

<b>1. Project Data:</b>		<b>Date Posted :</b> 09/06/2013	
<b>Country:</b>	Senegal		
<b>Project ID:</b>	P115938		
		<b>Appraisal</b>	<b>Actual</b>
<b>Project Name :</b>	Rapid Response Child-focused Social Cash Transfer And Nutrition Security Project	<b>Project Costs (US\$M):</b>	18.0
			18.0
<b>L/C Number:</b>	C4605	<b>Loan/Credit (US\$M):</b>	10.0
			10.0
<b>Sector Board :</b>	Health, Nutrition and Population	<b>Cofinancing (US\$M):</b>	8.0
			8.0
<b>Cofinanciers :</b>	Multi-donor Trust Fund of the Global Food Price Crisis Response Program	<b>Board Approval Date :</b>	05/06/2009
		<b>Closing Date :</b>	12/31/2011
			08/31/2012
<b>Sector(s):</b>	Health (49%); Other social services (44%); Public administration- Health (4%); General education sector (3%)		
<b>Theme(s):</b>	Nutrition and food security (40% - P); Global food crisis response (25%); Social safety nets (23% - S); Child health (8% - S); Decentralization (4%)		
<b>Prepared by :</b>	<b>Reviewed by :</b>	<b>ICR Review Coordinator :</b>	<b>Group:</b>
Hjalte S. A. Sederlof	Judyth L. Twigg	Christopher D. Gerrard	IEGPS2

## 2. Project Objectives and Components:

### a. Objectives:

The Emergency Project Paper (EPP) and the Financing Agreement (FA) have the same Project Development Objective: *"to reduce the risk of nutrition insecurity of vulnerable populations, in particular children under five in poor rural and urban areas in the Recipient's territory, by scaling up the Recipient's Nutrition Enhancement Program and providing cash transfers to vulnerable mothers of children under five ."*

As the PDO consists of both outcomes and outputs, the Review will assess achievement of objectives based on the following PDO: *"to reduce the risk of nutrition insecurity of vulnerable populations, in particular children under five in poor rural and urban areas in the Recipient's territory."*

The remaining phrase, *"scaling up the Recipient's Nutrition Enhancement Program and providing cash transfers to vulnerable mothers of children under five,"* lists project activities.

### b. Were the project objectives/key associated outcome targets revised during implementation?

No

### c. Components:

The project contained four components:

**Component 1: Community-Based Nutrition** (estimated cost at appraisal: US\$6.6 million; actual cost: US\$10.8 million). This component consisted of community-based growth promotion and integrated management of childhood illnesses, including community management of (severe) acute malnutrition. The component was to be implemented through sub-projects with local governments and non-governmental organizations acting as community executing agencies (CEAs). The sub-projects were to provide monthly growth monitoring, nutrition education, provision of micro-supplements, de-worming, and insecticide-treated bed nets. A behavior change communications strategy was to focus on feeding practices for infants and young children, disease prevention, home-based care, and care-seeking behavior. Arrangements were made to incorporate support from UNICEF and the World Food Program for the management of acute malnutrition in all the intervention areas. In addition to sub-projects, the component was to support capacity building for CEAs and their support systems.

**Component 2: Sectoral Support for Nutrition Results** (estimated cost at appraisal: US\$1.3 million; actual cost: US\$0.7 million). This component was to include periodic distribution of micro-nutrient supplements and de-worming medicines, supervision of nutrition services, and scaling up of food fortification.

**Component 3: Support to Implementation, Monitoring, and Evaluation of Nutrition Development Policy** (estimated cost at appraisal: US\$ 700,000; actual cost: US\$ 900,000). This component was to include activities to strengthen implementation and monitoring functions in the coordinating unit for the Government's Nutrition Enhancement Program (NEP), the *Cellule de Lutte Contre la Malnutrition* (CLM); in local governments; and in line ministries. The existing NEP monitoring and evaluation system also was to be adapted to include enhanced monitoring of the project-initiated cash transfer program.

