

EVALUATION REPORT

ECHO-funded drought relief programme in Kenya and Ethiopia

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The comments contained herein reflect the opinions of the consultants only.

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I. EXECUTIVE SUMMARY

a. Evaluated Action

The evaluation is related to ECHO actions as a response to serious drought conditions in Kenya and Ethiopia, over a period of three years (2000 –2002).

b. Date of the Evaluation

The evaluation was carried out between September 19th and October 3rd 2002

Mission in Kenya: From September 19th to September 24th 2002

From October 1st to October 3rd 2002

Mission in Ethiopia: From September 25th to September 30th

c. Consultants

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d. Purpose and Methodology

Purpose of the evaluation

- To assess ECHO's contribution as a response to a variety of needs in the Horn of Africa region and, in particular, in Kenya and Ethiopia
- To analyse the planning and implementation of ECHO's intervention and to analyse its integration with local conditions and customs
- To analyse the degree to which objectives were met
- To assess the effectiveness of the means employed
- To quantify the relevance and impact of ECHO's actions
- To analyse the links between Emergency, Relief, Rehabilitation and Development in terms of sustainability
- To examine the participation of the beneficiary population
- To verify the visibility of ECHO

Methodology of the evaluation

The evaluation started in Kenya with a general meeting with ECHO's TA for Kenya and ECHO's Water and Sanitation TA. The evaluation team held meetings in Nairobi with ECHO's partners¹, the EC/CDTF Officer, UN agencies², and Kenyan Ministries³ in order to gain a deeper insight into the policy and strategy implemented in the country.

The evaluation team visited some ECHO funded projects (Oxfam, VSF-CH and MSF-E in Mandera and AAH in El Wak). See Annex III for a list of meetings organised and sites visited.

A general debriefing meeting with ECHO's partners and all other actors took place in Kenya, as well as a separate meeting with ECHO's Regional Co-ordinator and ECHO TA for Kenya, in order to exchange and discuss observations relating to ECHO's actions in Kenya.

¹ INTERMON/Oxfam-US, VSF-CH, MSF-E, COOPI, CORDAID and EPAG-Kenyan NGO, AAH-UK. - Kenya

² WFP, UNICEF, OCHA, FAO and FEWS

³ The Office of the President – OoP and the Ministry of Agriculture and Rural Development – MoARD

The evaluation team continued its mission in Ethiopia. Due to several constraints, the team was unable to follow the methodology applied in the other regions. Meetings with major UN agencies, donors and Line Ministries, as well as the planned field visit, could not be organised⁴.

The evaluation team held separate meetings with ECHO's partners⁵, World Food Programme, United Nations Emergency Unit of Ethiopia (UN EUE) and EC/Food Security Unit.

The general debriefing meeting with ECHO's partners and other organisations and/or institutions could not be held. Nevertheless, ECHO's Water and Sanitation TA and ECHO's Regional Coordinator were informed individually about the findings.

Data for this report was collected from ECHO partners in Kenya and Ethiopia, the EC/Community Development Trust Fund/Kenya, EC/Food Security Unit/Ethiopia, UN agencies, donors and Line Ministries, as well as from local political and institutional authorities, project staff, local counterparts and direct/indirect beneficiaries.

e. Main conclusions

i) *Relevance*

The provision of **rapid emergency assistance** to areas in Kenya and Ethiopia most affected by drought, and helping the vulnerable communities with disaster preparedness strategies **in case of future drought** through the strengthening of community based systems, improved capacity building and early warning systems, have been relevant in the design of ECHO's intervention. Project supports were focusing on:

- Nutrition with dry Supplementary -, Therapeutic - and School feeding (sun-dried meat), Nutritional surveys and Surveillance;
- Health with measles vaccination, provision of Health kits to hospitals, Health Centres and Health Posts as well as health education;
- Veterinary Health with treatment and vaccination, rehabilitation and construction of water sources (bore holes, wells and pans), capacity building in and management of livestock surveillance and establishment of a cost-recovery system;
- Water supply for human consumption through water storage, rehabilitation and construction of water sources (bore holes, traditional wells, underground tanks), management of the water sources and establishment of a cost-recovery system;
- Food Security with production of sun-dried meat, set-up of fodder production farms and increase of agricultural land through rehabilitation of irrigation systems (Ethiopia);
- The establishment of an Early Warning and Preparedness system, mainly in Ethiopia.

