

EUROPEAN COMMISSION HUMANITARIAN AID OFFICE (ECHO)

Advisor Evaluation

ANNEX IV TERMS OF REFERENCE

FOR THE EVALUATION OF ECHO'S 2000 AND 2001 GLOBAL HUMANITARIAN PLANS IN THE DEMOCRATIC REPUBLIC OF CONGO

ECHO/EVA/210/2001/01004

Name of firm: Germax Gerli GmbH Name of consultant: Michael Kunze

Global Plan to be evaluated

• Region and country: **DEMOCRATIC REPUBLIC OF CONGO**

• Period covered: 2000 - 2001

• Themes to be evaluated: **Overall approach to the country and synthesis of the evaluation**

- Decision(s):
- ECHO/ZAR/210/2000/01000 for an amount of 20 MEURO in 2000
- ECHO/COD/210/2001/01000 for an amount of 35 MEURO in 2001

Introduction

The Democratic Republic of Congo, one of the largest African countries by area, has for several years been torn by fighting between various factions, many of whom are backed by outside forces. At the same time the DRC is itself host to a certain number of refugees who have sought a hopefully slightly less unsafe place of refuge than their own neighbouring countries.

This means that a country long wracked by economic mismanagement has added to its woes by widespread fighting and disruption, rendering even more acute and widespread the humanitarian crisis.

In 2000 ECHO approved a global programme of 20 M€ for DRC, while in 2001 the figure has been increased to 35 M€ The plans have covered defined sectors for implementation in specific regions, and have been planned to take into account other Commission funded activities in government held areas. The most important activities provide basic health cover – the previously well-organised state system having ceased to exist – in rebel held areas – other Commission funds do the same in government areas – and nutritional aid. There is, however, provision for surveillance, co-ordination and rapid response programme to be able to react as required through most of the country, and aid to refugees – both those who have come to DRC from Angola as well as those now able to return from across the river in the Republic of Congo.

The complexity of the humanitarian situation is more than reflected in the political situation, which has obvious effects on the logistical implementation of aid. It is often impossible to cross from one side of a frontline to the other, however well intentioned the mission.

If the government, aided by Angolan and Zimbabwean official forces, generally has control in the west and south, in the north and east there are three separate rebel movements, backed by either Ugandans or Rwandese. The wastage of natural resources and established lines of communication and trade is further increased by uprisings among specific tribes or war-leaders in what has never been a heterogeneous country.

Previous cease-fire agreements brokered either regionally or with UN – backing have not been applied, although there is some hope that the former President of Botswana may now be able to have some effect.

It is therefore essential that any evaluation not only enumerate the vast humanitarian needs but also take into account the different regions and the logistical problems applicable. It should also make proposals to ensure that, after coordination with other Commission services and donors, as far as practicable aid is distributed to all those in need.

Consultant's role

During the course of the mission, whether on the ground or while the report is being drawn up, the consultant must demonstrate common sense as well as independence of judgement. He must provide answers that are both precise and clear to all points in the terms of reference, while avoiding the use of theoretical or academic language.

This evaluation is part of a global evaluation that should be carried out by a team of 4 experts with both good experience in the humanitarian field and in the evaluation of humanitarian aid. These experts must agree to work in high-risk areas. Solid experience in relevant fields of work to the evaluation and in the geographic area where the evaluation takes place is also required.

The team members are responsible for the themes as follows:

Mr Michael Kunze: team leader, overall approach to the country, responsible for the synthesis report

Ms. Martine Logez Casaux-Bussière: nutrition needs and how to meet them

Mr Olivier Barthès: health needs and how to meet them

Mr Friedrich von Massow : drug procurement, distribution and tarification systems and their appropriateness to the current socio-economic environment

Purpose of the evaluation

The Democratic Republic of Congo is roughly speaking divided into two parts: the western and southern, government-controlled part and the eastern and northern part, which is in the hands of different rebels movements. The dividing lines between and inside the regions continue to be hotly contested. There are therefore different needs in the two areas and the evaluation should be adapted to this situation.

The purpose of this evaluation is set out under points 4.1 to 4.5 below:

to assess the appropriateness of 2000 and 2001 ECHO Intervention Plans in favour of the Congolese population, and the level at which the programmes in the various sectors of activity concerned has been implemented. This should take into account assistance being provided to specific areas of DRC by other Commission services.

to assess the degree to which the objectives pursued have been achieved and the effectiveness of the means employed;

to quantify the impact of the Global Plans in terms of outputs;

- o to analyse any possible link between emergency, rehabilitation and development and the areas in which this may be feasible.
- o to establish precise and concrete proposals on the future of ECHO's funding by sector and activities where ECHO's aid can still be deemed both necessary and capable of being implemented, with a view to improving the effectiveness of future operations.

Specific evaluation objectives

To this end, the consultant will develop the issues below for **his own sector** (**defined in chapter 3**), and cover all points in his evaluation report. He will only take into account the new facts since the beginning of the global plans. These specific issues must be studied in each sector evaluated as well as in the synthesis report.

A brief description of the Global Plans and analysis of their context:

- the political and social-economic situation, the humanitarian needs and, where existing, any local capacities available to respond to local needs.
- The analysis of the country's present condition in political and socioeconomic terms, should include an overview which permits to situate the
 Global Plans financed by ECHO. This analysis should be both quantitative
 and qualitative and contain information on the various economic sectors
 such as social and economic policies in force, the levels of income and its
 distribution among the population, sanitation and medical policies, access to
 foodstuffs, etc. An assessment should be done of the specific humanitarian
 context in the various parts of the country by taking into account factors
 such as the volatile situation, the lack of infrastructure, dependency on air
 transport, and the high overhead costs for the delivery of assistance.

It would also be interesting to analyse how humanitarian organisations can best interface with rebel movements in the region in general.

- The second part of the analysis should be devoted to identifying vulnerable groups and localising them, where possible, as well as giving an estimate of their needs by category. This analysis should also indicate sectors of intervention in order to allow the Office to concentrate on specifically targeted beneficiaries (very vulnerable groups, IDP's, etc).
- The evaluation should also permit an appreciation of the capacities both of the local population and of local public authorities to deal with problems pinpointed.

Analysis of the relevance of the objectives of the Global Plans, of the choice of the beneficiaries, and of the deployed strategy, in relation to identified needs. In the government controlled areas specific attention should be paid to ECHO's involvement in

the health sector and its assistance to the mostly long-term IDP and refugee population. This analysis should address the problem of using humanitarian assistance in a protracted situation to deal with what are structural problems. Regarding the eastern and northern part of the country an analysis of the appropriateness of ECHO's approach for nutritional as well as health programmes should be undertaken. Linked to household food security, the approach in the delivery of non-food relief items to displaced and other very vulnerable groups should be studied.

Examination of the co-ordination and coherence for each of the themes concerned with:

- other donors and international operators, as well as with local authorities.
- other European Commission services that are operating in the country with projects that are similar or related to those included in the Global Plans. The projects identified should be described with their cost and with the aid elements they include, and an analysis made as to whether the current split of activities is optimal or should be amended;

Analysis of the effectiveness of the Global Plans in quantitative and qualitative terms for each of the sectors;

Analysis of the cost-effectiveness of the Global Plans. The cost-effectiveness has to be established, notably, on the basis of the quantitative elements that have been identified under point 5.4.

Analysis of the efficiency of the implementation of the Global Plans. This analysis should cover:

- the planning and mobilisation of aid;
- the operational capacities of the partners;
- the strategies deployed;
- major elements of the Global Plans such as: staff, logistics, maintenance of accounts, selection of recipients, suitability of the aid in the context of local practices, etc.;
- management and storage of merchandise and installations;
- quality and quantity of merchandise and services mobilised and their accordance with the contractual specifications (including packaging conditions, the origin of merchandise and the price);
- the systems of control and auto-evaluation set up by the partners;
- given the restrictions imposed by the various authorities on the use of currencies, the effect of this on the purchase and price of foodstuffs;
- the effects of the difficult operating environment in the various parts of the country.

Analysis of the impact of the Global Plans. This analysis should be based on the following non-exclusive list of indicators, bearing in mind that consultants might well add others:

- contribution to the reduction of human suffering;
- creation of dependency on humanitarian aid;
- effect of humanitarian aid on the local economy;
- effect on the incomes of the local population;

- effect on health and nutritional practices;
- environmental effects;
- impact of humanitarian programmes on local capacity-building

Analysis of the visibility of ECHO.

Analysis of the integration of "gender issues" (social, economic and cultural analysis of the situation of both women and men) in the intervention.

Analysis of the measures taken to assure the security of aid workers, both ex-patriate and local: means of communication placed at their disposal, specific protection measures, emergency evacuation plan;

Analysis of the viability of the Global Plans.

- On the basis of the results of the evaluation, the consultant will draw up operational recommendations on the needs of a humanitarian nature that might be financed by the European Community. These recommendations may also cover other domains than humanitarian aid, such as development co-operation. In this context the recommendations should establish specific proposals on:
 - the way forward for ECHO as an important humanitarian donor and the linkage with other Commission instruments currently utilised in the country or which are eligible to be so.
 - capacity for phasing out / handing over to other donors in certain sectors/regions.

Analysis of the methodology of programme planning used by ECHO for the Global Plans should be included in the synthesis report;

A drawing up of "lessons learned" in the context of this evaluation must also be provided. The ''lessons learned'' must include the analysis of the role of ECHO and other services of the Commission in the decision making process and monitoring.

Working method

For the purpose of accomplishing his tasks, the consultant may use information available at ECHO, via its correspondents in the country, in other Commission services, the Commission Delegation in Kinshasa and in Nairobi, ECHO partners on the spot, aid beneficiaries, as well as local authorities and international organisations.

The consultant will analyse the information and incorporate it in a coherent report that responds to the objectives of the evaluation.

Timetable

The evaluation will last 52 days, beginning with the date of signature of the contract by the last party and ending no later than **31 October 2001** with the acceptance of the final reports.

Phases of the evaluation

A briefing at ECHO will be held from the 3rd till the 6th of July 2001 with the responsible staff during which all documentation necessary for the mission will be provided. The day after the consultant will submit by e-mail to ECHO "Evaluation" a concise report of the

briefing listing any clarifications to the terms of reference which will have to be taken into consideration during the mission;

A briefing with the Commission delegation in Kinshasa and in Nairobi.

The mission to the area concerned will last maximum 30 days starting the second week of <u>July 2001</u>. The consultant must work with the Commission Delegation in Kinshasa and in Nairobi, as well as with the ECHO experts throughout DRC, ECHO partners, local authorities and international organisations and other donors;

The consultant should devote the first days of his mission to the areas concerned to preliminary and preparatory discussions with the ECHO expert and local partners, in Kinshasa and then in each region visited. A visit to the E.C. Delegation in Nairobi shall also take place during the first days of the field mission. It may be necessary to reach certain regions after travel through a third country.

The last day of the mission in each area should be devoted to a discussion with the ECHO expert and partners for observations arising from the evaluation. The team will discuss the schema and the content of the synthesis report;

The draft report should be submitted by electronic transmission on the 20th of August 2001 (Word 7.0 format or a more recent version) to ECHO "Evaluation" in Brussels before its presentation and discussion during the debriefing: this is to ensure that the relevant ECHO operational unit can provide prior written comments on the draft for discussion during the debriefing;

A debriefing at ECHO of a maximum of 2 days will take place on 30 and 31 August 2001; Once the necessary amendments to the draft report, have been incorporated, the revised text will be resubmitted to ECHO "Evaluation", which should mark its agreement within 15 days or request further amendments;

Submission of the final report which should take account of any remarks, which may be made after the submission of the revised report.

Report

The evaluation will result in the drawing up of 4 reports (1 for health, 1 for nutrition, 1 for drug procurement and 1 synthesis report of the evaluation) written in English or French, of a maximum length of 15 pages including the evaluation summary which should appear at the beginning of the report.

The evaluation report is an extremely important working tool for ECHO. The report format appearing under points 9.2.1 to 9.2.5 below must, therefore, be strictly adhered to:

Cover page

- title of the evaluation report:
- period of the evaluation mission;
- name of the evaluator;
- Indication that the report has been produced at the request of the European Commission, financed by it and that the comments contained therein reflect the opinions of the consultants only.

Table of contents Summary (see form in annex)

The evaluation summary which should appear at the beginning of the report.

EVALUATED GLOBAL PLAN (5 LINES MAX) DATE OF EVALUATION:
CONSULTANT'S NAME:
PURPOSE & METHODOLOGY (5 lines max.):
MAIN CONCLUSIONS (+/- 20 lines)

- Relevance
- Effectiveness
- Efficiency
- Co-ordination, coherence and complementarity
- Impact & strategic implications
- Visibility
- Horizontal Issues

RECOMMENDATIONS (+/- 20 lines) LESSONS LEARNED (+/- 10 lines)

The **main body** of the report should start with a section on the method used and should be structured in accordance with the specific evaluation objectives formulated under point 5 above (10 pages maximum).

Annexes

- list of persons interviewed and sites visited;
- terms of reference;
- abbreviations;
- map of the areas covered by the operations financed under the Global Plans.

If the report contains confidential information obtained from parties other than the Commission services, this information is to be presented as a separate annex. The report must be written in a direct and non-academical language. Each report shall be drawn up in 20 copies and delivered to ECHO. The report should be submitted with its computer support (diskette or CD ROM, Word 7.0 format or a more recent version) attached.

SUMMARY FRAMEWORK FOR THE EVALUATION OF A GLOBAL PLAN

The summary should provide clear and concise information about the key findings of the evaluation. Its structure must follow the main criteria commonly used for the management and evaluation of aid interventions. All subsections must be addressed. If not, a justification should be given.

To better understand this document, details on each criterion are provided in the attached annex.

Subject of the evaluation:
Country of operation (or region):
Operation contract n° (<i>Decision</i> n°):
Dates & duration of the operation (period covered):
Amount:EURO
Sector(s) concerned and description (max. 5 lines):

DESCRIPTION OF THE EVALUATION

Dates for the evaluation (from - to):

Name of consultant:

Purpose & methodology (5 lines max.)

CONCLUSIONS (+/- 25 lines)

Relevance

- Needs assessment, identification of beneficiaries, problem analysis, methods used for needs assessment.
- Understanding of the context and analysis of the humanitarian situation .
- Relevance and feasibility of the intervention strategy: general objective(s), project purpose, results, activities and means, timetable, external factors, community participation, protection systems,

Effectiveness

- Analysis of the attained results and the level of achievement of the project's purpose; adaptation to changes in the situation.
- Cost-effectiveness.

Efficiency

- Partner's operational management, organisation and implementation (technical competence, staff, effectiveness of monitoring and co-ordination), quality of products.
- Administrative management (costs, budget management).

Co-ordination, coherence and complementarity

- Coherence et complementarity with interventions of other donors and Commission services.
- Co-ordination arrangements in the field (other humanitarian agencies, local authorities, member states and others, co-operation with ECHO).