**Component 4: Child-Focused Social Cash Transfers** (estimated cost at appraisal: US\$ 6.3 million; actual cost: US\$5.8 million). The cash transfer component was to use the NEP community organization structure to identify eligible beneficiaries (mothers of young children in vulnerable families), who would receive small bimonthly payments for six months. The cash transfer was to be accompanied by a strong communication campaign emphasizing messages about maternal and child nutrition, and close monitoring of process and effect. The component was to be implemented in ten districts that had been identified by the Ministry of Health as having critical levels of malnutrition.

#### **d. Comments on Project Cost, Financing, Borrower Contribution, and Dates:**

Project cost and financing: Project cost at appraisal was estimated at US\$ 18 million. The actual project cost also was US\$ 18 million. Financing was provided by IDA (US\$ 10 million) and a grant from the Multi-Donor Trust Fund for the Global Food Price Crisis Response Program (US\$ 8 million).

Borrower contribution: There was no incremental Borrower contribution.

Dates: The project was approved on May 6, 2009, and became effective on September 11, 2009. It closed on August 31, 2012. The original closing date was December 31, 2011, but was extended because of implementation delays in the cash transfer program.

### **3. Relevance of Objectives & Design:**

#### **a. Relevance of Objectives:**

Relevance of objectives is rated **high**.

The project was put into place following a series of shocks to the economy, which had led to a sharp increase in food prices and deteriorating living conditions, especially among the poorest households who were facing severe food insecurity and nutritional risk. Senegal had experienced two successive years of inadequate rainfall - the 2006/2007 and 2007/2008 seasons - resulting in a 25% reduction in cereal production at a time when prices for imported cereals were reaching record heights as a result of the global food crisis. The price of rice, an imported staple, had risen by 80% between December 2007 and December 2008. In response to the situation, the Government sought to accelerate essential poverty alleviation programs and safety nets, including by scaling up its Nutritional Enhancement Program (NEP). Better nutritional outcomes have been and remain a central theme in the Government's Poverty Reduction and Social Protection Strategies, for which the NEP provides the implementation framework for nutritional goals. The project's objective responded to the immediate need to mitigate the risk of nutritional insecurity, as well as build resilience for the future, using the NEP framework to scale up community-based nutrition and health services. The objective also was in line with strategic Bank priorities in Senegal. The second pillar of the 2007 Country Assistance Strategy (CAS) aimed at "improving human development through better delivery of social

services, notably to the most vulnerable groups," while the current 2013 CAS includes technical assistance for continued strengthening of nutrition policy and program implementation and support for implementing building blocks of an efficient safety net system, to be tested through pilot cash transfer programs .

#### **b. Relevance of Design:**

Relevance of design is rated **high**.

Reflecting the emergency nature of the crisis, the project was prepared under OP 8.00. The main activities planned under the project - scaling up the NEP and piloting cash transfers to vulnerable mothers with children under five - directly supported its objective. The former focused on increasing coverage in current intervention areas as well as expanding coverage into new hard-to-reach areas with high levels of malnutrition, and the latter targeted families in ten districts with critical levels of malnutrition. While the cash transfers were unconditional, international studies have found that additional cash when provided to female household members mainly goes to household welfare, especially the well-being of children. The results framework was straightforward, linking inputs, outputs and intermediate outcomes to the PDO,

#### **4. Achievement of Objectives (Efficacy):**

Reduce the risk of nutrition insecurity of vulnerable populations, in particular children under five in poor rural and urban areas, is rated **substantial**.

##### Outputs

90 percent of children under 5 were screened for acute malnutrition, compared to a target of 80 percent.

From a baseline of 60 percent, 81 percent of children 0-24 months showed adequate weight gain, compared to a target of 75 percent.

From a baseline of 39 percent, 51 percent of pregnant women made at least 4 prenatal care visits, compared to a target of 51 percent.

From a baseline of 80 percent, 90 percent of mothers of targeted children participated in monthly information and education sessions, compared to a target of 80 percent.

From a baseline of 80 percent, 94 percent of targeted children under 5 received vitamin A supplementation, compared to a target value of 80 percent.

From a baseline of 80 percent, 95 percent of targeted children in primary education received weekly micronutrient supplements, compared to a target value of 80 percent.

From a baseline of 80 percent, 95 percent of targeted children in primary education received deworming medication twice in a year, compared to a target value of 80 percent.

