, insecticides and other equipment.

- C. It should be made clear to MININTER that the silos at Mubuga and Satinskyi are not approved and the funds involved must be reallocated.

- D. The extension of Rushashi silo (if indeed it is only an extension, which the high cost puts into question) should be constructed.

II. Relative to Future Programs

1. OPROVIA's Overhead Costs.

Measures should be taken to reduce the 30% overhead cost which OPROVIA is allowed to deduct from sales proceeds and which represents a significant loss to the target population of the program. One action which would reduce OPROVIA's actual handling cost and which the GOR proposed in 1980, is the packing of food products in smaller containers. **One** or **five** gallon tins instead of 55 gal. drums are available. **The** size of container desired must be specified in the final project document.

2. Time lags in Implementation.

Discussions concerning the projects to be undertaken should begin as soon as the Transfer Authorization for the commodities is signed, in order to avoid the effects of inflation, and increase the efficiency of project implementation.

In the current program, most of 1980 was devoted to commodity sales, and most of 1981 to negotiating appropriate projects. Thus construction was not carried out until 1982 and 1983. The negotiation of projects concurrently with the sales of the commodity would have reduced the implementation period by 12-18 months.

3. Communications.

Regular meetings of all the parties concerned, from the initial planning stages, through the implementation phase, should be scheduled, and a written report of the meeting distributed to participants. During the course of this evaluation numerous examples of misunderstanding or ignorance of facts came to light. Two of the major ones were the misunderstandings at Nyagahanga and Tare, mentioned earlier. With several levels authority involved, and no regular forum of discussion, it is not surprising that communication breakdowns occur. Regular meetings and reports would both improve communications and fulfill project monitoring requirements.

4. Deposit of Funds in an interest-bearing account.

The CDF should be encouraged to deposit Funds generated by the Section 206 program in an interest-bearing account.

By December 1980, 17.9 million FRW had been deposited in the CDF, and a further 5.6 million was deposited by August 1981.

23

However, it was not until 1982 and 1983 that most of this money was distributed to the communes. Assuming an average balance of 18 million over 2 years at 5% simple interest, 1.8 million FRW, or enough to construct a new storage silo, would have been generated.

24

Annex I *
Rwaza nutrition center costs

List of Persons Contacted:

M. Bigirabagabo Gervais	Bourgemeister of Bwisige
Père Daguerre Manuel	Rwaza parish
M. Gahamanyi	Director General, Office of Communal Development
Dr. Higiro Celestin	Muhororo Hospital
Sr. Julienne	Nyagahanga Nutrition Center
M. Kalibwenda Innocent	Deputé au Conseil National de Developpement, Byumba
Père Kanyoni Boniface	Gatagara Mission
M. Karekeji, Jean Chrysostome	Bourgemeister of Tare
Sr. Marie Clarisse	Rwaza Nutrition Center
Sr. Marie Juonne	Rwaza Nutrition Center
M. Mbungira André	Bourgemeister of Kibilira
M. Ngirumpatse Pierre Damien	Bourgemeister of Ruhondo
M. Zitoni Callixte	Kabuye Health Center.

In addition to those mentioned above, M. Louis Marie de Montfort, of the Communal Development Office participated in, and made many useful contributions to this evaluation.