Impact & strategic implications

- Analysis of the operation's impact (measures utilised)
- Analysis of other effects, including sustainability (dependence, environment, gender, ...).
- Perspectives, link between emergency, rehabilitation and development.

Visibility

- Visibility (beneficiaries, partners, local authorities)
- Means used and effects.

Horizontal issues

Gender; LRRD; human rights; security of humanitarian staff.

RECOMMENDATIONS (+/- 20 lines)

LESSONS LEARNED (+/- 10 lines)

SUMMARY FRAMEWORK FOR THE EVALUATION OF A GLOBAL PLAN² ANNEX

Relevance

(Appraisal of the intervention's objectives. Justification of objectives in relation to the problems and needs)

Needs assessment

Identification of the beneficiaries (type, number, localisation, socio-economic information, ...) ?

Description of the beneficiaries' problems? Analysis of their needs?

Identification of the priority needs (in relation to the political and humanitarian context, and to ECHO's intervention strategy)?

Methods used to assess the needs (participatory consultations, norms used to identify humanitarian emergency, technical assessment, ...)?

Context and humanitarian situation

Understanding of the country's overall situation (political, social, economic, security) and constraints?

Knowledge and analysis of the humanitarian situation?

Knowledge of the national authorities' strategies (in particular concerning disaster preparedness)?

Partner's experience?

Knowledge of the local capacity to respond to the humanitarian situation?

Description of other interventions addressing the humanitarian situation?

Co-ordination, coherence et complementarity (Efficient account taken of connected interventions)

<u>Coherence</u> and <u>complementarity</u> with present and future interventions of other donors? other Commission services?

Organisation set in place for field <u>co-ordination</u>: ministries and local authorities, other humanitarian agencies (UN, NGOs), direct link with beneficiaries, co-operation with ECHO correspondent and delegation, ...?

Effectiveness (level of achievement of the intervention's objectives)

Results

Attained results (qualitative et quantitative)?

Results' contribution to the project purpose (beneficiaries reached ? means of measurement, ...) ?

Account taken of the situation's evolution? Effectiveness of modifications?

Project cost in comparison with the level of achievement of the project purpose?

Monitoring

Measurement systems put in place?

Factors of success/ failure

Description of success strategies?

Analysis of weakness and recommendations?

Efficiency (Economic quality of the transformation of means into results and achievements)

Partner's operational management / organisation & implementation

Technical competence: planning (respect of timetable, management system, ...), mobilisation capacity? Logistics management? Appropriate quality and quantity of products delivered? Transport, distribution and storage systems ...? Respect of local habits? Technical aspects specific by sectors?

Personnel: Competence of employed personnel? Organisation in the field? Personnel security measures? Communication?...

Monitoring : quality of the monitoring ? Auto-evaluation ? Quality control ? Quality of the reporting ? ...

Co-ordination : quality of the co-ordination ?

Administrative management

Costs?

Budget management?

Supply policy?...

Impact & strategic implications (*Effects deriving from the intervention*. *Changes in the situation after the intervention*)

Impact

Analysis of the impact? Measures used?

Contribution to the reduction of human suffering?

Dependence on humanitarian aid?

Effects on the local population's income?

Effects on gender aspects? environment? strengthening of local capacities? Other effects?

Perspectives & viability

Perspectives for the future?

Emergency, protracted crisis, rehabilitation?

Opportunity to initiate development operations?

Respect of the Madrid Declaration principles?

Visibility (Means of communicating about ECHO's presence and actions)

Means used?

Visibility » achieved?

Horizontal issues (...)

Gender: were the gender aspects appropriately taken into account in the design phase and during the implementation of the project?

LRRD:

Human rights:

Security of the humanitarian staff:

RECOMMENDATIONS (+/- 20 lines)

LESSONS LEARNED (+/- 10 lines)

Annex 2 – Work Programme and List of Persons interviewed

Namo	Designation / Organisation/Legation
Name	Designation / Organisation/Location
3 – 6 July / European Commission	•
Mr Steffen Stenberg-Jensen	Head of Unit ECHO 1 Evaluation Advisor. ECHO Evaluation Unit
Ms Jaqueline Coëffard Mr Richard Lewartowski	
Ms Maïte Orens Teleki	Evaluation Administrator, ECHO Evaluation Unit
Mr Richard Hands	Evaluation Assistant, ECHO Evaluation Unit
Ms Evelyne Soetewey	Desk Officer DR Congo, ECHO 1 ECHO – IRM Unit
Mr Gatta Bruno	Desk Officer DR Congo, DG-Dev
Mr Raphael Aguirre	AIDCO, Co-ordinator
Mr Ricardo Gambini	Desk Social Development, EuropeAid Directorate C
Mr J. Cassanova	EuropAid –C4, Desk Officer for DR Congo
Mr J.P d'Altilia	General Manager AEDES (EU PATS II Programme)
	n in Kinshasa / ECHO technical assistant
Mr Sprietsma	Head of Delegation, EC Delegation Kinshasa
Mr Francois Goemans	ECHO Country Coordinator for DR Congo, Kinshasa
9 – 13 July / RDC, Kinshasa	Lorio Godini y Goordinator for Dix Gongo, Kinanasa
Ms Janet A Schulman	USAID, Supervisory Program Officer
Mr Charles Tobin Vaughan	USAID / DAI, Team leader
Ms Nancy Bolan	USAID
Mr Martin Schelman	USAID, Advisor
Mr Alex Dupré	USAID
Dr Léonard Tatsoba	WHO, Representative
Pr Ngo Bebe	WHO, Administrator, planning, evaluation
Dr François Jung	EC PATS II, Technical Assistant (AEDES)
Dr Prosper Mirindi	EC PATS II, Medical Doctor, public health
Mr Maurizio Buresti	EC PAR, Team Leader
Ms Heli Gerlach	GTZ Project Manager, project SSP Kenge
Mr J. C Mubalama	UNICEF Representative
Ms Claudine van Remoortere	UNICEF, Administrator in charge of monitoring and evaluation
Ms Céline Carré	ACF
Ms Shannon Strother	ACF
Amivi Noukpoape	Nutrition, ACF
Mr Baert De Poorter	MSF B, Medical Co-ordinator
Mr Alain Kassa	MSF B, Head of Mission
Dr Malemba	Directeur de cabinet du Ministre de la santé
Dr Audace Makamba	Chef du bureau de Planification et des études, ministère de la santé
Dr Jacky Singa	Conseiller médical auprès du Ministre de la santé
Mr Pietro Balero	Italian Embassy
Ambassador	Belgium Embassy
Mr Bernard Sexe	French Embassy
Mr José Pita-Gros	WFP, Directeur Adjoint
Mr Foday Turray Mr Alexandre Manunga	WFP, Program Manager
Dr David Nku	WFP, Program Administrator Médecin directeur Service médical de l'Armée du Salut, Kinshasa
Frère Luc	MEMISA, Kinshasa
13 – 15 July / Goma, North Kivu	INICINIO73, INIISHASA
Mr Christian Dalmais	ECHO Coordinator Goma, Eastern DRC
Ms Angela Schwartz	GAA, Project manager for Bunia
Mr Patrick Evrard	GAA, Floject manager for Burlia GAA, Head of mission
Ms Annet Bok	ASRAMES, Director
Dr Jannes van der Wijk	ASRAMES, Technical Assistant
Ms Marie Rose	ASRAMES, Pharmacist
Mr Mirindi	UNICEF / Representative
16 – 17 July / Uvira, South Kivu	
Ms Vitoria Lac	ACF, Medical co-ordinator
Ms Sophie Bruas	ACF, Head of mission
Mr Claude Chigangu	ACF, Counterpart nutrition
Mr Prosper Lfungula Mutuza	RCD, Territory administrator
Mr N'Tango Turubika	Médecin chef de zone Uvira
Mr Serge Bisserbe	AMI, Medical co-ordinator
Mr Cyril Nogier	AMI, Desk Officer
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Name	Designation / Organisation/Location
18 – 19 July / Bukavu, South Kiv	
Dr Roungyambo	MIP, Bukavu
Mr Abder Chatmi	Malteser, Medical Co-ordinator
Sœur Maria Masson	BDOM
Dr Martial Kanyono	BDOM, Pharmacist
Mr Desmond Kashosi	APAMESK, Pharmacist
Mr Jacques Birukuruku	FHI, Project Assistant
Mr Niel Olstein Frère Pablo Parniagua	FHI, Project Co-ordinator Caritas Espagne, Project Co-ordinateur
Mr Claude Jibidar	WFP, Est DRC, Co-ordinator South Kivu
Ms Gertrude Modekereza	WFP, Assistant
Ms Dominique van Zuylen	Save the Children UK, Emergency Support Officer
Mr Simon Brooks	ICRC, Head of the sub-delegation South Kivu
Mr Horst Gebbers	Pharmakina, Director
19 – 20 July / Kalémie, Katanga	
Mr Christian Floribert Kilanga	RCD, Governor
Mr Achille Garavelli	ALISEI, Medical Co-ordinator
Ms Lucia Bramante	ALISEI, Medical Doctor
Mr Enzo Campanello	ALISEI, Logistician
Mr Lorenzo Groppo	ALISEI, Logistician
Mr Stephania Del Rosso	ALISEI, Mid-wife ALISEI, Administrator
Ms Raffaella Longis	·
20 – 21 July / Kasongo, Maniema	
Dr Danny Lunda Ngandu Mr Gérard Dandoy	FOMETRO, Medical Co-ordinator FOMETRO, Logistic Co-ordinator
Mr Raphael Luka Djedi	HGR Kasongo, Administrator
Mr Placide Zakuani Assani	Société Civile du Maniema, Président
Mr Bakari Kayembe	Commission diocésaine Justice et Paix, General Secretary
21 – 24 July / Kindu and Kalima,	
Mr John Kutumbakana	OXFAM, Project Engineer
Mr Gilbert Masumbuko	OXFAM, Project Manager
Ms Alice Mabaya	OXFAM, Sanitation Health Education
Mr Sylvain Madiela	REGIDESO, General Manager Kindu
Mr Huseini Jafari Ms Bananga Ifoto	REGIDESO, Commercial Director Kindu REGIDESO, Civil society Committee member
Mr Rosette Lufuma	REGIDESO, Civil society Committee member
Mr Fançois Massandi Kitembele	RCD, chef de cité
Dr Sale	MIP, Maniema
Dr Rwende	MCZ, Kindu
Ms Laureen Coonley	MERLIN, Medical Co-ordinator Maniema
Ms Joanne Watson Dr Gabi	MERLIN, Program Co-ordinator Maniema MCZ, Kalima
24 – 25 July / Goma, North Kivu	MO∠, Naiiiia
Mr Roy Maheshe	OXFAM, Program Co-ordinator eastern DRC
Mr Christian Dalmais	ECHO Technical Assistant
Mr Patrick L'Hôte	ICRC, Head of Mission, Eastern DRC
Ms Suzan	MERLIN, Nutritional Project Officer
25 – 26 July / Bunia, Orientale	[NID II .
Dr Biliatre	MID, Ituri
Mr Nuru Bendonne Mr Mohammed Selemani	OXFAM, Project Engineer REGIDESO Bunia, General Manager
Dr Marian van der Snoek	MEDAIR, Medical Co-ordinator
Ms Yane Lyse Golay	MEDAIR, Project Manager
Ms Ellen Tavernier	MEDAIR, Isiro
Mr Daniel Masumbuku Kasereka	Nyankunde Central Pharmacy
Ms Angela Schwarz	GAA, Project Manager
Mr Jean-Pierre Duquesnoy	GAA, Logistic Co-ordinator
Mr Eugène Kasongo	GAA, Program Manager
26 – 28 July / Aru and Ariwara, C Dr Alfred Kinzelbach	MALTESER, Project Co-ordinator Ariwara
28 – 30 July / Isiro, Orientale	IVIALTEDEN, FTUJECT CU-UTUIHATUI AHWATA
Mr Vital Budu Tandema	FLC, commissaire de district
Dr Joseph	MID, Bas Uélé
Dr Lopay	MCZ, Laybo
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Name	Designation / Organisation/Location
30 – 31 July / Gbadolite, Equateu	ır
Mr Jean-Pierre Bemba	President of MLC/FLC
Ms Catherine E. Famsworth	USAID, Disaster Relief Co-ordinator
Mr Elo Yakpwende	FLC, State Secretary Public health
Dr Alexis Bulankete	FLC, Medical Advisor
Ms Cécile Bulankete	FLC, State Secretary women and social affairs
Dr Sotho Gesenwni	Ordre des médecins (MLC territory)
Mr Olivier Kamikatu	Director of cabinet, JP Bemba
Mr Armand Borrey	MLC Representative to EU in Brussels
Dr Assabi	General Secretary MLC
Dr Iluya Lubele	HGR Gbadolite, Director
Dr llonga	MCH Gbadolite
Ms Tanya	MSF B
31 July - 2 August / Gemena, Eq	
Mr Mbawa	FLC, Directeur du territoire
Mr Alexis Makweta	CDI Bwamanda, Deputy Project Manager
Dr Fançois Xavier	CDI Bwamanda, Medical Co-ordinator
Sœur Jacqueline Verbunt	CDI Bwamanda, Public Health Advisor
Dr Nyamowala	MEMISA / CDI, Program Co-ordinator Humanitarian aid
2 – 3 August / Kisangani, Equate	
	MSF B, PUC Co-ordinator
	Handicap International team
3 – 5 August / Goma, North Kivu	
Mr François Goemans	ECHO Technical Assistant, West DRC (Debriefing session)
Mr Christian Dalmais	ECHO Technical Assistant, East DRC (Debriefing session)
Mr Jean Charles Dupin	OCHA, Principal Humanitarian Advisor
5 – 7 August / Nairobi, Kenya	
	nal support office, EC Delegation
Mr Gary Quince	Head of Delegation, EC Delegation Nairobi
Mr Johan Heffinck	Regional Coordinator ECHO – Great Lakes Region
Mr Alessandro De Matteis	Regional Food Expert ECHO – Great Lakes Medical Expert – Great
	Lakes Region
30 - 31 August / Brussels - Debi	riefing in ECHO Evaluation Unit
Mr Steffen Stenberg-Jensen	Head of Unit ECHO 1
Ms Jaqueline Coëffard	Evaluation Advisor, ECHO Evaluation Unit
Mr Richard Lewartowski	Evaluation Administrator, ECHO Evaluation Unit
Ms Maïte Orens Teleki	Evaluation Assistant, ECHO Evaluation Unit
Mr Richard Hands	Desk Officer DR Congo, ECHO 1
Mr J. Cassanova	EuropAid –C4, Desk Officer for DR Congo
Other Personalities and Organis	ations contacted
Other reisonanties and Organis	ations contacted

