SIERRA LEONE GOVERNMENT

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Sierra Leone / CARE International on behalf of the Consortium for Rehabilitation and Development (CORAD)

Developmental Relief Program (DRP)

Fiscal Year 2005 Results Report

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Contacts:

Cooperating Sponsor HQ:

Khawaja M. Adeeb
Advisor, Supply Chain Management
Food Resources Coordination Team
CARE USA
151 Ellis Street
Atlanta, Georgia 30303
Telephone: (404) 681-2552
Fax: (404) 577-5977
Email: Hadeeb@care.orgH

Cooperating Sponsor, Country Office

Nick Webber, Country Director
John Perry, DRP Coordination and Compliance Manager
CARE International in Sierra Leone
35 Wilkinson Road
Freetown, Sierra Leone
Telephone: (232 22) 234227-234228
Fax: (232 22) 234246
Email: Hcaresl@sierratel.slH

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A. ANNUAL RESULTS

A. 1. Background and Context:

A.1.1. Overall assistance environment and USG strategic Interests

The primary USG interests in Sierra Leone are consolidation of peace, security and stability. All are dramatically affected by internal and external developments. Sierra Leone is still recovering from the effects of a decade-long civil war that led to the loss of many lives and greatly disrupted the country's economic and social infrastructure. Both her neighbors (Liberia – to the south east, and Guinea- to the north east) are fragile states whose internal problems risk spilling over to Sierra Leone. The development and stability of Sierra Leone is, therefore, key to greater regional political stability, economic development, and the sub-region's reintegration into the global market place. Although Sierra Leone has made significant progress towards reintegration and reconstruction that is the envy of many other African countries recovering from civil war and unrest, the process is far from complete. The transitional efforts so far implemented have mainly focused on (i) restoring national security and good governance; (ii) re-launching the economy; and (iii) provision of basic social services to the most vulnerable groups. To move forward, the country urgently needs focused interventions that will: (i) enhance and maintain economic stability, (ii) leverage resources to fight poverty and, deliver and sustain quality public services, (iii) broaden economic opportunities for broad-based growth (iv) increase human capacity to undertake income generating activities, (v) rebuild security, support effective and democratic governance and; (vii) ensure respect and protection of human rights.

A.1.2. The USAID program in Sierra Leone

To address these challenges, USAID is implementing a transitional strategy for FY 2004-2006 that directly contributes towards consolidation of peace, security and stability. Two Special Objectives (SpOs) will contribute to USAID/Sierra Leone's program goal.

SpO 1: Reintegration process of war-torn populations advanced. This SpO directly supports the program goal by creating an enabling environment for rapid and sustainable economic growth. It also directly supports the reintegration process of target beneficiaries by broadening economic opportunities and increasing the ability of the poor to increase their incomes. In addition, it supports the USG administration objectives of trade, agriculture, and private sector development. To achieve sustainable reintegration, USAID is supporting activities that will: *establish or expand micro enterprises (IR1.1); increase agricultural production and marketing (IR1.2) and; improve community infrastructure and services (IR1.3).* Through sustainable reintegration of target communities into dynamic local economies, USAID hopes to rebuild communities that will not revert to conflict and violence. USAID recognizes that, sustainable reintegration for war-torn populations requires: (1) stimulating production and productivity in agricultural and micro enterprises for target communities and; (2) linking beneficiary communities to regional and national input and output markets.

SpO 1: Democratic governance strengthened. This SpO directly supports the program goal through improved governance and reduced conflict. Three critical results will contribute to the

achievement of this objective: *broadened political participation (IR 2.1); better informed citizens, local government, and CSOs and; (3) improved management and accountability over national resources.*

A.2 The CORAD Title II DRP Program:

During March 2004, The Consortium for Rehabilitation and Development (CORAD) started implementing a 3-year Developmental Relief Program (DRP) which directly contributes towards the USAID Mission's SpO 1. The DRP's goal is ***to support Sierra Leone's recovery from the war by focusing on restoring livelihoods for rural households in 29 chiefdoms in some of the most badly affected districts in the country***. Over its 3-year life[1], the DRP will reestablish livelihoods -and will do so in ways that will facilitate a transition from relief to development programs. To achieve this objective, CORAD members are implementing household-focused long-term food security interventions that encompass: access; availability; and utilization - but which retain a targeted food assistance strategy[2]. Such initiatives will promote social and economic conditions that enable individuals to gain access to food, either through producing it themselves or by earning the income to purchase it. To achieve the DRP goal, two program objectives will be achieved. First, the program will improve food availability and access by target beneficiaries *(Program Objective 1).* Secondly, the health status of target beneficiaries will be improved through improved access to maternal and child health (MCH) services, and improved knowledge related to basic prevention and management of common illnesses, nutrition and dietary diversification *(Program Objective 2).* The progress made towards implementing critical DRP activities and the immediate outcomes of FY 2005 completed activities are described below.

During FY 2006, the DRP average accomplishment rate for measured indicators is over 100% with notable exceeding of targets related to: farm sizes planted to selected food and cash crops; establishing/strengthening the capacity of farmer and health-related groups; safety-net activities; rehabilitation of public health structures; training of village health workers on early referral services; outreach activities (especially immunization and post-natal care) and; children participation in growth monitoring programs. Explanations have been given for the very few cases where FY 2005 targets have been under achieved. In this case, the shortfalls have been added to FY 2006 targets. A detailed explanation of performance is presented under each program objective below. Appendix 1 sets out the Indicator Performance Tracking Table (the IPTT) which contains baseline data, FY 2004 & FY 2005 performance against targets, as well as the progress made towards achieving program-level Life of Activity (LOA) targets.

A.3 The Health and Nutrition Objective:

Under the health and nutrition objective, the DRP is implementing activities that "*will improve the health status of 15,800 food-insecure households over a 3-year period*". This objective will be achieved through; "*improved access to basic health services (IR 1.1); improved beneficiary*

[1] The DRP is entering its 3rd and last year of implementation.
[2] This targeted food assistance strategy is part of the DRP's safety-net interventions designed to address the immediate food and housing needs of vulnerable households and people in institutions (e.g., IDPs, malnourished children, pregnant and lactating mothers, etc.,).

knowledge and skills related to MCH and nutrition (IR1.2); building village-level capacities for effective planning and decision-making associated with health issues and opportunities (IR1.3); and linking these strengthened village-level organizations; and organizations who serve them with the wider governance structure (IR 1.4)."

Impact created at the program objective level will be assessed by the extent to which its focused interventions have; reduced malnutrition levels of vulnerable children; increased immediate and exclusive breastfeeding; and increased delivery safety for infants and their mothers. This impact will be assessed during the end of program summative evaluation. During FY 2005 a number of critical interventions that will directly contribute towards achieving this program objective have been implemented. Notable are those outlined under the respective IR s below.

IR 1.1: 10,800 target households have obtained access to comprehensive maternal and child health care services through Maternal Child Health Posts and or outreaches

Under IR 1.1, CORAD partners are implementing activities that will contribute towards the restoration of the functional relationships between rural populations and basic health services by raising awareness on the availability of health services and facilitating, in some cases, the provision of services at the village through outreach clinics. Complemented by repair and construction activities (under IR 1.4 below), IR 1.1 activities are necessary to restore comprehensive basic health care services that were disrupted by the decade-long civil war.

Impact at the IR level will be assessed by the significance of the contribution made by the DRP towards increasing the rate of full immunizations for children under 12 months, and prevalence and care seeking for the 3 most common morbidity symptoms (diarrhea, fever, cough and acute respiratory infections - ARI) among target communities.

FY 2005 Accomplishments:

Similarly, although impact created at the IR level will be assessed only at baseline and final evaluation, CORAD members have, during FY 2005, implemented three key interventions that will directly contribute towards achieving this IR.