R W A Z A
B.P. 63
RUHENGARI

RWAZA, LE 15 MAI 1982

DEVIS DU CENTRE NUTRITIONNEL DE RWAZA

	U	R	P.U.	P.T.
0 <u>PREPARATION TERRAIN</u>				
01 DEBLAIS GENERAUX	m ³	15.0	350	5 250
02 REMBLAIS	m ³	26.87	350	9 404,5
03 FOUILLES FONDATIONS	m ³	45.0	350	15 750
				Total... 30 404,5
1 <u>MACONNERIE</u>				
1.1 SOUBASSEMENTS MOELLONS LARGE 0.40 - HAUT 0.85	m ²	48.52	7500	363 900
1.2 JOINT ETANCHEITE	m ²	34.00	400	13 600
1.3 MACONNERIE MUR BRIQUES CUITES 376 m ² -15 OUVERT = 361 x 0,95	m ³	127.000	8500	1 079 500
1.4 CONSTRUCTION CHEMINEE + CUISINE + LAVOIR	fft	fft	fft	75 000
1.5 ESCALIER	fft	fft	fft	45 700
				Total.. 1 577 700
2 <u>BETON ARME</u>				
2.1 CHAINAGE 40. 12 m/m	m ³	40	2000	80 000
2.2 (300) 25 6 m/m	m ³	25	980	24 500
2.3 C.P. 350kg (m ³) 0.20 x 0.20 m	m ³	0.60	36.000	21 600
				Total.. 126 100
3 <u>TOITURE</u>	U	Q	P.U.	
3.1 CHEVRONS-BOIS	m	180	1200	216 000
3.2 TOLES	p	185	2000	370 000
3.3 DEMI-CHARPENTES	p	4	22000	88 000
				Total.. 674 000
4 <u>REVETEMENT</u>				
4.1 REJOINTOYAGE MURS EXT. ET INT. cf.PLAN	m ²	361	220	79 420
4.2 CREPISSAGE MURS INT.	m ²	661	400	264 400
				Total.. 343 820
5 <u>SOL</u>				
5.1 PAVEMENT SUR LIT DE BRIQUES AVEC BETON-REPLISSAGE ET CHAPPE	m ²	260	1400	364 000
				Total. 364 000
6. <u>PLAFOND</u>				
6.1 PLAQUES CLOUEES SUR JITAGE BOIS, COUVRES-JOINTS ET LATTES (COTE BUREAU-CLASSE)	m ²	78	1400	109 200
				Total . 109 200

	U	Q	P.U.	P.T.
7	HUISSERIE			
7.1	p.c	12	13200	158 400
7.2	p.c	5	13200	66 000
7.3	p.c	1	39600	39 600
				Total 264 000
8	PEINTURE			
8.1	m ²	293	350	102 550
8.2	m ²	48	350	16 800
8.3	m ²	45	400	18 000
8.4	kg	4	1000	4 000
				Total 141 350
9	VITRERIE			
9.1	m ²	28	2000	56 000
				Total 56 000
10	AMEUBLEMENT			
10.1		5 %		200 000
				Total 200 000
11	ENTREPRISE			
		10 %		400 000
				Total 400 000

TOTAL 4 286 574,5

R W A Z A

B.P. 63

RUHENGURI

R W A Z A , le 3 octobre 1982

Construction -
Centre Nutritionnel
de R W A Z A .

DEPENSES :

Nombre	Libellé	P.U.	Montant
60 000	Briques	5	300 000
12	Camions de Pierres	6776	81 312
10	" " Sable	6776	67 760
3	" " Gravier	7575	22 725
33	Tonnes-Ciment	40 000	1 320 000
	Salaires-manoevre pour décharger		30 400
	" préparation-terrain		30 500
	Salaires et Matériel-maçonnerie-fondations		220 000
10	Camions de Sable	6776	67 760
180	Chevrans	1200	216 000
165	Tiles	2000	370 000
4	Lami-charpentes	22 000	88 000
	Main d'oeuvre-maçonnerie-caffrage-ferraillage		220 000
	Fournitures diverses (clous, fil de fer, outils...)		38 240
4	Camions de Sable	6776	27 104
	Fers d Béton		66 049
	Huisseries		264 000
	Plafonds		109 200
	Peintures		141 350
157	Claustres	170	26 690
	Salaires correspondants à ces travaux		290 750
	entreprise		300 000
			4 317 440

Nous faisons : quatre millions
trois cents dix-sept mille
quatre cents quarante Frs.Rwandais.

