EUROPEAN COMMISSION

HUMANITARIAN AID OFFICE (ECHO)

EVALUATION of ECHO INTERVENTIONS in the FEDERAL REPUBLIC of YUGOSLAVIA (SERBIA)

SYNTHESIS REPORT

PROLOG Consult - Belgium

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A. EXECUTIVE SUMMARY

A.1. <u>THE EVALUATION</u>

Evaluated entity: Serbia (Serbia & Montenegro, formerly Federal Republic of Yugoslavia)Dates of evaluation:31/03 - 18/04/2003 (field visits)Consultants names:Michel Van Bruaene (Team Leader, Synthesis), Donatella Bradic (Shelter
and Return), Markus Michael (Health)

Purpose & Methodology:

The overall objective of the evaluation was to assess the appropriateness of ECHO intervention in Serbia, and to what extent its goals had been achieved on the eve of its final disengagement from that country. To that effect, the global plans of the last three years (i.e. as from 2000) had to be reviewed. The evaluation had also to analyse a number of current issues: phasing out strategy of ECHO, sustainability of interventions, and decision to fund a few selected last actions in 2003. In that framework, the evaluation had to focus on two sectors, highly relevant to co-ordination/LRRD:

- *Health*, in which ECHO had i.a. invested up to 30 million Euro since 1999 to improve access to Primary Health Care (PHC) by upgrading equipment and structures country wide, and
- *Durable Solutions* where significant needs in shelter and repatriation/return were still outlined by humanitarian actors. The evaluation was instructed by ECHO to focus on refugees from BiH and Croatia. Kosovo IDPs, whose fate still depends from protracted political discussions, could not be considered in the same immediate perspective.

Findings collected in both sectors have been detailed in separate, self-standing reports, and are being summarised in the present synthesis document. The methodology reflects the above objectives. Desired results¹ were translated into a frame containing corresponding evaluation questions, judgement criteria and indicators (Annex F). This frame was systematically used by the evaluation team, throughout the three standard phases of the evaluation. It was also designed to be readily transposed into the main report.

The progressive closing of operations and subsequent turnover of knowledgeable partners staff proved to be a constraint for comprehensive field assessment, e.g. in the shelter sector where visits mostly concerned the still active rehabilitation programme of permanent housing and self-reliance for refugees.

A.2. MAIN CONCLUSIONS

A.2.1. Overall Intervention Logic

i) The programming decisions to engage in health and durable solutions activities were appropriate and relevant to the humanitarian conditions in Serbia. ECHO was the only donor of importance to assist in the whole of Serbia persons with disabilities and PHC structures, where unmet needs were plenty after years of neglect. At an early point the focus began to shift away from the 'vulnerable groups', which were difficult to discern, and more adequately concentrated on PHC services that would serve the whole population. However, in a post-conflict situation with complex institutional and political contexts and lack of clear indicators, the biggest external constraint appeared to be the lack of a health policy framework, which was not within ECHO mandate or resources. The support provided by CARDS² and its main implementation instrument, the European Agency for Reconstruction (EAR) to the policy reform, among other health activities, was relevant in that context [§ 13-19].

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¹ Nine desired results were outlined in TOR, chapter 2.3

² Community Assistance for Reconstruction, Development and Stabilisation programme

ii) Supporting return activities for refugees in Serbia has been ECHO contribution to the regional stabilisation process. However, the absence of a functioning regional mechanism on return and the inability to effectively link returnee families to EU funded programs in BiH and Croatia negatively impacted the effectiveness of ECHO funded repatriation programs. Shelter projects significantly reduced the overall number of aid dependent beneficiaries in Serbia, which has by far the largest numbers of refugees and IDPs in Europe –see also A.2.3 below [§ 22-25, table 1].

A.2.2. Results and Means Compared to Objectives

- iii) Operations were generally very effective. Efficiency of ECHO and most partners was also high, despite some minor shortcomings. Partners could mainly be divided in two groups: those working within their core capacities and mandates who demonstrated good operational and co-ordination capacity, and others who did less to contribute to overall coherence or to reducing overheads. Income generating schemes were mostly valid and the need for self-sufficiency is indisputable, though the implementation of the in-kind grants in non-rural areas was found to be sometimes questionable in practice (based perforce on a limited number of investigated cases), and their effects limited. The importance of the training component as multiplier factor for effectiveness of projects was generally not used to the full. The training program for patronage nurses is a good point in case that this scope may have been broadened. Similarly, the overall lack of training for ECHO field staff was a recurrent constraint for optimum effectiveness, e.g. on LFA, performance indicators, procurement, etc. [§ 35-60].
- iv) In a post-conflict situation, short planning cycles can limit effectiveness, either directly because certain development objectives cannot be reached in a short time, or indirectly by hampering the learning process that should take place over of a couple of years. Too short a time horizon can also prevent the pursuit of appropriate, more development-oriented objectives [§ 53].
- v) For repatriation, ECHO faced structural and institutional limitations –e.g. Serbia funds could not be spent across the border is Croatia or BiH. This limited activities to the preparatory stage of return, without direct involvement in housing reconstruction or self-sufficiency, i.e. sustainability. The lack of regional synergy with other Commission instruments or return programmes were further obstacles. ECHO therefore rightfully decided to work with partners who were active in the countries of return and who could had other possibilities of funding. The effectiveness of ECHO support in shelter has generally been high, due to good partners and appropriate programming strategy. Activities focused on durable solutions for those most in need, with the objective to regain dignity and, hopefully, to become self-sufficient [§ 44-45, 55-56].

A.2.3. Durable Solutions in Shelter Sector

- vi) The type of assistance was appropriate. By helping the host families, it contributed to a better social acceptance of the refugees and IDPs, and it alleviated the pressure on collective centres. It also provided the refugee families with a property that can be used as a collateral for credit, once the legal and banking system allow it. With the available funding, 1/5 of the refugee/IDP population has been reached and assisted. Considering complexity of needs, dispersion of refugees/IDPs throughout Serbia and mandate limitations, this is an impressive achievement [§ 62, 64, 66].
- vii) The decision to fund durable solutions for refugees was supported by favourable parameters: (i) according to a survey funded by ECHO, 65% of the refugees have expressed their intention to stay in Serbia, (ii) the government of Serbia allowed all refugees to apply for citizenship, and (iii) the demand for housing assistance was great. The context was however also highly political. A still active programme concerned assistance that was provided through several partners, in order to complete housing units or to convert poor ones into habitable homes. Selection criteria combined

vulnerability and sustainable integration of refugees. Effectiveness was usually high in rural areas but was found sometimes disputable around Belgrade, again based on a limited number of investigated cases. Criteria of ownership for this specific programme could also arguably exclude poor refugees living in rented accommodation. [§ 63, 65].

A.2.4. Phase Out Strategy and LRRD

- viii) Apart from the objective to cover all districts with the PHC operation, there was no 'phase out *strategy*' as such, with precise benchmarks and pre-defined criteria. ECHO communication strategy, however, was successful with regard to the calendar of the phase-out: it was clearly understood by beneficiary institutions, implementing partners and other actors [§ 67-68, 78-82].
- ix) There were consistent attempts by ECHO to promote LRRD and develop contacts between partners and the EAR, though with little results so far [§ 68].
- x) Institutional LRRD tools were in place in Brussels. ECHO was able to use these to include Health in the CARDS Country Strategy Paper 2002-2006 (CSP), though other humanitarian concerns mostly failed to appear in the Commission development strategy. The CSP further pointed at LRRD health linkages with other donors⁴: although such activities have been much delayed by the latter's own institutional constraints, these information did not seem to have been adequately reflected in ECHO Global Plans or at field level [§ 26, 70-77, 80].
- xi) Operational co-ordination at field level was difficult⁵. It was further constrained by complex political and institutional settings in Serbia. As a result, coherence and complementarity have so far been minimal in practice, either within the Commission or with other donors [§ 26-33, 70, 75-77, 83].

A.2.5. Reduction of Aid Dependency

xii) Health operations consisted mainly in capital investment and training, and shelter for refugees and IDPs in private accommodation did not entail permanent supply of services; aid dependency was therefore nearly a non-issue for the sectors covered by the present evaluation [§ 87-88].

A.2.6. Recommendations for Future Phase Out Strategies (see A.3)

A.2.7. Continuation of Activities in 2003

- xiii) The decision to complete the intended nation-wide coverage with the PHC operation was justified, reflecting an objective clearly spelled out in the 2002 global plan [§ 92].
- xiv) The funding cut from 36,9 mEur to 6,6 mEur for durable solutions was probably too drastic. ECHO field expected a higher budget in its final year (8-10 mEur). It can be argued that a more generous last year budget could have eased the phase-out, in particular the funding gap for the socially most vulnerable cases [§ 91].

A.2.8. Recommendations from Previous Evaluations

xv) Few of these recommendations were directly relevant to the current evaluation. ECHO tried very strongly to promote LRRD, with limited success only. Efforts were mostly curtailed by inadequate donor procedures (CARDS Return) or political situation (IDPs) [§ 93-125].

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⁴ The World Bank would take the lead in Health Insurance Fund, viability of PHC model and social safety net, while several EU Member States would contribute to funding continuous training activities.

⁵ "A pro-active approach to co-ordination is needed" Communication on LRRD COM(2001)153, chap 3.1 §5

A.2.9. Cross-Cutting Issues

xvi) Relevant cross-cutting issues were duly taken into account within in the framework of ECHO operations. Regarding humanitarian accountability, a consultation of affected populations might probably have been envisaged for some PHC aspects. In a protracted political situation, where the Serbian Government must still make a final decision, Kosovo IDPs are still faced with implementation constraints which limit their rights [§ 126-135].

A.3. <u>RECOMMENDATIONS</u>

Future Phase-out Strategies and LRRD Situations

- xvii) To promote a more conducive institutional environment for LRRD in the Commission: clear institutional set up and relations between instruments present in the country, designated focal points, internal communication lines, identification of potential constraints.
- xviii) In parallel, to enhance the pro-active capacity of some institutional tools: concrete developmentoriented proposals by ECHO as early as possible in CSP programming (bullet point below), adequate field co-ordination framework and agenda, possibly dedicated LRRD function in ECHO, better vertical and horizontal information flows (between Commission Services and between HQ and field), more regular contacts with other concerned donors.
- xix) More efforts should have been made with the EAR to promote LRRD in priority on some selected activities which are often part of Commission long term development or technical assistance programmes, and could be integrated in one of the main areas of support: e.g. micro-credit scheme, continuous training, legal environment reforms conducive to micro-credit and NGOs, etc. (see table 3, Chapter B.2.6). Preference in LRRD should be given to direct linkages with other Commission instruments, where appropriate institutional tools have already been defined.
- xx) Notwithstanding the above, to increase efforts to seek LRRD operational complementarity at HQ and field levels with other (non-Commission) donors mentioned in CSP, even though institutional tools with such donors are often not yet firmly in place. To capture lessons learned into the overall LRRD Commission mechanisms.
- xxi) At the beginning of an intervention, to increase quality of initial needs assessments, gathering more complete baseline data and linking them to clear intervention criteria.
- xxii) Mirroring these, to establish a phase-out strategy with benchmarks (e.g. quality and quantity of PHC services to be performed, or responsibilities of the Commissariat for Refugees) and pre-set criteria (e.g. at the level of local capacities), instead of just setting a time limit to ECHO presence. ECHO should indeed try to clarify and develop its policy regarding entry and exit criteria/ indicators for, including –when relevant- coherence between them. ECHO and LRRD would benefit from such a methodological improvement.
- xxiii) To achieve better complementarity/continuity after phase-out, by better identifying possible institutional constraints, detrimental to LRRD. A (joint ?) ex-ante evaluation to validate CSP settings might have outlined CARDS weaknesses in funding cross-border refugee returns.
- xxiv) To promote transfer of knowledgeable staff from ECHO to Commission development bodies, to avoid losing a pool of expertise that might be very valuable for project identification and coherence.

- xxv) To ensure that standard criteria applied by humanitarian aid (e.g. for rehabilitation of refugee houses) are properly recorded in institutional memories of potentially concerned development donors, to avoid creating disparities or jealousy if similar programs are later decided.
- xxvi) When ECHO has phased out from a country, 'trustees' or ad hoc focal points need to be maintained within Delegations, to ensure sustainable regional coherence.
- xxvii) Regional linkages should be seriously considered in designing country specific strategies. Efficient practices, related to cross-border/boundary needs assessments, design and implementation of programmes and funding decisions, in areas that are politically inter-linked, must be introduced and adopted as an intra-Commission practice.
- xxviii) To organise a joint evaluation (with Aidco) on the subject of LRRD, to analyse selected case studies and to propose institutional mechanisms and tools. This evaluation should be based on the 2001 LRRD Communication.
- xxix) At EU level, the introduction of an enlarged "uprooted people" budget line that could continue providing assistance for refugees and IDPs on durable solutions should be considered.

Results and Means Compared to Objectives (Efficiency and Effectiveness)

- xxx) To allow, in a context of post-conflict rehabilitation not only longer project cycle times (one year), but to expand the time horizon in general. To allow for multi-year strategic planning.
- xxxi) In case of standardised approach to projects, to limit the number of partners to those with welldefined, appropriate mandates and/or development-adapted capacities. This would improve efficiency, effectiveness, overhead costs, and may have effect on LRRD by increasing chances of continued donor support.
- xxxii) Also in case of a standardised approach implemented by a variety of partners, to better streamline certain processes, like tendering and monitoring/evaluation. Instead of relying on a variety of performance indicators, to choose and monitor a number of valid, cross-cutting ones.
- xxxiii) ECHO should in particular ensure that partners are duly organised and can demonstrate prior experience of procurement. Otherwise, training and/or supervision/assistance is highly recommendable. ECHO should be systematically present at the (public) opening of tenders, and attend evaluation committees from time to time with all partners. Some rules of the FPA 'Document 14' should be made more precise: (1) ECHO should propose technical expertise if required (or impose it in case of doubt), to ensure adequacy of technical specifications. (2) 'Invitations are generally published in the international press' definitely needs to be redrafted and clarified (minimum number of media, suggested media of reference).
- xxxiv) In post-conflict/transition periods, the importance of the training component as multiplier factor for effectiveness of projects and as LRRD tool needs to be stressed. Continuous training is generally a strong asset of long term TA programmes.
- xxxv) Similarly, to strengthen overall training for ECHO field staff (PCM, LFA, monitoring indicators, procurement). The lack of training is a major constraint for optimum effectiveness of the Office.
- xxxvi) Instead of carrying over the artificial objective of assisting the 'most vulnerable', to be more explicit about increasing capacities of PHC services. This was a legitimate humanitarian objective

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in this context where most of the population was in need of, and able to benefit from, their improvement.

xxxvii) Distribution of in-kind grants should be more selective in urban areas, and closely co-ordinated with contiguous micro-credit scheme.

Cross-cutting issues

- xxxviii) To increase downward accountability by consulting the affected population as primary stakeholders.
- xxxix) To carry out additional information on ECHO inside the Commission (intranet with RELEXlinked DGs) and the EU. ECHO is still too often perceived as an actor of small-scale humanitarian emergency projects, without linkages or needs for sustainability. Messages to beneficiaries / local authorities on EU/EC need to be kept as simple as possible.

A.4. LESSONS LEARNED

Institutional LRRD Constraints for ECHO

- xl) An effective phase out strategy of ECHO is often (at least partly) dependent from an effective LRRD framework.
- xli) LRRD was mainly ECHO's brainchild (ECHO 4, S. Greenaway). It was later adopted by the Commission.
- xlii) However, to this date ECHO is still the Commission Service most primarily interested in LRRD.
- xliii) ECHO is not a large Service (the 5th smallest by staff number), and its influence in the Commission is still limited.
- xliv) Despite some progress, ECHO activities are still often perceived as short-term, small-scale emergency only. One Commission staff stated that ''sustainability is not an issue'' for ECHO.
- xlv) Finally, the ECHO Regulation itself is still not adapted to LRRD (short project cycle and time horizon, limited training capacity, etc.)

Results and means compared to objectives.