The targeting of the pastoralist and agro-pastoralist communities (2.2 million and 4 million indirect beneficiaries for Kenya and Ethiopia respectively) and their livestock (approximately 2.8 million for Kenya) in the Somali regions of Kenya and Ethiopia has been adequate as these communities were directly hit by the drought crisis.

ECHO's two-phase strategy, namely a first rapid and immediate reaction followed by a recovery and drought preparedness phase, has been a good response to the urgent needs of the different targeted regions and beneficiaries. The urgent needs to be tackled were: an increase of global and severe acute malnutrition with high mortality rates in the infant population (above 3/10,000/day, particularly in Ethiopia), depletion of the livestock (main food and income generating source) and lack and/or absence of water supply for both human and animal consumption.

The tables below give an overview of the priority sectors, activities and beneficiaries supported by ECHO:

⁴ Friday September 27th was a national holiday and none of these actors could be reached before Monday September 30th. The planned return on September 30th to Nairobi could not be delayed as the team had already planned several meetings for October 1st.

⁵ MSF-B SCF-UK, SCF-US, COOPI, LVIA, OXFAM, ACF-F and ICRC - Ethiopia

Kenya:

SECTORS	AGENCIES	ACTIVITIES	LOCATION	BENEFICIARIES	AMOUNT IN €
Food Aid & Nutrition	UNICEF	Dry Supplementary Feeding Supply Nutritional surveys & surveillance	Marsabit, Wajir, Mandera & Moyale Districts	Total: 747,000 Affected: 623,000 (83%)	1,000,000 1,000,000 200,000
	AAH-UK	Nutritional Surveys & Surveillance, Nutritional Causal Analysis Dry SF, Health Education	EI-Wak sub-district Mandera District	2,500 (direct)	260,000 250,000
	MSF-E	TF Centre, Nutritional surveillance & training, Health Education	Mandera District, Town	500 (direct)	100,000
Water & Sanitation	AAH-UK	Borehole surveys & assessment	Moyale district	54,000	460,000 380,000
		Rehabilitation boreholes, wells, pans, Vector control and Sanitation Technical Capacity building	Mandera District	150,000	700,000
	CORDAID	Support to PMU and PAC, Rehabilitation boreholes, wells, springs, Hygiene	Mandera, Wajir, Garissa & Isiolo Districts	50,000 to 75,000 (direct)	350,000 900,000
	INTERMON	Water resources mapping Rehabilitation of wells, pans & water sources, Training and Hygiene	Mandera District	60,500 (direct) 100,000 (indirect)	470,000 460,000
MERLIN	Waste Disposal System, Health, sanitation and hygiene education,	Wajir District	60,000 (direct)	360,000	
Livestock	VSF-CH	Veterinary Health & Surveillance, Capacity building, de-stocking & off take	Garissa, Wajir & Mandera Districts	Total: 961,000 Affected: 681,000 (71%)	470,000
	TERRA NUOVA	Livestock health & vaccination Training of AHAs and CAHWs Community animal delivery system	Mandera, Wajir & Garissa Districts	615,000	500,000
	CORDAID	Support for sustainable initiatives to diversify livelihood	Mandera, Wajir, Garissa & Isiolo Districts	230,000	(900,000)*
	COOPI	Livestock Health, vaccination, Training of CAHWs & Consolidate network	Samburu, Marsabit & Moyale Districts	Total : 318,000 Affected: 83%	500,000 680,000
Food Security	COOPI	School feeding with Sun dried Meat production from the off-take	Samburu, Marsabit & Moyale Districts	40,000 (direct)	390,000 (500,000)* (680,000)
Health	UNICEF	Vaccination Provision of emergency Health Kits	Marsabit, Wajir, Mandera & Moyale Districts	Total: 747,000 Affected: 623,000 (83%)	(1,000,000)* (25%)
Co-ordination	CORDAID	Setting-up of core Project Management Team within the CDTF	7 Districts		1,000,000
	ECHO	Coordination & monitoring	22 Districts	2,200,000	600,000

* (): Different projects under one Contract Decision No

Ethiopia:

SECTORS	AGENCIES	ACTIVITIES	LOCATION	BENEF.	AMOUNT IN €
Food Aid & Nutrition	ICRC	Dry Supplementary Feeding Supply	Gode Zone	188,888 (Pop. & IDPs)	2,000,000 1,500,000
	SCF-UK	Targeted Blanket S. Feeding	Fik Zone	44,500	500,000
	ACF-F	3 Outreach SFC and 1 TFC	Korahe Zone	12,000	380,000
	MSF-B	SFC and TFC	Denan District, Gode Region	50,000	675,000 375,000
	UNICEF	Nutritional Surveys & Surveillance, Training	12 Zones in Oromya, Somali & SNNPRG		(500,000)
	CONCERN Worldwide	10 SFC & TFC in HC, Capacity building	Badewacho woreda SNNP Region	4,000 in SFC & 300 in TFC	320,000
	DIA/ICCO	Dry Food to IDPs - Flood	Dubte, Afar Region	4,015	100,000
	LVIA	Nutritional surveying	Moyale Woredas	10,350 household	(350,000) *
	COOPI	Nutritional surveying	Filtu , Liben Zone	112,000	(600,000)
Water & Sanitation	ACF-F	Rehabilitation, maintenance of water sources Water tankering	Kebri-Dehar, Korahe Zone	125,000 32,000	410,000 300,000 55,000
	SCF-NL	Water tankering and water sources rehabilitation	Gode Zone Gode & Afder Zones	200,000	500,000 (750,000)
	MSF-B	Rehabilitation & treatment of water sources, Sanitation	Denan District, Gode Zone	50,000	(675,000) (375,000)
	OXFAM-UK	Water-sources rehabilitations, Community training, Cost-recovery	Shinile Zone Afar Region	45,000	350,000 275,000 100,000
	CARITAS-D	Water construction & rehabilitation, Cost-recovery	Shinile, Dire-Dawa & Haraghe Zones	425,000	(700,000)
	COOPI	Construction of water sources, Community management,	Filtu Woreda, Liben Zone	112,000	(600,000)
	Christian Aid (OWS)	Rehabilitation of wells & birkas, Latrines and hygiene	Deghabur Zone	53,000	230,000
	NOVIB	4.5 million L water supply	Warder, Degahbur Zones	75,000	85,000
Livestock	SCF-NL	Livestock Health, CAHWs Training, Surveillance	Gode Zone Gode & Afder Zone	1,4 Million livestock	(500,000) 750,000
	INTERMON	Vaccination of livestock	Afder and Liben Zones	150,000 livestock	(150,000)
	CARITAS-D	Livestock Health Services, Training CAHWs,	Shinile, Dire-Dawa & Haraghe Zones	950,000 livestock	500,000 700,000
	LVIA	Livestock Health & Surveillance	Moyale Woredas	116,000 livestock	350,000
	COOPI	Livestock Health & Surveillance	Filtu Woreda, Liben Zone	148,000 livestock	600,000
	ACF-F	Livestock Health, Training CAHWs	Korahe Zone	35,000 livestock	(300,000)
	Christian Aid (OWS)	Mobile Animal HC, training CAHWs, Cost-recovery	Aware Woreda Degahbur Zone	330,000 livestock	(230,000)
	NOVIB	900 T Fodder & 90,000 I supply	Warder & Degahbur Zones	30,000 livestock	(85,000)