1. ***208 village health workers (VHWs) were trained on comprehensive basic health, sanitation and referral services.*** A key sustainability strategy of the DRP program is to strengthen the capacity of existing health care systems. As a first step towards improving and sustaining household access to comprehensive MCH services, the DRP FY 05 program has trained 208 VHWs (at least 1 from each DRP village) on: the importance of delivering with a skilled health birth attendant and early referral in case of any sign of obstetric distress; malaria prevention and treatment; diarrhea prevention and management (especially among under 5s); basic community hygiene and sanitation; early referrals (especially for malaria, acute respiratory infections-ARI, and diarrhea – especially for under 5s) and; nutrition and the Hearth Model (focusing mainly on the essential nutrients for pregnant women, importance of exclusive breastfeeding, proper feeding of under 5s, and community rehabilitation of malnourished children). On this activity, the program

exceeded its FY 2005 target by 3%. To ensure that this training enhances the capacity of VHWs to be highly effective in providing basic MCH services and health advice to target beneficiaries, the DRP program instituted three mechanisms. First, all VHW trainings were jointly organized with the district health management teams (DHMTs) of the respective DRP districts which directly supervises VHWs. Secondly, specific targets were set for each VHW trained against which their performance will be assessed. Thirdly, a follow-up plan was agreed upon to ensure each trained VHW is adequately supervised and backstopped by DHMTs and DRP health workers.

2. ***The DRP conducted 350 monthly community clinic outreach sessions through which more than 10,000 children where immunized and more than 7,000 mothers received post-natal care services.*** To enhance the efficiency of DRP operations, outreach sessions were also used to provide basic training on household health and sanitation; nutrition and dietary diversification; as well as prevention and management of common communicable diseases. Generally, these outreach sessions have been well attended and beneficiaries frequently site the *"decreased distance to health facilities"* as an indicator of *"increased access to MCH services.* On this activity, the program achieved 80% of its FY 2005 target mainly due to reduced beneficiary participation during the second half of the FY which corresponds with the major rainy and farming season. The shortfall has been added to FY 2006 targets.

3. ***140 joint health supervisory visits were conducted.*** As a long term strategy towards enhancing the capacity of DHMTs to adequately plan and supervise public health care systems, the DRP is promoting joint supervisory visits of public health facilities and VHWs. During FY 2005, 140 such visits were conducted to ensure that: health facilities are properly staffed and stocked; WHWs are present and effective in their respective locations and; target communities maintain an acceptable level of environmental health and sanitation. A comprehensive checklist was developed to make these visits highly effective and meaningful. The checklist focuses on: availability and management of protected water sources; distance to safe water sources; water treatment; latrines (availability, distance and maintenance); community refuse management; prevalence of diarrhea, ARI, and malaria during past one month and; existence and use of referral systems. Through these visits, the DHMTs have been able to assess existing needs and action plans to meet them. At the moment, these visits are subsidized by the DRP with a plan to withdraw subsidies as DHMTs see the value-added and obligate resources to effectively conduct them (visits). On this activity, the program met 85% of its FY 2005 targets mainly because roads were impassible during the rainy season (almost the 2nd half of the FY) for the DRP staff and DHMTs to reach all DRP supported communities.

IR 1.2: ***15,800 targeted households have acquired understanding and skills related to improved health and nutrition***

Under this IR, CORAD partners are using proven approaches for increasing the knowledge and skills of mothers in a range of areas related health and nutrition. Specifically, the program seeks to increase household knowledge related to: immediate and exclusive breastfeeding, effective weaning, rehabilitation of moderately malnourished children, importance of early referrals, diarrhea prevention and management, malaria prevention, HIV & STI prevention, value of diet

diversification, hygiene and water safety, and food processing, safety and storage. To accelerate progress, the program is deliberately promoting monthly growth monitoring for children less than 5 years. During FY 2005, two activities which directly contribute towards this IR were implemented.

FY 2005 Accomplishments:

1. ***406 VHWs, and traditional birth attendants (TBAs) were trained on effective infant nutrition practices.*** This training preceded the implementation of the Positive Deviance/Hearth Model, a methodology for community rehabilitation of malnourished children. Hearth model sessions began de-worming all children and conducting a volunteer mother training to orient two key members in all aspects of rehabilitating malnourished children. VHWs and TBAs were trained to ensure their continuing capacity-building in the area of infant and child nutrition.