- xlvi) If ECHO promotes, at planning level, a standardised operational approach to ten or so implementing partners, it retains, beyond its natural function as a donor (and therefore duty-holder) also the function as a duty-bearer at implementing level (policy changes, efficiency and monitoring/evaluation).
- xlvii) For the extremely complex problems posed by the situation of the Roma population, there are no quick fixes. Including this issue into a specific, broader EU programme with regional/horizontal approach and longer time horizon might be more appropriate.

Phase-out and LRRD

xlviii) Specialised partners believe that refugees may take up to 3 years to decide whether to return or not. If correct, impact of Go & See visits/ and legal aid will be visible only 2-3 years from now.

Cross-cutting issues

- xlix) It was admittedly difficult to discern and impossible to target 'vulnerable groups', as stated in the objectives. ECHO did the right thing in supporting PHC services that would serve the whole population. But this does not dispense from the responsibility to consult the affected population initially intended to reach by the operation, about its effects on them.
- I) Although probably above the standards of many refugee camps around the world, collective shelters represent a real drawback to a dignified life, create passivity and increases aid-dependency. Such centres become very difficult to close, and residents require constant and specific care. Learning from experience in Serbia, centres should be avoided whenever possible. When this is challenged by circumstances, early engagement to find alternative solutions should be a priority.

MAIN REPORT

B.1. INTRODUCTION & PERSPECTIVES

B.1.1. Objectives, Methodology, Evaluation Team

- 1. Chapter 2 of the terms of reference⁶ (TOR) described the overall objective of the evaluation as follows: "to assess the appropriateness of ECHO's intervention and to what extent the overall objective had been achieved, with a retrospective look at the past three years' interventions. The evaluation will analyse the phase out strategy adopted by ECHO, its sustainability and the decision to consolidate interventions in some sectors in 2003". In the context of a final ECHO disengagement from Serbia, the objective was therefore twofold, looking at achievements of past activities, and analysing implementation in relation to phasing out as an objective.
- 2. The TOR further stated that the evaluation should focus its work on two specific sectors:
 - <u>Health:</u> the main axis of ECHO strategy has been to improve access to Primary Health Care (PHC) structures throughout the country, aiming in particular at extremely vulnerable groups. To that effect, up to 30 million Euro have been invested since 1999 to upgrade equipment, rehabilitate structures and procure drugs. The main objective of the last sector plan in 2002 was to complete and consolidate prior ECHO actions.
 - <u>Durable Solutions</u>: shelter and repatriation/return activities had been consistently funded by ECHO; significant needs were still stressed by partners and most other actors involved in this sector, though these could hardly be addressed by the limited ECHO budget. The main objective of the final 2002 strategy was to 'promote the sustainability of the shelter solutions provided' and to 'facilitate the return process of refugees'. The evaluation was instructed by ECHO to focus on refugees from BiH and Croatia. Kosovo IDPs, whose fate still depends from protracted political discussions, could not be considered in the same immediate perspective. Unstable political situation in Serbia does not yet allow the Government to commit itself to a *realpolitik* and IDPs are faced with subsequent implementation constraints. Finally, the progressive closing of projects and subsequent turnover of knowledgeable partners staff proved to be a constraint for a comprehensive field assessment, e.g. in the shelter sector.
- 3. Nine *desired results* were specifically listed in the TOR. For clarity purposes, they have been copied as headings of chapters B.2.1 to B.2.9 below. The evaluation methodology has been adapted to reflect this approach. Desired results were translated into a frame containing corresponding evaluation questions, judgement criteria and indicators (see Annex E), which was systematically used by the evaluation team during projects assessments and interviews.
- 4. The evaluation was divided in three standard phases: (i) briefing and desk study in Brussels from 26 to 28 March 2003, (ii) field mission to Serbia from 31/03 to 18/04, and (iii) preparation of the draft report, final debriefing and presentation of the report on 28 May. The team was made of three consultants, who have drafted separate, self-standing reports according to their own sectors of expertise:
 - Michel Van Bruaene, team leader, synthesis report and horizontal/institutional issues
 - Donatella Bradic, report on Durable Solutions (shelter and return for refugees)
 - Markus Michael, report on Health sector.

B.1.2. Background and Context

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⁶ see Annex A

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- 5. Up to the overthrow of the Milosevic regime in October 2000, ECHO had little alternative but to pursue activities of care and maintenance in favour of an estimated 500.000 refugees from BiH and Croatia, and to prepare contingencies for possible worst-case scenarios. In 1999, an additional influx of 187.000 IDPs came from Kosovo. ECHO presence in Serbia had to be low-profile, as clearly distinct as possible from both government-controlled 'humanitarian' organisations and from politically oriented aid initiatives, such as the EU 'Fuel for Democracy'. There were hardly any perspectives of transparency, durable solutions or Linking Relief to Rehabilitation and Development (LRRD).
- 6. The situation changed dramatically after the victory of the democratic parties in Serbia. Sanctions were rapidly lifted, and the international community engaged in a massive plan for economic recovery. Humanitarian actors could at last start looking forward to normalisation of relations with neighbouring countries, a prerequisite for repatriation and resettlement. ECHO immediately started to contemplate a gradual phasing out of its activities⁷.
- 7. However, the sudden appearance of democracy did not *ipso facto* lead to the solution of humanitarian problems. Consequences of economic embargo, war efforts, former centralised system, masses of refugees and IDPs and rapidly ageing population can still be felt on the national economy, with dire results in lack of maintenance and investment in infrastructure, equipment, and supplies. Social-related sectors, such as health, suffered particularly, though key productive sectors of the national economy were also near the point of collapse. The regional situation was not yet fully stabilised; Croatia has only very recently started to demonstrate lesser reluctance to accommodate returnees.
- A social gap appeared, increasingly threatening the most vulnerable parts of the population. The 8. unemployed, the elderly, the disabled, and families with many children and/or single parents bear the brunt along with many refugees and IDPs. The gap has not been curbed to this date, despite reforms and some favourable macro-economic indicators8. Unemployment - official and involuntary - remains at about 30% of the labour force. Wages have increased in real terms by 5.9%, but due to significant price increases a good portion of family income must now be set aside for food, utilities and other essential public services9. The level of poverty varies according to sources. The World Bank estimated that 1.3 million people (12% of the population) live in absolute poverty, defined as a monthly income of 50 Euro or less. According to the Ministry of Social Affairs, 10,6% of the population live under the poverty line, defined as a monthly income of Euro 70 (4.489 dinars) per equivalent adult¹⁰. The Commission¹¹ gave much worse figures: 1/3 of the Serbian population live in 'relative poverty' (less than 30 Euro /person/month) and almost 1/5 in 'absolute poverty' (defined at less than 20 Euro). Poverty rates are worst in rural areas of Southern Serbia. "Coping" strategies such as subsistence farming and "informal" employment, together with remittances from the Diaspora, help to ameliorate matters for many, though often not for the poorest.
- 9. ECHO interventions during the period, the efforts towards an effective international co-ordination and LRRD were all conducted in difficult institutional and political frameworks, and were faced with successive and often cumulative constraints. Economic difficulties have been evoked above. Protracted political problems and ensuing vacuum could also be felt e.g. at the level of the Ministry of Health, where no less than five (acting) Ministers followed one another between 1999 and June 2002. At a broader level, uncertain negotiations between Serbia and Montenegro also proved to be a major constraint for co-ordination and policy decisions regarding international co-operation.

⁷ Expectations of LRRD with the EAR can be found in the ECHO Decision of Nov. 2000, page 23

⁸ e.g. increasing agricultural output, lower-than-expected budget deficit and decreasing inflation rates. This is however still fragile, and foreign investors are mostly waiting.

⁹ Source: World bank

¹⁰ Source: Ministry of Social Affairs, 'Poverty Profile in Serbia', Dec. 2002

¹¹ Stabilisation and Association Report 2003, Com (2003) 139, page 28

10. In this context, the extent of *direct* LRRD between ECHO and the main EU development instrument (the EAR) has been quite limited, to the notable exception of pharmaceuticals supply. After an initial emergency programme launched in December 2000 and devoted to bringing food supplies, medical drugs and energy, the EAR shifted its focus in 2001 towards reconstruction, and more specifically to areas such as energy, agriculture, health and enterprise. In 2002 and 2003, the emphasis gradually evolved from infrastructure rehabilitation towards long-term development and good governance (a priority highlighted by the recent murder of PM Djinjic). Further information concerning LRRD with the EAR programme and with other donors identified in the CARDS Country Strategy Paper can be found in Chapter B.2.1. below.

B.1.3. Facts and figures

- 11. Since 2000, the main thrust of ECHO health intervention in Serbia was the support to the PHC sector, which caters for a population of roughly 8.5 million. Actions started in the South/South-West of Serbia where a large number of IDPs were concentrated. Ten NGO partners, each covering 8-10 municipalities, gradually covered Dom Zdravljia (PHC structures) in the whole of Serbia with equipment, consumables, rehabilitation, drugs (until 2001), and training. Outreach services, people with disabilities and detection of communicable diseases were also supported. Total budget from 2000 to 2002 amounted to 20,25 mEur (see table 2). More details can be found in *Annex E* and in the Health sector report.
- 12. Regarding durable solutions, ECHO spent more than 38 mEur over the period for adequate housing (including water and sanitation), helping more than 100,000 individuals in private accommodations and approx. 30,000 in collective centres. In addition, more than 14 mEur were spent on return activities. Fourteen partners were funded to carry out shelter projects, and four were used in repatriation activities. Details can also be found in *Annex E*. As demonstrated in table 1 below, Serbia is still the country with the highest concentration of refugees and IDPs in Europe. This problem will most probably require further EU attention in the years to come from the points of view of stabilisation and integration for all countries of the region.

	Dofuceo f	nom Croat	ia and BiH in S	orbia (Doc		able T (Source: UNHC
	Kelugees I	rom Croat	ia and biri in 5	erbia (Dec	ember 2002)	
	Male		Female		Total	
Age Group	(absolute n°)	(in %)	(absolute n°)	(in %)	(absolute n°)	(in %)
0-4	4,036	1.2%	3,363	1.0%	7,399	2.2%
5-17	30,270	9.0%	28,925	8.6%	59,195	17.6%
18-59	95,855	28.5%	104,600	31.1%	200,455	59.6%
60 and >	28,925	8.6%	40,360	12.0%	69,285	20.6%
Total:	159,086	47.3%	177,248	52.7%	336,334	100.0%
Major locations:		Vojvodi	na and areas surre	ounding Be	elgrade	
Inter	nally Displaced Po	ersons fror	n Kosovo in oth	er parts o	f Serbia (Decem	ber 2002)
			1			
	Male		Female		Total	
Age Group	(absolute n°)	(in %)	(absolute n°)	(in %)	(absolute n°)	(in %)
0-4	6,911	3.4%	6,352	3.1%	13,263	6.5%
5-17	25,998	12.7%	24,640	12.0%	50,638	24.7%
18-59	56,198	27.4%	56,485	27.6%	112,683	55.0%
60 and >	12,563	6.1%	15,679	7.7%	28,242	13.8%
Total:	101,670	49.6%	103,156	50.4%	204,826	100.0%
Major locations:		Central and South Serbia and areas surrounding Belgrade				

Table 1 (Source: UNHCR)

Table 2 further summarises annual and total figures of ECHO operations in the sectors concerned:

			Table 2 - All amounts in Euro
Year	Health	<u>Shelter</u>	Repatriation
2000	5,750,000	11,100,000	5,700,000
2001	8,000,000	9,350,000	4,340,000
2002	6,500,000	7,330,000	4,000,000
Total	20,250,000	27,780,000*	14,040,000

Not counting water and sanitation projects.

B.2. <u>MAIN FINDINGS</u>

B.2.1. Overall Intervention Logic

<u>Desired result</u>: to obtain an overall view of the funded actions, showing their intervention logic and their relation to the overall objectives of the decision taken (global plan, operation, etc.) and to the overall objectives of the Commission in the country. This will require:

an analysis of the strategy and methodology used in the elaboration of the decision;

an analysis, <u>taking into account the ECHO mandate</u>, of the coherence, co-ordination and complementarity of the actions implemented under the decision with regard to other actions funded or carried out by other actors or EC instruments^{*}. The analysis is to include a retrospective on the past three years.

*This specific issue will be assessed in Chapter B.2.4.3.

B.2.1.1. ECHO Decisions in Health Sector

- 13. The main decisions defining the scope of ECHO-funded health operations were taken before the fall of the Milosevic regime on 5 October 2000, at a time when, suitable for humanitarian aid, political distance was sought from the central authorities. ECHO started acting 'as far as possible from... Belgrade', aiming at 'the most remote areas in Serbia' (Global Plan –GP- 2000). Additional pressure in the same direction came from partners to provide direct health care in collective centres for IDPs. ECHO started instead to support at first outreach services serving the whole population. The PHC program followed then an internal logic, moving gradually 'upstream', from the outreach services into the PHC services themselves: focussing on outreach services only was not possible; needs within the health services were overwhelming, too, and were included into the ECHO operation.
- 14. At a very early point, therefore, the focus shifted irreversibly away from the 'vulnerable groups' and concentrated on PHC <u>services</u>. The formulation of objectives kept mentioning the 'vulnerable groups', especially IDPs and refugees. Activities, however, were neither targeted at them nor was this really practicable. Vulnerable categories mentioned in post-conflict Serbia were as numerous as respondents and only agreed on poverty. ECHO was quite aware of this: 'the two main vulnerable groups identified in Serbia are the refugees from Bosnia and Croatia and the IDPs from Kosovo. This is not to say that the large segment of local population living below the poverty line is not equally vulnerable'¹². Should refugees and IDPs even admitted to be more vulnerable, it was 'no longer clear whether they suffer from the consequences of their displacement or simply from the general economic crisis'¹³. As early as

¹² ECHO Humanitarian Aid Decision [B7-210]. ECHO/FRY/210/2003/01000

¹³ Exit strategies: Lessons Learned from ECHO in the Balkans. Report from an ECHO 2 Regional Seminar, 20-22 June 2002. Bussels, ECHO 2/AK D(2002)

2000, the recommendation was therefore made that 'priority should be on the level of vulnerability defined by clear criteria rather than on categorisation as refugees, IDPs and resident social cases' (GP 2000).

- 15. Though the status of *refugee or IDP* did not appear sufficiently vulnerable by itself, regions with a large IDP population had not been given adequate financial means to face the additional costs. ECHO decision to support first the PHC system in such regions was therefore appropriate.
- 16. The *Roma* were usually included in the categories of vulnerable groups (GP 2002). Evidence for their vulnerability with regard to health is stronger, but not quite conclusive as to its causes. Also, like refugees and IDPs, they should not be treated at aggregate level, because 'some are rich'. Health standards among Roma, especially among IDPs, are low, linked also to poor standards of education and environmental hygiene. However, anecdotal evidence didn't indicate that limited access to health care was the only causal factor for this. Poverty is another key factor, shared with a good part of the population. Roma IDPs¹⁴ officially have access to public health care, but due to the lack of information, personal documents, language barrier, a discriminatory attitude in society, and difficulties in the functioning of the public health sector, they are discouraged in seeking medical assistance and are marginalised in this respect as well. ECHO decision to define the Roma population (or rather, part of it) as specifically vulnerable with regard to health, was therefore justified. The snag, however, lies in the potential for effectiveness of short-term interventions.
- 17. The last category always included in ECHO objectives, the *Persons with Disabilities* (PWDs) were, surprisingly, never spontaneously listed under the particularly vulnerable, reflecting possibly a pre-existing lack of awareness. They were –and are– of course vulnerable, owing to their special needs, lack of progress of national strategies to meet these, and were probably hardest hit by individual and institutional levels of poverty.
- 18. Lastly, the project in support of the Institute of Public Health (IPH) concerned 'ALERT', a surveillance /early warning of communicable diseases and laboratory equipment. Decision trail is not entirely clear from retrospect, being 'largely based on the experience built from Albania'. Although the national Health Information System (HIS) is admittedly ridden with shortcomings, the small part of burden of disease that lies with communicable diseases in Serbia hardly justifies the urgent creation of a surveillance system for these alone.
- 19. In this context, the biggest external constraint, particularly for PHC, was the lack of a health policy framework, which is of course not within ECHO mandate or possibilities. An important underlying assumption is that in post-conflict areas the health system can (or should) almost never be restored to its pre-conflict status. The latter point was recognised in 2001: health donors recommended to ensure that 'any refurbishment of facilities is both minimal and appropriate'. Regional experience taught that Serbia's future PHC services will not at all look what they look today. Helping to develop a health system without a policy framework is therefore admittedly difficult, and the option taken by CARDS and EAR to focus on policy reform in the health sector seems entirely relevant.