Annex 3 – Documents consulted

Title and Content	Publisher	Publishing Date
Formulation de l'avant projet du plan directeur pharmaceutique national (PDPN) de RDC	Ministère de la Santé Publique RDC – PNUD/OMS	12/1998
Politique Pharmaceutique Nationale	Ministère de la Santé Publique RDC	12/1999
Projet de Plan Directeur de Développement Sanitaire pour la Période de 1999 a 2008	Ministère de la Santé Publique RDC	8/1999
Etat des Lieux du Secteur de la Santé – Profil Sanitaire du niveau central, des provinces, des zones de santé et de ménages	Ministère de la Santé Publique RDC	5/1999
Chronicles of a humanitarian Crisis – Democratic Republic of the Congo	UN OCHA	3/2001
Rapport Annuel d'activités	ASRAMES	2000
Statu provisoire de la centrale d'achats et d'approvisionnement en médicaments de KISANTU	Pats Project	6/2001
Guide clinique et thérapeutique (4ème édition)	MSF	1999
Médicaments Essentiels (3 ^{ème} édition)	MSF	1999
First quarterly report	MEDAIR	5/2001
Les médicaments fabriqués par la pharmacie diocésaine Dr Martial et R. Kanyono	BDOM Bukavu	2000
Recueil d'informations sanitaires 1998 4 ^{ème} rapport annuel	ISA	1999
Séminaires MEDAIR – Modules concernant la gestion et la prescription rationnelle	MEDAIR	5/2001
Response to measles epidemic Kalima health zone	MERLIN	5/2001
Nutrition assistance to war affected population in Kalima Final report	MERLIN	4/2001
Nutrition survey, Kaliman town, Maniema Province DRC	MERLIN	01/2001
Health assistance to war affected populations in Maniema Province East DRC Narrative interim report	MERLIN	3/2001
Programme d'aide médicale d'urgence en RDC, zone rebelle Rapport narratif	MSF B	2000
Activités du pool d'urgence Congo 1996 – 2000	MSF B	12/2000
Synthèse des interventions : MSF en RDC	MSF	7/2000
Enquête socio-économique sur la capacité de prise en charge en soins médicaux des ménages de la Province du Nord Kivu en RDC (draft)	ASRAMES	12/2000
Manuel de santé communautaire	ASRAMES, SCF, BIP Nord Kivu	7/1997
ASRAMES : statuts	ASRAMES	2001
Drug use patterns & prescribing behaviours at PHC level in North Kivu	HEALTHNET ASRAMES	12/1995
ASRAMESSAGE	ASRAMES	3/2001
Aide d'urgence au nord Ubangi, sud Ubangi et Mongola en Nord Equateur Rapport descriptif synthétique	MEMISA B	7/2001
Zone de santé rurale de Bwamanga Rapport synthétique de l'année 2000	CDI Bwamanga	2001
Programme d'appui transitoire au secteur santé Plaquette de présentation	AEDES	1996
Rapport narratif intermédiaire	Nuova Frontiera (Alisei)	11/2000
Politique sanitaire du Front de Libération du Congo	FLC	2001
The sphere project		1998
Médecine tropicale	Marc Gentillini	1993
La situation des enfants dans le monde	UNICEF	1997
Rapid household food economy assessment of Masina	Save the Children UK	06/2000
Commune in Kinshasa	Camilla Knox-Peebles consultante	

Title and Content	Publisher	Publishing Date
Evaluation de l'économie alimentaire des ménages des provinces du Sud et Nord Kivu	Save the Children UK	01/2000
The human tragedy of the confict in the DRC « No End in Sight »	Save the Children UK	08/2001
Rapport de l'enquête nutritionnelle dans la zone de santé d'Uvira, Province du sud Kivu	ACF USA	04/2000
Programme de sécurité alimentaire Kinshasa Rapport d'activités de avril à juillet 2000	ACF USA	07/2000
Programme médico-nutritionnel d'urgence à Kinshasa Rapport intermédiaire de juin à octobre 2000	ACF F	12/2000
Programme médico-nutritionnel d'urgence à Kinshasa Rapport intermédiaire de novembre 2000 à janvier 2001	ACF F	2001
Rapport trimestriel d'activités du programme nutritionnel d'urgence dans les territoires d'Uvira et de Fizi de janvier à mars 2001	ACF F	2001
Enquêtes nutritionnelles dans les communes de Kimbanseké, Selembao et Kiseno à Kinshasa (31 janvier au 23 février 2001)	ACF USA / CEPLANUT	2001
Formation dispensée au personnel de santé chargé de l'éducation nutritionnelle et sanitaire	ACF USA	01/2001
Formation technique maraîchage / programme de sécurité alimentaire de Kinshasa	ACF USA	
Formation dispensée au personnel des centres de santé chargés des consultations préscolaires	ACF USA	11/2000
Formation dispensée au personnel chargé de la réhabilitation nutritionnelle : prise en charge de la malnutrition sévère et modérée	ACF USA	11/2000
Formation en nutrition dispensée aux « mamans Bongisas » chargées des visites à domicile (Kinshasa)	ACF USA	12/2000
Modules de formation sur les centres nutritionnels thérapeutiques et l'argumentation des protocoles	ACF USA	12/1998
Evaluation socio-économique des travaux de réhabilitation de la route Sake-Mweso-Kanyabayonga réalisés par AAA (German Agro Action)	ULPGL Goma	03/2001
Briefing sur la situation humanitaire au Sud-Kivu	PAM	07/2001
Rapport d'évaluation de la situation nutritionnelle à Rimba, Nioka et Shubert dans le district de l'Ituri	COOPI	04/2001
Madrid Declaration		12/1995
Annual Report on Humanitarian Aid 2000 – COM(2001) 307 final	EC	8/2001
Guidance for Evaluating Humanitarian Assistance in complex emergencies	DAC - OECD	1999
The Democratic Republic of Congo – Selected Issues and Statistical Appendix	IMF / WB	7/2001
Framework Partnership Agreement user's guide for ECHO Staff	ECHO	1/1999
Summary Paper - Development and Humanitarian Assistance Programm for the DRC	USAID	6/2001
14-point report – Member State Aid Database ECHO – DRC	ECHO IT	8/2001
Global Plan 2000 – Democratic Republic of Congo	ECHO	5/2000
Global Plan 2001 – Democratic Republic of Congo	ECHO	5/2001
Humanitarian Charter and Minimum Standards in Disaster Response	The Sphere Project	2000
Consolidated Agency Appeal (CAP) – Democratic Republic of Congo	United Nations	2001
Mid-Term Review of the CAP 2001 for DRC	United Nations	5/2001
Linking Relief, Rehablilitation and Development (LRRD) – COM(96) 153 final	EC	1996
Internal Documentation DG DEV / ECHO & UN – Provided by the DRC Desk – ECHO	Divers	2001
General Background Information – Provided by the DRC desk - ECHO	Amnesty International / ICG/ World Bank / UN Commission on Human Rights / UNOCHA	

Annex 4 - List of Abbreviations

English Abbreviations

CAP UN Consolidated Inter-Agency Appeals

CIF Cost Insurance Freight

DAC Development Assistance Committee of the OECD

DG-DEV Directorate General for Development of the European Commission

DRA Drug Regulatory Authority

DRC Democratic Republic of Congo (ex Zaire)

DRF Drug Revolving Fund/s EC European Commission

ECHO European Commission Humanitarian Aid Office

EDL Essential Drug List EM Essential Medicaments

EPI Enlarged Program of Immunization FAO Food & Agriculture Organisation GMP Good Manufacturing Practices

GP Global Plan (Humanitarian country programme for a one year period – ECHO)

HQ Headquarter

ICG International Crisis Group

IDA International Dispensary Association (Amsterdam, The Netherlands)

IDP Internally Displaced Person/s

IRIN Integrated Regional Information Networks

JMC Joint Military Commission

JMS Joint Medical Store (Kampala, Uganda)

LRRD Linkage with Relief, Rehabilitation and Development

MERLIN Medical Emergency Relief International

MOH Ministry of Health

MONUC United Nations Organization Mission in the Democratic Republic of the Congo

NGO Non Governmental Organisation

NL The Netherlands

OAU Organisation of African Unity

OCHA Office for the Coordination of Humanitarian Affairs (secretary to the UNDP)

OECD Organisation for Economic Co-operation and Development

PCI United Pharmaceutical Center Isiro

PHC Primary Health Care

PIC Pharmaceutical Inspection Convention
QA/QC (Drug) Quality Control & Quality Assurance

SANRU US-AID Project "Santé rurale" SCF Save the Children Funds

Sphere Humanitarian Charter and Minimum Standards in Disaster Response

Project

TA Technical Assistance
TOR Terms of Reference
UK United Kingdom
UN United Nations

UNHCR UN High Commissioner for Refugees US \$ United States (of America) Dollar/s

Ush Ugandan Shilling

WATSAN Water and Sanitation Sector

WFP World Food Programme of the United Nations

WHO World Health Organisation

French Abbreviations

ACF Action Contre la Faim
AMI Aide médicale Internationale

APAMESK Association Pour L'Approvisionnement en ME du Sud Kivu (Bukavu) asbl ASRAMES Association Régionale d'Approvisionnement en Médicaments Essentiels (Goma)

asbl

BCZ Bureau central de Zone

BDOM Bureau Diocésain des Œuvres Médicales

CC Consultation Curative CdA Centrale/s d'Achat

CDI Centre de Développement Intégral (Bwamanda) asbl CEPAM Centre Protestant d'Approvisionnement en Médicaments

CME

CNS Centre Nutritionnel Supplémentaire
CNT Centre Nutritionnel Thérapeutique

COGE Comité de Gestion COSA Comité de Santé

CRDI Centre Rurale de Développement Intégral (substructure of CDI)

CS Centre de Santé

CSR Centre de Santé de Référence

DCMP Dépôt Central Médicaux Pharmaceutique

FAM Fonds Achats Médicaments

FB Franc Belge FC Franc Congolais

FOMETRO Fond Médical Tropical (Bruxelles) HGR Hôpital Général de Référence

JNV Journée Nationale de Vaccination (Poliomyelite)

MCZ Médecin Chef de Zone ME Médicaments Essentiels

ME-G Médicaments Essentiels sous forme Générique / Generic Essential drugs

MID Médecin Inspecteur de District
MIP Médecin inspecteur Provincial
MSF Médecins sans Frontières
MSF-B Médecins sans Frontières

OMS Organisation Mondiale de la Santé – Belgique OMNIS Fournisseur Belge / en matière pharmaceutique

ONG Organisation Non Gouvernementales
PAM Programme Alimentaire Mondial
PATS Programme d'Appui Transitoire Santé

PEV Plan Elargi de Vaccination PFA Paralysie Flasque Aiguë

PG Plan Global

PMI Protection Maternelle et Infantile

PS Poste/s de Santé

PSF Pharmaciens sans Frontière SSP Soins de Santé Primaire

UNICEF Fond des Nations Unis pour l'enfance

ZS Zone/s de Santé

Annex 5 – Summary of all ECHO Projects under GP 2000 / 2001

Partner / Contract	Sub-Sector	Project Title	Locatio	Location and Province	Number of Amendments	Amount in TEURO	Number of Beneficiaries	ies	Start End	Duration in Months
Global Plan	2000	0								
Auxiliary Support Schemes	: Schemes		2000							
CAFOD-GB	Non-Food Items / Food Security / Rehabilitation	Assistance Project to support the Re-installment of the Population in North Kivu	east	Rutshuru	North Kivu 0	200	20.000 terminated	rminated	15.12.00 14.05.01	4.05.0
German Agro Action	Food Security / Rehabilitation / Non- Food Items	Programme for the Recapitalisation of Displaced and Local Population in	east	North Kivu, Masisi, Lubero	78	850	575.000 terminated	rminated	01.06.00 31.12.00	1.12.0
Food Security and Nutrition	d Nutrition		2000							
ACF ECHO/ZAR/210/2000/01012	Nutrition	Opening of Nutritional Centres, Improvement of the Nutrition Structures in Kinshasa	west	Kinshasa	Kinshasa 2	430	57,000 on-going	n-going	01.06.00 28.02.01	8.02.0
ACF-FR ECHO/ZAR/210/2000/01028	Nutrition	Emergency Nutrition Programme in Uvira, Fizi and Lemera	east	Uvira, Fizi, Lemera	South 1 Kivu	600	9.100 to	terminated	01.10.00 31.01.01	1.01.0
AVSI ECHO/ZAR/Z10/Z000/01013	Food Security / Rehabilitation / Medical Aid	Emergency Medical and Food Security Assistance in Uvira and Fizi, South Kivu	east	Uvira, Fizi, South Kivu	0	355	110.000 to	terminated	01.07.00 31.01.01	1.01.0
CAFOD-GB ECHO/ZAR/Z10/2000/01023	Food Security	Assistance Project for the Population in Kinsangani	east	Kisangani	Orientale 1	1 250	4.000 to	terminated	01.12.00 31.01.01	1.01.0
CARITAS Secours International	Nutrition / WatSan / Food Security / NFI	Emergency Humanitarian Assistance to the vulnerable Population in Kinshasa	east	Kinshasa	Kinshasa 0	500	3.600 h	terminated	15.05.00 14.11.00	4.11.0
CARITAS-Espagne	Nutrition / Food Security	Nutrition and Food Security, Bukavu Region	east	Bukavu	South	400	54.250 t	terminated	01.08.00 31.12.00	1.12.0

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Partner / Contract	Sub-Sector	Project Title	Locatio	Location and Province	Number of Amendments	ments	in TEURO	Beneficiaries	aries	Start cho	in Months
Food Segurity and Nutrition	d Nutrition	Ž.	oote ,								
CICR ECHO/ZAR/210/2000/01024	Food / Non-Food Items	Emergency Assistance Programme for the displaced Population	, <u>a</u>	Conflict Zones		•	2.000	500.000	500.000 terminated	01.04.00 30.09.00	6
COOPI	Nutrition	Nutrition Programme in Ituri	east	lturi	Orientale		1.000	. •	on-going	01.11.00 30.06.01	8
ECHO/ZAR/210/2000/01036				72							
German Agro Action	Food Security / Food Aid / Non-Food Items	Food Security Programme for IDPs in Ituri Province	east	E (Ituri Province		1.150	35.550	35.550 terminated	01.05.00 31.12.00	8
ECHO/ZAR/210/2000/01002											
MSF-BE ECHO/ZAR/210/2000/01033	Nutrition / Medical Aid	Medical and Nutritional Emergency Assistance in the Health Zones Basankusu, Bolomba and Befale	west	Basankusu, Bolomba and Befale	Equateur	0	300	450	450 terminated	16.10.00 15.01.01	3
Save the Children ECHOIZAR/Z10/Z000/01009	Food Security / Non- Food Items / Rehabilitation	Rehabilitaion of basic Services and Restoration of Livelihoods in North and South Kivu	east	Kaziba and Walungu, Masisi	South and North Kivu		500	221.200 terminat	terminated	01.07.00 31.12.00	6
SOLIDARITES ECHO/ZAP/210/2000/01026	Nutrition / Water and Sanitation	Emergency Support to IDPs in North Kivu	east	Kanyabayonga , Kanya, Kirumba, Kamandi and Luofu	North Kivu	_	500	115.390	terminated	01.12.00 31.05.01	6
UN-WFP-PAM ECHO/ZAR/Z10/2000/01038	Food Aid Refugees	Food Assistance to Angolan Refugees in the provinces of Katanga, Orientale and Maniema	east		Katanga, Orientale, Maniema		1.500	80.000	80.000 on-going	01.01.01 30.04.01)1 4
Public Health Care	re:		2000		i						
ALISEI	Primary Health Care / Nutrition	Medical Assistance in the Province of North Katanga	east	Katanga	Katanga	; `_ _	750	1.500.000	1.500.000 terminated	01.11.00 31.05.01	7
ECHO/ZAR/210/2000/01031											