DIOCESE DE RUHENGERI
ECONOMAT GENERAL
 B.P. 45 RUHENGERI / Rwanda

Facture N° 062712
 Ruhengeri, le 7/8/82

M CONSTRUCTION - CENTRE NUTRITIONNEL
 de RWANDA / COMMUNE RUHENDE doit

Nombre	Libellé	P.U.	Montant
137	de CIRENT	40 000	520 000
4	Couloirs de S. G. G.	6 726	27 004
	Isoloir		86 049
	Chaises - Métal 150 100		158 400
	Bois		66 000
	Mobilier		30 000
	Professeur pour 10 semaines		100 000
	Professeur		141 350
127	Classement	170	21 600
TOTAL			1.174.353

Banque Commerciale du Rwanda, B.P. 110, G.P. 110
 Banque de Kigali, B.P. 110, G.P. 110
 C.C.P. 24 110 Kigali

ECONOMAT GENERAL

DIOCESE DE RUHENGERI
ECONOMAT GENERAL
 B.P. 45 RUHENGERI / Rwanda

Facture N° 062718
 Ruhengeri, le 17/5/82

M Construction du Centre Nutritionnel
 de Rwanda - Kiboko doit

Nombre	Libellé	P.U.	Montant
60.000	Bois	5	300 000
12	Couloirs de pierre	6 726	81 312
10	Isoloir	6 726	67 260
3	Chaises	7 575	22 725
10	Toures de ciment	40.000	400 000
TOTAL			871 797

Banque Commerciale du Rwanda, B.P. 110, G.P. 110
 Banque de Kigali, B.P. 110, G.P. 110
 C.C.P. 24 110 Kigali

Constructions
R.L. 17271

FACTURE
N° C.N. IV

Date 7/8/82

M CONSTRUCTION du CENTRE
NUTRITIONNEL R.L. 17271 doit

pour

187-7

Salaires	290.750
Wages des ouvriers pour la construction du centre nutritionnel	
TOTAL	290.750
P. H. K. I. N. I.	

CONSTRUCTIONS
RWAZITZ

FACTURE
N° C.N. II

CONSTRUCTIONS
RWAZITZ

FACTURE
N° C.N. I

Date 21/9/82

Maintenance Centre Nutritionnel - Rwanda - Rubendoit

18747

pour ENTREPRISE		300.000
Nous disons: deux cents mille P. K. K.		300.000

Date 17/5/82

MCONSTRUCTION du CENTRE NUTRITIONNEL - RWANDA, Commune Rubendoit

18747

• solancey - main d'œuvre pour décharge		30.000
• solancey pour principes Ferraux		30.500
Nous disons: deux cents mille P. K. K.		60.500

CONSTRUCTIONS
RWAZITZ

FACTURE
N° C.N. III

CONSTRUCTIONS
RWAZITZ

FACTURE
N° C.N. I a

Date 28/6/82

Construction du Centre Nutritionnel Rwanda

doit

18747

solancey: main d'œuvre + matériaux - coffrage - ferraille + fournitures diverses (clous, fils de fer, outils...)		220.000
		38.240
Nous disons: deux cents cinquante- huit mille deux cent quarante et s. P. K. K.		258.240

Date 17/5/82

MCONSTRUCTION du CENTRE NUTRITIONNEL - RWANDA

18747

Solancey pour matériel FUNDATIONS		220.000
Nous disons: deux cents vingt mille P. K. K.		220.000

Executive Summary

PL 480 Title II - Section 206 Program

1. What constraints does this project attempt to overcome?

Consistent with the provisions of Section 206 of the PL 480 Title II program, the projects undertaken in Rwanda contributed to alleviating the causes of the need for food assistance and increased the effectiveness of local level food distribution. More specifically, the projects financed by Section 206 funds improved food storage activities through silo construction, nutrition education through the construction of several nutrition centers, and primary health care through health center construction/renovation.

2. What technology did the project promote to relieve this constraint?

This project promoted the development of modern food storage techniques, improved nutrition education and primary health care services.

3. What technology did the project attempt to replace?

Since there is a lack of modern food storage facilities, and nutrition/health centers in Rwanda, this project, on a limited scale, provided some of these needed facilities.

4. Why did project planners believe the intended beneficiaries would adopt the proposed technology?

Project planners had prior experience with similar projects in Rwanda to believe that the intended beneficiaries would readily accept the technologies being promoted by this project.