20. Recommendations

Instead of carrying over, in ECHO primary health care program, the artificial objective of assisting the 'most vulnerable', to be more explicit about the objective that was in fact pursued: increasing the capacities of the primary health care <u>services</u>: a legitimate humanitarian objective in this context because most of the population was in need of, and able to benefit from, their improvement.

¹⁴ ECHO did not distinguish between Roma <u>IDPs</u> and resident Roma.

In a context of lack of health policy framework (which implies, in a post-conflict situation, less of a greater licence to act than a greater responsibility for decisions taken), to make sure that every single development program with long-term implication is relevant.

21. Lesson learned

Neither the end of hostilities in 1999, nor the establishment of a legitimate –though very fragile-government in 2000 were apparently sufficient to provide the conditions to implement the – long overdue - health sector reform. With regard to ECHO PHC program, this lack of a policy framework was an external cause for partners to continue acting in humanitarian 'relief mode' (i.e. mainly providing goods)until the end, in a post-conflict situation that would, in principle, require more of development orientation.

B.2.1.2. ECHO Decisions in Shelter and Return Sectors

- 22. The overall objective of ECHO intervention in Serbia, in the durable solutions sector, was to promote and facilitate sustainable return, self-reliance and to provide sustainable shelter solutions to refugees. ECHO decision to concentrate on these specific issues came in response to the Commission policy in the region, which adheres to the principle of return, and the overall objective of timely response to humanitarian needs in Serbia. The genesis of the intervention logic stems from the political developments and their humanitarian and social consequences in the country, such as the outflow of IDPs from Kosovo in 2000 and 2001, which occurred at a time when collective centres were overcrowded or unsuitable. Moreover, a considerable host family fatigue had developed over the years. Therefore, the scheme designed by ECHO to provide building material to the host families in exchange for a rent free arrangement with the IDP family, helped alleviating overcrowded collective centres and directly increased living standards.
- 23. Nevertheless, the strictly humanitarian character of the programmes can be challenged: shelter schemes sometimes failed to target EVIs, to the notable exception of the elderly (see also B.2.3). At first, the long period of international isolation and sanctions prevented any kind of engagement of Serbia by the international community except for the humanitarian. With the arrival of the main donor agencies and international financial institutions in 2000, to engage in the development agenda, the transition onto the rehabilitation stage had started. Consequently, most humanitarian agencies operating in Serbia at that time, decided to downsize their operations and to return to their core mandate. Nevertheless, it appears that the humanitarian agencies were concerned about the capacity and willingness of both the government and the international aid structures to care about the vulnerable groups, hence some –including ECHO- have continued to engage.
- 24. The absence of a functioning regional mechanism on return significantly impacted the effectiveness of ECHO funded repatriation programs. The inability to effectively link returnee families to EU funded programs in Bosnia and Croatia has led to the conclusion that the overall return effort was a missed opportunity. The return effort in Serbia limited itself to the preparatory stage of the return process engaging in legal aid, public information and logistics. Although important in isolation from activities at the receiving end, this effort remains only partly effective. Despite the potential that ECHO, in conjunction with other EC instruments, has not only to promote but to effectively assist sustainable return, the main achievement of ECHO activities in this field was to keep the refugee population informed about the conditions in the country of origin and about their legal rights.
- 25. Therefore, ECHO decision to get involved in the operational side of return, in order to support the process, was the right decision. Lacking the opportunity of a coherent regional approach, this was the only way of adhering to the Commission policy towards minority return in the region.

B.2.1.3. Complementarity with EU Member States

26. Four EU Member States have informed RELEX about their pledges for bilateral contributions to the Health sector in Serbia: Austria, Finland and France (each funding between 200.000 and 300.000 Euro), and Italy (8 mEur). They are all planning disbursements in 2003.

B.2.1.4. Co-ordination with the Government of Serbia

- 27. Overall co-ordination of international assistance is carried out by the Ministry of Foreign and Economic Relations, including with the Member States above. The main priority of the Government is currently focused on infrastructure (roads) and on all productive sectors that may help the economy to restart. Among social-related issues, pensions are considered as a priority, considering the numbers involved.
- 28. In May 2002, the Government adopted a "National Strategy for Resolving the Problems of Refugees and IDPs". The strategy aims at providing housing and employment for refugees and gradual closure of collective centres, with considerable emphasis on the latter. Other objectives include the promotion of alternative durable solutions in way of promotion of repatriation and local integration. These objectives outlined in the regional strategy were adopted in the 2002 Global Plan. ECHO tried to respond to all three of these priorities by adapting its programmatic strategy to meet the objectives. Against the objective of promoting local integration, refugees who opted to remain in Serbia were added as an eligible category for assistance, to the shelter projects funded in 2002.
- 29. However, funds are lacking and a final political solution for the IDPs is still unclear. In particular, the costs of a housing strategy aimed at renovating urban flats and farmsteads, and generating employment for refugees was estimated at 300 mEur. Out of total needs estimated at 620 mEur, the Government has adopted a budget of 160 million over the next 4 years, and only 60 million have been pledged by donors (see also chapter B.2.3).
- 30. According to OCHA, projections outline the risk of a social gap that would concern a core group of 150.000 vulnerable people until 2005 at least, when current economic reforms can be expected to start generating employment and tax revenue. To face that risk, a "Poverty Reduction Strategy Process" (PRSP) should be completed in July 2003, under the co-ordination of the Ministry of Social Affairs. PRSP is supported by the World Bank, IMF and the EAR (engagement of civil society in the PRSP).

B.2.1.5. Co-ordination with Other Donors

- 31. Donors are still present in numbers in Serbia, though many are phasing out and most others have limited means only. In the sectors funded up to now by ECHO, the following information could be collected:
 - The Ministry of Social Affairs stated that it was being supported by a rather large number of donors, though most with limited funding: World Bank (lead, budget support), EU (civil society in PRSP), US (pensions), DFID, Switzerland, France, Austria, Norway, Italy, UNDP, UNICEF, etc.
 - Resources of the Serbian Commissioner for Refugees are being curtailed by the increasing lack of funding from UNHCR, which was itself largely dependent from ECHO. The Commissioner stated that his office can currently cover only 47% of its needs, despite the steady closure of collective centres. Innovative solutions are being sought, and appeals launched.
 - The Ministry of Health is receiving significant support from the World Bank (lead, HIS, PHC) and is also expecting a loan of 50 mEur for rehabilitation of structures from the EIB. See also B.2.14 above.
- 32. In addition, the OCHA "Humanitarian Situation and Strategy 2003" provides the following donor details:

- <u>Shelter</u>: DRC, NRC (own funds)
- <u>Return</u>: BPRM (information)
 - Self-sufficiency: UNHCR micro-credit scheme (with IRC and CORDAID)
 - UNDP and EAR on a labour-intensive municipal improvements project¹⁵
- <u>Roma:</u> USAID (combating trafficking), UNICEF, SOROS, OSCE.
- <u>Health:</u> ICRC (PHC sustainability in Kraljevo, co-funded by World Bank), Canadian CIDA (very active in academic training for family medicine) and WHO, though funds are lacking.
- 33. 'Humanitarian' UN Agencies are currently phasing out (OCHA is leaving, WFP at the end of 2003 or early 2004); UNHCR is still tied by its mandate and the need to provide durable solutions for refugees, though lack of funds is a major constraint. The capacity of remaining UN Agencies to implement the 5 years strategy derived from the Common Country Assessment (CCA) are similarly much limited by very low response rates to the CAP 2002. For example, UNDP received only 806.764 US\$ (against requirements of 5,45 million); UNICEF got 234,525 \$ (against 5 million), and WHO collected no funds at all. UN Habitat is due to work on housing solutions with a budget of 15 million Euro entrusted to them by the Cooperazione Italiana.

34. Recommendations

- Priority should be given to direct LRRD with Commission instruments, for co-ordination and operational reasons.
- To increase efforts to seek LRRD operational complementarity with other (non-Commission) donors mentioned in CSP, at HQ/ field levels.

B.2.2. Results and Means Compared to Objectives

<u>Desired result</u>: to assess the results and the means employed as compared to the objectives mentioned in 2.2. The assessment should cover the application of performance indicators during all phases of the project cycle.

B.2.2.1. Effectiveness

- 35. In *Health*, ECHO operations were effective within their scope and had undeniably a considerable impact, though attribution is, as always, a problem. The provision of care is the result of a synergy between a number of resources and processes: financial resources (in most instances, a proxy for the other resources), infrastructure, equipment, drugs and consumables and, last but not least, human resources with necessary knowledge and skills. These resources, if well managed, allow the actual provision of care. The ECHO operation focussed almost exclusively on two resources: infrastructure and equipment. Health professionals, when asked about the most limiting factors for the provision of care at the end of 1999 almost invariably mentioned infrastructure and equipment among the first three. Other limiting factors, however, ranked also regularly among the top three: lack of drugs, management failures, lack of continuous education, and low salaries¹⁶.
- 36. The lack of drugs is the prime cause of the fact that patients bear a significant part of the cost of health care with out-of-pocket expenses, despite the fact that health care is still supposed to be free, funded through the national HIF with near universal coverage. The EAR intervention improved availability of drugs on the market, but not necessarily for the individual patients, who still have to buy a

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¹⁵ ECHO Belgrade pointed to a number of inaccuracies in this OCHA report, including this specific project, which has reportedly no connection with humanitarian assistance.
¹⁶ as low as 2 DM / month for a doctor in 1999

PROLOG Consult - Belgium

- 37. There are also shortcomings at the level of human resources. Though there is no lack of trained health professionals in the FRY, the Ministry of Health (MoH) itself points at 'over-extensive but poor quality education of health care professionals'. Other sources define irrational and not cost-effective prescribing, over-prescribing or inconsistent clinical quality as major problems. General practitioners complain about the lack of continuous programmed training a complaint confirmed one ECHO partner.
- 38. There were managerial challenges as well, and even more to come (these were foreseen a while ago): the responsibility for administration and finance, today managed at a higher level¹⁸, will fall with new laws to the PHC services; general practitioners will have to grapple with fixed annual per capita payments for each person on their list. The MoH points therefore at the need to 'ensure that health care managers are trained in applying the principles and skills for change management'.
- 39. In that framework, and pending a comprehensive reform of the Health policy, ECHO partners focused on health service needs, and only at local level. Directors of DZs were asked what they needed and got it: investment in infrastructure and equipment. The outcome with regard to beneficiary satisfaction is extremely high: they almost invariably would make the same wish list if given a second chance. Very few shortcomings only were noted, mostly due to the obvious trade-off between coverage and quality.
- 40. Using the DZ director as key partner for the needs assessment, may, on the other hand, have introduced a bias that explains why the mentioned potential needs with regard to both clinical and management knowledge and skills were not expressed as a demand. The training component of ECHO PHC operation was generally very small, around 3.5%19. ECHO own mandate insists in 'taking long-term development objectives into account wherever possible' and includes 'small-scale training schemes' into the scope of its operations²⁰. It also recommends itself that 'capacity-building of local actors can (and should) be integrated as a secondary objectives in all types of projects, be they "LRRD projects" or basic distribution projects'21. To concentrate on infrastructure and equipment only may be justified in a short-term operation. Once, however, ECHO decided to continue after the year 2000, it would have been indicated to increase the training component beyond the - recently implemented emergency care training, in order to increase its effectiveness. Many possible topics were mentioned by respondents, suitable even for short-term interventions: communication skills, teamwork, managerial skills, basics of - or at least awareness for health economics and health finances, English language²² and computer skills etc. Some exceptions were made, e.g. in the training programme for all patronage nurses (1600) at national level. This was a good example of synergy achieved between capacity building and material support.
- 41. Projects implemented by partners for persons with disabilities (PWDs) have generally had a great impact. There is evidence of an economic impact of micro-projects within institutions. Being productive also increases their self-esteem. The generally high degree of effectiveness of programs for

¹⁷ Our sample of patronage nurses put this part currently at 64% for ailments treated at the level of PHC

¹⁸ The 'Health Centre', which includes the local hospital and DZ

¹⁹ ECHO pointed out that in the patronage nurses programme, they had an experienced partner to rely on and they had stepped into an already existing programme. This is highly suggestive of the fact that partners limits (and capacities) are to a significant extent, ECHO's own limits and capacities.

²⁰ Council Regulation EC 1257/96 of 20 June 1996 concerning humanitarian aid, OJ no. L 63 02/07/1996. pp. 1.6
²¹ Exit strategies: Lessons Learned from ECHO in the Balkans. Report from an ECHO 2 Regional Seminar, 20-22 June 2002. Bussels, ECHO 2/AK D(2002)

²² actually implemented by a few partners

PWDs can again in part be attributed to the high quality of consultation process with beneficiaries. Another part of effectiveness is attributable to the training component, always an important part of programs for PWDs.

- 42. Less effective was health-related assistance targeted at the Roma population. Despite anecdotal evidence of better coverage with outreach services and insurance cards, the projects implemented give the impression of having been added as a sideline, a small tribute to the mention of the Roma among the vulnerable groups in ECHO objectives. This, despite ECHO own advise that 'aid to the Roma must be specifically designed by agencies with experience' (GP 2000).
- 43. Bigger reservations need to be made regarding effectiveness of laboratory equipment delivered to the IPH for the ALERT project. In some instances, pieces of equipment given had to be returned and, once changed, have not been installed yet, or people were not trained to use them. These complaints are due to shortcomings in the consultation process. In stark contrast to the PHC operation, all 22 laboratories were given the same 'kit' of equipment and were therefore unable to approve or disapprove the final purchase.
- 44. In achieving the Repatriation objectives set in the global plans, ECHO faced structural and institutional limitations which significantly affected the effectiveness and the sustainability of the return projects. According to the "rules of engagement", ECHO could not spend Serbia funds across the borders in Croatia or BiH. It consequently limited activities to the preparatory stage of the return process, without direct involvement in house reconstruction or self-sufficiency, i.e. the *sustainability* of the process. This would not in itself be a limitation had there been synergy among other Commission instruments operating in the region. However, the regional linkage of return programmes, or lack thereof, remained a serious obstacle. The use of 'national' funds of CARDS Return in Croatia and BiH was e.g. subject to prior agreement with national authorities. Consequently, returnees assisted by ECHO Serbia had largely not been included in EC funded reconstruction projects through CARDS in the countries of return, which made the return projects only partially effective. In attempting to overcome these limitations and compensate for internal institutional shortcomings, ECHO rightfully decided to work with partners who were active in the countries of return and in turn could co-finance ECHO programmes with their own funding. Within these limitations, ECHO has managed to assist an impressive number of individual organised returns, but the main contribution remains in keeping the refugees informed about the conditions in the country of origin and offer good quality information, sometimes helping individual cases in pursuit of their legal rights pertaining to citizenship and property.
- 45. However, the assistance offered by ECHO partners was generally not a defining factor in the returnees decision. The decision is mostly based on other factors often not related to assistance, though organised returns generally make return safer and less problematic, fulfilling the returnees with a sense of security.
- 46. ECHO's decision to focus on *shelter* activities was taken with the objective to promote durable solutions for refugees in need of proper accommodation, i.e. people with special needs (elderly), refugees in private and collective accommodation (see also B.2.3. below). The goal was to help the beneficiaries in gaining their own accommodation, support the family to regain a level of self-respect and human dignity and, hopefully, become self sufficient. In private accommodation, the shelter projects included the provision of building material for the beneficiary and an in-kind grant to ensure self sufficiency. The effectiveness of ECHO support to the shelter programme in Serbia has been high. Such performance has been a result of, in most cases, an excellent choice of partners and close cooperation with a wide range of stakeholders in the consultative and implementation stage of the projects. This was also a result of an appropriate programming strategy that adequately responded to

need for shelter, preventing any worsening in the impact of the crisis reflected in the deterioration of the living conditions of refugees.