2. ***The DRP supported more than 240 monthly growth-monitoring sessions through which more than 15,500 children were consistently weighed and their progress monitored.*** On this activity the program exceeded its FY 2005 target by 86%. This outstanding performance can be attributed to a high degree of receptivity in communities involved in the Hearth Model, intensive sensitization on nutritional issues in all DRP communities, and active involvement of village development health committees. A representative number of children will be selected and followed up to assess their progress during FY 2006[3].

IR 1.3: ***The capacities of participants and village level organizations strengthened to enable them address health and nutrition problems and capitalize on opportunities in 250 villages***

Under IR 1.3, the DRP provides technical training and assistance to different groups and community-based organizations to enable them to continue working together to address nutritional problems and capitalize on opportunities for improving health services and nutrition in the community. Building capacity for these groups and organizations is a critical component of the DRP's sustainability strategy. Ultimately, 50% of all supported groups and organizations should, by the end of the program, have annual action plans and the capacity to continue operating as village-based groups after the project has ended.

FY 2005 Accomplishments:

Building on the progress started during FY 2004, the DRP has, during FY 2005, continued to strengthen a functional relationship between target populations and basic health care service systems by establishing/strengthening more than 200 village development committees (VDCs) – with health subcommittees. As part of CORAD's sustainability strategy, these VDCs were reestablished in accordance with GoSL protocols and mandates for VDCs. Where no VDCs existed CORAD members provided the necessary sensitization and logistical support for

[3] Because of the extraordinary performance during FY 2005, FY 2006 have been revised upwards to reflect an ambitious but realistic commitment of the DRP to maximize the effectiveness and efficiency of program operations.

communities to elect members and constitute them. Each of these committees has 12 members including representatives for the youth, women and community health workers. A series of basic business planning trainings were organized for these VDCs and other health related groups. A total of 466 groups (with approximately 7,000 members) benefited from these trainings. Seventy five percent of these groups have developed action plans to address health-related problems and capitalize on opportunities existing in their villages. On this activity, the program exceeded its FY target by 50%[4], again because of the overwhelming support the DRP has received from local leaders and local government structures.

IR 1.4: Linkages established between village-level organizations in 325 villages and other health sector institutions serving these villages to support effective governance and promote social cohesion

This IR was designed to deliberately address one of the root causes of the decade-long civil war; *marginalization of youth in local power and decision-making*. This effort is necessary to maximize social cohesion and mitigate against the recurrence of conflict. The IR focuses specifically on the VDC Health Sub-Committees and the health and nutrition clubs to ensure that they are fully and effectively represented in local decision making structures.

FY 2005 Accomplishments:

1. ***The DRP organized an average of 3 meetings per 6 months between members of VDCs/village health groups and representatives from health-related institutions serving them.*** Through these meetings, the two stakeholders target beneficiaries have had the opportunity to meet representatives from the DHMTs and discuss their problems and opportunities. As the government decentralization process continues to be strengthened it is anticipated that DRP facilitated dialogues between supported groups and policy makers will increase the capacity of DRP beneficiaries to participate in policy formulation and reform processes. This interface between stakeholders is also expected to improve accountability of local leaders to their constituents.

A.4 The Agriculture Objective

Under the agriculture objective, the DRP is implementing activities that will improve supply and access to food for 37, 400 rural-food insecure households over a 3-year period. This objective will be achieved through; *restoring agricultural production (IR 2.1); restoring storage and processing practices and facilities to reduce pre- and post-harvest losses (IR 2.2); restoring market infrastructure and market linkages (IR 2.3); building village-level capacities for effective planning and decision making associated with agricultural issues and opportunities (IR 2.4); linking these strengthened village-level organizations and organizations who serve them with the wider governance structure (1R 2.5); and providing for the immediate food and physical infrastructure rebuilding needs of vulnerable households (IR 2.6).* Impact at objective level will be assessed by the extent to which its focused interventions have; increased the value of selected farm production per household; increased percent of vulnerable households consuming minimum daily food requirements; and increased diet diversification of beneficiary households. During FY

[4] FY 2006 targets have been revised to a more realistic and ambitious level.