Health	ACF-F	Mass Measles vaccination campaign	Kebri-Dehar, Korahe Zone	(30,000 children)	(410,000)
	UNICEF	Provision of Essential Drugs Kits (hospitals, HC and HS)	12 Zones in Oromya, Somali & SNNPRG		500,000
	INTERMON	Medical Supplies to HC Measles vaccination	Afder and Liben Zones	65,000 persons	150,00
	CONCERN Worldwide	Logistic & training support to Measles vaccination	Badewacho woreda SNNP Region	59,000 persons	(320,000)
	CARITAS-D	Staff support, Training CHWs-TBA, provision Kits, Basic rehabilitation of HP	Shinile Zone, Dire-Dawa & Haraghe Zones Somali & Oromya	425,000 persons	(500,000) (700,000)
Food Security	ICRC	Food For Work – Irrigation System - Flood	Gode Zone	70,000	600,000
Early Warning & Disaster Preparedness	CARITAS-D	Baseline & natural resource surveys, Training and logistical means for EWS data-collection and analysis	Shinile zone, Dire-Dawa & Haraghe Zones, Somali & Oromya Regions	425,000 persons	(500,000) (700,000)
	SCF-UK	First-line security assessment, Indicators EWS & Core-coordination	Jijiga and 8 zones Somali Region	3.7 Million	150,000 216,000 200,000
	SCF-NL	Participation in SCF-UK-driven Regional EWS	Gode and Afder Zone	250,000	(750,000)
	CHRISTIAN AID (OWS)	Training in disaster mitigation & preparedness	Aware Woreda Degahbur Zone	53,000 persons	(230,000)
Non-Food	SCF-NL	Targeted Non-Food items	Gode zone	250,000	(500,000)
	INTERMON	Essential Non-Food Items	Afder and Liben Zones	65,000 persons	(150,000)
Coordination Monitoring	WFP	Support food-relief op.	Somali Region		350,000
	ECHO-Flight ⁶				
	OCHA	Emergency Prep. Plan Livestock			90,000

Although the livestock strategy has not been very clear to ECHO's partners involved in livestock projects because of insufficient professional expertise in veterinary projects on the part of ECHO's TA, ECHO has responded efficiently with the appointment of a Regional Water and Livestock Technical Assistant.

Regional strategy and intervention plans, although considered by ECHO Technical Assistants, have not been implemented. According to the ECHO TAs, the implementation of a regional plan is impossible/cannot be achieved for administrative procedures. Taking into account the effects of drought in both countries, with a similar situation (geographical, climate and population wise), the establishment of a regional intervention plan is advisable. It would avoid population movements from bordering countries (Somalia and Ethiopia) into Kenyan areas (e.g. Mandera district) in search for assistance closer to the communities of respective countries.

The integration of emergency operations into ongoing longer-term development structures and programmes run by ECHO's partners and local NGOs was weak. Disruption of ECHO's partners' development activities (with funds from other donors) interfered with achieved or in process of

⁶ Information on contract and amount allocated is not available

being achieved activities, e.g. re-introduction of free distribution of drugs (human and livestock) during the emergency, when a cost-recovery process had been introduced to longer-term projects.

Interventions in the medical, sanitation and hygiene sectors for humans have been weak and sometimes lacking. ECHO's support to the health sector (vaccination and provision of emergency health kits to main hospitals and health centres) has been considered as an immediate assistance in order to decrease the malnutrition and infant mortality rates. Interventions in medical structures and facilities would imply a long-term development oriented involvement of partners and ECHO, which is not within the mandate of ECHO. However, the inadequate medical system (insufficient and poor health structure and drugs supply) and lack of appropriate water supply (quantity and quality) is one important issue in the still high Global Acute Malnutrition Rate (see Main Report p. 23 and Annex VI - Malnutrition Rates).

The selection of ECHO's partners for the implementation of the drought projects has been appropriate, as the majority of NGOs has proved to be efficient in emergency situations in the past. Most of them were already operating in the regions with longer-term projects (with EC/Food Security Unit funds for Ethiopia – and/or other donors), which allowed a quick intervention, in full understanding of the regional context and local customs.

ii) Coordination

In Kenya, the coordination between ECHO and its partners is based on individual relations, with good comprehension and flexibility:

- The relationship, as regards procedure, timely response, flexibility and support, between ECHO and its partners has been good.
- During the drought crisis some coordination meetings were held, but not on a regular basis. The lack of field missions and regular meetings with all of ECHO's partners has created overlapping of projects and funds: e.g. UNICEF (ECHO funds) supplied ECHO's partners as well as WFP with UNIMIX for their dry supplementary feeding programmes, but NGOs were not aware if the beneficiaries of the WFP were the same as the ones involved in their feeding programme.
- ECHO flights have been an excellent logistic support to ECHO's partners.

The coordination between ECHO and other donors in Kenya is also based on individual relations. No regular donor meetings have been held, which created some confusion for ECHO's partners in terms of donor's strategy and programme approach.

The coordination between ECHO and other donors in Ethiopia appeared to be strong, coherent and complementary. The coordination between ECHO and EC/Food Security Unit seemed to be very good. Regular meetings and field missions were organised in order to better address the needs of the communities.