From a baseline of 87,000 tons, the quantity of salt adequately iodized by small producers dropped to 73,300 tons, compared to a target of 139,000 tons (reflecting seasonal shocks and a six-fold increase in the price of the fortificant).

From a baseline of zero, the quantity of oil adequately fortified with vitamin A by the oil industry reached 107,000 litres, compared to a target of 80,000 litres.

From a baseline of zero, 31 local governments incorporated nutrition objectives and interventions in their development plans, compared to a target of 25 local governments.

2.5 percent of selected beneficiaries did not meet eligibility criteria (inclusion errors), compared to a target of 20 percent.

The government developed and adopted an efficient child-focused social cash transfer scheme as part of the national social protection strategy. 100 percent of piloted cash transfers were made by local payment service providers, compared to a target of 80 percent.

##### Outcomes

The community nutrition program targeting children under 5 years of age was scaled up from a baseline coverage of 22 percent to 65 percent, exceeding the target of 45 percent coverage.

Targeted mothers providing exclusive breast-feeding rose from a baseline of 34 percent to 62 percent, exceeding the

target of 44 percent.

From a baseline of zero, cash transfers were provided to over 55,000 women in the pilot districts, compared to a target of 50,000. In total, including children, the pilot cash transfer program reached some 300,000 people. 96 percent of beneficiaries received all intended cash transfers, exceeding the target of 80 percent.

Scaling up of the NEP was the main element of project design that directly supported the PDO. Here, while targets were surpassed for all relevant indicators, the project reached a seemingly standard 65 percent of the target population. The cash transfer program was successfully piloted, and confirmed that households primarily will use unconditional benefits for family well-being - according to the ICR, the cash transfer included few targeting errors, payment delivery was 100 percent, and the bulk of resources were, as expected, used by households for the well-being of children. Food insecurity in target areas dropped from 31.4 percent to 30.9 percent. While apparently modest, this decline should be compared to an increase in food insecurity in control areas from 35.4 percent to 42.4 percent. The cash transfer also appears to have influenced health status among children in targeted households, with a decrease in diarrhea cases and an increase in the likelihood of a child being vaccinated.

### 5. Efficiency:

While neither the EPP nor the ICR included an economic or financial analysis, the project design did contain features that enhanced its efficiency. Project management for the NEP elements drew on existing national structures and on established partnerships at the local level. The management structure for the cash transfer was kept purposefully light, amounting to only three percent of total project costs. Technical efficiency was high, as the project included some of the most cost-effective interventions to improve nutrition outcomes (household and community-focused behavior change communications, screening, simple treatment protocols). Fiscal sustainability appears strong: the project built on ongoing government institutions to which it provided short-term financing and technical assistance. The Government has slowly and steadily increased resources allocated to the NEP.

Efficiency is rated **substantial**.

a. If available, enter the **Economic Rate of Return (ERR)/Financial Rate of Return (FRR) at appraisal and the re-estimated value at evaluation** :

	Rate Available?	Point Value	Coverage/Scope*
Appraisal	No		
ICR estimate	No		

\* Refers to percent of total project cost for which ERR/FRR was calculated.

### 6. Outcome:

The relevance of the PDO and project design are both rated **high**. The PDO was well-focused on addressing immediate issues as well as building resilience for the future, while the intervention designs drew on best practice. Efficacy is rated **substantial**, with the NEP reaching some 65 percent of the target population and the cash transfer reaching a high 96 percent of beneficiaries with all intended payments. Efficiency was rated **substantial**: the project took advantage of existing institutions and focused on simplicity in building new ones, and interventions were cost-effective.

a. **Outcome Rating** : Satisfactory

### 7. Rationale for Risk to Development Outcome Rating:

The project was built on ongoing policies that the Government has been pursuing consistently for over a decade. The risk to financial sustainability is low, considering that budget allocations for nutrition have been steadily increasing over time. The NEP model has broad stakeholder support and involves public and private agents at central and local levels. Technical risk is low. The NEP is an example of a successful model, as is confirmed by project results, and the pilot cash transfer has proven to be an effective low-cost means of adding to the Government's instruments for mitigating future economic risks in the face of economic crisis. It remains to be seen whether it actually will become a permanent safety net instrument.

