

# MONITORING AND EVALUATION REPORT

2017

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## **Table of Contents**

Executive summary	1
Introduction	.3
Grand Total of planned and achieved Beneficiaries at the level of Clusters	.5
TYF 2017 objectives and achieved results	6
Health and Nutrition projects implemented and indicators	.9
Rapid response activities to cholera	.15
Recommendation	.17

## Executive Summary

Hu	Humanitarian Aid Program											
		Planned beneficiaries				Men	Women	Girls	Boys	Total		
						22629	23551	33942	35328	115450		
Gra	and Total Ad	chieved beneficiaries				(	Grand Total Achieved beneficiaries					
						Men	Women	Girls	Boys	Total		
						19523	34381	24695	25070	103668		
		Ben	eficiari	es Sui	nmary							
#	Cluster	Project Title	Project Status	Gov.	Dist.	Men	Women	Boys	Girls	Total		
1	WASH	Water Distribution Project to (4) public Hospitals	Closed	Taiz	Al Mudhaffar	411	372	334	338	1455		
2	WASH	Water Distribution Project to (4) public Hospitals	Closed	Taiz	Al Qahirah	352	328	287	289	1265		
3	WASH	Water Distribution Project to (4) public Hospitals	Closed	Taiz	Salah	278	294	354	365	1290		
4	Shelter/ NFI/CC CM	Emergency WASH and Household NFI assistance to vulnerable IDPs and Host communities in Taiz Governorate	Closed	Taiz	Al Mawasit	847	1592	1483	1663	5586		
5	Shelter/ NFI/CC CM	Emergency WASH and Household NFI assistance to vulnerable IDPs and Host communities in Taiz Governorate	Closed	Taiz	Hayfan	2378	2099	1957	1944	8379		
6	Shelter/ NFI/CC CM	Emergency WASH and Household NFI assistance to vulnerable IDPs and Host communities in Taiz Governorate	Closed	Taiz	As Silw	64	113	100	109	385		
7	Shelter/ NFI/CC CM	Emergency WASH and Household NFI assistance to vulnerable IDPs and Host communities in Taiz Governorate	Closed	Taiz	Ash Shamayata yn	1077	1379	1530	1614	5600		
8	WASH	Emergency WASH and Household NFI assistance to vulnerable IDPs and Host communities in Taiz Governorate	Closed	Taiz	Hayfan	4198	4764	957	873	10795.		
9	WASH	Emergency WASH and Household NFI assistance to vulnerable IDPs and Host communities in Taiz Governorate	Closed	Taiz	Al Mawasit	3066	2650	2310	1898	9924		
10	Protectio n	Distribution 1400 Dignity Kits	Closed	Taiz	Al Mawasit, Hayfan		1400	0		0		
11	Food Security and Agriculture	Food security response for most affected and vulnerable Households	Closed	Taiz	As Silw	861	827	1291	1241	4220		

12	Health	ealth Emergency Integrated Nutrition and Health Services		Taiz	As Silw	2301	5303	4852	4925	17381
	Emergency IntegratedNutritionNutrition and HealthServices		Closed	Taiz	As Silw	0	4436	3110	3536	11082
13	Health	Integrated health and nutrition Project	Ongoing	Taiz	As Silw	1364	4367	2426	2559	10716
	Nutrition	Integrated health and nutrition Project	Ongoing	Taiz	As Silw	4	1971	1787	1813	5575
14	WASH	Meeting Basic Needs Enhancing Access to WASH and Improving Reproductive Health Services WASH Project	Ongoing	Taiz	Jiblah	2322	2484	1916	1902	8624

#### Introduction

TYF with no doubt believes that a well-established compliant and feedback mechanism and M&E system are crucial to ensure accountability, transparency as well as achievement of projects objectives and indicators.

During the implementation of the above entitled projects' lifetime, M&E unit had applied a compliant and feedback mechanism to ensure two way communication between the project team and the beneficiaries. Complaint boxes were set at HFs and hot line were operated particularly in health, nutrition, and food security projects as to involve community in the monitoring and evaluation activities as to ensure quality of services provided and assistance.

The M&E process was not bounded only to the Meal officer or assistant in those projects having a post, however it was extended to include community and different stakeholders. Government related offices, Main partner (if any), third party monitoring were included.