The Drought coordination, through the Kenyan Food Security Meeting (KFSM), has been excellent at national and district levels. Although present from the beginning of the crisis, ECHO has not been participating on a regular basis in these meetings. According to the national authorities and major UN partners, ECHO could play a more active role since having the expertise and being a major actor in emergency situations: ECHO could participate in general meetings, have an advisory role in recommendations and in the elaboration of a national contingency plan.

iii) *Effectiveness*

ECHO's budgets allocated per sectors as drought response were as follows:

	YEAR	BUDGET Million €	SECTOR (3) In % of Drought Budget/year					
			Nutrition/ Health	Livestock	Water/ Sanitation (1)	Food Security	Coordinatio n	Early Warning
KENYA	2000	4	31.5	11.75	20.25	9.75	25	-
	2001	4.6	27.17	21.73	38.04	-(2)	13.04	-
	2002	2.5	12	27.2	60.80	-(2)	-	-
Sub-Total		11.1	25.31	19.36	36.75	3.51	14.41	-
ETHIOPIA	2000	8.760	74.20	5.58	14.08	-	3.91(3)	1.71
	2001	4.251	-	56.45	22.23	14.11	2.11	5.08
	2002	0.300	-	-	33.33	-	-	66.66
Sub-Total		13.311	45.07	21.95	17.44	4.54	3.33	4.28
TOTAL		24.411	38.13	20.68	26.15	4.05	8.35	2.31

- (1) The Water and Sanitation sector included water rehabilitation, construction and supply for both human and livestock consumption.
- (2) The fodder production, although considered as part of the Food Security, is not taken into account in this column, as the budget allocated for this activity could not precisely be determined. It is included in the livestock sector budget.
- (3) ECHO-flight support not included, as no figures are available.

About 40% of the budget for the regional drought response was allocated to Nutritional and Health projects, in particular during the first phase of the emergency. The water sector, for both human and livestock consumption, received increasing support during the drought response, as well as the livestock sector. The Food Security and Early Warning sector received only little more than 6% of the total regional drought budget, which appears to be very low considering the objective of the recovery phase and the emphasis put on preparing vulnerable communities for future drought.

- Nutrition:
 - In Kenya, about 8,000 persons benefited directly from the feeding programme, 62% of which were malnourished children under five years and 38% pregnant and nursing mothers. The Global Acute Malnutrition Rate has declined over the two years of drought response⁷. Nevertheless, it remains high (33% in Z-score -W/H) in Mandera Town and the eastern part of the Mandera District (along the Somali Border).
 - In Ethiopia, supplementary dry rations were distributed to 180,000 persons spread over seven zones of the Somali Region (ICRC). In addition, ECHO's partners ran several TF- and SF Centres, covering about 80,000 beneficiaries in Somali, Oromya and SNNPRG Regions
 - Poor health structure, insufficient medical supplies and inadequate water supply for human consumption (quality and quantity), and the morphology of the Somali community may be the causes for the still high Global Acute Malnutrition rates.
- Health:
 - The Health sector has not received much attention, although in great demand in the communities, as it has been considered to be a more structural problem. It focused mainly on vaccination (still poor immunisation coverage of 30% in Mandera District- Kenya), drugs supply to main hospitals and health centres and training of Community Health Workers.
 - Besides the beneficiaries involved in the nutritional programmes, an additional 42,000 persons and an estimated 600,000 persons may have benefited from the health interventions, in Kenya and Ethiopia respectively.