**8. Assessment of Bank Performance:**

**a. Quality at entry:**

The project focused on child welfare and in particular responded to nutritional risks that children were facing as a result of domestic climate shocks and the international food crisis . It included a fast track response, benefiting from OP 8.0; a pre-project survey informed the selection of districts to target for scaling up; and community -level screening of children was undertaken before project effectiveness . The advantage of rapid preparation was somewhat diluted during implementation, as it turned out that the payment system for the cash transfer did not have sufficient coverage in all target areas . This would delay implementation and require a project extension of some eight months.

Design built on and expanded the successful NEP, which already was performing to international standards in achieving healthy child measurements . Design of the cash transfer mechanism was able to draw on extensive local field level knowledge from the NEP experience to identify risks and incorporate mitigating measures into the design of the cash transfer . A strong project monitoring system already existed for the NEP, which allowed a mix of monitoring data and independent evaluation studies to measure results . The project was to be implemented by the CLM, which already was implementing the NEP . The CLM would have a coordinating function, as the NEP already had well-established and effective structures at national and sub -national levels. Fiduciary aspects were to be handled by the CLM, which already had experience with the Bank 's fiduciary procedures. With the introduction of the cash transfer, emphasis was placed on adequate reporting, flow of funds, and auditing processes for this component .

**Quality-at-Entry Rating :** Satisfactory

**b. Quality of supervision:**

The supervision process was characterized by close collaboration between the CLM and the Bank team . The latter provided technical assistance as well as encouragement to the CLM to develop its own solutions to implementation challenges . Implementation Status Reports and aide-memoires show broad consultation with stakeholders and were well structured to move the project forward . All outcome indicators were exceeded .

**Quality of Supervision Rating :** Highly Satisfactory

**Overall Bank Performance Rating :** Satisfactory

**9. Assessment of Borrower Performance:**

**a. Government Performance:**

The Government was and remains committed to pursuing the project's development objectives . Child nutrition has been a major priority for over a decade, and this is reflected in the Government's poverty and social strategies. It has developed and maintained the NEP -- an innovative community-focused mechanism -- to pursue this objective. The NEP involves a broad segment of public and private stakeholders at the national and sub-national level, and is supported by donors . During project preparation and implementation, the Government, through the Prime Minister's Office, provided continuous support . Fiduciary compliance and procurement methods have consistently been rated satisfactory . Monitoring and evaluation arrangements were based on several data collection methods, including the NEP's monitoring system, sampling surveys, and impact and process evaluations (the latter two pertaining to the cash transfer ). Monitoring and evaluation has been somewhat handicapped by uncertain flows of information from health districts, weakening national health and nutrition information and hence the usefulness of an otherwise strong M&E, an issue that the Government has not been able to resolve . In terms of transition, the Government intends to maintain the mechanisms that have been put into place: the NEP is currently completing a second phase (2007-2013), and it is expected to continue with public as well as donor funding .

**Government Performance Rating**

Moderately Satisfactory

**b. Implementing Agency Performance:**

The CLM displayed strong commitment to scaling up the NEP and to designing and implementing the cash transfer. It collaborated well with the Bank and linked effectively with other development partners. The ICR indicates that it has a strong sense of mandate and is well organized. It implemented the project by example and developed pragmatic and innovative solutions. It was, for instance, instrumental in finding workable mechanisms for the cash transfer payment system; it was able to address the weak information flow on health and nutrition from sub-national levels by systematically conducting household and quality assurance sampling surveys; and it expanded the monitoring and evaluation system to integrate the cash transfer.

**Implementing Agency Performance Rating :**

Highly Satisfactory

**Overall Borrower Performance Rating :**

Satisfactory

**10. M&E Design, Implementation, & Utilization:****a. M&E Design:**

Monitoring and evaluation was based on clearly specified objectives, a concise set of measurable indicators with baselines and targets, and an M&E plan containing identified milestones. The existing M&E system of the NEP was used and scaled up as appropriate under the project, with new tools introduced to monitor progress on the cash transfer and to evaluate processes and beneficiary impact. The design also drew on household and quality assurance sampling surveys to complement unreported sub-national health and nutrition data.