Different M&E tools utilized to assess the progress of activities implementation that related to indicators in the logicalframe. The indicator tracking sheet was developed to monitor the progress of activities implemented.

Project management through the M&E and IT unit had made projects records and reports available for any stakeholder in order to ensure transparency.

Projects' information were shared with stakeholders in the GHO, GARWP, health, nutrition and food security clusters. Mid and final narrative reports were produced describing activities implemented.

In brief, this report outlines grand total of sectorial beneficiaries planned and achieved, projects implemented and beneficiaries reached and 2017 goals and objectives compared to achievement.

#### Grand Total of planned and achieved Beneficiaries at the level of Clusters

In 2017 the project management has set a group of objectives and indiacators to be achieved in each cluster. The opposite table shows the planned beneficiaries in each cluster compared to the achieved beneficiaries.

For the Wash component, 74 % of the target have been achieved.

For health cluster, the accomplished rate of target have overpassed the planned beneficiaries due two higher need in the targeted district which is As Silw district. The first project was

from 1 Jan 2017 up to 31 August 2018. Six sub-districts were targeted by a qualified MT

Cluster	Planned	Achieved	% of target achieved
WASH	45000	33344	74
Health	15000	28097	187
Nutrition	3000	16657	555
Food	20,000	4220	21
Shelter	30,000	19950	67
Early Recovery	950	0	0
Protection	1500	1400	93
Total	115450	103668	89

Table No.1 Planned and reached

reaching 35 rounds for each sub-district. The health component included IMCI, PNC, FP, NPC and EPI. The referral system has been activated during the project as well health education was provided.

Beneficiaries achieved in the FSAC cluster were very low compared to the planned. Only one project implemented during 2017 reaching 21 % of the targeted beneficiaries.

Objectives under the early recovery were not achieved because the cluster related to this indicator is not initiated so far therefore interventions.

As the table shows 89% of the planned beneficiaries were reached during 2017.



The following chart shows the number of achieved beneficiaries against the planned

Chart No1.Planned and achieved beneficiaries

## TYF 2017 objectives and achieved results

## Partnership and Capacity Building

In the set plan for 2017 the program management has planned to initiate partnerships with different humanitarian actors such as UN agencies, INGOs and NGOs.

Planned Objective	Status
Initiate a partnership with Yemen Humanitarian Pooled Fund (YHPF)	Achieved
Initiate a partnership with UNFPA	Not Achieved
Initiate a partnership with WFP	Achieved
Initiate a partnership with the WHO	Not Achieved
Initiate a partnership with the social Fund for Development (SFD)	Not Achieved
Initiate a partnership with UNDP	Not Achieved
Initiate partnership with Kwait Relief Commission	Not Achieved
Initiate partnership with OXFAM	Not Achieved
Initiate partnership with Mercy Corps	Not Achieved
Initiate partnership with Danish Refugee Council	Not Achieved
Initiate partnership with all national humanitarian clusters in Sana'a	Achieved
Initiate partnership with the private sector (MTN, Tadhamoon Bank and Yemen Mobile)	Not Achieved
Overall Comment	
During 2017 there were a lot of efforts exerted by TYF administration in	
order to find common ground for partnerships with most of those	
above mentioned UN agencies, INGOs and Private sector with whom it shares values and objectives. These efforts has resulted in obtaining partnership with YHPF, signed understanding memos with SFD, putting the first steps toward partnership with WFP. For partnership with the working humanitarian clusters, TYF become a member in the national and subnational clusters.	

## **Compiling Surveys and Studies**

Objectives	Status
Compile a Multi Sectorial comprehensive survey in 6 governorates	Not Achieved
Compile four sectorial assessments within the targeted districts	Partially Achieved
Update date of pre-piloted surveys	Partially Achieved
Develop a date base to be as reference for information	Partially Achieved

**Overall Comment** 

Although the above mentioned assessments and pilot studies have not been conducted during 2017 due to new needs and changes occurred therefore changing priority areas for intervention and activities.