- 47. The shelter project included an in-kind grant component (750 Euro on average) which aimed to ensure some income generation for the family. Although the need for self-sufficiency is indisputable, the implementation of the in kind grants in practice is sometimes questionable. The majority of the NGO partners distributed the in kind grant to all beneficiaries in the shelter programme, except for one partner who concluded that not every family was suitable. Some beneficiaries, especially in urban areas, didn't have the skills or the interest to engage in an income generating activity at home. This allowed this partner to be more flexible with the amounts allocated to remaining families by increasing the amount of some of the grants.
- 48. Indeed, based on a –perforce- limited number of investigated cases, in-kind grants for beneficiaries in rural areas (especially livestock) generally seem to have been put to more effective use. People receiving livestock are more likely to sell or use the products for their own consumption, gradually increasing the number of animals or production. When questioned, rural beneficiaries could often provide calculations of expected revenue. In urban areas, although a percentage of in-kind grants were certainly successful, our visits regularly showed that some kits, especially the locksmith tool kit or the welding tool kit appeared less effective. In several cases, beneficiaries decided to take one of the kits because it was available, not because it would allow them to earn an income. In other cases, the beneficiaries were given in-kind grants whereas their intention, supported by professional abilities, was to set up an income generating business. The limited amount available made it impossible to purchase the necessary set of tools, and micro-loans (see below) would have been more appropriate.
- 49. In parallel, ECHO has also allocated funds (Euro 991.500) to cover management costs by one major partner of a loan revolving fund of approx. 3 mEur. The fund is run with three NGO partners and intends to provide self-employment and income generating opportunities to refugees who have entrepreneurial ideas but no access to credit from the commercial banking sector. The fund had been operating since 2001 and is reportedly highly successful. Loans average Euro 1,000 to 1,200, and would benefit to approximately 3.000 refugee families. There are constraints, however: ECHO Regulation does not allow loans (hence the funding of management costs only), and the legal framework is not yet in place in Serbia. There is still no law either for micro-credits or for international NGOs.

B.2.2.2. Efficiency

- 50. ECHO operational capacity in Belgrade was appreciated by the partners: its accessibility, practical assistance (e.g. with customs procedures), flexibility, prompt disbursement of funds, and readiness to help out with trouble-shooting. In later months, some effects of phasing out policy seem to have slowed down the process somewhat. One partner stated that a proposal which had been submitted in August 2002 had only been replied to at the end of October, which was quite unusual. Another partner explained some delays in construction works by a three months delay in the signing of the agreement with ECHO HQ, and late transfer of funds.
- 51. In *Health*, ECHO partners fall mainly under two groups: (1) the ones working within their core capacities and mandates and (2) the numerous PHC partners. The former generally demonstrated a good operational and co-ordination capacity. Among the latter, it varied. Although there was, within the PHC operation, a certain degree of freedom for partners (proposals often result from a common formulation work between ECHO and the most experienced partners), ECHO has to work within the confines of decisions and Global Plans' orientations and provisions, and in the PHC operation in particular, it had furthermore to take into account the need to harmonise the actions of NGOs nation-wide. Such parameters tend inevitably to lead to a *standardised approach to projects*, which can sometimes appear as a 'blueprint'. The number of partners to implement this approach should ideally be the result

- 52. When ECHO as a donor promotes a standardised approach to partners at planning level, it also retains responsibility for coherence at implementation level. ECHO did its best to hold monthly health meeting among PHC partners, but shortcomings remained. Some innovative partners included components into the program that were worth to be included in all of them, but weren't. The mentioned management training course for instance, or English lessons, the construction of a needle incinerator or of a ramp for disabled patients. This last example points also at the missed opportunity to establish a strategy, between the PWD partners and the PHC partners to remove architectural barriers within the framework of the PHC operation.
- 53. The operations investigated could certainly have profited from 'planning over longer periods'²³. Project cycles of 6 months are too short for a post-conflict situation. An exception was made for the nurses training program, for which a longer time horizon was granted. Interestingly, PHC projects were usually carried forward and copied/pasted/modified into other districts or departments with the same partners again and again, resulting in *de facto* much longer projects. Maintaining the somewhat artificial 6 months project cycles, however, deprived the operation of some of its potential to evolve, by thinking about the next one or two years, and not six months only. Too short a time horizon particularly hampered effectiveness of the ALERT project, which has been defined as 'a mid-term project over 2-3 years'.
- 54. In most operations, *tendering and procurement* of medical and rehabilitation equipment could be performed in satisfactory conditions and within acceptable time limits. One partner stated that the rules of the 'Document 14' of the FPA were basically appropriate, even in the case of an open international tendering to be performed in the restricted framework of a 6 months contract. Open international tendering further tends to increase competition and decrease prices. This opinion was however not shared by all partners. In two cases only, ECHO health partners did not perform in an adequate manner (poor equipment imported from Greece in contradiction to document 14 of FPA, and poor tender specifications, resulting in substandard equipment provided by an Italian supplier despite poor earlier performance by the same).
- 55. Although the 2002 Global Plan defines the forthcoming period as one that is more conducive to *return*, the funding allocated to return continued to decrease since proper links could not be established with CARDS. In 2002, 4 mEur were allocated to return activities, out of a total budget of 36,9 mEur. Previous allocations amounted to 5,7 mEur in 2000 and 4,34 mEur in 2001. The programming strategy in the field of returns targeted three main areas of activity with the common objective of promoting durable solutions; (i) repatriation movements including transportation of returnees and their belongings, (ii) go&see visits to Croatia and BiH, and (iii) legal aid and protection. This objective was further reinforced by the choice of partners and reflected in the project design. A significant part of the funding was channelled through a major partner agency who traditionally led most of the return related activities in close co-operation with national and international partners.
- 56. Organised group returns are labor intensive and require a high degree of organisational and operational capacity. All the partners demonstrated a high degree of professionalism, sensitivity to the issue and compassion towards the refugees, during the entire process of the return trip. The individuals who returned seemed genuinely happy with the operation and content to return to their homes. The reception was well organised and some follow-up ensured through the Red Cross and other NGOs

²³ ECHO Humanitarian Aid Decisions - Manual of Procedures (draft) Vers. 4a / 14.06.02

assisting the process of return in Croatia. In Bosnia, the absence of a social safety net for returnees is a notable debilitating factor for sustainable return.

57. In *Shelter*, ECHO relied on a number of NGO partners that were active in the region. Four projects that were still ongoing or recently completed were visited: all achieved satisfactory results, though with some variations in quality. In most cases, building material was delivered or works already completed. Beneficiaries were already living in the houses, or were about to move in. The projects were technically well managed and completion was on schedule. However, one of them was a smaller NGO which, due to a late transfer of funds, faced difficulties in pre-financing activities. This had a negative impact on project implementation. Most of the construction works had not yet started. The in kind grant also seemed to have rather been handled as a technicality in the overall implementation.

B.2.2.3. Use of Performance Indicators

- 58. Evidence of the actual use of performance indicators was not overwhelming, neither gathered as baseline indicators, nor presented in the form of project evaluations. Their quality was generally not very convincing either. A superficial sampling of the PHC log frames for 2002, for instance, reveals that among the valid indicators (excluding 'improved efficiency of the health system' and suchlike), the overwhelming majority were limited to the level of input, process or output indicators. The very few outcome indicators mentioned at all were so difficult to verify that they almost certainly weren't effective: 'greater awareness of environmental hygiene in Roma settlements', or 'staff satisfaction/motivation'.
- 59. Of the only two real impact indicators mentioned, one is theoretically correct (lowering of morbidity/mortality), but neither attributable nor verifiable. Which leaves, as the one and only valid impact indicator, the availability of PHC services (cases handled at PHC level that before the intervention had to be referred upward or to private practice), though this was not monitored consistently. The fact also outlines the lack of training in LFA and monitoring, to the benefit of ECHO field staff and partners.
- 60. In *Shelter*, indicators were mainly used to select potential beneficiaries (see B.2.3). Regarding performance, the methodology of self-help was generally suitable since most people had basic skills or families/friends that could help them. However, the self-help rule could exclude vulnerable groups. One partner mentioned a few cases of single mothers with children, handicapped or elderly who might have been excluded due to this requirement, though DRC managed to overcome this difficulty by mobilising the community.

61. Recommendations

- To allow, in a context of post-conflict rehabilitation not only longer project cycle times, but to expand the time horizon in general. A mid-term review, for instance, of the PHC operation at the end of 2000, could have enabled it to profit from some of the findings of this evaluation.
- To take a more 'holistic' view of a PHC service: the assumption that in a post-conflict situation investment in infrastructure and equipment is the most effective way to improve the provision of care needs to be carefully analysed, and complemented (training...) if necessary.
- In case of a standardised approach implemented by a variety of partners (where ECHO retains responsibility for coherence at implementation level), to better streamline certain processes (tendering, monitoring). Instead of relying on a variety of performance indicators, to choose and monitor a number of valid, cross-cutting ones.

- In post-conflict/transition periods, the importance of the training component as multiplier factor for effectiveness of projects and as LRRD tool needs to be stressed. Continuous training is a strong asset of long term TA programmes.
- Similarly, to strengthen ECHO own technical capacities in key sectors, especially at field level. The overall lack of training for ECHO field staff (PCM, LFA, monitoring indicators, procurement) is a major constraint for optimum effectiveness of the Office.
- ➤ To limit the number of partners, in case of a standardised approach, to those with well-defined, appropriate mandates and/or development-adapted capacities (unless there are stringent institutional reasons, e.g. geographical representation).
- ECHO should ensure that partner are duly organised and can demonstrate prior experience of procurement. Should this not be the case, training and/or supervision/assistance is highly recommendable.
- ECHO representatives should be systematically present at the (public) opening of tenders, and attend evaluation committees from time to time with all partners.
- Some rules of the FPA 'Document 14' should be made more precise: (1) ECHO should offer the assistance of technical expertise if required (or impose it in case of doubt), to ensure the adequacy of technical specifications. (2) 'Invitations are generally published in the international press' definitely needs to be redrafted and clarified (minimum number of media, including one suggested media of reference).
- Distribution of in-kind grants should be more selective in urban areas, and closely co-ordinated with contiguous micro-credit scheme.

B.2.3. Durable Solutions in Shelter Sector

<u>Desired result</u>: to examine to what extent, ECHO's decision to support durable solutions in the shelter sector was appropriate, taking into account the results achieved, the value for money and ECHO's decision to concentrate operations on its core mandate.

- 62. Refugees and IDPs in Serbia are largely accommodated with host families or, less often, in collective centers (about 10%). Only few have their own accommodation, making shelter a major issues for refugees/IDPs, local authorities and relief organisations. According to a WFP survey in April 2001, about 72% of refugee households lived in sub-standard housing without toilets, hot water or adequate flooring. In 2000 and 2001, ECHO funding was channelled to improve living conditions of individuals in collective accommodation and to respond to the urgent accommodation needs of the IDPs from Kosovo. This assistance was appropriate and its benefits are twofold; (i) by helping the host families, to contribute to a better social acceptance of IDPs and allow them to find a more "natural habitat" while in refuge. (ii) It alleviated the pressure on collective centers to provide additional capacity.
- 63. In 2002, the global plan focused on expanding capacities of specialised institutions to secure permanent accommodation for the most vulnerable refugees and increasing support for durable solutions. Support for temporary shelter for IDPs continued where needs arose. Favourable factors led to this decision: (i) a survey in which 65% of the refugees expressed their intention to stay in Serbia, (ii) the easy granting of citizenship by the Government and (iii), the large extent of demand for housing assistance.

- 64. Over the period of three years, ECHO assisted almost 100,000 beneficiaries in private accommodation and most refugees accommodated in collective centers (30,000 in average per year). In the process, ECHO spent 38,585 mEur on shelter (including water and sanitation in 2000) and managed to reach 1/5 of the refugee/IDP population and almost all the population in collective accommodation. Having in mind the complexity of the needs, the dispersion of the refugees/IDPs throughout Serbia and the limitations stemming from the mandate, this is an impressive achievement.
- 65. Among the few programmes still active, a major one concerned an assistance that was provided through several partners, in order to complete housing units or convert poor ones into habitable homes. Several selection criteria were defined, some of them of a vulnerability nature (large families, special needs, low income, etc). The key criteria was however targeting sustainable integration of refugees: "the beneficiaries must own some property that is not habitable at present but can be converted into suitable housing with an average of Eur 2,500 input. Legal title of property and citizenship must be documented". Although the assessment could only be based on a limited number of cases (approx. 20), the effectiveness of the programme seemed to be mixed. Whereas the assistance was usually of high value in rural areas of Vojvodina and duly contributed to rehabilitate old farms in very poor condition, it was found that in some urban or semi-urban areas around Belgrade, the same assistance had also been provided to complete new houses of a much higher standard, in which the owners had already been able to invest significant funds. Such houses would probably have been completed without assistance, though on a longer time span. It can also be argued that many of the poorest refugees accommodated in rented housing would not qualify for this type of assistance, being excluded by the 'ownership' criteria.
- 66. Generally, sustainability of shelter projects was high. ECHO funding allowed for either completion or adaptation of the dwelling, bringing it to a liveable condition. The project helped some families to move out of the collective centers earlier then they would otherwise, though this figure remains modest. It also generally reduced the number of aid dependent beneficiaries with the provision of sustainable housing. Housing is the main problem for refugees/IDPs and this is exactly the kind of assistance the beneficiaries prefer and welcome. Owning a house has also a sentimental meaning, as this is how they identify their loss. More importantly, by providing them with a housing solution, the refugees preserve the income they would otherwise use for paying rent which can now be used for other needs. Creating employment opportunities, which would allow them to earn the money to resolve their housing question would be the preferred scenario, but this is beyond ECHOs mandate. Another very valuable contribution of durable shelter solution was to provide refugee families with a property that can be used as a collateral for credit.

B.2.4. Phase Out Strategy and LRRD

<u>Desired result</u>: to assess ECHO's "phase out" strategy for Serbia, with a focus on LRRD towards local authorities, the EAR and other donors, on the light of the EC Communication on LRRD.

B.2.4.1. ECHO Phase Out Strategy

67. An analysis of available documents (ECHO Global Plans from 2000 to 2002, programming matrix for 2003) has shown a growing number of references to LRRD and phasing out. LRRD was envisaged as soon as the Milosevic regime disappeared, though the co-operation framework was not yet 'straightforward' at the time. In 2001 ECHO still considered the possibility of serious troubles in

southern Serbia and only handed over pharmaceutical distribution to the EAR. There was therefore scant description of an actual phasing out strategy (or even a tentative planning) until 2002. The Global Plan of that year finally provided some benchmarks to rapidly reduce the number of food and NFI beneficiaries, in accordance with the phasing out strategies of some key partners²⁵. As a result, although the 2003 programming matrix includes expected results such as 'to consolidate and finalise ECHO programmes in the health sector' and 'to promote durable solutions for the refugees', limitations to the plan appear in the corresponding activities: 'no strict hand-over is required' in the health sector, and for shelter, LRRD is envisaged with authorities and UNHCR, despite the fact that 'no donor funding seems forthcoming'. Repatriation is similarly to be transferred to UNHCR and CARDS Return, though in both cases the probability of success is very low.

68. As a part of the phasing out strategy, ECHO took several very valuable initiatives, for example a field visit by ECHO Director during summer 2002 to outline the strategy to partners and to concerned national authorities, or a 'round table' organised as early as December 2001 with ECHO partners and the Ministry of Social Affairs. The latest led to useful contacts and co-operation. The evaluation could not find any result from contacts between partners and the EAR, which had been encouraged by ECHO, except an action by which the EAR has used NGOs to distribute redundant office equipment and furniture.