⁷ See Annex VI: Malnutrition Rates

- Livestock:
 - The livestock objectives have been largely attained and the quality of the services offered (treatment and vaccination) has had a positive effect on the livestock. Cost-recovery activities have quickly been introduced and have been well accepted by livestock owners.
- Food Security:
 - An interesting sun-dried meat project has been implemented in Kenya with the aim to feed school children (COOPI project). Goats were purchased from livestock owners, slaughtered and processed using sundry technology. A specific training on the methodology was given to targeted groups: women, school children and teachers.
 - The establishment of the pilot fodder farm along the river Daua, initiated by the Kenyan Ministry of Agriculture and technically supported by ECHO partners, has been very innovative for the North-eastern region of Kenya. About 30% of the potential available land was cultivated with different grass (i.e. Sudan grass, Boma Rhodes). This project has had strong community participation, including women groups, and a large impact on the region.
 - ICRC's Food-For-Work project in Ethiopia (aimed at increasing the area under cultivation by improving the rainwater irrigation and retention system) has been completed in 347 sites in 110 villages for an estimated 94,000 beneficiaries. A total of 234 Km of canals have been constructed or cleaned. It has therefore increased the agricultural surface. Tools and technical advice have been provided to the beneficiaries, resulting in an increase in sustainability.
- Water and Sanitation:
 - The water projects' implementations have been highly satisfactory in terms of drought recovery and targeted beneficiaries. However, the quality of water for human consumption is questionable. The water sources for human consumption are the same as the ones for livestock, mainly ponds, pans and hand-dug wells during the raining seasons and boreholes and underground water tanks during dry seasons. The population is collecting and/or drinking water directly from the pans: there are no separate and protected areas for human consumption.
 - Sanitation and hygiene projects have been very weak in terms of quantity (only one NGO involved – El Wak), although in great demand in the communities.
 - The CORDAID/Community Development Trust Fund (CDTF)⁸ activities have been a good example for the integration of local partners into ECHO-funded projects.[01]
- Early Warning:
 - The set-up of an Early Warning System fitted well in ECHO's post-emergency approach.

iv) *Efficiency*

The following comments are only applicable for Kenya:

The operational capacity of the NGOs involved in Livestock and Food Security projects in response to drought has been very good, as:

- Recruitment of appropriate, professional and trained international and local staff for the implementation of the projects;
- The introduction of new Food Security technologies well adapted to semi- and arid regions: e.g. fodder and sun-dried meat production;
- Respecting local customs and coping mechanisms: de-stocking and off-take.

⁸ See Annex VII: CDTF – MoU and Funding Criteria and Operational Guidelines

The operational management and technical expertise of the Water and Sanitation programme has been very good.

- The locally recruited water engineer of AAH-UK has long professional experience with governmental water services and international NGO's and corporations.
- The professional staff members of CORDAID have long and well-recognised professional experience with the EC/Community Development Trust Fund project.
- The overall programme's weakness has been the community-management component: the cost-recovery system of the water resources was introduced in the pastoralist communities and appropriate capacity to manage the water resources was not available within the communities. Training and capacity building has therefore been difficult and slow.

The operational management of the Nutrition programme has been good, with appropriate international professional staff, use of proper nutritional protocols and training of local staff. The health projects have been of poor quality and insufficient in quantity. Poor health services could be one of the reasons for the still high malnutrition rate in certain areas

During the implementation of the projects, all actors have been involved, international and local NGOs as well as local district authorities and representatives of Line Ministries.

The collaboration and coordination between ECHO's partners and district authorities has been excellent and the Manderu Process is one example for this⁹.

v) *Impact*

The chapter describes the impact of the interventions in Kenya:

- ECHO's global nutrition interventions have improved the nutritional status of the communities both in Kenya and Ethiopia, as the Global Acute Malnutrition (GAM) and Severe Acute Malnutrition (SAM) Rates have declined over the two years of drought response¹⁰. However, the nutritional status and the mortality rate in the infant population of Eastern -, Western- and Central Division Sub-Districts of Manderu District remain alarming¹¹.
- The immunisation coverage in the infant population seems to have increased (comparative data are not available), but remains very low in the Manderu District (about 30%)¹². The impact of the provision of emergency health kits (to hospitals and health centres) on the health status of the population cannot be measured, as detailed data (distribution points, treatment and population figures) are not available.
- The increased access to and storage capacity of water sources, the introduction of community-based management of water resources, combined with appropriate veterinary services offered, resulted in veterinary health significantly improved¹³.
- The innovative and creative approaches such as the set up of fodder farms, sun-dried meat production and de-stocking of small ruminants during drought, had a positive impact on the community's ownership. The introduction of innovative and appropriate technologies and the enhanced ownership by the communities of water and livestock projects have therefore resulted in an increased self-sufficiency of the community and sustainability of the projects.
- The NGOs do not have real opportunities to consolidate their emergency and recovery response to drought, as there is no appropriate donor response for future and longer-term

⁹ See FN 33

¹⁰ See Annex VI – Malnutrition Rates

¹¹ See table at page 23

¹² Source: UNICEF and AAH-UK interview and "Nutritional Anthropometric Survey, AAH-UK El Wak, Manderu District", March 2002.