A WaSH needs assessment has been conducted in AS Silw district in Oct 2017

The project management has also conducted in participation with WFP a survey for As Silw, Sama'a, Sala, Al Qahrah, districts in Taiz governorate

## **Project Management**

Objectives	Status				
Recruit a professional project manager	On progress				
Set and Develop program objective matrix and definitions of the four main programs developed by the project	Partially completed				
management : 1)Humanitarian aid 2) Protection 3) Building Peace and 4)Empowerment and Early Recovery					
Develop a set of projects proposals and activities to be updated or replaced based on needs and changes	Achieved				
Develop WaSH operational procedures directory that will be updated constantly	Not accomplished				
The project management tried to identify the permanent post	ts and departments				
such as the IT, HR. M&E, and Financial and Operations managements.					
The project management has developed and put the corner stones for the food					
security, health and nutrition programs identifying the annual	targets and				

objectives as well as their measurement tools, registries, and reporting mechanisms

There is a significant, unfortunately polar mammoth efforts exerted by the project management trying to identify programs and the flow of their activities the thing must be supported by other managements as well as executive management.

## Institutional Development

Objectives	Status
Conduct institutional analysis as to figure out strengths and weaknesses	Not completed
Finalize the organizational structure	Modest delay but acceptable
Complete the job descriptions and selection for permanent jobs	Not completed
Develop an evaluation tool that will serve to measure the y	Not completed <sup>ĵ</sup>
permanent and temporary employee performance in each	
management	
Recruit and select public accountant	Completed
Establish and use an electronic accounting system in the main office and sub-offices	Partially completed
Develop the project cycle for the implemented activities to be applied by TYF's projects' teams	Not completed
Establish connection between management units(first line, second and the supervisory units) through: The completion of internal regulations Identify the accounting cycle and management unit regular reports and temporary reports by projects Develop certain periodic and monthly based reporting mechanism for management units Develop an operation directory identify the flow of activities	Partially completed
Initiate and run the foundation's website and complete It's social accounts	Completed
Identify a mechanism and format to gather information and news sharing	Partially completed
Conduct training courses for the administrative team in the main office about the internal regulations and reporting mechanism	Not accomplished
Conduct institutional analysis to measure and evaluate the achieved results	Not accomplished

## Health and Nutrition projects implemented and indicators

<u>1"Emergency Integrated Nutrition and Health Services" project</u>

## 1.1 Health Component

#	Indicator	Men	Women	Boys	Girls	Achieved	% Achievec of target
1.1.1	Provision of free health services to people through medical mobile team	751	2165	1874	1831	6621	61%
1.1.10	Provide mothers with pre-natal care		548			548	141%
1.1.11	Provide children with immunization services			447	449	896	42%
1.1.3	Provide mothers with reproductive health		1224			1224	126%
1.1.4	Number of critical cases successfully referred	4	4	3	2	13	41%
1.1.6	Provide children with vitamin A supplementation			828	722	1550	60%
1.1.7	provided children with de-worming			1817	1804	3,621	140%
1.1.8	Assist beneficiaries to make them satisfied with the services provided					80%	100%
1.1.9`	Raise awareness of the beneficiaries about the complaint and feedback mechanism					%58	83%
1.2.1	Rehabilitate and equip two health facilities					2	100%
1.2.2	Number of community health workers trained on CMAM	5	9			14	100%
1.2.3	Generate disease alerts and respond to them					1	100%
1.2.4	Conduct awareness sessions in the targeted communities	1,5 46	1,362			2908	145
Overal	I percentage of health component activities achieve	9	6 <b>88</b>				

Table No.2 Activities and achievement in the MT

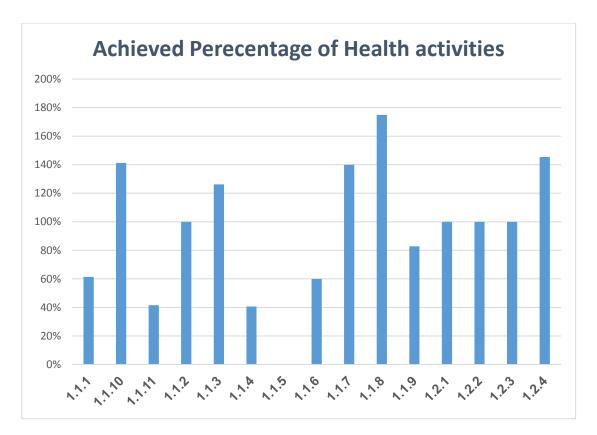
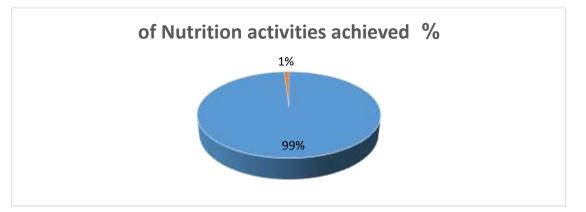