B.2.4.2. The LRRD Communication

- 69. In April 2001, a Communication was submitted to the Council and Parliament on LRRD²⁶. A large number of comments and recommendations, particularly relevant comments to Serbia and CARDS can be found in this valuable document. Most of those were duly taken into account, such as:
 - Country Strategy Papers (CSP), which form the basis of the new programming process for EC cooperation, must be used as the central reference for guiding different interventions at different stages in the crisis cycle, and, through the inclusion of conflict indicators, as a forward planning and preventative tool.
 - The linkage issue will become an integral part of the CSP in countries where crises and emergencies, or the potential for them exists, particularly where ECHO is active. This will allow the EC to take into account the pre-crisis phase and the opportunities to prevent or prepare for disaster and prevent conflict. It will also enable the planning of the transition from the emergency to the development phase. Such an approach is already foreseen for the (...) new CARDS programme for the Western Balkans, which focuses on reconstruction and stabilisation as on well on longer term objectives of sustainable economic and social development

70. In other cases, however, recommendations have not (yet), or only partially, been followed so far:

- A pro-active approach to co-ordination is needed. Due to its importance both as a donor of emergency assistance and of development assistance, as well as to its broad international presence, the European Commission has a particular responsibility in improving co-ordination.
- International and local NGOs and other civil society groups should also be associated with discussions of strategic orientations and participate in co-ordination mechanisms. This is consistent with the new development policy approach, which encourages increased participation of a broad range of civil society actors in dialogues on strategies and in the implementation of co-operation programmes. Civil society has valuable expertise and knowledge.

²⁵ Food and NFIs still drew nearly 50% of ECHO budget, despite the fact that food supplies (especially WFP basket) had very little added value in a country where there was no food shortage, but rather distribution problems.

²⁶ Linking Relief, Rehabilitation and Development - An assessment, COM(2001) 153 final

• A change and broadening of implementing partners may be required in the transition phase. This requires looking beyond NGOs and UN agencies to other bodies, including local organisations, the private sector and consultants for technical studies. Where a decision is made to continue with NGOs, preference should be given to those NGOs that have acquired a proven competence in both emergency relief and development.

B.2.4.3. Co-ordination & Coherence with CARDS, EAR and other Commission Services

- 71. A range of institutional tools have been put in place by the European Commission to prepare the main LRRD instrument, the Country Strategy Paper (CSP). These instruments were duly used in the case of Serbia and can be listed as follows: Task Force (in which ECHO was involved), Inter-Service Consultation process (through which ECHO managed to add the Health sector on the agenda), circulation of draft annual EAR programme (ECHO has a right of veto), and final approval by the CARDS Committee and the Governing Board of the EAR. In addition, regular (quarterly) discussions are scheduled between RELEX and ECHO, the latter being also involved in the EU-FRY Consultative Task Force on Stabilisation and Association process (SAp). Overall co-ordination with ECHO has been described as 'very good' by RELEX D/2.
- 72. As a result of this process, priorities for the 2003 budget of the EAR (229 mEur) include:
 - *Economic reconstruction, regeneration and reform.* Energy, Environment and Transport; local, enterprises and rural economic development: (141 mEur, or 61,6% of total budget)
 - *Good governance and institution building*: administration reform –including in Health-, justice and home affairs, etc (total 59 mEur, or 25,8% of 2003 budget)
 - Social development and civil society: vocational education and training, media, Tempus, civil society (24 mEur, 10,5%).
- 73. It is clear that the EU does not have sufficient resources to cover the full spectrum of social policy issues, and that activities need to be focused on a limited number of key areas of co-operation (generally three in most development programmes). Choices have to be made, and potential external partners identified. As described above, this has been done in the CARDS Country Strategy Paper 2002-2006, where intentions of the World Bank (lead in the Health and social sectors) and pledges from several EU Member States (Health, continuous training) were duly recorded. Approval of a large 50 mEur loan by the EIB Board for further rehabilitation of Health infrastructures is now expected for June 2003.
- 74. Nevertheless in this framework, direct EAR support to sectors also covered by ECHO appears rather limited. In 2003, 9,5 mEur (4%) went to Health -including a share for the much needed policy reform, and only 1 mEur (0,4%) for 'help to reduce poverty by establishing a fund that brings government and NGOs together, aiming to help the most vulnerable'. Although there was no direct support to durable solutions for refugees, which is hardly in accordance with the first and fourth of the major objectives of the CSP²⁷, some help can probably be expected from the 'Local/Municipal development' sector, to which a significant budget of 35 mEur has been allocated. The objective of this last measure is indeed described as follows: 'enhance the delivery of municipal services and strengthen the ability of municipalities to design and implement local development initiatives, by supporting the decentralisation of government. This will include targeting disadvantaged areas of the country'. However, the degree to which any co-ordination with ECHO can still be achieved in this field is unclear, considering that the phasing out of the Office is now almost completed.
- 75. As already stated, the lengthy process of LRRD formulation within the Commission does not suffice to guarantee results. Close co-ordination involving regular dialogue (largely based on technical

²⁷ "Reconstruction, democratic stabilisation, reconciliation and the return of refugees"

discussions) among the instruments present in the field is as indispensable. In Serbia, this quality of coordination was not obtained owing in part to complex interlocking relations between the Delegation, the EAR and ECHO. However, the responsibility of impulsing and stimulating action in the field always lies with the Commission.

- 76. Furthermore, LRRD operational linkages with external donors are obviously often much 'looser' than within the Commission. Co-ordination can be weak, institutional constraints and ensuing delays are not always clearly identified and followed up. Regular information between external donors and RELEX, and inside the Commission to LRRD concerned Services, can be correspondingly weak. The evaluation did not find evidence that proper linkages or even information about LRRD with a number of the external donors mentioned in the CSP had been established with ECHO and its key implementing partners.
- 77. It should finally be noted that significant macro-financial assistance is also provided by DG ECFIN, in close co-ordination with IMF. A first package of 345 mEur has been completely disbursed in August 2002, and a second package of 130 mEur (including 75 mEur in grants) was adopted in November. The general objective is to support balance of payments and strengthen foreign exchange position. Macro-financial assistance is not intended to be used for earmarked budget support (e.g. to fill the social gap), nor should it be in the words of the Head of Delegation, since current macro-financial assistance is effective and should not interfere in national budget settings.

B.2.4.4. Health

- 78. Continuation of ECHO operations after 2000 was certainly justified by the famous 'gap': Serbia received considerable donor funding, which was, however, mostly targeted at economic and agricultural investment and reform. State agencies in charge of health were 'financially totally incapable of meeting needs' (GP2002). Whether the phasing out was based on significant 'reduction of humanitarian needs'²⁸ in the health sector is debatable as least it was not verified for health. The phasing-out was not guided by application of benchmarks and the attainment of pre-set criteria at the level of 'vulnerable groups'. With the exception of the only, very rough, benchmark of covering all districts with the PHC program, there was no written evidence of a 'phase-out strategy'.
- 79. Instead, a time limit was simply defined, justified by ECHO mandate. ECHO is the only major humanitarian player still in Serbia; a good three years is good measure for the aftermath of a conflict. The setting of more precise benchmarks, however, could have been envisaged, such as the services (in quality and number) to be performed at PHC level or the number or portion of PWDs in need provided with individual aid. Other criteria could be the capacity of the Ministry of Social Affairs to support extremely vulnerable individuals, or the level of local funding obtained by Counselling Centres created.
- 80. The phasing out was also justified by ECHO with the 'presence of other Commission instruments (mainly the CARDS programme and the EAR)'²⁹. We have mentioned the successful hand over of the drug supply operation from ECHO in 2001³⁰. This was to be an exception, however: there was no other evidence of direct complementarity with 'appropriate longer term instruments... mobilised in a timely fashion', as proposed in the 2000 evaluation. The focus of the EAR on policy reform, which seems quite relevant from a broader LRRD perspective and from Brussels, does not appear as a co-ordinated move in the field, due to a general failure to consistently pursue the conversion of funding opportunities laid out in Commission programmes into concrete LRRD.

²⁸ European Commission. ECHO Aid Strategy 2003

²⁹ ibid.

 $^{^{30}}$ 20 m Euro of drugs were supplied alone through the winter of 2001/2, through PSF

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81. The calendar of ECHO phasing-out appeared to be clearly understood by beneficiary institutions, especially the biggest, the MoH, without the slightest complaint. Its effect highlights again the difference between the best performing partners on the one hand, and the ten or so PHC partners: the latter are gone for the most part; the few who try to hang on have little chance to do so. The former, however, are still present, with funds from other donors or own funds and have good chances to continue to be active in Serbia.

B.2.4.5. Durable Solutions

- 82. ECHO phase out strategy in Serbia entailed a reduction in funding over the period of three years (2000-2002) and transfer of responsibilities, by direct funding, to leading multilateral organisations in the sector of return and shelter. ECHO Belgrade describes this as a transition from being a key operator to a key donor, by disengaging from participation in the overall process of strategic planning. This decision was further justified by the arrival of the EAR and their much larger development budget in 2001. While in other parts of former Yugoslavia ECHO often funded similar projects to the ones funded by other Commission instruments³¹, this was not the case in Serbia. Refugees and IDPs, as well as other vulnerable individuals, were not a target group for other EC instruments, whose funding is structural and aims mainly at economic recovery and transition to a market economy. Once the phase out decision had been taken, ECHO tried to ensure that some attention is given to the refugee and IDPs, by inserting some provisions in the Country Strategy Paper which defines the allocation of the CARDS funds. This was subsequently done but only in a form of acknowledgement, and no funds will specifically target this segment of the population. In a complex political and institutional context, a confusion seemed to lie in the fact that ECHO intervention was mainly aimed at alleviating the consequences of the war in the region and used procedures based on grassroots partners proposals, whilst CARDS/EAR mainly focused on transition aspects leading to the process of stabilisation and association (SAp), in a CSP framework.
- 83. Some of ECHO partners will continue activities in the shelter sector and local integration but without EU funding. There are some initiatives related to housing, one coming from the Council of Europe and another funded by the Italian government through UN Habitat, that are currently being mentioned by the Serbian Government. Neither are linked to ECHO programmes and ECHO expertise and experience, should these initiatives come to fruition, is unlikely to be available or used.
- 84. In the area of returns, ECHO will continue in 2003 funding the major agency who leads the repatriation programme to Croatia and BiH. Funds permitting, the Serbian Commissariat for Refugees will take over some of this operational activities in the same way that ODPR and the Red Cross took on in Croatia. One of the areas that is most likely going to be affected by ECHO phase out is the Legal Aid field. There are many obstacles still in place that prevent people from accessing rights in their countries of origin, especially in Croatia). Access to property (houses and land, tenancy rights), pensions, citizenship and other documents remains an issues and refugees are often victims of cumbersome legal procedures slowing the return process. Although some local capacity exists (Serbian Democratic Forum), also thanks to ECHO policy of strengthening local capacities, they are dependent of international funding.
- 85. Recommendations (see other phase-out recommendations under B.2.5)
- To follow the recommendation of an assistant Minister of Health, to 'pay more attention to what will be, an not what is'. This could mean to include issues such as management changes/change management in an operation that covers a country's entire PHC system, knowing that it will soon change dramatically.

³¹ In BiH and Kosovo, ECHO funded housing reconstruction projects at the same time as DG1A and the EAR.

To achieve better complementarity / continuity after phase-out, by better identifying possible institutional constraints, detrimental to LRRD. A (joint ?) ex-ante evaluation to validate CSP settings might have outlined CARDS weaknesses in funding cross-border refugee returns.

86. Lesson learned

In the own words of the ECHO Director: 'LRRD is still a weak link, in spite of all efforts made³². At HQ level, LRRD tools may be in place, though in the field a lack of appropriate and effective coordination mechanisms can still have detrimental effect on coherence between Commission instruments. Furthermore, LRRD needs also to be envisaged with external donors, which require additional efforts in co-ordination and knowledge of agenda, mandates and institutional constraints.

B.2.5. Reduction of Aid Dependency

Desired result: to assess to what extent the objective of reduction of aid dependency has been achieved.

- 87. Aid dependency is more pertinent to other areas of ECHO activities (food, non food items, winterisation) which are beyond the scope of this report. Aid dependency in the health sector was generally not much of an issue, as it has been consistently and successfully avoided³³: programs consisted in capital investment and training. With few exceptions confirming the rule, no new needs were created either. This leaves the question of sustainability. In general, it is high, owing to a strong sense of local ownership at the level of management and authorities.
- 88. Aid dependency in the shelter sector has been minimal. Firstly, because provision of shelter as a form of assistance for refugees and IDPs in private accommodation did not exist and second, because shelter per se is a durable solution and as such does not entail permanent supply of services, thus avoiding dependency. A sensible housing/shelter policy in the mid and long-term would contribute to speed up the closure of collective centres and significantly reduce dependency on aid for the population in collective accommodation through its shelter programme and directly reduce the number of individuals dependent on other forms of aid. The process of organised returns is almost entirely dependent on international aid including ECHO funding, i.a. for cost reasons (average of 350 Euro per individual). It is highly unlikely that national partners will be able to raise this kind of funds from national sources or that national authorities would embark on such an expensive venture. Return is bound to continue to take place after ECHO phase out, but most probably at a different pace.

B.2.6. Recommendations for Future Phase Out Strategies

<u>Desired result</u>: to draw conclusions and make recommendations for future "phase out" strategy, which could applied to other contexts and improvements in methodology.

89. As ECHO itself admits, the 'definition of an exit strategy from the Balkans did not benefit from a preestablished list of exit criteria/indicators that would reflect entry criteria'³⁴. Why not? In part, this can be attributed to the fact that the latter weren't very clearly defined either. Which is common for a humanitarian action started, after all, in an emergency situation (1999) in a context where needs, if not

³² Report of the mission of Mrs Adinolfi, ECHO Director to Serbia (07-11 October 2002)

³³ The only exception was the drug supply program, handed over to the EAR

³⁴ Exit strategies: Lessons Learned from ECHO in the Balkans. Report from an ECHO 2 Regional Seminar, 20-22 June 2002. Brussels, ECHO 2/AK D(2002)

known in detail, were obvious. There was scope to improve the initial needs assessment. For example, we do not know what were the biggest needs of the population with regard to access to PHC. At the level of health services provided, even baseline data were not systematically gathered. Also, baseline data were not linked systematically to intervention criteria and translated into cross-cutting objectives and indicators.

- 90. On the basis of collected findings, a number of <u>recommendations</u> can be made in order to improve future exit strategies in other contexts.
- To increase quality of initial needs assessments; not only through maintaining a more holistic perspective and carrying them out closer to the end beneficiaries, but also through the gathering of more complete baseline data and linking them to clear intervention criteria.
- Mirroring these, to establish a phase-out strategy with benchmarks (e.g. quality and quantity of PHC services to be performed, or responsibilities of the Commissariat for Refugees) and pre-set criteria (e.g. at the level of local capacities), instead of just setting a time limit to ECHO presence.
- In post-conflict situation, to enlarge ECHO strategic horizon and allow for multi-year strategic planning.
- Regional linkages should be seriously considered in designing country specific strategies and should not remain theoretical. Efficient practices, related to cross-border/boundary needs assessments, design and implementation of programmes and funding decisions, in areas that are politically inter-linked, must be introduced. The level of impact and effectiveness of ECHO projects in similar situations will depend on whether this will be achieved This is not only applicable to ECHO internally, but to other Commission instruments and should be adopted as an intra-Commission practice.
- To ensure that standard criteria applied by humanitarian actors are properly recorded in institutional memories of potentially concerned development donors, to avoid creating disparities or jealousy if similar programs are later decided.
- At EU level, the introduction of an enlarged "uprooted people" budget line³⁵ that could continue providing assistance for refugees and IDPs on durable solutions should be considered.
- To promote the transfer of key field staff (national and international), whenever feasible and relevant, from ECHO to the EU longer-term development structure (either Agency or de-concentrated Delegation), in order not to lose a pool of expertise that might be very valuable for project identification and coherence.
- To increase efforts to seek LRRD operational complementarity with Commission Services at field level (co-ordination, transfer of staff), and with other donors involved in CSP, at HQ/ field levels. To pay early attention to the potential of international partners to stay on, to cultivate those and to engage actively for their continuation in development phase.
- In the long term, ECHO should try to clarify and develop its policy regarding entry and exit criteria/ indicators for, including –when relevant- coherence between them. Both ECHO and the LRRD process would probably benefit from such a methodological improvement.