5. What characteristics did the intended beneficiaries exhibit that had relevance to their adopting the proposed technology?

Project beneficiaries did not have available to them the kinds of services and resources provided by the facilities constructed under this project. As a result there were inadequate grain storage practices and a generally poor nutritional/health status among project beneficiaries.

6. What adoption rate has this project achieved in transferring the proposed technology?

This project financed the construction of four nutrition centers (two of which were subsequently used as dispensaries), two silos (one new construction and one extension) and one health center renovation. At the time of the evaluation two nutrition centers and one silo had not yet become operational.

7. Has the project set forces into motion that will induce further exploration of the constraint and improvements to the technical package proposed to overcome it?

134

The facilities financed under this project are part of a GOR long-term construction plan to provide similar facilities and resources in all prefectures of the country. In this sense the project did not set forces in motion but contributed to forces that had already been set in motion.

8. Do private input suppliers have an incentive to examine the constraint addressed by this project and to come up with solutions?

For one of the silos constructed under this project (Tare), there is some local level interest in having it become a "private enterprise" by establishing a community cooperative.

9. What delivery systems did the project employ to transfer technology to intended beneficiaries?

Basically 250 MT of vegetable oil was provided by the U.S. Government to the GOR. The oil was sold by a local marketing organization, OPROVIA. The funds generated, less OPROVIA's overhead costs, were placed in a special communal development fund designed to finance local level projects.

10. What training techniques did the project use to develop the delivery system?

Training was not a major element of this project since private entrepreneurs were used for the construction of project facilities supplemented by voluntary community labor (umuganda). In addition, government staff provided for the new facilities were already trained prior to the development of this project. There is some interest in training a silo manager for the Tare silo but this will be done with GOR financing.

11. What effect did the transferred technology have upon those impacted by it?

The evaluation noted that all of the facilities constructed by this project were needed and desired by the communities involved. One can presume that the overall effects have been quite positive. Nutrition and health services are being provided in some of these facilities and agricultural products are being properly stored in others. These services have intrinsic value and have been well-received by project beneficiaries.

h5

Executive Summary

PL 480 Title II - Section 206 Program

1. What constraints does this project attempt to overcome?

Consistent with the provisions of Section 206 of the PL 480 Title II program, the projects undertaken in Rwanda contributed to alleviating the causes of the need for food assistance and increased the effectiveness of local level food distribution. More specifically, the projects financed by Section 206 funds improved food storage activities through silo construction, nutrition education through the construction of several nutrition centers, and primary health care through health center construction/renovation.

2. What technology did the project promote to relieve this constraint?

This project promoted the development of modern food storage techniques, improved nutrition education and primary health care services.

3. What technology did the project attempt to replace?

Since there is a lack of modern food storage facilities, and nutrition/health centers in Rwanda, this project, on a limited scale, provided some of these needed facilities.

4. Why did project planners believe the intended beneficiaries would adopt the proposed technology?

Project planners had prior experience with similar projects in Rwanda to believe that the intended beneficiaries would readily accept the technologies being promoted by this project.

5. What characteristics did the intended beneficiaries exhibit that had relevance to their adopting the proposed technology?

Project beneficiaries did not have available to them the kinds of services and resources provided by the facilities constructed under this project. As a result there were inadequate grain storage practices and a generally poor nutritional/health status among project beneficiaries.

6. What adoption rate has this project achieved in transferring the proposed technology?

This project financed the construction of four nutrition centers (two of which were subsequently used as dispensaries), two silos (one new construction and one extension) and one health center renovation. At the time of the evaluation two nutrition centers and one silo had not yet become operational.

7. Has the project set forces into motion that will induce further exploration of the constraint and improvements to the technical package proposed to overcome it?

The facilities financed under this project are part of a GOR long-term construction plan to provide similar facilities and resources in all prefectures of the country. In this sense the project did not set forces in motion but contributed to forces that had already been set in motion.

8. Do private input suppliers have an incentive to examine the constraint addressed by this project and to come up with solutions?

For one of the silos constructed under this project (Tare), there is some local level interest in having it become a "private enterprise" by establishing a community cooperative.