2005, a number of critical activities that directly contribute towards this objective have been implemented. These activities and progress made to date are outlined under each IR below.

IR 2.1: Production restored on inland valley lowland rice farms, tree farms, or upland farms for 37,400 food-insecure households

Through this IR, the DRP is facilitating the restoration of productivity for a wide range of selected crops including both food and cash crops during both the rainy and dry season. The DRP uses (FFW) to mobilize labor to clear and rehabilitate overgrown farms. Using FFW to compensate participating individuals and groups confers short-run benefits of increasing food availability, preserving their scarce cash, and protecting precious seed reserves from being consumed.

FY 2005 Accomplishments:

1. ***The DRP supported planting of more than 7,200 hectares to selected food and cash crops thereby exceeding its FY target by 6%.*** This accomplishment includes: farmers training on improved agronomic practices which led to planting more than 2,660 hectares to groundnuts, cassava and other food crops (on which FY 2005 targets have been exceeded by 2% and 69% of LOA target met); using food for work to mobilize labor that has rehabilitated nearly 2,500 hectares of formerly overgrown cocoa, coffee and oil palm plantations (FY 05 target exceeded by 22% and 66% of LOA target met); farmers training on improved agronomic practices which has led to planting of 270 hectares of commercial vegetables (54% of FY 05 target met and 30% of LOA target met)[5] and; using food for work to rehabilitate 1,800 hectares of inland-valley swamps (FY 05 targets exceeded by 8% and 54% of LOA target met). To achieve sustainable food production, the DRP program is promoting interventions that will improve both production and post-harvest management efficiencies. Consequently, productivity levels of various crops planted during FY 2005 will be assessed during the first quarter of FY 2006. Key findings will be highlighted in the FY 06 results report.

IR 2.2: Community-managed storage, drying and processing facilities rehabilitated in 490 villages

Under this IR, the CORAD DRP implements activities aimed at reducing post-harvest losses. This objective is primarily pursued through: rehabilitation of community drying and storage facilities destroyed during the war; and training farmers on effective pre-and post-harvest techniques.

FY 2005 Accomplishments:

[5] Very ambitious LOA (and subsequently FY interim) targets were set for this activity. Commercial vegetables are predominantly cultivated in only 2 out of the 30 DRP focal Chiefdoms. LOA targets were set with the assumption that the DRP could increase the scale of commercial vegetable operations in the 2 Chiefdoms and stimulate the adoption and production levels in the other Chiefdoms. This has not happened mainly because of the weak input and output markets. LOA targets for this activity will therefore need to be revised to realistic levels.

1. ***106 community-managed storage and drying facilities were rehabilitated.*** During the design stage of the DRP, it was discovered that post-harvest losses for DRP supported crops were very high (over 30%) because community-managed drying floors and storage facilities were destroyed during the decade-long civil war. During FY 2005, the DRP used food for work to mobilize local labor that rehabilitated 106 community-managed drying floors and storage facilities. Only 46% of the FY target was met primarily because of lack of imported materials for rehabilitation activities. This activity was designed on assumption that recipient communities would be able to contribute all the necessary inputs for rehabilitation (including locally available materials and imported materials e.g., cement) obtained through other collaborating projects which had been the case during previous emergency programs. Based on this assumption, CORAD members did not budget for imported materials, which most communities have not been able to afford in the absence of supplies from collaborating interventions. The current levels of accomplishments are therefore based on the DRP's use of food for work to rehabilitate facilities where target beneficiaries have been able to contribute imported and locally available materials.

IR 2.3: Access to local markets reestablished through rehabilitation of roads and infrastructure in 203 villages

Interventions under this IR are aimed at restoring agricultural market systems that were disrupted during the war. Through repairing farm-to-market roads, rehabilitation of market facilities, reestablishing weekly markets and provision of market information, the DRP hopes to attract buyers to beneficiary communities. Expanded market opportunities will then stimulate increased production for household consumption and sale to generate income for other household requirements.