³⁵ Uprooted people budget line – according to Parliament and Council regulation of 29 October 2001 on Aid to uprooted people of Asian and Latin American developing countries.

Among institutional tools already set up, a better integration of ECHO actions to be integrated into long term development framework of main 'Areas of Co-operation', can be recommended. More practically, a number of selected activities could have been more strongly pushed by ECHO for integration into CARDS/EAR programmes, such as micro-credit scheme, continuous training, legal environment reforms conducive to micro-credit and INGOs, or NGO support to returnees. This is tentatively illustrated in table 3:

	Table 3
CARDS/EAR main areas for support	ECHO-funded activities to be continued
1. Good governance, public administration reform,	Provision of drugs (done)
institutional support (JHA, Health)	Continuous training in health, social support
	Participate in dialogue on Health policy reforms
	Legal reforms in favour of (I)NGOs, micro-credit schemes
2. Economic recovery: energy & other public utilities,	Micro-credit scheme for refugees and IDPs, training in
environment, transport & infrastructure, enterprise,	business management.
agriculture	
3. Social cohesion, support to civil society, media	Support to valuable local NGOs (facilitation of contacts
	and procedures of EIDHR, though no equivalent to
	LIEN/IBPP)
4. Education (TEMPUS)	
5. Integrated border management	
	Return of refugees (information and support)
	Shelter for most vulnerable refugees

B.2.7. Continuation of Activities in 2003

<u>Desired result</u>: to assess ECHO's decision to continue activities in 2003, on line with ECHO's core mandate and its annual strategy.

91. Based on the 2002 OCHA report and as a result of it own assessment, ECHO defined its priorities in the final year before closure and significantly decreased funding in 2003, channelling all funding available for durable solutions (3 mEur) through a major agency. The aim was to build on the work of previous periods by continuing to support return to BiH and Croatia and help those refugees who have opted for local integration. However, The funding cut from 36,9 mEur to 6,6 mEur -to which must be added some unspent funds- was probably too drastic. ECHO Belgrade expected a higher budget in its final year (8-10 mEur) but the field has limited influence over funding decisions. A more generous last year budget could have somewhat eased the phase-out, and could have been geared towards easing the consequences of a probable funding gap, e.g. in the field of social activities for the most vulnerable in those collective centers being closed. ECHO could also have concentrated more on social cohesion programs, working more closely with the EAR³⁶ and other development agencies involved in social rehabilitation programs. One such programme could have been to facilitate the integration (or else) of refugees and IDPs that reside in collective accommodation designated for closure. UNHCR has designed a scheme with the Serbian Commissariat for Refugees, but so far has received funding only from the Norwegian government. To concentrate on legal and other protection of refugees and IDPs may also have been a better strategic choice. The justification is dual; (i) legal obstacles are still the main reason for slow return to Croatia, and (ii) access to pension rights, property

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³⁶ Article 9 of Council Regulation No 1257/96 states that; "where necessary , the Community may also finance humanitarian operations by the member state's specialised agencies.

rights and potential financial gain from sale or rent in BiH and Croatia, could contribute to the unburdening of the social (humanitarian) bill of Serbia.

92. In the health sector, ECHO's objective in 2002 was to 'continue to support the PHC system countrywide covering 160 municipalities' (GP 2002, added emphasis). The decision to continue in 2003 in order to complete the coverage, appears perfectly justified. As mentioned above, however, (chapter B.2.3.) there was no 'phasing out strategy' as such.

B.2.8. Recommendations from Previous Evaluations

<u>Desired result</u>: to examine to what extent the recommendations of the 2000 Evaluation were taken into account as well as, when directly link to the scope of this Evaluation, the 2002 WFP Evaluation, the 2002 drought Evaluation and the Evaluation of the information and communication plan for Serbia.

93. These recommendations were only partly relevant to the current evaluation. Complete results are nevertheless listed below.

B.2.8.1. 2000 Country Evaluation

- 94. The evaluation submitted nine recommendations, as follows:
- <u>Adequate international staff are available to fulfil effectively the expected role</u>
- 95. The number of international staff (three) who had been working in the Belgrade office until the phasing out process was generally considered adequate, and it has not been increased. They were assisted by very committed national staff, one of which was recruited after the 2000 evaluation. Nevertheless, this recommendation can sometimes be ambiguous: whereas the number of staff should depend from the extent of the programmes, the reverse can also be true. The extent of certain operations may somewhat depend from the perception and expertise of the staff in charge.
- providing opportunities for training and career development of national staff at field offices
- 96. This appears as a very important and valuable suggestion, though training should not be restricted to national staff only. Whereas desk officers in Brussels have access to Commission training cycles, and partners are introduced to broad FPA principles, the Belgrade office international staff have not been offered any training opportunity whatsoever. The lack of training for both international and national ECHO field staff has been identified as a major problem. The staff need to be trained in a number of key matters, such as e.g. PCM, LFA, monitoring practices and key FPA provisions (such as procurement rules). National staff also need to be better acquainted with the Commission in general and the expectations of ECHO in particular. Such training could ideally take place in Brussels at regular intervals. The seminars for field experts could similarly be integrated in a training process.
- Greater delegation of decision-making to field offices in administrative procedures
- 97. The 'Administrative and Financial Field Manual for ECHO Officers' drafted on the basis of experience collected in BiH has, to a large extent, clarified the procedures and tasks, though the field office has not perceived significant delegation in decision-making. On the contrary, the financial supervision carried out by ECHO Brussels has become even more demanding (e.g. local purchases). The head of office is responsible for all accounts, though without having corresponding authority.
- Appropriate targets and objectives, the indicators to measure them and monitoring systems by which they will be applied should be included in proposals. The use of basic LFA is recommended

98. The use of LFA has become a prerequisite in any partner proposal to ECHO. This has resulted in some improvement, since LFAs require a more thorough analysis of all issues at stake. The quality of LFAs is however uneven among partners, and ECHO field staff have not been trained in this field. Furthermore, whereas LFAs are usually adequate for initial project appraisal, indicators are still too often inappropriate for monitoring purposes, which reduces their utility.

Together with the Delegation to try to set up a joint co-ordination group with member states.

99. Regular co-ordination meetings stopped with the downfall of Milosevic. After Nov. 2000, only ad hoc meetings have been organised, mostly for visiting officials. The recommended role of co-ordinator could hardly be continued by the Delegation (no resources, strong bilateral agendas of some Member states), and should rather have been the task of OCHA.

Echo should have as its partners only those NGOs with proven ability and capacity

- 100. The contracts of a couple of NGOs have not been renewed, due to their lack of ability. This is however a difficult recommendation to implement, for several reasons: (i) which criteria should be applied to judge a 'proven ability or capacity'? In a LRRD context, the capacity to work on the long term with a well-defined mandate would probably be an advantage. (ii) The FPA should already be a screening process for partners capacity; (iii) the low visibility of the Serbian situation and some strong regional interests have resulted in having a high proportion of Italian and Greek NGOs.
- FPA should be amended to take on partnerships between local and international NGOs, national organisations, and non EU NGOs with adequate expertise
- 101. The FPA can only reflect the provisions of ECHO legal basis. Flexibility has nevertheless been applied as much as possible: non-EU international NGOs have been funded directly by ECHO, and local NGOs have also benefited through several partner umbrellas.
- ECHO should limit itself to a strict definition of humanitarian assistance and to developing its role and expertise to cover disaster mitigation and preparedness

102. This recommendation seems to have been 'half-cooked' and was not appropriate to post-conflict.

- ECHO should use its influence to the full to ensure that the discussions on LRRD provide an effective continuum between HA and reconstruction/ development
- 103.See also Chapter B.2.4. ECHO has indeed tried very strongly to promote LRRD, with limited success only, in the Health sector.

B.2.8.2. 2002 WFP Evaluation

- 104. This evaluation resulted in a very large number of recommendations (20). Some of them were overlapping, and have been condensed into the following six key issues, for convenience purposes:
- Programme management has to recognise the need for early long-term planning, i.a. as a permanent management and monitoring instrument, and to prepare LRRD/exit strategies.
- 105.Long-term planning capacity is constrained by ECHO mandate and short programming cycle. As stated above, LRRD has been a focus of ECHO, though food was not part of it. There was no food shortage in Serbia, only distribution problems. An indirect result was that, although protracted food distributions tend to create or increase counterproductive dependency of beneficiaries, this was not the case in Serbia since the real added value of WFP food basket was quite low.
- ECHO and WFP should carry out nutrition surveys, to better address nutritional needs.
- 106.Useful recommendation, though difficult to implement considering that WFP capacity to carry out effective surveys had long been rather weak in Serbia. When the capacity was finally improved, the

needs had disappeared.

- Monitoring of food distributions must always get full attention. Information should not only be quantitative and a better "bottom-up" information system should be established and used for analysis and new programming.
- 107.WFP took the right steps by modifying its 'joint food needs assessments' and broadening them into more appropriate 'joint needs assessments'.
- <u>WFP should conduct regular (auto-)evaluations and involve IPs systematically</u>. See point 2 here above.
- <u>To circulate the pipeline projections amongst the IPs.</u>
- 108.See also point 2. For a long time, pipeline information have reflected only programming figures, not actual deliveries. Such information only improved in the final phase of WFP presence.
- Food commodities have not been procured locally despite local surplus in Serbia and the commitment to do so in ECHO contract (local procurement conditions and pressure of the government). Sourcing must, wherever possible, be local -for obvious economic reasons. Where local sourcing is not possible, the alternative choice must be based only on good budgeting.
- 109. This valid recommendation also reflects the low capacity of WFP during most of its Serbia programme.

B.2.8.3. 2002 Drought Evaluation

110. The current evaluation and the ECHO office in Belgrade could not find any evidence of the implementation of the "2002 Drought Evaluation" in Serbia.

B.2.8.4. Evaluation of the Information and Communication Plan

- 111. This evaluation resulted in a set of thirteen recommendations:
- Design communications strategies for all ECHO offices
- 112. This recommendation has been implemented.
- <u>Appoint more ECHO Communications focal-points</u>
- 113.A PIO has been appointed since February 2000 in Belgrade. Valuable work has been done, including checking that no mis/dis-information is to be disseminated.
- Build upon the draft guidelines for ECHO field experts
- 114. The guidelines have been published on the intranet.
- Design local, more than country or regional communications strategies
- 115. This unclear recommendation could not be applied.
- <u>Build in 'market' research</u>

PROLOG Consult - Belgium

116. This type of activity is not allowed by ECHO mandate, and cannot be funded at field level.

• <u>Run more training and seminars for ECHO and partner focal points</u>

117. The lack of training at every level for field staff is still a major problem for ECHO effectiveness.

• Develop the ECHO global (Brussels) Communications strategy

118. This is a very valid recommendation, which could not be investigated in detail in the field.

- <u>Request the appointment of partner focal-points for large operational budgets</u>
- 119.Partners have already taken the necessary measures.
- <u>Develop strong ECHO-Partner co-ordination in communications</u>
- 120.All partners visited had produced good quality material with joint logos. Several highly effective joint TV spots (with SCF and CARE) could be seen during the field mission. The same had however reportedly been refused to ECHO by HI, for reasons of mandate integrity (?).

• <u>Make ECHO Brussels visits to the field more frequent</u>

121.A visit to Serbia was carried out in May 2002, to bridge the gap between Brussels and the field. Its specific objectives included highlighting the 'Europe day' (9th May), and better informing and assessing contacts with key partners. According to ECHO Brussels, the necessary information has been successfully provided to the local media. Recommendations include better planning and co-ordination with partners.

122. Two **lessons learned** can be drawn from the visit:

- Official 'high profile' visits from Brussels are likely to <u>highlight a particularly important event</u> (such as e.g. the launching of an important project or a final phasing out ceremony). In parallel, regular working visits can be useful to assess the usefulness of the communication plans of the partners, and to enhance co-ordination.
- Messages addressed to beneficiaries and local authorities need to be kept <u>as simple as possible</u>. Recipients tend to be easily confused by the complex institutional structures governing relations between the EU and the Commission. In Serbia, whereas the European Union is well known and appreciated, the role of the Commission is rather obscure. ECHO should therefore be seen as a EU body only.

• <u>Make the ECHO communications budget approval process more agile</u>

- 123. This was a very valid recommendation, which has apparently not been sufficiently applied to this date. A typical request from the ECHO field office to Brussels regarding a visibility item could take as much as two months before final approval, and had to pass through no less than six stages (Delegation, ECHO 2, Desk, ECHO Information, back to ECHO 2, and finally ECHO 5).
- <u>Produce more materials centrally (at Brussels)</u>
- 124. This particular recommendation should probably not be applied in Serbia. Quality/price ratios are much more favourable for most locally produced items. There is however a need to centrally define the range of items and their specifications in Brussels.
- Improve communication and co-ordination between ECHO, services, agencies and Delegations.
- 125.Very useful recommendation: co-ordination with the Delegation on communication matters was proactive, though the EAR had obviously adopted a policy of low profile. The evaluation did find one EU 'info point' shop in Belgrade, though its location was rather bad and visibility minimum.

B.2.9. Cross-Cutting Issues

<u>Desired result</u>: to study how the following cross-cutting issues have been taken into account, where relevant: (i) Gender; (ii) Elderly; (iii) Children; (iv) Handicapped; (v) Effects on the environment; (vi) Security of aid workers; (vii) Respect of Human Rights; (viii) Donor communication strategy; (ix) Humanitarian Accountability.

- 126.Relevant cross-cutting issues were, with one exception (accountability), duly taken into account within in the framework of ECHO health operations. ECHO stated policy of targeting the most vulnerable groups and the reluctance to exclude less vulnerable groups, even though they do not have the means or the mandate to come to the aid of the entire population affected by a particular crisis, remains one of the most morally complex areas in humanitarian action.
- 127. <u>Gender</u>. More programs specifically focusing on women's needs were implemented in the psycho-social area than in the health sector. Many health program components, however, were directed at women's needs: special support for early detection of cervical cancer, for instance (IISA), and in general, assistance to gynecology services within DZs. The prime focus of patronage services is Mother and Child Health; they were supported by all PHC partners and by the special UNICEF program. The self-help methodology in the shelter programme, if not executed in the spirit of community development, could be seen as particularly gender insensitive. Single head of household may be disadvantaged especially if they are female. Furthermore, female head of household are less likely to own a property in the first place, thus remains outside the targeted group.
- 128. <u>The Elderly</u>. The PHC operation included and initially, even focused on remote areas, were a bigger part of them live. The elderly were also the main beneficiaries of the support to home care services and of the influenza vaccination campaigns. Elderly refugees and IDPs were a category of special concern for ECHO. Often they have no source of income due to unresolved pension issues and, as refugees, have no access to social benefits. Sustainability has been ensured by signed agreements between UNHCR and the Ministry of Social Affairs. The agreement regulated the use of these centers, financing of placements. In repatriation movements, the elderly are given special attention and adequate medical escort is ensured.
- 129. <u>Children</u>. The prime focus of patronage services is Mother and Child Health; they were supported by all PHC partners and by the special UNICEF program. Entire programs were targeted at children with special needs, such as assistance to schools and individuals. Attention had been paid to the needs of returnee children by providing them with school kits. The eligibility criteria for the shelter projects (ownership of property etc.) tends to exclude families who are economically more vulnerable (larger families with young children) than families who have grown-up children and earn several incomes.
- 130. <u>People with disabilities</u>. 15.3% of the budget for the period under investigation was devoted to them, through SCF and HI. In chapter B.2.2.2., however, we have pointed at a missed opportunity to coordinate efforts for the removal of architectural barriers in PHC structures. Refugees with special needs returning to their country of origin are assisted by an accompanying physician who can assist them during the return journey. Information about their physical condition is shared with the Red Cross or other organisations at the receiving end.
- 131. *Environment.* The issue of environmental protection was generally not pertinent to this report; in Health the construction of an incinerator for medical waste disposal was a missed opportunity for replication.
- 132. Security of aid workers. Security has not been an issue in the last three years in Serbia.
- 133. <u>Human Rights</u>. Partners and beneficiary institutions generally tried to provide equal access to all for health care. A good example of inclusion is the participation of 'Albanian' nurses in the UNICEF seminar in South Serbia. In the implementation of shelter programmes, ECHO applied different criteria for refugees and IDPs. For example, IDPs were offered only temporary shelter and benefited from a two year rent free arrangement. This difference in criteria reflects the protracted and still unstable political situation in Serbia which does not yet allow the Government to commit itself to a *realpolitik*. Although laws are in place, IDPs who would like to de-register in Kosovo and settle in other

- 134. <u>Communication strategy</u>. ECHO Belgrade produces a Communication strategy on a yearly basis, following the finalisation of the Global Plan and the funding decisions. The Communication strategy is entirely produced locally, based on the local media and communication environment but needs to be approved by ECHO Communication for general streamlining. The Communication strategy is largely based on promoting ECHO and European values and raises the visibility of ECHO with the end users and the general public. The effects of this approach have been satisfying.
- 135. <u>Humanitarian accountability</u>. We have pointed at certain shortcomings with upward accountability, like weaknesses in the monitoring process, scarcity of project evaluation reports (chapter B.2.2.3.). Neither was evidence found of longitudinal monitoring whether learning within ECHO took place. With regard to local accountability, the quality of relationship with local institutions and authorities was good. A major shortcoming, however, was the lack of consultation of the affected populations, who were, as end beneficiaries, primary stakeholders of the PHC operation. The assumption made that support to PHC services would benefit the whole population and the often quoted 'vulnerable groups' within it, is to a certain extent legitimate. These 'vulnerable groups', however, nor the population in general, were never consulted on the effects of the PHC operations, or its possible shortcomings.