Partner / Contract	Sub-Sector	Project Title	Locati	Location and Province	Number of Amendments	10.00	In TEURO	Number of Beneficiaries	aries	Start End	Duration in Months	900
Public Health Care	To the second	SHOP THE SHOP	2000		MANAGEMENT AND ADDRESS OF THE PARTY AND ADDRES	8	ŝ	No.				
COOPI CHOZNIJI INDOODONI	Primary Health Care	Errespency Aid for the Health Zoses of Zorgo and Liberge, Equation	HOM	Zongo, Liberge, Equatiour	Equation 2		675	318.316	358.316 terranaled	01.06.00.30.10.0 6	111.00	
FOMETHO SCHOOLSHIP COMMENTED	Prinary Health, Care	Emergency Assistance for the Population of the Hoath Zones Kasings, Kibombo, Lasengi	8	Kasongo, Kibombo, Lussingi	Maniema 0	1 100	- 6	H\$1.H37 on-going	Darbons	01,10.00 30.06.01	0.08.013	
Johanniter EDIOGMONORIERI	Prinsary Hoalth Care	Medical Assistance to the Health Zones of MwengerSandaga, South Kirol	ğ		South Khu		240	119,072	batterina	01.01.00.30.10	non	
Mattesor-DE DCHO/Detg/II/2000/HUH	Primary Health Care / Non-Food Rems	Emergency Medical Programme in 6 Health Tones in Province Overfide	8011	Orbestale, Hauf-USSs, But	Orientale		400	500,000	terrelated	01.08.00 31.12.00	1.12.00	
Malbeser-DE Economission (III)	Primary Hoath Care	Energency Aut in the Health Zones of Winlurge and Hypergeot	out.		South Khu		000	520.000	520.000 isentinated	01.08.00 31.12.00	1.12.96	
MEDAIR	Раіначу Наявь Сэге	Aid to whereaste Populations to improve that Access to Health Centres	990	But, Hauf and Bas-Urbr	Bud, Hauf and Bus- Dally in Chantal Province		800	=	beninited	01.06.00 31 12.00	1.12.00	ч.
Madecins du Monde - França ECHOZMO INCODERRIT	Essential Druge	Errorginny Medical Assistance in the Health Zones of Tsfriberge, Kassal Chantai	1	Tshlämge, Kasal Odentale	Kassi Oriental	10	200	207.000	terretated	01.08.00 31.01.01	101.01	
MEMISA ASIMISA	Primary Health Care	Distribution of Wedichers and Medical Egypment in Northern Uhangi	Ĩ.	Northern Utengi	Equation		90	3,000,000	hermanushed	23,06.00 22.12.00	2.12.00	0.

Partner / Contract	Sub-Sector	Project Title	Locatio	Location and Province	Number of Amendments	of	Amount in TEURO	Number of Beneficiaries	Start End	Duration in Months
Public Health Care	are	2	2000							
MERLIN	Medical Aid / Essential Drugs / Training	Health Assistance for the war-affected Population in Maniéma	east	Kindu, Kalima, Punia	Maniema	0	645	425.694 terminated	01.05.00 31.12.00	2.00 8
ECHO/ZAR/210/2000/01010										
MERLIN	Primary Health Care	Health Assistance to the war-	east	Lodja	Kasai	_	400	358.833 terminated	01.12.00 30.06.01	5.01 7
ECHO/ZAR/210/2000/01022		Orientale, East DRC			Orientale					
MSF-BE	Medical Support	Pool d'Urgence Congo	<u>a</u>	Nationwide	Nationwid		550	0 terminated	01.07.00 31.12.00	2.00 6
ECHO/ZAR/210/2000/01015		Emergency Assistance			Ф					
MSF-BE	Cholera Intervention / Assitance for Displaced	Emergency Assistance for war-affected Displaced of Pweto and Kasenga	east	Pweto, Kasenga	Katanga		380	0 terminated	01.10.00 31.12.00	2.00 3
ECHO/ZAR/210/2000/01027	System strik som bledeten									
MSF-BE ECHO/ZAR/210/2000/01037	Primary Health Care	Medical Emergency Assistance in Equateur, Orientale, Maniema,	east		Orientale, Maniema, Equateur	0	300 2	2.000.000 terminated	01.08.00 31.01.01	.01 6
MSF-BE	Essential Drugs / Non-Food Items	Medical Emergency Assistance Programme for	east	Kisangani	Kisangani	_	330	11.500 terminated	14.06.00 13.09.00	.00 3
ECHO/ZAR/210/2000/01007		Displaced and Victims of the War in Kisangani								
NOVIB/ASRAMES	Essential Drugs	ation of Medicine, North	east	North Kivu	North Kivu	2	500 3.	3.500.000 terminated	16 09 00 15 01 01	01 4
ECHO/ZAR/210/2000/01029		Kivu							10.01.	
UN-UNICEF	Primary Health Care	Preparatory Studies,	east	:		0	40	0 terminated	04 03 04 04 05	
ECHO/ZAR/210/2000/01035		of				. (ā	o tomillated	01.03.01 31.05.01	3
Water Sanitation		2	2000							

Partner / Contract	Sub-Sector	Project Title	Locati	Location and Province	Number of Amendments		Amount in TEURO	Number of Beneficiaries	Start End Dura	Duration in Months
Water Sanitation			2000							
MSF-NL	Water and Sanitation	Water and Sanitation Potable Water for Cholera- prone Populations	east	Bukavu Periphery	South	0	260	12.000 terminated	01.09.00 30.04.01	8
ECHO/ZAR/210/2000/01030		Avadesprope to Anglinare	1000		Balanco Laborat			SC 2000 requirement	010101 34 1201	
OXFAM-GB ECHO/ZAR/210/2000/01018	Water and Sanitation	Water and Sanitation Emergency Intervention in Ituri	east	Djugu	lturi		420	107.500 terminated	16.06.00 31.12.00	6
OXFAM-GB ECHO/ZAR/210/2000/01039	Water and Sanitation / Non-Food Items	Emergency Water and Sanitation Intervention in East DRC (Interim Phase)	east	Maniema, Ituri, North Kivu	Maniema, Orientale, North Kivu		440	107.646 terminated	01.01.01 31.03.01	ω
OXFAM-GB ECHO/ZAR/210/2000/01019	Water and Sanitation	Emergency Water and Sanitation Intervention in Kindu	east	Region of Kindu	Maniema	-	330	200.000 terminated	01.05.00 31.10.00	6
OXFAM-GB ECHO/ZAR/210/2000/01008	Water and Sanitation	Water and Sanitation Water and Sanitation Intervention in Kirotshe	east	Kirotshe	North Kivu		300	44.986 terminated	01.05.00 31.10.00	6

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Annex 5 - Summary of ECHO Projects under GP 2000 / 2001 - Democratic Republic of Congo

Partner / Contract	Sub-Sector	Project Title	Location	Location and Province	Number of Amendments		Amount in TEURO	Number of Beneficiaries	er of ciaries	Start End		Duration in Months
Global Plan	2001	Ĭ										
Auxiliary Support Schemes	t Schemes		2001									
UN- UNHCR ECHO/COD/Z10/Z001/01003	Refugee Support	Assistance to Anglolan Refugees in Bandundu and Bas-Congo provinces	west		Bandundu , Bas- Congo	0 3.	3.750	60.000	60.000 requested	01.01.01 31.12.01	31.12.0	01 12
Food Security and Nutrition	d Nutrition		2001									
ACF ECHO/COD/210/2001/01025	Nutrition	Nutrition Programme, South Kivu	east	South Kivu	South	0	670	16.230				6
CARITAS-Espagne ECHO/COD/210/2001/01013	Nutrition / Food Security	Aid to vulnerable Families	east	Archidiocèse de Bukavu	Personal Lindon	1.0	1.000	69.000	69.000 on-going	01.01.01 31.12.01	31.12.0	11 12
German Agro Action ECHO/COD/210/2001/01004	Food Security / Food Aid / Non-Food Items	Food Security Assistance to the displaced Population in Ituri (Phase II)	east	Ituri	Orientale, Ituri	~	800	66.250	66.250 on-going	01.03.01 31.12.01	31.12.0	1 10
German Agro Action ECHO/COD/210/2001/01008	Food Security / Rehabilitation	Re-integration of Returnees and Displaced in Masisi and Lubero, North Kivu	east	Masisi, Luber	North Kivu	1.5	1.200 1	170.000	170.000 on-going	01.01.01 31.12.01	31.12.0	1 12
ICRC-CH ECHO/COD/210/2001/01007	Food Aid and Watsan Food Aid in DRC	Food Aid in DRC		Zango		2.0	2.000	0	requested	80 00 00 00 00	8	0
MERLIN ECHO/COD/210/2001/01001	Nutrition	Nutrition Assistance to the war-affected Population in Kalima	east	Kalima Town	Maniema	N	210	7.800	7.800 terminated	01.03.01 31.05.01	31.05.0	ω ω
MSF-BE ECHO/CODZ10/2001/01017	Nutrition	Nutrition Programme in Basankusu	west	Basankusu	Equateur	. ω	350	900	terminated	15.02.01 14.08.01	14.08.0	5
Evaluation Global Plans 2000/2001 - DR Congo - Synthesis Report	2000/2001 - DR Congc	- Synthesis Report								Page 6 of 9	6 of 9	

Partner / Contract Sub-Sector Food Security and Nutrition Save the Children Food Security Rehabilitation Rehabilitation	Sub-Sector nd/Nutrition Food Security / Non- Food Items / Rehabilitation	Project Title Project Title Restoration of Livelihoods of War-affected Populations in North and South Kivu	2001 f east	Cocation and Province OT Walungu. Ngweshe, walungu	Number of Amendments Amendments North and South Kivu	§ S.	o its	Amount in TEURO	o its	Amount Number of the in TEURO Beneficiaries 0 700 237.415 on-going	Amount Number of the in TEURO Beneficiaries 0 700 237.415 on-going
ECHO/COD/210/2001/01009						١.,					
SOLIDARITES ECHO/COD/210/2001/01029	Nutrition / Water and Sanitation	Nutrition / Water and Sanitation Programme North Kivu	east	Grand Nord	North Kivu			0	0 0		
UN-WFP-PAM ECHO/COD/210/2001/01020	Food Aid	PRRO 6274.00 : Assistance to War Victims	<u>a</u>					4.500	4.500 100.000 requested	100.000 requested	
World Vision	Nutrition / Medical Aid	Nutrition Programme, Health Zone Oicha	east	Grand Nord	North Kivu			250	250 8.800 on-going	8.800 on-going	
Public Health Care	are.		2001								
ALISEI ECHO/COD/210/2001/01030	Primary Health Care / Nutrition	Medical Assistance in North Katanga	east		North Katanga		0	0 0		0	0
AMI-France ECHO/COD/210/2001/01021		Access to Primary Health Care for the Population in the souther parts of South Kivu	east		South			360	360 29.000 on-going	29.000 on-going	
СООРІ	Primary Health Care		west	Zanan	Equateur						
ECHO/COD/210/2001/01005		Primary Health Care Systems Support in the Health Zones of Zongo and Libenge		Libenge				420	420 146.837 on-going	146.837 on-going	

Annex 5 - Summary of ECHO Projects under GP 2000 / 2001 - Democratic Republic of Congo

MSF-BE Medical Support Pool d'Urgence Congo east Maniema, Component (PUC) (PUC) - Est Equateur ECHOICODIZ 10/2001/01028	ECHOICODZ10200101019 MSF-BE Medical Support Pool d"Urgence Congo (PUC) all Nationwide Nationwid e ECHOICODZ10200101002	MSF-BE Primary Health Care Medical Assistance to east Orientale, Orientale and Maniema Maniema	MERLIN Primary Health Care Health Assistance to war-east Kindu, Kalima, Maniema affected Populations in Punia Health Assistance to war-east Kindu, Kalima, Maniema	MEMISA Primary Health Care Support to the Primary east Equateur Health Care System in North ECHO(CODZ10/2001/01011 and South Oubngui	MEDAIR Primary Health Care Aid to vulnerable People to east Haut and Bas- Orientale, improve their Access to Uéle, Ituri Ituri ECHO/COD/210/2001/01006	Malteser-DE Primary Health Care Emergency Relief east Orientale Orientale ECHOCODDZ10/2001/01015	Malteser-DE Primary Health Care Emergency Humanitarian Aid east South in the Health Zones of Kivu Walungu and Nyangezi, province of South Kivu	Partner / Contract Sub-Sector Project line Location and Province Amend Amend Public Health Care	Sub-Sector Project Title
			7	1.000	1.385	1.200	0 545	ं डि	
0	750 0 on-going	292.000 requested	715 800.000 on-going	00 1.402.500 on-going	85 13.000.000 on-going	00 800.000 on-going	45 250.000 on-going	0	Amount Number of
	01.01.01 31.12.01 12	0	01.01.01 31.10.01 10	01.02.01 31.12.01 11	01.02.01 31.12.01 11	01.02.01 31.12.01 11	01.01.01 31.12.01 12		Start End Duration

Partner / Contract	Sub-Sector	Project Title	Location	Location and Province	Number of Amendments	- 1	Amount in TEURC	Amount Number of In TEURO Beneficiaries	of	Start End		Duration in Months
Rublig Health Gare	G.		uOu									
MSF-ES ECHO/COD/210/2001/01023	Primary Health Care	Access to the Primary Health Care in Pweto Health Zone	east	Pweto		0	230	45.000	45.000 terminated	01.05.01 31.07.01	31.07.01	မ
MSF-FR ECHO/COD/210/2001/01026	Primary Health Care	Emergency Medical Assistance to Kabalo District, Northern Katanga Province	east	Kabalo	Katanga		155	78.000	78.000 on-going	01.07.01 31.08.01	31.08.01	N
NOVIB ECHO/COD/210/2001/01010	Essential Drugs	Donation of Medicaments in the Health Zones of North Kivu	east	North Kivu	North Kivu		1.200	3.510.000 on-going	on-going	01.03.01 30.11.01	30.11.01	9
PSF ECHO/COD210/2001/01016 Water Sanitation	Primary Health Care	Medical Assistance in the Health Zones of Lubao and Tshofa	east	Lubao, Tshofa	East Kasai		465	207.000 on-going	on-going	01.05.01 31.01.02	31.01.02	9
		Water and Sanitation Emergency Water and Sanitation Intervention	east	Masisi, Kindu, Kalima, Ituri	North Kivu, Maniema, Ituri	0	655	250.932 on-going	on-going	01.06.01 30.11.01	30.11.01	6
ECHO/COD/210/2001/01022												

Annex 6 - Presentation of relevant tables

Table 1 - Member State Aid 2000-2001 to DRC

	2	2000	2	2001
Donor	Operations	Total Amount EUR	Operations	Total Amount EUR
Member States(MS ¹):				•
Austria	1	14.535	1	3.634
Belgium	6	3.619.749	4	2.790.505
Denmark	1	311.645	1	4.689.238 (Multi country)
Finland	2	1.009.128	2	4.456.980 (Multi country)
Germany	10	1.984.347	7	2.143.604
Ireland	2	380.922	2	634.872
The Netherlands	4	2.990.216	5	2.822.142
Spain	1	1,050,911	-/-	-/-
Sweden	5	3.768.729 (EURO 175,000 multi country)	1	2.040.597 (Channel ICRC)
UK	5	2.478.286	-/-	-/-
Sub-Total MS	37	17.608.468	23	19.581.572

The indications of Finland, Denmark and Sweden include nominations for several countries. The specific contribution to DRC cannot be distinguished on this basis. Therefore the indicated amounts for contributions to DRC are overestimated, whereas the number of supported operations appear to be correct. The annual average member states contribution is estimated at about 13 - 15 MEURO for 2000 and 2001. The funds are contributions to the UN CAP or directed to NGOs active in DRC.