FY 2005 Accomplishments:

1. ***203 kilometers of farm-to-market roads have been rehabilitated using food for work.*** In order to improve access by target beneficiaries to viable input and output markets, the DRP is using FFW to mobilize labor to rehabilitate critical farm-to-market roads. During FY 2005, the DRP supported the rehabilitation of 203 kms thereby exceeding its FY target by 35%. To date, the program has met 66% of its LOA target on this activity. Therefore, despite the outstanding FY 05 performance, program LOA targets are still ambitious enough and commensurate with obligated and committed resource levels.

2. ***Five Market facilities and 16 regular markets were reestablished.*** Using FFW, the DRP mobilized labor to rehabilitated 5 market facilities and reestablish 16 regular markets which were previously accessible by target beneficiaries before the war. On the rehabilitation of market facilities, the program met 14% of its FY target and 10% of the LOA target. Similarly, 76% and 21% of FY 05 and LOA targets on regular markets have been met respectively. As mentioned under IR 2.2 above, the under achievement on these activities is primarily due to the inability of target communities to contribute all the necessary locally available and imported materials. The DRP only contributes FFW to compensate used labor.

IR 2.4: ***The capacities of participants and community-based groups strengthened to enable them to address agricultural problems and capitalize on agricultural opportunities in 410 villages***

IR 2.5: ***IR 2.5: Linkages established between village-level organizations and other agricultural sector institutions to support effective governance and promote social cohesion in 240 villages***

Under IRs 2.4 and 2.5, the DRP provides technical training and assistance to various groups and community based organizations to enable them continue working together to address agricultural problems and capitalize on opportunities for improving production and marketing. Building capacity for these groups and organizations is a critical component of the DRP's sustainability strategy. Ultimately, 50% of all supported groups and organizations should, by the end of the program, have annual action plans and the capacity to continue operating as village-based groups after the project has ended.

FY 2005Accomplishments:

1. ***More than 200 village development committees and farmers groups received training on basic business planning (approximately 40% of these groups have developed annual action plans to address agricultural-related problems and capitalize on existing opportunities.***

2. ***The DRP organized an average of 3 meetings per 6 months between members of VDCs/village groups and representatives from agricultural-related institutions serving them.*** Through these meetings, the two stakeholders target beneficiaries have had the opportunity to meet representatives from the district agricultural departments and discuss their problems and opportunities. As the government decentralization process continues to be strengthened it is anticipated that DRP facilitated dialogues between supported groups and policy makers will increase the capacity of DRP beneficiaries to participate in policy formulation and reform processes. This interface between stakeholders is also expected to improve accountability of local leaders to their constituents.

IR 2.6: ***Immediate food and physical infrastructure rebuilding needs of 18,239 vulnerable households are addressed***

Through IR 2.6, the DRP provides safety net food and material assistance to vulnerable households, particularly those who return to reestablish their farms and those resettled with few if any assets. Without assistance, these households remain vulnerable to any spurious local disasters such as fires, wind, and floods, all very common throughout DRP target districts.

FY 2005Accomplishments:

1. ***72 public health structures (wells and pit latrines) were rehabilitated using FFW to improve beneficiary access to safe water and sanitation.*** On this activity, the program exceeded its FY target by more than 90% and the LOA target by 57%. Subject to availability of resources, LOA targets on this activity may need to be revised.

2. ***More than 8,800 individuals were fed through vulnerable group feeding activities.*** On this activity, the program exceeded its FY 2005 target by 4 % and its LOA target by 12%.

3. ***More than 2,000 houses were rebuilt (or rehabilitated) using food for work (thereby meeting 100% of the FY target and 67% of the LOA target).*** This activity benefited more than 14,000 members of vulnerable households.