136. Recommendation

To increase downward accountability by ensuring that affected populations are effectively consulted, whenever appropriate to achieve optimum adequacy to needs.

-ANNEXES-SYNTHESIS REPORT

ANNEX A: TERMS OF REFERENCE



EUROPEAN COMMISSION HUMANITARIAN AID OFFICE (ECHO)

ANNEX 2

TERMS OF REFERENCE For the evaluation of the ECHO interventions in the Federal Republic of Yugoslavia (Serbia)

Contract n°: ECHO/EVA/210/2003/0xxxx

Name of consultant(s): Firm:

a) Context of the humanitarian crisis (political, natural, etc):

The disintegration of Yugoslavia in the early 1990's led to the creation of four independent states (Bosnia-Herzegovina, Croatia, the former Yugoslav Republic of Macedonia, Slovenia) and a reduced Federal Republic of Yugoslavia (FRY) made up of the Republic of Serbia and the Republic of Montenegro. The Republic of Serbia, in turn, includes the provinces of Vojvodina and Kosovo. Following the 1999 conflict, the UN placed Kosovo under an interim international civil and military administration.

The successive wars in the region and the policy of ethnic cleansing precipitated a forced movement of people (both as refugees and displaced persons), the scale of which had not been seen in Europe since the second World War. Over one million people were displaced within Bosnia alone and almost one million became refugees. Since 1991, the FRY has received over 500,000 refugees from the conflict in Bosnia and Croatia and a further 220,000 internally displaced people, mostly Serbs, from Kosovo. The economic effects of a decade of wars, sanctions, unsustainable economic and financial policies and international isolation have been very damaging for the FRY. Between 1990 and 1999, its economy (excluding Kosovo) recorded a negative average annual growth rate of 7%, resulting in the 1999 GDP being about half of that registered in 1990 and the rate of unemployment remains one of the highest in Europe.

The situation in Serbia can be classed as a "post-crisis" situation, with local and international governments facing two main challenges: finding durable and sustainable solutions for over half a million refugees and displaced people and addressing the increasing poverty which indiscriminately affects refugees, IDPs and the local population. It is estimated that over 1.1 million people live below the poverty line. The change of government following the October 2000 revolution and the normalisation of relations with the international community, particularly with the EU, have raised hopes as to the end of the humanitarian crisis in Serbia.

From a political standpoint, a longer-term solution to the refugee problem is in sight, as both the return to Croatia and Bosnia and local integration in Serbia have become real possibilities for the 377,131 refugees still present in Serbia. With regard to the 187,000 IDPs, although the official policy of the government remains that they must return to Kosovo, this return is still hampered by serious difficulties on the Kosovo side, especially security.

b) Humanitarian situation:

The overall outlook for the humanitarian sector remains bleak. Whilst considerable donor funding and credits from international financing institutions are being made available, most of this support is being

targeted at economic and agricultural investment and reform. In general terms, it is postulated that a general steady economic recovery will be beneficial for all in the medium to long term. However, the humanitarian situation is bound to worsen as there is not, as yet, an adequate social security system and as privatisation begins to bite, the social burden will increase dramatically. In the short term, the increase in unemployment is likely to have a very negative impact as more and more individuals fall into poverty. The responsible ministries and state agencies, Health, Social Affairs, Education and the Serbian Commissioner for Refugees (SCR), are not financially capable of meeting the needs of such a huge caseload. A very high pensioner population and an increasing level of unemployment in the work force place a huge burden on the relatively small employed section of the population. There is a growing risk of increased poverty and vulnerability for the traditional beneficiaries of humanitarian assistance, be they refugees, displaced people or the local population, constituting a gap between the humanitarian assistance and the expected benefits of the donor-supported reform process. Whatever the long term prospects for the refugee and IDP population, the current living conditions of the majority of the population are extremely difficult, reflecting the situation of the poorer strata of the local populations.

Other humanitarian donors are phasing out and development programmes should be progressively substituted for humanitarian aid. The leading humanitarian agencies have introduced stricter vulnerability criteria that limit the number of refugees, IDPs and local people eligible for humanitarian aid. At the same time, the opportunity for political change in the region is leading agencies to pay increased attention to finding durable solutions for refugees. Finally, the attitude of the national authorities and the presence of longer term donors present an increasing potential for a linkage between humanitarian assistance and long term development (LRRD).

c) ECHO's response:

Over the years ECHO has adopted a regional approach to the Balkans, on several occasions, mainly at the height of the Kosovo crisis, taking regional decisions and adopting several multi-country programmes, usually through the UN or the Red Cross families. The strategy towards Serbia cannot, therefore, be disassociated from the broader Balkans strategy, especially in relation to the aftermath of the Kosovo crisis. Due to the particular problems encountered in Serbia, namely the number of IDPs and refugees and the difficult living conditions of the poor, the phasing out from Serbia has been somewhat slower than in the rest of the region.

Whilst the overall stabilisation in the Balkans has allowed ECHO to phase out of some countries and phase down in others, the situation in Serbia was recognised in the ECHO 2002 strategy as still requiring a sizeable intervention, albeit a reduced one if compared with previous levels of assistance. The presence of humanitarian donors is being reduced whilst the humanitarian needs themselves remain and, with increasing social and economic problems, needs overall are increasing.

The main objectives of the 2002 Global Plan for Serbia are:

- To provide essential humanitarian aid to refugees, displaced people and other extremely vulnerable persons during the 2002-2003 winter;
- To consolidate and finalise ECHO programmes in the health and psychosocial sectors;
- To promote durable solutions for the refugees.

The largest single sector covered by the proposed programme is to provide basic relief (basic food, hygiene and winter heating material) to the most vulnerable people. Whilst vulnerability criteria are applied across the board, the bulk of the assistance goes to refugees and IDPs, then the local population. In the food sector for instance, 150,000 refugees are covered (i.e. about 40% of the caseload), 50,000 IDPs (i.e. about 30% of the caseload) and 55,000 extremely vulnerable individuals (i.e. about 5% of the population living under the

poverty line³⁷). It is therefore important that, as humanitarian donors reduce their programmes, the basic social needs of the vulnerable population of Serbia are addressed by donors and actors with medium to long term tools.

As ECHO's intervention in the Balkans is coming to an end, particular attention has been paid in the programming to the formulation of a "phase-out friendly" operation. Due account has therefore been taken of the consolidation of previous interventions (e.g. in the health sector), providing assistance which complements the national and regional efforts (e.g. in the shelter and in the repatriation sectors), seeking durable solutions (in shelter, repatriation and the psycho-social sector) and introducing stricter criteria for basic relief assistance to promote a reduction of the dependency on aid (food and non food sectors). In all sectors, efforts are being made to support the LRRD process by ensuring co-ordination with the national authorities, other donors and the European Agency for Reconstruction, as well as, where relevant, the Commission's programmes on return to Bosnia-Herzegovina. Similar efforts were made in 2002 to link up with the return programmes to Croatia.

Annex [N°] shows the main funding allocated to Serbia in the past five years and the implementing partners for the 2002 Global Plan.

d) Justification and timing of the evaluation:

ECHO intends to phase out activities in Serbia by the end of 2003. A large number of activities funded under the 2002 Global Plan will still be ongoing in the first part of 2003. To date, a contribution to the efforts of the major agencies is envisaged, continuing the provision of essential humanitarian aid to the most vulnerable and the promotion of durable solutions for the refugees.

The present Evaluation should assess:

- the impact of past interventions and their effect on current strategy;
- the phase out strategy, with a special attention to LRRD and to the reduction of aid dependency;
- to what extent the recommendations from the 2000 Evaluation were integrated in the strategy;
- ECHO's decision to continue humanitarian operations in 2003.

External Evaluations of individual projects are available – ECHO and other services - as well as the ECHO 6 Audit reports.

Purposes of the evaluation

Global objective

The overall objective of ECHO's strategy towards Serbia in recent years has been to provide the necessary assistance and relief to the most vulnerable populations affected by the aftermath of the various conflicts in the Balkans. In 2002, taking into account ECHO's decision to phase out activities in Serbia, humanitarian operations have notably focused on providing durable solutions and consolidating previous ECHO operations, with a view to ensuring their self sustainability.

The overall objective of this Evaluation will be to assess the appropriateness of ECHO's intervention and to what extent the overall objective had been achieved, with a retrospective look at the past three years'

³⁷ As statistics regarding poverty and vulnerability vary, the reference figure for the local population is the population living in "absolute poverty" according to the Joint Food Aid Needs Assessment Mission (JFNAM), i.e. 12% of the population. It should be noted that the proportion of refugees and IDPs to be assisted by the humanitarian agencies has been determined in the JFNAM and covers at least all those living beneath the poverty line.

interventions. The evaluation will analyse the phase out strategy adopted by ECHO, its sustainability and the decision to consolidate interventions in some sectors in 2003.

Specific objectives

In particular, the Evaluation team will focus on the following specific sectors:

<u>Health</u>: The main objective of the 2002 strategy for this sector is to complete and consolidate prior ECHO actions in the health sector aimed, in general, at improving access to primary health care and, in particular, at ensuring adequate health and social conditions for extremely vulnerable groups, such as the disabled and the Roma minority. In principle, operations in 2002 should consolidate ECHO's past interventions and there is no strict hand over strategy. However, co-ordination activities with the European Agency for Reconstruction under the "institutional reform" have been undertaken.

Durable solutions: The main objective of the 2002 strategy has been to provide shelter to refugees and IDPs in a way that promotes the sustainability of the shelter solutions provided and to facilitate the return process of refugees. LRRD has been undertaken with the UNHCR and local authorities, managing collective centres and durable private accommodation for refugees. For the repatriation/return of refugees and IDPs, ECHO has been co-ordination with the CARDS³⁸ return programme, managed by EuropeAid. The specific objective of this evaluation will be to analyse the results of ECHO's strategy in Serbia, as well as its **relevance, impact, effectiveness, efficiency and sustainability** and of the way these results have been achieved. The evaluation should contain conclusions and recommendations at both strategy and operational levels. Each conclusion should be followed by a recommendation.

Desired results

The desired results of the evaluation are:

- To obtain an overall view of the funded actions, showing their intervention logic and their relation to the overall objectives of the decision taken (global plan, operation, etc.) and to the overall objectives of the Commission in the country. This will require:
 - an analysis of the strategy and methodology used in the elaboration of the decision;
 - an analysis, <u>taking into account the ECHO mandate</u>, of the coherence, co-ordination and complementarity of the actions implemented under the decision with regard to other actions funded or carried out by other actors or EC instruments. The analysis is to include a retrospective on the past three years.
- To assess the results and the means employed as compared to the objectives mentioned in 2.2. The assessment should cover the application of performance indicators during all phases of the project cycle.
- To examine to what extent, ECHO's decision to support durable solutions in the shelter sector was appropriate, taking into account the results achieved, the value for money and ECHO's decision to concentrate operations on its core mandate.
- To assess ECHO's "phase out" strategy for Serbia, with a focus on LRRD towards local authorities, the EAR and other donors, on the light of the EC Communication on LRRD.
- To assess to what extent the objective of reduction of aid dependency has been achieved.

³⁸ Community Assistance for Reconstruction, Development and Stabilisation

- To draw conclusions and make recommendations for future "phase out" strategy, which could applied to other contexts and improvements in methodology.
- To assess ECHO's decision to continue activities in 2003, on line with ECHO's core mandate and its annual strategy.
- To examine to what extent the recommendations of the 2000 Evaluation were taken into account as well as, when directly link to the scope of this Evaluation, the 2002 WFP Evaluation, the 2002 drought Evaluation and the Evaluation of the information and communication plan for Serbia.

To study how the following cross-cutting issues have been taken into account, where relevant:

- Gender;
- Elderly;
- Children;
- Handicapped;
- Effects on the environment;
- Security of aid workers;
- Respect of Human Rights;
- Donor communication strategy;
- Humanitarian Accountability.

The consultant will take into account the non-exclusive list of criteria referred to in 2.2. The definition of these criteria and sample questions to be answered regarding each of them are given in annex 2 to these ToR.

The weight given in the study to these criteria will depend on the level of implementation of the action and of the importance given to these by ECHO during the briefing session.

Work Plan

The evaluation is made in 3 stages:

Briefing in Brussels

- A **briefing** of **two days** at ECHO with the responsible staff of ECHO and other services, during which all the documents available for the mission and necessary clarifications will be provided by the requesting service and other services of the Commission.
- **Examination and analysis** of documents (desk study).

This phase is to allow a careful planning of the activities/visits to be undertaken in the field.

Field Study: xx days

- The consultant must work in co-operation with the relevant Commission Delegation, ECHO experts, ECHO partners, local authorities, international organisations and other donors;
- The consultant should devote **the beginning of the mission** to the field concerned to preliminary and preparatory discussions with the Delegation, ECHO experts and local ECHO partners;

• At **the end of the mission** the consultant should meet with the Delegation, ECHO experts and ECHO partners for discussion of observations arising from the evaluation.

Debriefing and submission of reports

- The first **draft report**(s) in accordance with the format given in point 4.2 below shall be submitted by electronic transmission (Word 7.0 format or a more recent version) to ECHO 15 calendar days after the consultant's return from the field.
- The starting date for the **two-days debriefing** in Brussels will be fixed by ECHO not earlier than 10 working days after the submission of the first draft report(s). Prior to the meeting, ECHO will have transmitted in writing any substantial comments to the consultant.
- On the basis of the results of the debriefing the **draft final report(s)** will be submitted to ECHO within a maximum of 15 calendar days. ECHO should mark its agreement within 15 calendar days or request further amendments.
- Submission of the **final report**(**s**).