¹³ For detailed coverage see Annex IX – ECHO-funded NGO's Achievements.

programmes. Moreover, the EC tools/departments are not always accessible to NGOs or specifically represented in the countries.

vi) *Visibility*

With the exception of one NGO, ECHO's visibility has been well respected. For each implemented and fulfilled project, a board has been placed indicating the financial support of ECHO. ECHO's mandate and financial support policy is well understood at national and district levels. The awareness and understanding of ECHO's position has not been evaluated at the community level.

f. Recommendations

- In the specific context of North and North-eastern Kenya and South-eastern Ethiopia, which are regions geographically semi- and arid, politically neglected, with ethnical tension and chronically poor, severe drought periods are only exacerbating the existing Global Acute Malnutrition rates and health status of the communities. Therefore, it is advisable to enhance a multi-sectoral approach in drought emergency projects by integrating multi-sectoral small-scale projects into ongoing longer-term programmes and structures run by ECHO partners and local NGOs. An integrated approach may be more effective in terms of impact and long-term sustainability of the projects.
 - The Mandera District Strategic Development Plan could be used as an example of “ground foundation”, in which specific drought emergency intervention (e.g. water storage, food supply, feeding programme and specific health care related to poor water availability (quality and quantity) and vaccination) could rapidly be integrated when needed.
 - The elaboration and implementation of a regional approach as response to drought including e.g. Kenya, Ethiopia, Somalia, South-Sudan, would increase the regional impact of ECHO's interventions. ECHO could be a major actor in the region and act pro-actively.
- The design and carrying out of an in-depth multi-sectoral evaluation country wise (not specifically related to drought) by a multi-agency group could give a clearer view of the overall needs of the communities. ECHO and its partners could focus on their specific mandates, share the results and, when needed, recommend longer-term development agencies on possible actions to be taken. Health services and water availability for human consumption, in terms of quality and quantity, remains an important health issue.
- Increase ECHO's pro-active participation in general (Kenyan Food Security Meeting) and sectoral meetings (sub-group) in order to draw upon ECHO's expertise in emergency and contingency management available at national and regional levels.
- Advise ECHO partners to enhance, at local/district level, the technical and structural co-operation with representatives of the involved line ministries, through increasing capacity building projects.
- Increase the coordination and comprehensive approach between donors through the organisation of regular donor meetings and increase, at national level, ECHO's participation in the elaboration of global and sectoral strategies in order to avoid duplications and/or contradictions in the implementation of projects and protocols (e.g. free distributions of drugs when cost-recovery systems are implemented).
- Enhance the coordination between ECHO and its partners through the organisation of regular coordination meetings and regular field missions and increase the sharing of information between ECHO and ECHO partners, through e.g. the editing of a newsletter and/or e-mail information paper.
- Increase the collaboration between the departments and instruments of the EC, such as the Food Security Unit and ECHO, through regular meetings and sharing information on progress

made in the implementation of the projects, in order to better define the hand-over process of longer-term projects, such as livestock.

- It is recommended that ECHO should be present in Ethiopia, as the general drought issues (chronic drought emergencies) are similar to those in Kenya. In addition, Ethiopia faces a really insecure situation and ethnic fragility.

g. Lessons Learned

- Kenya and Ethiopia, and more specifically the semi- and arid regions, have experienced several and repeatedly longer severe drought periods. In both countries, chronic poverty, political negligence and ethnical tension have hampered the development of these regions. Severe drought periods have only exacerbated the existing poor health and malnutrition status of the communities. The integration of multi-sectoral projects in ongoing longer-term programmes and structures would have been more effective in terms of impact and long-term sustainability of the projects. It would also have avoided the “zip” situation – being in and out of the region- of NGOs involved specifically in an emergency.
- Dry Supplementary Feeding programmes, as a response to moderate GAM; may not be the most appropriate response in pastoral communities. Dry rations are not used as supplement but as a substitute to the normal diet and are shared by the entire family.