Table 2 - European Commission ECHO / DG-DEV contribution DRC

	2	2000	2001 (p	lanned)
Donor	Operations	Total Amount EUR	Operations	Total Amount EUR
ECHO – European Commission Humanitarian Aid Office		20.000.000		35.000.000
European Commission DG- Dev	PATS II (84) PAR	11.300.000 N.A.	PATS II (84) PAR	11.300.000 20.300.000
Total EC		31.300.000		66.600.000

PATS II – about 45 MEURO in 4 years (funding of about 84 projects during this period)

Table 3 - United States - Development and Humanitarian Assistance to DRC

	20	01	2002 (p	lanned)
Field of	Operations	Total Amount USD	Operations	Total Amount USD
Support	Operations	Total Amount 03D	Operations	Total Amount 03D
Development Assistance	N.I.	21.000.000	N.I.	20.700.000
Economic Support Funds	N.I.	18.000.000	N.I.	18.000.000
Humanitarian Food Aid	3 World Food Programme / ICRC	24.900.000	N.I.	39.000.000
Humanitarian	13	19.000.000	N.I.	20.000.000

¹ Information on Member States assistance from the ECHO 14-Q database, which represents the information provided by the MS on the bilateral humanitarian operations.

	20	01	2002 (p	lanned)
Field of	Onovetions	Total Amount USD	Operations	Total Amount USD
Support	Operations	i Total Amount 050	Operations	i Total Amount 03D
Assistance (divers)				
Total US		82.900.000		97.700.000

Remark: The figures indicated by USAID, as contributed for humanitarian assistance, cannot be directly compared because OFDA utilise different project approaches and the understanding of what is humanitarian aid related, is slightly different to the ECHO appreciation. It is estimated that the USAID contribution, in activities comparable with those of ECHO, amounts to about 35 MEURO.

IDPs and Refugees – Facts and Figures

The figures on IDPs and refugees give only indications and are far from being precise on giving an idea of the real vulnerability of the population. Since no monitoring system for IDPs exists, it cannot be stated for how long people are displaced and what their current living conditions are.

Table 4 - Location of Internally Displaced People in DRC

Province	Estimated number of displaced people
North Kivu	620.000
South Kivu	373.000
Maniema	132.000
Province Oriental	220.000
Katanga	354.000
Equateur	170.000
Kasai Oriental	114.000
Kasai Occidental	29.000
Kinshasa	28.000
Total	2.040.000

Source: OCHA, March 2001(Estimate)

Table 5 - Estimates of Quantitative Changes by Categories of Vulnerable Groups

Category of Affected Population	Number November 1999	Number November 2000	Number May 2001	Difference Nov 2000 – May 2001
IDPs	830.000	1.800.000	2.040.000	240.000
DRC Refugees in third countries	190.000	310.000	330.000	20.000
Refugees in DRC	270.000	327.000	327.000	-
Unaccompanied Children (Street Children and Child soldiers)	N.A.	50.000	70.000	20.000
Total	1.320.000	2.487.000	2.769.000	280.000

Source: Mid-Year Review CAP for DRC, May 2001

Remark: Important numbers of the refugees have been displaced for more than 5 years and might be counted as local population in the areas where they are now living – At present, no monitoring system to track IDP movements is in place. This makes it difficult to use these figures for planning purposes.

Table 6 - Project Status - Evaluation Coverage (GP 2000 / 20001)

Partner	GP 200	0			GP 2001				Sector	Province
	Ongoing		Ongoing		Negotiatio	n	Planne	d		
UNICEF				Г	2.000.000	-			PHC/PEV	East DRC
MSF-B		П		Г	440.000	-			Health/Surveillance	East DRC
Соорі			420.000	-					Primary Health Care	Equateur
Memisa B			1.000.000	Χ					Primary Health Care	Equateur
MSF-B		П	350.000	-					Nutrition	Equateur
MSF-B					770.000	-			Primary Health Care	Equateur/Orientale
Merlin	400.000	-					300.000	-	Primary Health Care	Kasai
PSF			500.000	-					PHC/Drugs	Kasai oriental
NF			500.000	Χ					Nutrition	Katanga Nord
NF		П	370.000	Χ					Primary Health Care	Katanga Nord
ACF	430.000	Χ			500.000	_			Nutrition	Kinshasa
Fometro	400.000			Г	400.000	_			Primary Health Care	Maniéma
Merlin			715.000	Х		_			Primary Health Care	Maniéma
Merlin		П	300.000	_					Nutrition	Maniéma
Oxfam			400.000	_		_			Watsan	Maniéma
GAA			600.000	_		_			Food Security	N.Kivu
SCF			500.000	_		_			Food Security	N.Kivu
Novib			1.200.000	-		_			PHC/Drugs	N.Kivu
Oxfam			200.000	-		_			Watsan	N.Kivu
GAA			600.000	_		_			Food Security	GrN.Kivu
Solidarité	500.000	D		H	500.000	_			Nutrition	GrN.Kivu
World Vision			500.000	-		_			Nut/PHC	GrN.Kivu
Caritas-E			600.000	_		_			Food Security	S.Kivu
SCF		П	230.000	-		_			Food Security	S.Kivu
ACF			800.000	_		_			Nutrition	S.Kivu
Caritas-E			400.000	_		_			Nutrition	S.Kivu
AMI			360.000			_			Primary Health Care	S.Kivu
Johanniter	240.000	-		Ē	400.000	_			Primary Health Care	S.Kivu
Malteser		П	530.000	χ		_			Primary Health Care	S.Kivu
Malteser			1.200.000	_		_			PHC/Drugs	Orientale
Medair		Н	1.385.000	_		_			PHC/Drugs	Orientale
GAA			850.000	-		_			Food Security	Ituri
Соорі	1.000.000	χ		Ĥ	800.000	_			Nutrition	Ituri
Oxfam		Ë		Н	555.555	_	400.000	D		Ituri
MSF-B		H	750.000	D		_	.55.550	H	Health/Surveillance	Ouest RDC
HCR			4.200.000	_		_			Réfugiés	Ouest RDC
OCHA			55.556		500.000	D			EHI	RDC
CICR/FICR					1.000.000				Emergency	RDC
PAM		Н	4.500.000	D		_			Food Security	RDC
Contingency			3.030.000	_		_				1
Total	2.970.000		26.990.000	_	7.310.000	_	700.000			
GP Total	20.000.000	-	35.000.000	_		_				
Percentages		_	77	_	21	_	2		Project Status (Status/Total GF)
Evaluation	10	Н	- ''		- '	_				/i
Covered	2.330.000		17.290.000		500.000	_	400.000		Covered in Terms of Budget	
Percentages		_	64	_	7	_	57	-	Percentage (Budget/Covered)	

Remark:

X = Visited (project sites visited during evaluation)
D = Discussions held with local project manager (PM)
- = Not visited during the evaluation/no discussion with PM

Table 7 - Composition of the successive Global Plans by Sector of Intervention

The following table simplifies the context in order to see differences in the strategic orientation and the amount of intervention provided by sector. The available figures are based on indications/estimates given in the Global Plan documentation prepared by ECHO.

Main Sectors	PI	anning - GP 2000		PI	anning - GP 2001	
/Positions	Main Activities	Beneficiaries (Estimated)	Funds in EUR / %	Main Activities	Beneficiaries (Estimated)	Funds in EUR / %
	Support to approximately 87 health districts	3.500.000	6.000.000 / 30%	Curative Health Care Support to 102 health districts	3.750.000 15.000.000	10.660.000 / 30,46%
		14.000.000			(Population	
Public Health Care (PHC)		(Population covered)		Preventive health care – EPI/MCH in 17 health districts	covered) 500.000	2.000.000 / 5,71%
	Nationwide surveillance and epidemiological monitoring system	Country wide	1.700.000 / 8,5%	Surveillance, coordination and emergency	Country wide	2.750.000 / 7,86%
			7,000,000	response		·
		Sub-total PHC	7,000,000 (38,5%)		Sub-total PHC	15,410,000 (44,03%)
	Nutritional support (supplementary and therapeutic	19.000	5.600.000 / 28%	Supplementary therapeutic feeding	73.000	3.500.000 / 10%
Food Security and Nutrition (F&N)	feeding)	(Under five years)		Targeted food security (NGOs)	250.000	3.200.000 / 9,14%
	Food Security activities (seed and tools)			Targeted Food Aid (WFP, NGOs)	250.000	5.000.000 / 14,29%
		Sub-total F&N	5,600,000 (28%)		Sub-total F&N	11,700,000 (33,43%)
Water Sanitation	Provision of potable water and sanitation in IDP settlements	1,000,000 (Affected population)	1,000,000 (5%)	Water and sanitation activities as part of preventive measures (PHC)	Supplement to PHC programme	1,000,000 (2,86%)
	Care & Maintenance Angolan refugees	45.000	1.500.000 / 7,5%	Care & Maintenance Angolan	40.000	2.800.000 / 8%
Auxiliary Support	Non-food items distribution		900.000 / 4,5%	refugees		
Schemes	Basic infrastructure rehabilitation	120.000	1.300.000 / 6,5%	Repatriation	120.0000	1.400.000 / 4%
	(support to resettlement of IDPs)	120.000		DRC refugees	(based on 6 persons per family)	
		Sub-total ASS	3.700.000 (18,5%)		Sub-total ASS	4.200.000 (12%)
Reserve			2.000.000 (10%)	Reserve		2.690.000 (7,69%)
Total GP 2000			20.000.000	Total GP 2001		35.000.000

Table 8 – Budget Analysis GP 2000/2001 (Cost per month per Beneficiary)

	Glo	bal Plan 2	000			
ECHO Partner	Contract Number	Duration in Months	Contract Amount in thousand EURO	Number of Beneficiaries	Project costs per months in thousand EURO	Costs per month per Benef. In EURO
		lic Health				
ALISEI	ECHO/ZAR/210/2000/01031	7	750	1.500.000	107,14	0,07
CAFOD UK	ECHO/ZAR/210/2000/01023	2	250	20.000	125,00	6,25
COOPI	ECHO/ZAR/210/2000/01005	6	575	126.837	95,83	0,76
FOMETRO	ECHO/ZAR/210/2000/01032	6	400	275.000	66,67	0,24
Johanniter	ECHO/ZAR/210/2000/01020	6	240	119.072	40,00	0,34
Malteser	ECHO/ZAR/210/2000/01014	5	400	900.000	80,00	0,09
Malteser - DE	ECHO/ZAR/210/2000/01016	5	300	520.000	60,00	0,12
MEDAIR	ECHO/ZAR/210/2000/01003	7	800	N/I	114,29	
Médecins du Monde - France	ECHO/ZAR/210/2000/01011	6	200	207.000	33,33	0,16
MEMISA Belgique	ECHO/ZAR/210/2000/01006	6	600	2.500.000	100,00	0,04
MERLIN	ECHO/ZAR/210/2000/01010	8	645	425.694	80,63	0,19
MERLIN	ECHO/ZAR/210/2000/01022	7	400	358.833	57,14	0,16
MSF-B	ECHO/ZAR/210/2000/01007	3	330	11.500	110,00	9,57
MSF-BE	ECHO/ZAR/210/2000/01037	6	300	2.000.000	50,00	0,03
MSF-Belgique	ECHO/ZAR/210/2000/01015	6	550	*	91,67	
MSF-Belgique	ECHO/ZAR/210/2000/01027	3	380	80	-,-	
NOVIB/ASRAMES	ECHO/ZAR/210/2000/01029	4	500	3.500.000	125,00	0,04
UN - UNICEF - INT	ECHO/ZAR/210/2000/01035	3	40	N/AV	13,33	
Food Security	and Nutrition					
ACF - France	ECHO/ZAR/210/2000/01028	6	600	9.100	100,00	10,99
ACF	ECHO/ZAR/210/2000/01012	9	430	5.700	47,78	75,44
AVSI	ECHO/ZAR/210/2000/01013	7	355	110.000	50,71	0,46
CARITAS Secours International	ECHO/ZAR/210/2000/01001	6	500	3.600	83,33	23,15
CARITAS-Espagne	ECHO/ZAR/210/2000/01017	5	400	54.250	80,00	1,47
CICR	ECHO/ZAR/210/2000/01024	6	2000	500.000	333,33	0,67
COOPI	ECHO/ZAR/210/2000/01036	8	1000	20.000	125,00	6,25
MSF-BE	ECHO/ZAR/210/2000/01033	3	300	450	100,00	222,22
SOLIDARITES	ECHO/ZAR/210/2000/01026	6	500	115.390	83,33	0,72
UN - WFP - PAM	ECHO/ZAR/210/2000/01038	4	1500	80.000	375,00	4,69
		ter Sanitat				
MSF-H	ECHO/ZAR/210/2000/01030	8	260		32,50	
OXFAM GB	ECHO/ZAR/210/2000/01039	3	440	107.646	146,67	1,36
OXFAM-GB	ECHO/ZAR/210/2000/01019	6	330	200.000	55,00	
Oxfam-UK	ECHO/ZAR/210/2000/01008	6	300			
OXFAM-UK	ECHO/ZAR/210/2000/01018	6	420	107.500		0,65
	Auxiliary Support Schem					
CAFOD	ECHO/ZAR/210/2000/01034	3	200	20.000	66,67	3,33
German Agro Action	ECHO/ZAR/210/2000/01004	7	850		·	0,21
Save The Children	ECHO/ZAR/210/2000/01009	6	500	221.200	83,33	0,38
German Agro Action	ECHO/ZAR/210/2000/01002	8	1150	35.550	143,75	4,04