Reports

- The evaluation will result in the drawing up of 3 reports written in a straightforward manner, in either English or French, of a maximum length of 18 pages including the Executive 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 below must, therefore, be strictly adhered to:
 - Cover page
 - title of the evaluation report:
 - - "FRY, action, sector 2003.";
 - date of the evaluation;
 - name of the consultant;
 - indication that "the report has been produced and financed by at the request of the European Commission. The comments contained herein reflect the opinions of the consultant only".
 - Table of contents
 - Executive Summary:

A tightly-drafted, to-the-point and free-standing Executive Summary is an essential component. It should be short, **no more than two or three pages**. It should focus on the key purpose or issues of the evaluation, outline the main points of the analysis, and clearly indicate the main conclusions, lessons learned and specific recommendations. Cross-references should be made to the corresponding page or paragraph numbers in the main text. Member States receive each Executive Summary, which is also published on the ECHO Web Page. The consultant should take this into account when drafting this part of the report.

The structure of the Executive Summary must be as follows:

- EVALUATED ACTION
- DATE OF THE EVALUATION
- CONSULTANT'S NAME
- PURPOSE & METHODOLOGY
- MAIN CONCLUSIONS: These conclusions should refer to the main evaluation criteria and cross-cutting issues dealt with by the consultant and set out under point 2 of the ToR.
 RECOMMENDATIONS LESSONS LEARNED
- Main body of the report:

The main body of the report shall refer to the points listed under 2.3. Individual fiches containing the in-depth technical analysis of each specific project will be provided as an annex to the main report. It also shall elaborate, although not necessarily in the same order or following the same structure, the elements included in the Executive Summary. It will include references to the methodology used for the evaluation and the context of the action. In particular, for each key conclusion there should be a corresponding recommendation. Recommendations should be as realistic, operational and pragmatic as possible; that is, they should take careful account of the circumstances currently prevailing in the context of the action, and of the resources available to implement it both locally and in the Commission (15 pages maximum).

- Annexes:
 - Terms of Reference;
 - List of persons interviewed and sites visited;
 - Map of the areas covered by the operations financed under the action;
 - Abbreviations.

All confidential information shall be presented in a **separate annex**.

Each report shall be drawn up in 20 copies and transmitted to ECHO.

An electronic copy of each report (CD-ROM, Word 7.0 format or a more recent version) <u>including all</u> <u>annexes</u> must be submitted together with the final reports' hard copies.

Required skills for the consultants

- This evaluation is part of a global evaluation that will be carried out by a team of 3 experts with experience both in the humanitarian field and in the evaluation of humanitarian aid. Solid experience in relevant fields of work to the evaluation and in the geographic area where the evaluation takes place is also required. Knowledge of the English language is obligatory. Knowledge of Serb would be an advantage.
- The members of the team work in close co-ordination. One of them will be designated Team Leader and will have the added responsibility of the overall co-ordination of the mission, of the elaboration of the Synthesis report and of the final coherence of the reports, both in terms of content and presentation.

Assignment of tasks

The team members are responsible for the following sectors and reports:

Mr/Ms, team leader

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- Responsible for the synthesis report

Mr/Ms,

- Responsible for the shelter and return report

Mr/Ms

- Responsible for the health report

<u>Timetable</u>

The tasks under this evaluation will be undertaken in a maximum period of working days, ending no later than with the acceptance of the final reports.

ANNEX D: ABBREVIATIONS

BiH	Bosnia and Herzegovina
CARDS	Community Assistance for Reconstruction, Development and Stabilisation programme
CESV	Centro Servizi per il Volontariato
COSV	Comitato di coordinamento delle organisazioni per il servizio voluntario
CSP	Country Strategy Paper
DZ	Dom Zdravlja (Health Centre)
EAR	European Agency for Reconstruction
GP	Global Plan
HI	Handicap International
HIF	Health Insurance Fund
HRT	Hellenic Rescue Team
IDP	Internally Displaced Person
IISA	Institute of International Social Affairs
IPH	Institute of Public Health
IRC	International Rescue Committee
LRRD	Linking Relief to Rehabilitation and Development
MDM	Médecins du Monde
NF	Nuova Frontiera
РНС	Primary Health Care
РСМ	Project Cycle Management
PSF	Pharmaciens sans Frontières
PWD	Person With Disabilities
SCF	Save the Children Fund
TOR	Terms of Reference
UMCOR	United Methodist Committee on Relief
WHO	World Health Organisation

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ANNEX F: TABLE OF EVALUATION QUESTIONS, CRITERIA AND INDICATORS

Evaluation Question	Judgement Criteria	Indicators
1. Has the intervention logic of the funded actions been appropriate, and have the actions been relevant to the overall objectives of ECHO and the Commission in Serbia ?	Judgement criterion 1.1. Whether the decision has been elaborated in an efficient and effective manner.	 1.1.1. Degree of adequacy of stated decision objectives with identified (reconstructed)priorities and needs. 1.1.2. Quality of LFA 1.1.3. Degree of consistency of decision objectives with budget of global plan and operations 1.1.4. Degree of coherence of timetable with seasonal needs and other donors' programming cycles
	Judgement criterion 1.2. Whether coherence, co-ordination and complementarity have been carried out in an efficient and effective manner, in the framework of ECHO mandate	 1.2.1. Degree of coherence and co- ordination achieved with other CARDS, EAR and other EC Services concerned, especially effectiveness of LRRD institutional tools. 1.2.2. Degree of complementarity with EU Member States present 1.2.3. Degree of co-ordination with Government and local authorities; 1.2.4. Degree of co-ordination with other donors 1.2.5. In all cases, frequency of meetings, quality of attendance, importance of documents exchanged for effectiveness of CSP
2. Have the employed means been adequate to achieve the objectives (identification and coverage, timeliness and flexibility, commitment, efficiency of organisation of ECHO and partners)?	Judgement criterion 2.1. Whether the 'multiplicative resources' assumption that A (rehabilitation) + B (equipment) = C (increase of quantity and quality of health care) has been followed.	2.1.1. Quality & quantity of PHC infrastructure 2.1.2. Quality & quantity of PHC equipment 2.1.3. sources of funding, available budget, financial management 2.1.4. Availability and sources of essential drugs lists 2.1.5. Availability, knowledge and skills of staff 2.1.6. Quality of care, impartiality 2.1.7. Standard partnership agreements between NGOs and municipalities
	Judgement criterion 2.2. Whether the access to the Primary Health Care for the most vulnerable has been effectively and efficiently improved	2.2.1. Degree of adequacy of PHC for the most vulnerable disabled 2.2.2. Degree of adequacy of PHC for the most vulnerable Roma 2.2.3. Degree of relevance with needs of beneficiaries, recipients (professionals/authorities), needs assessments, consultative/ participative process

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		2.2.4. Cost indicators: average costs, sustainability %; existing indicators of
		cost/effectiveness, of performance
		2.2.5. Health efficiency indicators
		2.2.6. Effectiveness (input, output,
		outcome and impact) 2.2.7. Quality of monitoring (shared
		between agencies ?), level of results,
		degree of participation/ training with
		local stakeholders
		2.2.8. Adequacy of ECHO 6-months cycle with post-conflict context
		2.2.9. Adequacy of partners' methods
		and organisation to post-conflict
	Judgement criterion 2.3. Whether	
	the return process has been	2.3.1. Degree of increase of refugees
	effectively and efficiently promoted	return to BiH, local sustainability 2.3.2. Degree of increase of refugees
		return to Croatia, local sustainability
		2.3.3. Quality of monitoring
		2.3.4. Degree of relevance and application of performance indicators
		2.3.5. Level of regional co-ordination
		2.3.6. Existing indicators of
		cost/effectiveness, of performance
		2.3.7. Adequacy of ECHO project cycle
		2.3.8. Adequacy of partners' methods
		and organisation
3. Has the decision to support	Judgement criterion 3.1. Whether	3.1.1. Degree of sector co-operation
durable solutions in the shelter sector been appropriate ?	the quality of the results achieved so far supports the decision	with national authorities concerned 3.1.2. Degree of co-ordination with
seen appropriate .	an support are decision	long term donors in Serbia
		3.1.3. Degree of sustainability and
		adequacy of shelter solutions for
		refugees 3.1.4. Degree of sustainability and
		adequacy of income generation
		solutions for refugees
		3.1.5. Degree of relevance and
		application of performance indicators 3.1.6. Degree of respect of timetables
	Judgement criterion 3.2. Whether	3.2.1. Cost-efficiency: % of ECHO
	the value for money of the results	investment as part of total housing
	achieved so far supports the decision	cost 3.2.2. Cost-effectiveness: repayment
		rate of micro-credit, % of
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		return/profit of in kind grants, other
		return/profit of in kind grants, other income generation activities (after 1-2
4. Is the "Phase Out" strategy	Judgement criterion 4.1. Whether	return/profit of in kind grants, other
appropriate and sustainable, and is it	the phase out strategy was coherent	return/profit of in kind grants, other income generation activities (after 1-2 years) 4.1.1. Quality of LFA 4.1.2. Validity (compatibility,
appropriate and sustainable, and is it consistent with the EC		return/profit of in kind grants, other income generation activities (after 1-2 years) 4.1.1. Quality of LFA 4.1.2. Validity (compatibility, coverage, timetable) and number of
appropriate and sustainable, and is it	the phase out strategy was coherent	return/profit of in kind grants, other income generation activities (after 1-2 years) 4.1.1. Quality of LFA 4.1.2. Validity (compatibility,

		understanding of strategy by partners and stakeholders
	Judgement criterion 4.2. Whether all EC instruments are appropriately co-operating as foreseen in the LRRD Communication framework	 4.2.1. Degree of ECHO involvement in CSP preparation (using LRRD tools) at HQ level 4.2.2 Quality of dialogue and co- ordination at field level with EC 4.2.3. Quality of dialogue and co- ordination with external (non-EC)
		donors mentioned in CSP 4.2.4. Degree of preference given to NGO partners and ECHO staff by EAR, when appropriate
5. To what extent has the objective of reduction of aid dependency been achieved ?	Judgement criterion 5.1. Whether Serbian authorities have taken appropriate measures to reduce aid dependency in collective centres for refugees	 5.1.1. Effectiveness of screening/ categorisation of refugees in centres 5.1.2. Effectiveness of disincentive/ incentive measures in centres. 5.1.3. Adequacy of resources of authorities to implement policy
	Judgement criterion 5.2. Whether a health and social security system is appropriately being set up to cover beneficiaries supported by ECHO.	5.2.1. Intended coverage and time- table of social security system. 5.2.2. Extent to which the PHC supported by ECHO is sustainable/ <i>viability, technical, financial, ownership</i>
6. Are there lessons to be learned from Serbia, in order to improve ECHO "Phase Out" strategies elsewhere	Judgement criterion 6.1. Whether conclusions and recommendations can be used in other humanitarian contexts	6.1.1. level of potential replicability of solutions (3 Cs, common tools, methodologies)
7. Is the decision to continue activities in 2003 appropriate, and is it relevant to ECHO core mandate and annual strategy ?	Judgement criterion 7.1. Whether the overlap/consolidation projects in Health are consistent with core mandate and strategy	7.1.1. Degree of consistence of needs with decision to complete coverage
	Judgement criterion 7.2. Whether the continuation of projects in durable solutions and shelters for refugees is consistent with core mandate and strategy	7.2.1. Degree of coherence of budget decided with the need to phase out progressively from shelter and collective centres, and to avoid shock7.2.2. Degree of coherence of ECHO mandate with proposed durable solutions
8. To what extent have the recommendations of relevant prior evaluations been taken into account ?	Judgement criterion 8.1. Whether the recommendations of the 2000 <u>country evaluation</u> have been taken into account ?	 8.1.1. Adequate international staff are available to fulfil effectively the expected role 8.1.2. providing opportunities for training and career development of national staff at field offices 8.1.3. greater delegation of decision-making to field offices in administrative procedures 8.1.4. Appropriate targets and objectives, the indicators to measure them and monitoring systems by
		which they will be applied should be included in proposals. The use of

	basic LFA is recommended 8.1.5.Together with the Delegation to try to set up a joint co-ordination
	try to set up a joint co-ordination group with member states. 8.1.6. Echo should have as its partners only those NGOs with proven ability and capacity 8.1.7. FPA should be amended to take on partnerships between local and international NGOs, national organisations, and non EU NGOs with adequate expertise 8.1.8. ECHO should limit itself to a strict definition of humanitarian assistance and to developing its role
	and expertise to cover disaster mitigation and preparedness 8.1.9. ECHO should use its influence to the full to ensure that the discussions on LRRD provide an effective continuum between HA and reconstruction/ development
Judgement criterion 8.2. Whether the recommendations of the 2002 <u>WFP evaluation</u> have been taken into account, whenever directly linked to the present questions ?	 8.2.1. Programme management has to recognise the need for early long-term planning, i.a. as a permanent management and monitoring instrument, and to prepare LRRD/exit strategies. 8.2.2. ECHO and WFP should carry out nutrition surveys, to better address nutritional needs. 8.2.3. Monitoring of food distributions must always get full attention. Information should not only be quantitative and a better "bottom-up" information system should be established and used for analysis and new programming. 8.2.4. WFP should conduct regular (auto-)evaluations and involve IPs systematically. 8.2.5. To circulate the pipeline projections amongst the IPs. 8.2.6. Food commodities have not
	been procured locally despite local surplus in Serbia and the commitment to do so in ECHO contract (local procurement conditions and pressure of the government). Sourcing must, wherever possible, be local -for obvious economic reasons. Where local sourcing is not possible, the alternative choice must be based only on good budgeting.

8.3.1. NA	
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	Judgement criterion 8.3. Whether the recommendations of the 2002 drought evaluation have been taken into account, whenever directly linked to the present questions ? Judgement criterion 8.4. Whether the recommendations of the evaluation on the information and communication plan have been taken into account, whenever directly linked to the present questions ?	 8.4.1. Design communications strategies for all ECHO offices 8.4.2. Appoint more ECHO Communications focal-points 8.4.3. Build upon the draft guidelines for ECHO field experts 8.4.4. Design local, more than country or regional communications strategies 8.4.5. Build in 'market' research 8.4.6. Run more training and seminars for ECHO and partner focal points 8.4.7. Develop the ECHO global (Brussels) Communications strategy 8.4.8. Request the appointment of partner focal-points for large operational budgets 8.4.9. Develop strong ECHO-Partner coordination in communications 8.4.10. Make ECHO Brussels visits to the field more frequent 8.4.11. Make the ECHO communications budget approval process more agile 8.4.12. Produce more materials centrally (at Brussels) 8.4.13. Improve communication and coordination between ECHO, services, agencies and Delegations.
9. Have the relevant cross-cutting issues been taken into account ?	Judgement criterion 9.1. Whether appropriate considerations have been given in any specific operation to extended human vulnerability criteria. (<i>To include views, perceptions, and opinions</i> of vulnerable and marginalised groups, affected people not covered by intervention.)	 9.1.1. Proportionate part of resources and activities dedicated to equal opportunities for women, e.g. project cycle, investigative process 9.1.2. Proportionate part of resources and activities dedicated to protection of elderly, children and handicapped. 9.1.3. Level of satisfaction of final beneficiaries, in each case. 9.1.4. Level of impact and sustainability, in each case. 9.2.1. Indicators on site planning.
	Judgement criterion 9.2. Whether appropriate consideration has been given in any specific operation to environmental protection. Judgement criterion 9.3. Whether appropriate consideration has been	9.2.1. Indicators on site planning (SPHERE and others)9.2.2. Indicators on water & sanitation, garbage disposal, etc. (SPHERE and others).9.3.1. Type, frequency, importance of

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given in any specific operation to the security of aid workers.	security-related incidents.
Judgement criterion 9.4. Whether appropriate consideration has been given in any specific operation to the respect of Human Rights.	9.4.1. Type, frequency, importance of issues contradictory to provisions of Declaration of Human rights and relevant international laws.
Judgement criterion 9.5. Whether appropriate consideration has been given in any specific operation to the Donor communication strategy.	9.5.1. Proportionate part of resources dedicated to communication activities 9.5.2. Levels of visibility and understanding measured from (i) general public, (ii) partners and (iii) final beneficiaries
Judgement criterion 9.6. Whether appropriate consideration has been given in any specific operation to humanitarian accountability.	9.6.1. Relevant FPA provisions followed by partner 9.6.2. Relevance of partner's own Code of Conduct

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