Chart No.2 Indicators and achievement in the MT

## **1.2 Nutrition Component**

1.1.1	Indicator Description # of boys and girls 6-59 months screened for acute malnutrition	80%	0	0%
1.1.2			1	
	# of boys and girls 6-59 months with SAM admitted to OTP	3795	6645	175%
1.1.3	# of PLW screened for acute malnutrition	484	453	94%
1.1.4	# of health workers trained in the management of acute malnutrition	1997	2,391	120%
1.1.5	# of boys and girls 6-59 months with SAM cured	14	14	100%
1.1.6	# of mobile nutrition teams deployed	363	414	114%
1.1.7	# of boys and girls 6-59 months with SAM defaulted	1	1	100%
1.1.8	# of PLW with MAM admitted in Targeted Supplementary Feeding Program (TSFP)	73	2	3%
1.1.9	# of public information products developed on project (i.e. human interest stories, articles, case studies	100	0	0%
2.1.1.	# of CHVs trained in community mobiliza tion and screening for IYCF support	20	20	100%
2.1.2	# of health & nutrition promotion sessions conducted (covering IYCF & Hygiene topic s)	1	1	100%
2.1.3	# of mothers that received Infant Young Child Feeding (IYCF) support	80	145	181%
	1.1.4 1.1.5 1.1.6 1.1.7 1.1.8 1.1.9 2.1.1. 2.1.2	1.1.31.1.4# of health workers trained in the management of acute malnutrition1.1.5# of boys and girls 6-59 months with SAM cured1.1.6# of mobile nutrition teams deployed1.1.7# of boys and girls 6-59 months with SAM defaulted1.1.8# of PLW with MAM admitted in Targeted Supplementary Feeding Program (TSFP)1.1.9# of public information products developed on project (i.e. human interest stories, articles, case studies2.1.1# of CHVs trained in community mobiliza tion and screening for IYCF support2.1.2# of health & nutrition promotion sessions conducted (covering IYCF & Hygiene topic s)2.1.3# of mothers that received Infant Young	1.1.34041.1.4# of health workers trained in the management of acute malnutrition19971.1.5# of boys and girls 6-59 months with SAM cured141.1.6# of mobile nutrition teams deployed3631.1.7# of boys and girls 6-59 months with SAM defaulted11.1.8# of boys and girls 6-59 months with SAM defaulted11.1.8# of PLW with MAM admitted in Targeted Supplementary Feeding Program (TSFP)731.1.9# of public information products developed on project (i.e. human interest stories, articles, case studies1002.1.1.# of CHVs trained in community mobiliza tion and screening for IYCF support202.1.2# of health & nutrition promotion sessions conducted (covering IYCF & Hygiene topic 	1.1.3# of health workers trained in the management of acute malnutrition19972,3911.1.4# of health workers trained in the management of acute malnutrition19972,3911.1.5# of boys and girls 6-59 months with SAM cured14141.1.6# of mobile nutrition teams deployed3634141.1.7# of boys and girls 6-59 months with SAM defaulted111.1.8# of boys and girls 6-59 months with SAM defaulted111.1.8# of PLW with MAM admitted in Targeted Supplementary Feeding Program (TSFP)7321.1.9# of public information products developed on project (i.e. human interest stories, articles, case studies10002.1.1.# of CHVs trained in community mobiliza tion and screening for IYCF support20202.1.2# of health & nutrition promotion sessions conducted (covering IYCF & Hygiene topic s)11

Table No.3 Indicators and achievement in the Nutrition comp.