	Glo	bal Plan 2	001			
ECHO Partner	Contract Number	Duration in Months	Contract Amount in thousand EURO	Number of Beneficiaries	Project costs per months in thousand EURO	Costs per month per Benef. in EURO
	Pub	lic Health (Care			
Alisei	ECHO/COD/210/2001/01030	N/I	N/I	N/I		
AMI-France	ECHO/COD/210/2001/01021	7	360	29.000	51,43	1,77
COOPI	ECHO/COD/210/2001/01005	7	420	136.837	60,00	0,44
Johanniter	ECHO/COD/210/2001/01027	7	475	369.000	67,86	0,18
Malteser - DE	ECHO/COD/210/2001/01012	12	545	250.000	45,42	0,18
Malteser-DE	ECHO/COD/210/2001/01015	11	1200	800.000	109,09	0,14
MEDAIR	ECHO/COD/210/2001/01006	11	1385	1.300.000	125,91	0,10
MEMISA	ECHO/COD/210/2001/01011	11	1000	1.402.500	90,91	0,06
Merlin	ECHO/COD/210/2001/01014	10	715	800.000	71,50	0,09
MSF-BE	ECHO/COD/210/2001/01018	N/I	N/I	160.000		
MSF-BE	ECHO/COD/210/2001/01019	N/I	N/I	292.000		
MSF-BE	ECHO/COD/210/2001/01028	N/I	N/I	N/I		
MSF-Belgique	ECHO/COD/210/2001/01002	12	750	N/I	62,50	
MSF-ES	ECHO/COD/210/2001/01023	3	230	45.000	76,67	1,70
MSF-France	ECHO/COD/210/2001/01026	2	155	78.000	77,50	0,99
NOVIB	ECHO/COD/210/2001/01010	9	1200	3.510.000	133,33	0,04
PSF	ECHO/COD/210/2001/01016	9	465	300.000	51,67	0,17
	Food Se	curity and	Nutrition			·
ACF	ECHO/COD/210/2001/01025	6	670	16.230	111,67	6,88
CARITAS Espagne	ECHO/COD/210/2001/01013	12	1000	69.000	83,33	1,21
Merlin	ECHO/COD/210/2001/01001	3	210	7.800	70,00	8,97
MSF-BE	ECHO/COD/210/2001/01017	6	350	900	58,33	64,81
ICRC-CH	ECHO/COD/210/2001/01007	N/I	2000	N/I		· · ·
Solidarites	ECHO/COD/210/2001/01029	N/I	N/I	N/I		
UN-WFP-PAM	ECHO/COD/210/2001/01020	6	4500	100.000	750,00	7,50
World Vision	ECHO/COD/210/2001/01024	6	250		41,67	4,73
	Auxiliary Support Schem	es (Food S				· ·
German Agro Action	ECHO/COD/210/2001/01004	10	800			1,21
German Agro Action	ECHO/COD/210/2001/01008	12	1200	170.000	100,00	0,59
Save the Children	ECHO/COD/210/2001/01009	12	700	237.415	58,33	2,95
UN-UNHCR-BE	ECHO/COD/210/2001/01003	12	3750	60.000	312,50	5,21
	Wa	ter Sanitat	ion			
Oxfam	ECHO/COD/210/2001/01022	6	655	250.932	109,17	0,44

KEY:

N/I NOT INDICATED N/AV NOT AVAILABLE

SEVERAL TENS OF THOUSANDS DEPENDING ON THE SCOPE OF THE EPIDEMICS.

Remark:

The information on the numbers of beneficiaries is taken from the "Fiche d'Operation" available at the time of evaluation. These figures often appear to be poorly assessed and imprecise (sometimes population in area covered, sometimes real final beneficiaries, etc.). Furthermore, some of the ECHO projects are co-financed by other donors and obviously the project approaches are different. This makes it difficult to compare the unit costs in each sector (e.g. cost per beneficiary per months).

Table 9 – Budget Analysis GP2000 / 2001 (Budget by Line)

			Globa	l Plan 2	000					
NGO	Sector / Contract Number	Expa- riate Staff %	Local Staff %	Items & Servic es %	Inter- natio- nal Transp ort %	Local Transp ort %	Auxi- liary Ex- pense s %	Ad- minis- tration %	Re- serve %	Final Amount (thou- sand EURO)
ALISEI	ECHO/ZAR/210/ 2000/01031	19,56	13,15	24,67	6,40	17,02	13,24	5,97	0,00	750
CAFOD UK	ECHO/ZAR/210/ 2000/01023	0,00	3,12	46,07	0,00	39,07	0,91	6,20	4,64	250
COOPI	ECHO/ZAR/210/ 2000/01005	18,26	15,76	40,54	5,57	8,45	6,21	6,21	0,75	575
FOMETRO	ECHO/ZAR/210/ 2000/01032	6,75	9,60	47,50	12,50	8,15	15,50	0,00	0,00	400
Johanniter	ECHO/ZAR/210/ 2000/01020	11,25	13,88	34,24	0,00	10,85	18,27	6,17	5,35	240
Malteser	ECHO/ZAR/210/ 2000/01014	27,00	6,93	36,79	0,45	12,28	10,22	6,34	0,00	400
Malteser - DE	ECHO/ZAR/210/ 2000/01016	22,50	8,20	42,30	0,00	7,67	12,92	6,42	0,00	300
MEDAIR	ECHO/ZAR/210/ 2000/01003	10,13	6,30	45,86	17,31	8,40	4,78	5,85	1,38	800
Médecins du Monde - France	ECHO/ZAR/210/ 2000/01011	18,00	18,45	22,50	6,51	11,75	11,72	6,23	4,85	200
MEMISA Belgique	ECHO/ZAR/210/ 2000/01006	3,00	0,55	69,80	11,60	2,62	0,58	5,79	6,07	600
MERLIN	ECHO/ZAR/210/ 2000/01010	22,33	7,04	47,25	0,00	6,70	10,01	6,06	0,61	645
MERLIN	ECHO/ZAR/210/ 2000/01022	15,75	6,39	40,67	6,25	10,33	11,70	6,17	2,75	400
MSF-B	ECHO/ZAR/210/ 2000/01007	6,82	7,44	36,36	22,24	2,21	1,70	5,29	17,94	330
MSF-BE	ECHO/ZAR/210/ 2000/01037	27,00	18,05	42,76	0,00	5,78	0,00	6,42	0,00	300
MSF-Belgique	ECHO/ZAR/210/ 2000/01015	7,36	14,07	44,19	10,22	12,99	3,61	6,09	1,46	550
MSF-Belgique	ECHO/ZAR/210/ 2000/01027	6,39	8,21	53,51	7,24	12,86	2,53	6,16	3,08	380
NOVIB/ASRAMES	ECHO/ZAR/210/ 2000/01029	0,90	0,00	81,07	5,58	0,00	12,45	0,00	0,00	500
UN - UNICEF - INT	ECHO/ZAR/210/ 2000/01035	45,00	3,00	0,00	0,00	21,75	23,71	6,54	0,00	40
Average GP 2000		14,89	8,90	42,00	6,21 Nutrition	11,05	8,89	5,44	2,71	<u>7660</u>
ACF - France	ECHO/ZAR/210/ 2000/01028	13,50	22,17	29,55	8,63	10,31	9,53	6,12	0,19	600
Action Contre La Faim	ECHO/ZAR/210/ 2000/01012	21,98	13,56	25,17	3,53	10,33	6,95	5,53	12,95	430
AVSI	ECHO/ZAR/210/ 2000/01013	12,25	15,18	43,00	0,00	9,52	11,12	6,20	2,72	355
CARITAS Secours International	ECHO/ZAR/210/ 2000/01001	10,80	4,02	72,78	0,00	3,72	2,11	6,21	0,36	500
CARITAS-Espagne	ECHO/ZAR/210/ 2000/01017	5,63	18,18	67,65	0,00	0,00	0,56	6,23	1,76	400
CICR	ECHO/ZAR/210/ 2000/01024	12,15	5,40	42,40	0,00	29,88	0,77	4,75	4,65	2000
COOPI	ECHO/ZAR/210/ 2000/01036	13,95	25,68	30,78	2,75	9,22	9,07	5,57	2,98	1000
MSF-BE	ECHO/ZAR/210/ 2000/01033	9,00	9,70	30,18	26,28	14,83	2,96	6,38	0,67	300

			Globa	l Plan 2	000					
NGO	Sector / Contract Number	Expa- riate Staff %	Local Staff %	Items & Servic es %	Inter- natio- nal Transp ort %	Local Transp ort %	Auxi- liary Ex- pense s %	Ad- minis- tration %	Re- serve %	Final Amount (thou- sand EURO)
SOLIDARITES	ECHO/ZAR/210/ 2000/01026	12,90	18,77	33,92	1,00	17,38	7,25	6,07	2,71	500
UN - WFP - PAM	ECHO/ZAR/210/ 2000/01038	3,60	1,53	23,17	16,58	42,55	12,55	0,00	0,02	1500
Average GP 2000		11,58	13,42	39,86	5,88	14,77	6,29	5,31	2,90	<u>7585</u>
		Water a	nd San	itation						
MSF-H	ECHO/ZAR/210/ 2000/01030	16,15	17,77	25,38	0,00	8,62	17,08	5,91	9,09	260
OXFAM GB	ECHO/ZAR/210/ 2000/01039	3,58	14,53	40,80	0,00	17,50	23,58	0,00	0,00	440
OXFAM-GB	ECHO/ZAR/210/ 2000/01019	5,80	13,91	39,26	0,00	21,40	19,64	0,00	0,00	330
Oxfam-UK	ECHO/ZAR/210/ 2000/01008	6,38	15,36	45,25	0,00	8,69	12,13	6,04	6,17	300
OXFAM-UK	ECHO/ZAR/210/ 2000/01018	6,16	15,13	45,34	0,83	10,48	13,25	6,17	2,64	420
Average GP 2000		7,61	15,34	39,2	0,17	13,34	17,14	3,62	3,58	<u>1750</u>
	Auxiliary Sup	port Sc	hemes	(Food S	ecurity o	riented	Project	s)		
CAFOD	ECHO/ZAR/210/ 2000/01034	0,00	0,00	93,12	0,00	0,00	0,00	6,52	0,36	200
German Agro Action	ECHO/ZAR/210/ 2000/01004	6,88	5,15	59,56	0,00	13,94	4,26	5,64	4,56	850
Save The Children	ECHO/ZAR/210/ 2000/01009	4,05	10,56	61,69	0,00	4,91	11,49	6,16	1,14	500
German Agro Action	ECHO/ZAR/210/ 2000/01002	8,35	6,41	61,15	0,00	7,18	6,62	5,34	4,95	1150
Average GP 2000		4,82	5,53	68,88	0,00	6,51	5,59	5,92	2,75	<u>2700</u>
Overall Average GP 2000		<u>9,72</u>	<u>10,8</u>	<u>47,49</u>	<u>3,07</u>	<u>11,42</u>	<u>9,48</u>	<u>5,07</u>	<u>2,99</u>	

			Globa	ıl Plan 20	001					
NGO	Sector / Contract Number	Expa- riate Staff %	Local Staff %	Items & Servic es %	Inter- natio- nal Trans- port %	Local Transp ort %	Auxi- liary Expen -ses %	Ad- minis- tration %	Re- serve %	Final Amount (thou- sand EURO)
	,		Public	Health	Care					
Alisei	ECHO/COD/210/ 2001/01030									
AMI-France	ECHO/COD/210/ 2001/01021	27,08	13,78	24,14	0,50	10,71	13,47	6,11	4,21	360
COOPI	ECHO/COD/210/ 2001/01005	20,71	7,17	33,90	4,29	12,30	9,48	5,95	6,20	420
Johanniter	ECHO/COD/210/ 2001/01027	13,26	12,88	39,64	0,00	14,57	11,28	6,13	2,24	475
Malteser - DE	ECHO/COD/210/ 2001/01012	23,12	11,56	36,83	0,00	8,59	12,63	6,11	1,16	545
Malteser-DE	ECHO/COD/210/ 2001/01015	19,31	11,07	43,41	0,87	9,09	7,30	5,35	3,61	1200
MEDAIR	ECHO/COD/210/ 2001/01006	16,68	9,49	44,76	6,35	9,14	6,48	5,26	1,84	1385
MEMISA	ECHO/COD/210/ 2001/01011	3,30	0,61	57,50	9,02	7,97	9,12	5,38	7,11	1000
Merlin	ECHO/COD/210/ 2001/01014	18,88	10,87	36,65	5,18	9,29	12,28	5,96	0,89	715
MSF-BE	ECHO/COD/210/ 2001/01028									
MSF-BE	ECHO/COD/210/ 2001/01019									
MSF-BE	ECHO/COD/210/ 2001/01018									
MSF-BE	ECHO/COD/210/ 2001/01002	14,40	14,48	35,61	12,04	11,60	5,30	5,94	0,63	750
MSF-ES	ECHO/COD/210/ 2001/01023	17,61	3,00	32,69	19,58	12,61	4,19	6,26	4,05	230
MSF-France	ECHO/COD/210/ 2001/01026	11,61	5,42	52,61	9,60	11,74	0,00	6,37	5,65	155
NOVIB	ECHO/COD/210/ 2001/01010	3,38	0,00	75,00	10,50	0,00	5,61	5,50	0,01	1200
PSF	ECHO/COD/210/ 2001/01016	17,42	15,77	26,75	4,30	13,96	10,67	5,98	5,15	465
Average 2001		15,91	8,93	41,50	6,33	10,12	8,29	5,87	3,06	<u>8900</u>
	ECHO/COD/210/		d Secu	rity and	Nutritio	<u>1</u>				
ACF	2001/01025 ECHO/COD/210/	11,42	19,17	33,65	8,00	10,35	8,99	5,93	2,50	670
CARITAS Espagne	2001/01013 ECHO/COD/210/	5,40	14,84	70,94	0,00	0,00	0,65	5,59	2,57	1000
ICRC-CH	2001/01007 ECHO/COD/210/									2000
Merlin	2001/01001 ECHO/COD/210/	12,86		40,41	3,14	13,83	2,89	6,27	4,20	210
MSF-BE	2001/01017 ECHO/COD/210/	14,14	17,70	32,03	12,60	9,86	1,82	6,02	5,84	350
Solidarites	2001/01029									
UN-WFP-PAM	ECHO/COD/210/ 2001/01020 ECHO/COD/210/	2,87	1,38	35,89	11,54	36,86	11,43	0,00	0,04	4500
World Vision	2001/01024	18,00 10,78		18,56 38,58	3,96 6,54	18,03 14,82	12,44 6,37	6,48 5,05	0,00	250 8980
Average 2001		10,76	13,34	30,30	0,54	14,02	0,37	3,03	2,52	0900
	Auxiliary Sup									
German Agro	ECHO/COD/210/	9,00	12,95	46,16	0,00	19,30	4,52	5,39	2,68	1200

Global Plan 2001										
NGO	Sector / Contract Number	Expa- riate Staff %	Local Staff %	Items & Servic es %	Inter- natio- nal Trans- port %	Local Transp ort %	Auxi- liary Expen -ses %	Ad- minis- tration %	Re- serve %	Final Amount (thou- sand EURO)
Action	2001/01008									
Save the Children	ECHO/COD/210/ 2001/01009	5,79	14,98	51,05	0,00	7,30	11,36	5,83	3,69	700
German Agro Action	ECHO/COD/210/ 2001/01004	16,88	19,31	16,63	0,00	24,09	14,83	5,80	2,47	800
UN-UNHCR-BE	ECHO/COD/210/ 2001/01003	7,2	1,20	79,60	0,00	6,02	2,45	3,53	0,00	3750
	Average 2001	9,72	12,11	48,36	0,00	14,18	8,29	5,14	2,21	<u>6450</u>
Water Sanitation										
Oxfam	ECHO/COD/210/ 2001/01022	8,18	15,31	30,01	0,00	18,52	19,37	5,94	2,66	<u>655</u>
Overall Average 2001		<u>11,15</u>	<u>12,92</u>	<u>39,61</u>	<u>3,22</u>	<u>14,41</u>	<u>10,58</u>	<u>5,5</u>	<u>2,61</u>	

Remark:

Figures based on available budget breakdowns at the time of evaluation. Figures have to be interpreted with utmost care since some of the ECHO partners receive co-financing (proper funds or other donors) and project approaches are often not comparable.