9. What delivery systems did the project employ to transfer technology to intended beneficiaries?

Basically 250 MT of vegetable oil was provided by the U.S. Government to the GOR. The oil was sold by a local marketing organization, OPROVIA. The funds generated, less OPROVIA's overhead costs, were placed in a special communal development fund designed to finance local level projects.

10. What training techniques did the project use to develop the delivery system?

Training was not a major element of this project since private entrepreneurs were used for the construction of project facilities supplemented by voluntary community labor (umuganda). In addition, government staff provided for the new facilities were already trained prior to the development of this project. There is some interest in training a silo manager for the Tare silo but this will be done with GOR financing.

11. What effect did the transferred technology have upon those impacted by it?

The evaluation noted that all of the facilities constructed by this project were needed and desired by the communities involved. One can presume that the overall effects have been quite positive. Nutrition and health services are being provided in some of these facilities and agricultural products are being properly stored in others. These services have intrinsic value and have been well-received by project beneficiaries.

Executive Summary

PL 480 Title II - Section 206 Program

1. What constraints does this project attempt to overcome?

Consistent with the provisions of Section 206 of the PL 480 Title II program, the projects undertaken in Rwanda contributed to alleviating the causes of the need for food assistance and increased the effectiveness of local level food distribution. More specifically, the projects financed by Section 206 funds improved food storage activities through silo construction, nutrition education through the construction of several nutrition centers, and primary health care through health center construction/renovation.

2. What technology did the project promote to relieve this constraint?

This project promoted the development of modern food storage techniques, improved nutrition education and primary health care services.

3. What technology did the project attempt to replace?

Since there is a lack of modern food storage facilities, and nutrition/health centers in Rwanda, this project, on a limited scale, provided some of these needed facilities.

4. Why did project planners believe the intended beneficiaries would adopt the proposed technology?

Project planners had prior experience with similar projects in Rwanda to believe that the intended beneficiaries would readily accept the technologies being promoted by this project.

5. What characteristics did the intended beneficiaries exhibit that had relevance to their adopting the proposed technology?

Project beneficiaries did not have available to them the kinds of services and resources provided by the facilities constructed under this project. As a result there were inadequate grain storage practices and a generally poor nutritional/health status among project beneficiaries.

6. What adoption rate has this project achieved in transferring the proposed technology?

This project financed the construction of four nutrition centers (two of which were subsequently used as dispensaries), two silos (one new construction and one extension) and one health center renovation. At the time of the evaluation two nutrition centers and one silo had not yet become operational.

7. Has the project set forces into motion that will induce further exploration of the constraint and improvements to the technical package proposed to overcome it?

The facilities financed under this project are part of a GOR long-term construction plan to provide similar facilities and resources in all prefectures of the country. In this sense the project did not set forces in motion but contributed to forces that had already been set in motion.

8. Do private input suppliers have an incentive to examine the constraint addressed by this project and to come up with solutions?

For one of the silos constructed under this project (Tare), there is some local level interest in having it become a "private enterprise" by establishing a community cooperative.

9. What delivery systems did the project employ to transfer technology to intended beneficiaries?

Basically 250 MT of vegetable oil was provided by the U.S. Government to the GOR. The oil was sold by a local marketing organization, OPROVIA. The funds generated, less OPROVIA's overhead costs, were placed in a special communal development fund designed to finance local level projects.

10. What training techniques did the project use to develop the delivery system?

Training was not a major element of this project since private entrepreneurs were used for the construction of project facilities supplemented by voluntary community labor (umuganda). In addition, government staff provided for the new facilities were already trained prior to the development of this project. There is some interest in training a silo manager for the Tare silo but this will be done with GOR financing.

11. What effect did the transferred technology have upon those impacted by it?

The evaluation noted that all of the facilities constructed by this project were needed and desired by the communities involved. One can presume that the overall effects have been quite positive. Nutrition and health services are being provided in some of these facilities and agricultural products are being properly stored in others. These services have intrinsic value and have been well-received by project beneficiaries.