## 2" Integrated Health and nutrition project"

## 2.1 Health Component

Cluster	No. of indicator	Indicator	Target	Achieved	% Achieved
Health	1.1.1	# of healthcare workers incentivized in hospitals or health facilities	16	12	75%
Health	1.1.2	# of patients provided with healthcare services	15,36 2	9,476	62%
Health	1.1.3	# of children vaccinated	1,045	561	54%
Health	1.1.4	# of health facilities supported with drugs and medical supplies	9	9	100%
Health	1.1.5	# of women provided with reproductive health services	1,535	679	44%
Health	1.1.6	% of households aware of the complaints and feedback mechanism	1	0	0%
Health	1.1.7	# of public information products developed on project (i.e. human interest stories, articles, case studies)	1	0	0%
Health	1.1.8	% of assisted people satisfied with the assistance received	1	0	0%

Table No.3 Indicators and achievement in the health comp.

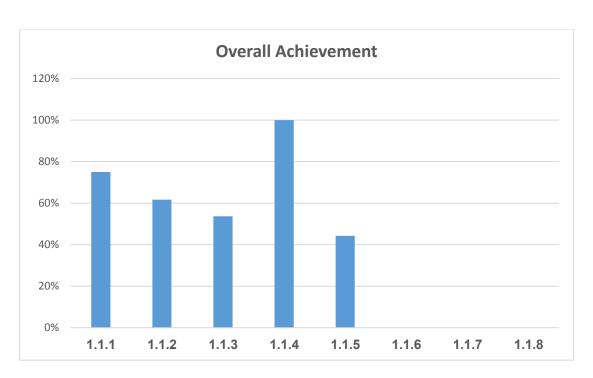


Chart No.3 Indicators and achievement in the health comp.

## 2.2 Nutrition Component

Cluster	No. of indicator	Indicator	Target	Achiev ed	% Achieved
Nutrition	1.1.1	# of Community health Volunteers trained on MUAC screening and Community outreach	30	30	100%
Nutrition	1.1.2	# of health workers trained in the management of acute malnutrition	10	12	120%
Nutrition	1.1.3	# of boys and girls 6-59 months screened for acute malnutrition	2,764	3,410	123%
Nutrition	1.1.4	# of boys and girls 6-59 months with SAM admitted to OTP	86	190	221%
Nutrition	1.1.5	# of boys and girls 6-59 months with SAM cured	73	123	168%
Nutrition	1.1.6	# of boys and girls 6-59 months with SAM defaulted	13	0	0%
Nutrition	1.1.7	# of PLW screened for acute malnutrition	869	1,341	154%

Nutrition	1.1.8	# of PLW with MAM admitted in Targeted Supplementary Feeding Program (TSFP)	217	0	0%
Nutrition	1.1.9	# of boys and girls 6-59 months with MAM admitted to TSFP	415	0	0%
Nutrition	1.1.10	% of households aware of the complaints and feedback mechanism	0.8	0	0%
Nutrition	1.1.11	% of assisted people satisfied with the assistance received	0.8	0	0%
Nutrition	2.1.1	# of mothers that received Infant Young Child Feeding (IYCF) support	695	592	85%
Nutrition	2.1.2	% of assisted people satisfied with the assistance received	1	0	0%

Table No.4 Indicators and achievement in the Nutriiton comp.

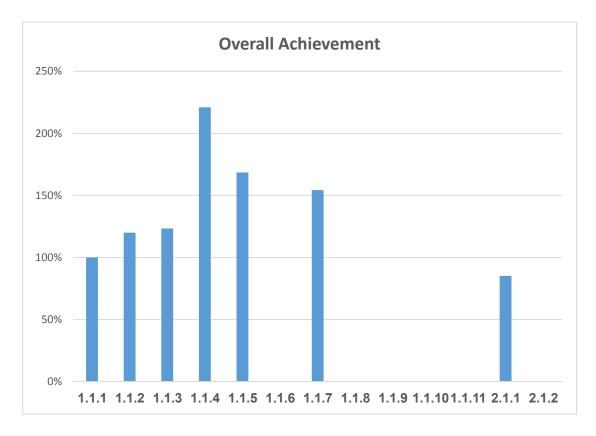


Chart No.4 Indicators and achievement in the Nutrition comp.