Table 10 – ECHO reaction time on requests

		GP 2000			
NGO	Contract Number	Duration (in months)	Date of Request	Start of Operation	Difference (in weeks)
	Auxiliary Support Schem				
CAFOD	ECHO/ZAR/210/2000/01034	3	12.12.00	15.12.00	0,4
German Agro Action	ECHO/ZAR/210/2000/01004	7	31.05.00	01.06.00	0,1
	ECHO/ZAR/210/2000/01009	6	22.06.00	01.07.00	1,3
German Agro Action	ECHO/ZAR/210/2000/01002	8	09.03.00	01.05.00	
	ECH	O Functio	ning		
Delegation Rwanda	ECHO/ZAR/210/2000/01021	10		01.12.00	
Delegation Zaire	ECHO/ZAR/210/2000/01025	7		01.12.00	
	Food Se	curity and	Nutrition		
ACF – France	ECHO/ZAR/210/2000/01028	6	15.09.00	01.10.00	2,3
Action Contre La Faim	ECHO/ZAR/210/2000/01012	9	27.03.00	01.06.00	9,4
AVSI	ECHO/ZAR/210/2000/01013	7	06.01.00	01.07.00	25,3
CARITAS Secours International	ECHO/ZAR/210/2000/01001	6	11.04.00	15.05.00	4,9
CARITAS- Espagne	ECHO/ZAR/210/2000/01017	5	08.06.00	01.08.00	7,7
CICR	ECHO/ZAR/210/2000/01024	6	31.03.00		0,1
COOPI	ECHO/ZAR/210/2000/01036	8	21.11.00		-2,9
MSF-BE	ECHO/ZAR/210/2000/01033	3	13.10.00	16.10.00	0,4
SOLIDARITES	ECHO/ZAR/210/2000/01026	6	24.10.00		
UN - WFP - PAM	ECHO/ZAR/210/2000/01038	4	18.12.00	01.01.01	2,0
	i e e e e e e e e e e e e e e e e e e e	lic Health			
ALISEI	ECHO/ZAR/210/2000/01031	7	16.10.00		
CAFOD UK	ECHO/ZAR/210/2000/01023	2	06.09.00		12,3
COOPI	ECHO/ZAR/210/2000/01005	6	04.02.00		16,9
FOMETRO	ECHO/ZAR/210/2000/01032	6	11.09.00		· · · · · · · · · · · · · · · · · · ·
Johanniter Malteser	ECHO/ZAR/210/2000/01020 ECHO/ZAR/210/2000/01014	5	06.07.00 06.06.00	01.08.00 01.08.00	3,7 8,0
Malteser - DE	ECHO/ZAR/210/2000/01014 ECHO/ZAR/210/2000/01016	5	27.07.00		0,7
MEDAIR	ECHO/ZAR/210/2000/01010 ECHO/ZAR/210/2000/01003	7	15.05.00		
Médecins du Monde - France	ECHO/ZAR/210/2000/01011	6	11.05.00		
MEMISA Belgique	ECHO/ZAR/210/2000/01006	6	03.03.00	23.06.00	16,0
MERLIN	ECHO/ZAR/210/2000/01010	8	18.04.00		1,9
MERLIN	ECHO/ZAR/210/2000/01022	7	17.08.00		15,1
MSF-B	ECHO/ZAR/210/2000/01007	3	14.06.00		
MSF-BE	ECHO/ZAR/210/2000/01037	6	06:07:00		
MSF-Belgique	ECHO/ZAR/210/2000/01015	6	06.06.00	01.07.00	3,6
MSF-Belgique	ECHO/ZAR/210/2000/01027	3	28.09.00	01.10.00	0,4
NOVIB/ASRAMES	ECHO/ZAR/210/2000/01029	4	03.11.00	16.09.00	-6,9
UN-UNICEF-INT	ECHO/ZAR/210/2000/01035	3	05.01.01	01.03.01	7,9
		ter Sanita			
MSF-H	ECHO/ZAR/210/2000/01030	8	25.08.00		
OXFAM GB	ECHO/ZAR/210/2000/01039	3	28.11.00		4,9
OXFAM-GB	ECHO/ZAR/210/2000/01019	6	23.03.00		
Oxfam-UK	ECHO/ZAR/210/2000/01008	7	11.02.00		
OXFAM-UK	ECHO/ZAR/210/2000/01018	6	29.05.00	16.06.00	2,6

	GP 2001										
NGO	Contract Number	Duration (in months)	Date of Request	Start of Operation	Difference (in weeks)						
Auxiliary Support Schemes (Food Security oriented Projects)											
German Agro Action	ECHO/COD/210/2001/01004	10	01.02.01	01.03.01	4,0						
German Agro Action	ECHO/COD/210/2001/01008	12	28.12.00	01.01.01	0,6						
Save the Children	ECHO/COD/210/2001/01009	12	04.01.01	01.01.01	-0,4						
UN- UNHCR – BE	ECHO/COD/210/2001/01003	12	31.01.01	01.01.01	-4,3						
		Security and									
ACF	ECHO/COD/210/2001/01025	6	04.05.01								
CARITAS Espagne	ECHO/COD/210/2001/01013	12	15.11.00	01.01.01	6,7						
ICRC - CH	ECHO/COD/210/2001/01007	0	22.12.00								
Merlin	ECHO/COD/210/2001/01001	3	30.01.01	01.03.01	4,3						
MSF-BE	ECHO/COD/210/2001/01017	6	26.02.01	15.02.01	-1,6						
Solidarites	ECHO/COD/210/2001/01029										
UN-WFP-PAM	ECHO/COD/210/2001/01020	6	12.04.01	01.09.01	20,3						
World Vision	ECHO/COD/210/2001/01024	6	29.05.01	01.07.01	4,7						
	Pι	ıblic Health	Care								
Alisei	ECHO/COD/210/2001/01030		20.06.01								
AMI-France	ECHO/COD/210/2001/01021	7	27.04.01	01.06.01	5,0						
COOPI	ECHO/COD/210/2001/01005	7	30.01.01	01.02.01	0,3						
Johanniter	ECHO/COD/210/2001/01027	7	05.06.01	01.07.01	3,7						
Malteser - DE	ECHO/COD/210/2001/01012	12	28.12.00	01.01.01	0,6						
Malteser-DE	ECHO/COD/210/2001/01015	11	19.02.01	01.02.01	-2,6						
MEDAIR	ECHO/COD/210/2001/01006	11	30.01.01	01.02.01	0,3						
MEMISA	ECHO/COD/210/2001/01011	11	20.12.00	01.02.01	6,1						
Merlin	ECHO/COD/210/2001/01014	10	19.02.01	01.01.01	-7,0						
MSF-BE	ECHO/COD/210/2001/01018	0									
MSF-BE	ECHO/COD/210/2001/01019	0									
MSF-BE	ECHO/COD/210/2001/01028										
MSF-Belgique	ECHO/COD/210/2001/01002	12	29.12.00	01.01.01	0,4						
MSF-ES	ECHO/COD/210/2001/01023	3	19.04.01	01.05.01	1,7						
MSF-France	ECHO/COD/210/2001/01026	2	07.06.01	01.07.01	3,4						
NOVIB	ECHO/COD/210/2001/01010	9	10.01.01	01.03.01	7,1						
PSF	ECHO/COD/210/2001/01016	9	13.03.01	01.05.01	7,0						
	V	Vater Sanit	ation								
Oxfam	ECHO/COD/210/2001/01022	6	20.04.01	01.06.01	6,0						

Remark: ECHO. Figures computed from data are contained in the documentation (fichops) of

<u>Table 11 – Cost-Effectiveness Analysis/Model (Health Sector)</u>

			theoric population	# CS covered	# CSR covered	# HGR covered	total # of curative cons.	annual Utilisation	average NC /day /Health Centre	Reference	average# inhabitant per
NGO	Province	# of ZS	covered	31/12	31/12	31/12	per month (CS)	Rate	(CS+CRS)	period	CS /CSR
co-financed pr	•										
ASRAMES	Nord-Kivu	19	3.528.498	242	19		113.188	0,38	14	JANO1 - MARS O1	13.519
MEDAIR	P. Orientale	19	2.550.264	225	31	21	55.988	0,26	7	J ANOI	9.962
MERLIN	Maniema	3	450.324	52	7	2	23.892	0,64	13	AVRLO1 - JUINO1	7.633
not co-finance	d projects										
MALTESER	Sud-Kivu	2	498.067	43	10	1	10.668	0,26	7	JAN01 - MARS 01	9.397
ALISEI	Katanga	5	824.063	17	0	5	12.333	0,18	24	AVRLO1 - JUINO1	48.474
MALTESER	P. Orientale	6	1.393.936	119	10	6	29.680	0,26	8	JAN-JUNO1	10.806
FOMETRO	Maniema	3	571.259	49	9	3	18.676	0,39	11	MARS OI JUINOI	9.849
	TOTAL	57	9.816.411	747	86	55	264.424	0,32	11		
		# months									
		covered by		average	annual	% of budget	annuel staff	% of budget	annuel medical		average budget
NGO	Province	present budget	Present budget	monthly	budget / inhab.in €	allocated to staff	budget / inhab. in €	allocated to medicines	budget / inhab. in €	average budget / NC (€)	
		buaget	(€)	budget (€)	IIIIab.III €	Starr	E	medicines	€	/ NC (€)	year (€)
co-financed pr	Nord-Kivu	9	1.200.000	133.333	0,45	3%	0.01	75%	0,34	1,18	6130
MEDAIR	P. Orientale	11	1.385.000	125.909	0,45	26%	0,01	36%	0,34	2,25	5902
MERLIN	Maniema					30%		36%	,		
-		10	715.000	71.500	1,91	30%	0,57	30%	0,69	2,99	14542
not co-finance	Sud-Kivu	40	5.45.000	45 447	4.00	0.40/	0.07	070/	0.40	4.00	40000
MALTESER		12	545.000	45.417	1,09	34%	0,37	37%	0,40	4,26	10283
ALISEI	Katanga	8	750.000	93.750	1,37		-		-	7,60	66176
MALTESER	P. Orientale	11	1.200.000	109.091	0,94	30%	0,28	41%	0,39	3,68	10148
FOMETRO	Maniema	6	400.000	66.667	1,40	17%	0,24	46%	0,64	3,57	13793
	Average			92.238	1,11		0,23		0,38	3,65	18.139

Remark: the Health sector report.

The colours show the extremes (red=maximum; blue=minimum) – For detailed analysis and interpretation please see

Table 12 – Performance Analysis/Model (Drug Supply System)

General Performance of Supply Systems of PHC Drugs

		ALISEI	ASRAM ES	FOMET RO	MALTE SER	MALTE SER	MEDAI R	MEDAI R	MEMIS A	MERLIN	MSF-B	MSF-B	- Average -
	contribut ion [%		ECHO	project	Ariwara	Bukavu	Bunia	Isiro	(CDI only)		Gbadolit e	Kisanga ni	
QC/QA aspects	35 %	0	0	<u>31,6</u>	43,3	<u>21,1</u>	0	0	60,0	11,9	0	43,3	19,2
Rational use of drugs	45 %	90,3	47,7	17,7	100	<u>70,8</u>	100	100	82,8	67,3	27,3	65,1	69,9
Risk of losses due to theft or embezzlement	20 %	94,8	17,5	21,7	100	72,5	100	100	100	76,9	20,7	20,7	65,9
% of scores	+/- avera ge	,		23,4	80,2	53,7	65,0	65,0	78,3	49,8	16,4	48,6	51,4

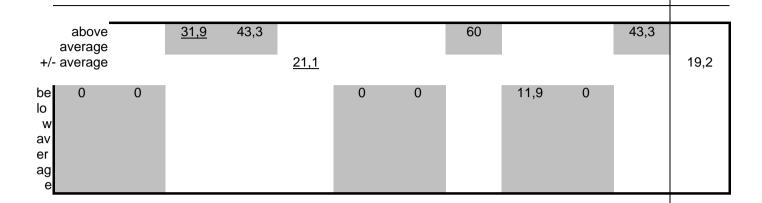
<u>n.a.</u> is valued at the average of available information

Quality control and assurance

		ALISEI	ASRAM ES	FOMET RO	MALTE SER	MALTE SER	MEDAI R	MEDAI R	MEMIS A	MERLIN	MSF-B	MSF-B	- Average
	cont [%]	ribution	ECHO	project	Ariwara	Bukavu	Bunia	Isiro	(CDI only)		Gbabolit e	Kisanga ni	-
Purchase applying knowledge of QC/AQ (GMP, product license, batch certificate) Supply using cool	40 %	0	0	n.a.	0 20	0 n.a.	0	0	n.a. 20	0	0	0	0,0
systems for sensitive goods (Ergo- metrine inj; Oxytocine inj) Central store using cool	% 20 %	0	0	20	20	n.a.	0	0	20	n.a.	0	20	8,6
systems for sensitive goods (Ergo.inj; Oxyto.inj) Retail store using cool systems for sensitive	20 %	0	0	n.a.	n.a.	n.a.	0	0	20	0	0	n.a.	3,3

goods (Ergo.inj; Oxyto.inj)