B. MONITORING & EVALUATION, AUDITS AND STUDIES

At the beginning of DRP implementation and as planned, an autonomous M&E Coordination Unit was created under the management of World Vision to coordinate monitoring and evaluation activities for the CORAD. Specifically, the M&E Coordination Unit was created with a mandate to perform 4 strategic functions: (1) to standardize CORAD's approach to M&E; (2) to coordinate program analytical efforts; (3) coordinate data collection and reporting processes for the Coordination and Compliance Unit; and (4) provide on-going M&E TA to all CORAD members.

During FY 2005, this unit has continued to strengthen the M&E systems of CORAD partners by reviewing and re-adjusting data collection methods and tools to maximize the quality of performance data used to compile annual results reports. To improve performance measurement, the consortium instituted a quarterly reporting mechanism that allows implementing partners to collect performance data that facilitates evidence-based decision-making and accountability. Through the quarterly reporting mechanism, DRP partners have been able to assess performance against monthly and quarterly targets; track, document and share lessons learned; assess and document the immediate outcomes of completed activities; as well as identify and jointly solve problems and constraints faced during the implementation of key activities. These reports are compiled by individual DRP members and consolidated by the M&E Unit into a program-level performance report. During FY 05 CORAD partners have also initiated annual rigorous data quality assessments (DQAs) used to verify information contained in partner-level results reports. These DQAs are keyed to USAID ADS policies and standards.

Apart from coordinating the collection of information to track IR success, CORAD is also responsible for field level monitoring of interventions to ensure that each consortium member has the operational capacity to accomplish planned targets. This function is carried out by the CARE Coordination and Compliance Unit (CCU) who have a team of staff with specializations in health, agriculture, food management, finance and administration. The CCU staff are integral members of the various technical working groups and also undertake regular field monitoring visits to the respective offices and operational field sites of all CORAD agencies. During FY 2005, the CCU has continued to conduct quarterly monitoring and site visits focusing mainly on the progress made by DRP partners to implement key activities; as well as any discernable impact of completed activities. Reports arising from the visits set out CCU observations and critical areas for improvement. Feedback from CORAD members at a recent Steering Committee meeting suggests that field staff are generally appreciative of this monitoring arrangement which provides an additional perspective on DRP field activities. During FY 2005, the CCU also undertook a Finance and Administrative check of all CORAD member activities for Year 1

operations (described in budget as year end internal assessment). This exercise examined CORAD member compliance with adoption of standard USAID/FFP finance, administration and commodity management procedures. Subsequent follow up visits by the CCU examined specific areas for improvement among all CORAD members and confirm that good progress has been made in up-grading systems to levels that are consistent with expected standards.

B. 1 Monitoring Risks and Assumptions

In the process of designing the DRP a number of risks and assumptions were identified that could affect implementation of the program. In the DRP program document each particular risk and assumption was identified and strategies proposed for addressing these in the event that it was likely to negatively impact on achievement of stated objectives and results. Each of these risks and assumptions is reported on through the DRP internal quarterly reporting process. As of the end of FY 05 there had been no major deviation from assumptions earlier made and no need to adjust any program approach to address the particular issues noted. One notable exception was the need to effect an internal budget re-alignment among the detailed budgets of various CORAD members to reflect changes in program costs related to operational fuel increases/associated costs in Sierra Leone (arising from global oil increases over the FY). These adjustments were carried out in accordance with guidance provided by the USAID/FFP program Agreement Officer.

In early FY 2006 the DRP will be engaging the services of an external consultant to examine in detail many of the stated risks and assumptions, with a particular focus on those which relate to potential for reversion to an emergency situation in DRP areas. The output of this consultancy will improve the emergency-response capacity of CORAD to strategically respond to any potential humanitarian situation within its development relief mandate.

B.2 Environmental monitoring

Appendix 2 presents the FY 05 Environmental Status Report which gives an update on environmental monitoring commitments of the DRP as of the end of the first and second years of program implementation.

APPENDIX 1

CORAD DRP FY 04 INDICATOR PERFORMANCE TRACKING TABLE (IPTT) SHOWING END OF YEAR 1 RESULTS

APPENDIX 2
ENVIRONMENTAL STATUS REPORT

APPENDIX 3
COMMODITY MANAGEMENT REPORT FOR FY 05