**b. M&E Implementation:**

Baseline data were collected for all activities that were ongoing at the start of the project. Likewise, all milestones were monitored throughout the project, drawing on the NEP monitoring system and surveys. Evaluation studies were restricted to the cash transfer, as it represented a pilot experience. No rigorous impact evaluation was undertaken for the NEP, as one had been done in 2004-2006 during the first phase of the NEP.

**c. M&E Utilization:**

The data generated from the NEP's monitoring system and related surveys monitored project outcomes and is still being used to evaluate the need for shifts in NEP design. Regular feedback is provided to regional stakeholders. Data on the cash transfer are used to evaluate processes, impact, and beneficiary satisfaction for adjusting program features as necessary.

**M&E Quality Rating :** Substantial**11. Other Issues****a. Safeguards:**

No safeguards were triggered by the project.

**b. Fiduciary Compliance:**

Fiduciary compliance was rated satisfactory throughout the project period. The project complied with the requirement to submit annual audit reports. All audit reports were submitted on time with unqualified audit opinions and have been

acceptable to IDA.

The procurement plan was in place at the beginning of the project . Implementation was satisfactory, and the internal control system performed well.

**c. Unintended Impacts (positive or negative):**

None reported.

**d. Other:**

<b>12. Ratings:</b>	<b>ICR</b>	<b>IEG Review</b>	<b>Reason for Disagreement / Comments</b>
<b>Outcome:</b>	Highly Satisfactory	Satisfactory	The ICR correctly notes that all PDO indicators were achieved and even surpassed. However, the IEG review also notes that targeting efficiency in the NEP component was at a relatively conventional 65 percent, taking into account a seemingly strong M&E, and strengthening of targeting mechanisms under the project. The outcome rating is therefore satisfactory rather than highly satisfactory.
<b>Risk to Development Outcome:</b>	Moderate	Moderate	
<b>Bank Performance :</b>	Satisfactory	Satisfactory	
<b>Borrower Performance :</b>	Satisfactory	Satisfactory	
<b>Quality of ICR :</b>		Satisfactory	

**NOTES:**

- When insufficient information is provided by the Bank for IEG to arrive at a clear rating, IEG will downgrade the relevant ratings as warranted beginning July 1, 2006.
- The "Reason for Disagreement/Comments" column could cross-reference other sections of the ICR Review, as appropriate.

**13. Lessons:**

The project achieved remarkable results as it surpassed targets for all key indicators . To an important extent this may have been driven by a strong community-based communications strategy and a broad, inclusive approach to community mobilization for health and nutrition, as illustrated by these lessons drawn from the ICR :

- **Effective communication for behavior change and counseling can achieve results** . To do so, they require precise messages on the promoted behaviors, built on positive examples that appear easy to take on, and including a description of how the promoted behavior should be accomplished . The scale-up of the NEP was built on extensive knowledge of the implementing partners on the challenges in keeping children healthy but was also built on the positive practices already performed . The project showed the way by, for example, linking local food demonstrations to the period when children start complementary feeding practices .
- **Community-based nutrition is an essential platform for service delivery of other social and health related packages** . The initial mobilization of targeted communities for nutrition activities successfully absorbed the social transfer pilot. Distribution of bed nets has also proved to be an easy expansion of the original nutrition activities. Extensive mobilization of communities can provide the crucial contact between children and other public and private interventions .

- **Effective strategies to combat the multiple causes of malnutrition require flexibility in addressing them** .  
Interventions that are narrowly focused on direct health and nutrition interventions leave less room for innovative and adaptable approaches . They also limit inclusiveness in excluding indigenous community organizations that are not directly health or nutrition -focused, but nevertheless can bring valuable experience to bear. The project under review used NGOs to tap into such local level resources and act as a catalyst for innovation, moving hand-in-hand with effective communications initiatives .

**14. Assessment Recommended?**  Yes  No

**15. Comments on Quality of ICR:**

The ICR provides a good deal of evidence and analysis, albeit erring a bit on the side of evidence and implementation narration . It is internally consistent and consistent with OPCS guidelines .

**a.Quality of ICR Rating :** Satisfactory