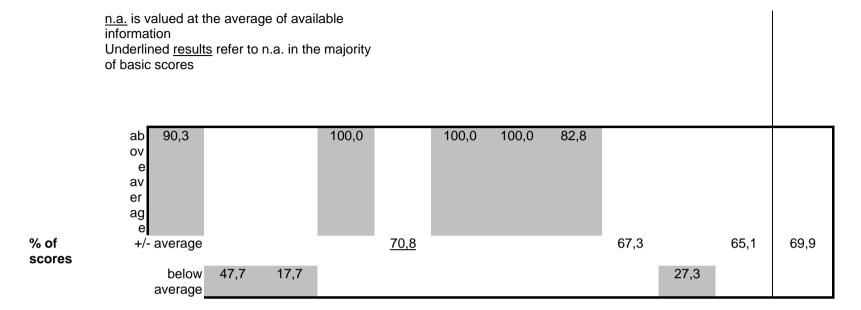
% of scores



n.a. is valued at the average of available information
 Underlined <u>results</u> refer to n.a. in the majority of basic scores
 Italic "% of score" <u>results</u> represent the minimal standard within the visited projects

Rational use of drugs

		ALISEI	ASRAM ES	FOMET RO	MALTE SER	MALTE SER	MEDAIR	MEDAIR	MEMIS A	MERLIN	MSF-B	MSF-B	- Average
	contr	ibution	ECHO	project	Ariwara	Bukavu	Bunia	Isiro	(CDI only)		Gbadolit e	Kisanga ni	-
Trainers/Supervisors trained	20 %	20	20	20	20	n.a.	20	20	20	20	10	20	19,0
Training material developed	20 %	20	20	0	20	n.a.	20	20	n.a.	n.a.	20	20	17,5
and/or distributed Infirmier/s at CS/CSR trained	20 %	20	20	10	20	20	20	20	20	20	10	n.a.	18,0
Regular supervision by the project/supply staff supervisor (as a rule not less the	20 %	n.a.	2	n.a.	20	n.a.	20	20	20	10	5	10	13,4
times per year) Regular explanation of weak- nesses (encountered during request procedure) within 1 month	20 %	20	2	0	20	10	20	20	n.a.	10	5	10	10,7
		93,4	64	43,4	100	<u>79,9</u>	100	100	88,2	77,5	50	76	79,3



For evaluation of the performance, the minimal required performance (= 0%) is set at "40% of average scores" and the best result represents "100% of possible scores"

<u>Reason</u>: What could be performed without any intention is not "quality of performance" (is no Center of Excellence).

Prevention against theft and embezzlement

		ALISEI	ASRAM ES	RO	MALTE SER	MALTE SER Bukavu	MEDAI R Bunia	MEDAI R	MEMIS A (CDI	MERLI N	MSF-B	MSF-B	- Averag e-
	cont [%]	ribution		project	Anwara	Бикачи	Durila	Isiro	only)		Gbabolit e	ni ni	
Control by documentation tools (forms, journals, etc) a realistic risk prevention certain risk prevention no realistic risk prevention	ma 65 x. % allows for 65 % 32 % 0%	65	26,55	37,3	65	53,45	65	65	65	53,45	25,75	25,75	49,8
- at Central store	15% thereof	9,75	9,75	4,8	9,75	9,75	9,75	9,75	9,75	9,75	9,75	9,75	9,3
- at BCZS level	50% thereof	16	0	n.involv.				n.involv.	32,5	n.involv.	16	16	25,0
- at CS/CSR	35% thereof	22,75	16,8	0	22,75	11,2	22,75	22,75	22,75	11,2	0	0	13,9
Storage supports - realistic risk prevention - certain risk prevention - no realistic risk prevention	ma 35 x. % 35 % 18 % 0%	32,4	32,2	23,6	35	32,8	35	35	35	35	34,6	34,6	33,2
· - at Central store	65% thereof	11,7	22,75	11,7	22,75	n.a.	22,75	22,75	22,75	22,75	22,75	22,75	20,5

20,7



	- at CS/CSR	35% thereof	n.a.	9,45	n.a.	12,25	12,25	12,25	12,25	12,25	12,25	n.a.	n.a.	11,9
		-	97,4	58,8	60,9	100,0	86,2	100,0	100,0	100,0	88,5	60,4	60,4	82,9
(1)	For validation procedures of three levels a	only		ertain/no										
(2)	effect) The procedure prevention at 3 or 2 storacertain degree (%) The multiplication in the indicated figures represented the sub-total.	age levels of ation of both ures. The b sent	concerned th figures	ed at a	o of ovoill	ahla								
		n.a. is val information n.involv. is times of "o Underline of basic s	on s valued a continuou ed <u>results</u>	at 100% a	as this is y"	the best tl	he prever	ntion at B	CZS-leve	I in the pr	esent			
		abo ve ave rag e				100,0		100,0	100,0	100,0	76,9			
	% of scores	+/-	average				72,5							65,9

below 17,5

average

21,7



For evaluation of the performance, the minimal required performance (= 0%) is set "50% of possible scores"

<u>Reason</u>: What could be prevented without any intention is not "quality of prevention" (is no Center of Excellence).

$$100\% = 100,0$$

$$0\% = 50,0$$



<u>Table 13 – Survey on Food Security and Nutrition Projects</u>

Sector / Partner	Contract	Duration in months	Amount in thousand (s) EURO	Number of beneficiaries	Amount per month in thousand (s) EURO	Amount per beneficiary	Amount per month/ per beneficiary	Province/ Region	Remarks
Nutrition - (main co	omponent)								·
GP 2000									
ACF - France	ECHO/ZAR/210/2000/01028	6	600	9.100	100	65,93		S. Kivu	
Action Contre La Faim	ECHO/ZAR/210/2000/01012	9	430	5.700	48	75,44		West DRC - Kinshasa	
CARITAS-Espagne	ECHO/ZAR/210/2000/01017	5	400	54.250	80	7,37	1,47	S. Kivu	Combined N/F Co-financed
CARITAS Sec.Int.	ECHO/ZAR/210/2000/01001	6	500	3.600	83	138,89	23,15	Kinshasa	Combined N/F/W/NFI
SOLIDARITES	ECHO/ZAR/210/2000/01026	6	500	115.390	83	4,33	0,72	N. Kivu	Combined N/W
MSF-BE	ECHO/ZAR/210/2000/01033	3	300	450	100	666,67	222,22	Basankusu	
COOPI	ECHO/ZAR/210/2000/01036	8	1000	20.000	125	50,00	6,25	Ituri	
	Tota		<u>3730</u>	208.490	Average:	<u>17,89</u>			
GP 2001									
ACF	ECHO/COD/210/2001/01025	6	670	16.230	112	41,28	6,88	S.Kivu II	
Merlin	ECHO/COD/210/2001/01001	3	210	7.800	70	26,92	8,97	Kalima Town	
CARITAS Espagne	ECHO/COD/210/2001/01013	12	1000	69.000	83	14,49	1,21	S. Kivu II	Combined N/F
MSF-BE	ECHO/COD/210/2001/01017	6	350	900	58	388,89	64,81	Basankusu II	
World Vision	ECHO/COD/210/2001/01024	6	250	8.800	42	28,41	4,73	Gr. N. Kivu	Combined N/PHC
	Total		2480	102.730	Average:	<u>24,14</u>			



Food Security - (main component)

GP 2000

GF 2000									
German Agro Action	ECHO/ZAR/210/2000/01002	8	1150	35.550	144	32,35	4,04	Ituri	Combined Food Aid / NFI/F
German Agro Action	ECHO/ZAR/210/2000/01004	7	850	575.000	121	1,48	0,21	Nord Kivu	Combined F/R. co-financed USAID/BMZ
Save The Children	ECHO/ZAR/210/2000/01009	6	500	221.200	83	2,26	0,38	N./S. Kivu I	Combined F/R/NFI
AVSI	ECHO/ZAR/210/2000/01013	7	355	110.000	51	3,23	0,46	Uvira / S Kivu	Combined F/R/PHC
CAFOD	ECHO/ZAR/210/2000/01034	3	200	20.000	67	10,00	3,33	N. Kivu	F/NFI/R
	Total		<u>3055</u>	961.750	Average:	<u>3,18</u>			
GP 2001									
German Agro Action	ECHO/COD/210/2001/01004	10	800	66.250	80	12,08	1,21	Ituri II	
German Agro Action	ECHO/COD/210/2001/01008	12	1200	170.000	100	7,06	0,59	Nord Kivu II	Combined F/R co-financed USAID/BMZ/WFP
Save the Children	ECHO/COD/210/2001/01009	12	700	237.415	58	2,95	0,25	N./S. Kivu II	Combined F/R/NFI
	Total		<u>2700</u>	<u>473.665</u>	Average:	<u>5,70</u>			
Others - Food Aid	I/Assistance to IDPs & Re	fugees							
GP 2000									
CICR	ECHO/ZAR/210/2000/01024	6	2000	500.000	333	4,00	0,67	Country wide	Combined Food Aid/NFI
UN - WFP - PAM	ECHO/ZAR/210/2000/01038	4	1500	80.000	375	18,75	4,69	West DRC	
GP 2001	·								
UN-WFP-PAM	ECHO/COD/210/2001/01020	6	4500	100.000	750	45,00	7,50		

Components

F - Food Security

NFI - Non-Food Items

N - Nutritional Component

W - Water & Sanitation

PHC - Public Health Care

R - Rehabilitation

Remark: Calculations are based on information available during the period of the evaluation. The definition by section (Nutrition; Food Security; Others) is based on the main activities within a project. Due to the varying project approaches and components included in the single projects, a simple comparison of projects and unit costs is difficult to undertake. This is also because some of the projects receive substantial co-financing from other donors.



Annex 7 – Presentation of Explanations

Explanation 1 – Field Based LRRD Task Force

LRRD Task Force – F]	
<u>Personnel</u>		Remarks
Technical Assistant Humanitarian Aid Programmes	Technical Assistant Development Programmes	Very general definition of the team composition should provide understanding but
Public Health Expert	Regional Development Expert	requires precision.
<u>Assigned Tasks</u>		
 Sector Coordination Public Health and Nutrition/ Food Security Baseline Standardisation of project approaches ECHO Interface Definition (LRRD) Monitoring of humanitarian projects with focus on compatibility with standardised approaches Documentation of experiences with standardisation Coordination of LRRD related activities with other humanitarian donors 	 Sector Coordination Rehabilitation Programmes (currently humanitarian funding) Preparation of regional development strategies for selected areas / regions Preparation of handing over processes Monitoring of development programmes Promotion of projects (EC internal and other donors) Documentation of experiences with handing over processes Coordination of LRRD activities with other development donors 	Precise TOR and job descriptions for the team members have to be worked out.



Overall Goal		
Successful promotion of standardisation of project approaches and interface design	Successful handing over processes implemented (EC internal /MS – Other Donors)	Objectives have to be properly defined.
<u>Funding</u>		
Possible funding by humanitarian budget	Possible funding by development budget	Depending on the EC administrative and contractual procedures.
<u>Coordination</u>		
Brussels: LRRD Steering Committee EC Local: EC Delegation Kinshasa / ECHC	Proposition	



Explanation 2 – Proposed Programming Schedule

Proposed Programming Schedule

The following list of recommended basic steps to prepare a GP, is not meant to provide a comprehensive procedural framework, but to indicate the necessity of having a strategy before starting a more technical planning exercise.

In addition, it includes the element that the partners are requested to endorse, structured operational planning documents. This operational planning should be based on needs assessments, including a properly worked out logical framework for each of their planned activities. The proposed steps are presented in chronological order and are the following:

- Preparation of a Strategy Paper by ECHO
 (Based on previous experience and the current situation in DRC)
- Information about the partners on the proposed ECHO country strategy and a request for the submission of their structured operation planning for the coming 12 months
- First conceptual GP draft (based on partners inputs and ECHO experience)
- Field mission exercise, including technical sector coordination meetings (used to discuss projects and to ameliorate GP conception by sector of intervention)
- Revision of the draft country programme (GP) based on the field mission results
- Presentation of the country strategy to the Humanitarian Assistance Committee
- Information on the partners (field level and headquarter level) and other parties involved in the decision-making, the strategies and the anticipated implementation procedures for the coming 12 months of operation. (this should be done with a "public version" of the GP, which needs to be prepared)

The currently applied timing of the planning process (Information of the partners in August; Field Mission in October; Decision in January of the following Year) is adequate and should be kept.



Information Policy

The evaluation considers it important that the partners (field and headquarter) and other parties (donors, government, rebel movements) are well informed about the ECHO strategy, the operational priorities and the implementation procedures of the Global Plan. Therefore, we recommend preparing a "public version" adapted to the needs of these target groups. This version of the GP could be widely distributed and used also for PR/Visibility/Transparency related measures.

Further Advantages

Given the situation where the ECHO partners follow the request for the preparation of well structured operational plans (including the provision of reliable figures on beneficiaries and the definition of realistic objectives), ECHO would be in the position to develop an adequate performance monitoring instrument, for the future Global Plan for DRC, including a proper cost-efficiency assessment scheme.



Explanation 3 – Definition of Objectives – Core Sectors of Intervention

Objectives GP 2000 Objectives GP 2001 Public Health Care

To ensure access to basic health facilities to To approx 87 Health Districts (out of 306) per

approx. 87 Health Districts (out of 306) corresponding with approx. 14 million inhabitants, who are covered at +- 25% (equivalent to 2.6 million new medical contacts/9 months). To provide essential drugs and medical supplies, training in rationalisation of drugs, epidemic surveillance, support to centralised drug management systems and revolving drug systems. The programme is concentrating mainly on the provinces of Equateur, Orientale, Kasai, Kivu, Katanga, Maniema, Bas-Congo in selective health zones. Selection criteria for the health districts are, the presence of IDPs, access and security, deficient health facilities due to lack of drugs and medical supplies.

To establish surveillance and epidemiological monitoring nationwide and the continuation of the rapid reaction teams to provide initial response to medical emergencies.

To reduce mortality rates from common pathologies among the population of some 102 Health Districts, i.e. an estimated 15 million people, by improving access to basic healthcare facilities through the provision of essential drugs and medical supplies, support to centralised drug procurement and decentralised cost recovery systems, training in rational drug management, epidemiological surveillance & reporting. The programme will focus on Equateur, Ituri & Orientale, E. Kasai, Kivus, Katanga, and Maniema.

To contain mortality caused by epidemics, war wounds and exposure, by supporting a nationwide surveillance and emergency medical and non-medical capacity for rapid intervention.

Food Security and Nutrition

To contribute to the reduction of acute global malnutrition in supporting therapeutic and supplementary programmes for targeted

To reduce the incidence and impact of global acute malnutrition by supporting therapeutic and supplementary programmes, integrated with food



vulnerable group feeding. The programme will be for a limited number of beneficiaries, concentrated mainly in urban areas where accessible (...) and in rural areas where accessible. To promote and support wider food security activities (seeds and tools).

aid and food security interventions, targeting the families of malnourished children. The programme will focus on the main centres of malnutrition, selected solely on the basis of stringent anthropometrical criteria.