## **Cholera Rapid response activities and Outputs**

This part covers the period from 18 Oct up to 2017 regarding the latest outbreak of cholera in As Silw district, Taiz governorate. As Silw is like any other area in Yemen infected by cholera epidemic. During the 2<sup>nd</sup> wave of cholera started on April and May 51 cases were reported. After that there was no cases reported so far until 17 October 2017 number of cases reported. According to locals from Waddi Jahafi village, on 15 October 2017 the first case suspected with AWD was noticed. After that there were some cases admitted to MSF hospital in Al Huban city.. Among those suspected cases are two mothers aborted accordingly. On 17 October and in particular at 9:30 am Tamdeen was informed through its volunteers and community committee reporting the outbreak of suspected cholera in Al Wadur sub-district Waddi Jahafy village. As a result Tamdeen sent an appeal to the HC, GHO at the level of Taiz governorate and As Silw district, UNICEF and other stakeholders for an integrated rapid response to prevent cholera outbreak and morbidity in As Silw therefore equipped a qualified medical team and provided medicine to Al Dhabba HF and started receiving cases infected with AWD.

#### Major Activities Taken

- On 17 Oct locals in Wadi Jahafi sent an appeal for humanitarian assistance and lifesaving services
- In response to this Tamdeen has conducted an early rapid response to detect the incidence of suspected cases as to minimize morbidity and fatality rate
- On 18 Oct it equipped a medical team and Provided Al Dhabba and Al Mashjjab HFs with cholera medicines and requirements and opened Al Dhabba HF to receive cases infected with AWD and treat them
- Then, TYF sent an appeal to the HC, WHO, GHO, UNICEF and other stakeholders for an integrated rapid response to prevent cholera outbreak and morbidity in As Silw district
- Tamdeen's team conducted a site visit to the infected area interviewed community leaders and some infected cases
- It had conducted awareness sessions in Wadi Jahafi area about Cholera transmission ways, causes, sources, treatment and prevention
- As part of Tamdeen's plan responding to the outbreak, it had coordinated with the WASH cluster Taiz/IBB hub and conducted WASH needs assessment in AS Silw district and in particular infected areas and shared the assessment with the WASH cluster and stakeholders
- Tamdeen had coordinated with the surveillance team and conducted a site visit
- WHO and the GHO provided Al Dhabba HF with cholera medicines( IV fluids, antibiotics, ORS ) and furniture

- GARWP had chlorinated some water resources and distributed a quantity of hygiene kits to some of the infected cases
- Tamdeen's strategy is to strengthen surveillance by updated data, implementation, coordination and control, capacity building, strengthen advocacy and conducting an integrated interventions in (health, WASH and communication).

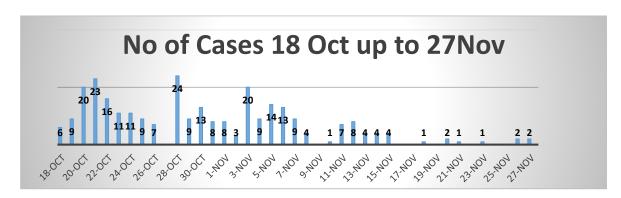


Chart No 5 Number of AWD received and treated

## **Major Outcomes**

- The accumulative number 0f cases received was discharged cured from 17 October up to 27 Nov 2017 which was 277, 118 are males and 159 females out of them 101 are children U5.
- TYF engaged into the Prime system as a partner of cholera
- Conduct number of awareness sessions for infected as well as people in the As Silw district

## **Recommendations**

- It might be helpful for TYF's staff and project management in particular to identify and define the four programs on which it is working, their TOR, operational procedures, objectives and indicators as well as performance measurement tools
- Set objectives based on needs and disaggregated by sex
- The completion of training planned to be conducted for employee according to their needs of capacity building meeting so they can meet the technical expertise required to occupy posts in a very efficient way
- It might be important to cover another geographical areas by projects activities and services provided activities implemented pursuing potentials opportunities in other governorates and districts
- Make use of the previous project implemented in the process of mapping activities
- Conduct the institutional analysis as to identify weakness and strengths opportunities and threats
- Make use of lesson learned and best practices from out of the implemented projects
- Develop an operational manual on the technical knowhow for each program