GEF EO Terminal Evaluation Review Form for OPS4

1. PROJECT DATA				
			Review date:	October 24, 2008
GEF Project ID:	631		at endorsement (Million US$)	at completion (Million US$)
IA/EA Project ID:	PO52315	**GEF financing:**	$1.8	$0.85
Project Name:	Conservation and Sustainable Use of Medicinal Plants	IA/EA own:	$2.51	$1.81
Country:	Ethiopia	Government:	$0.78	$0.56
		Other*:		
		Total Cofinancing:	$3.29	$2.37
Operational Program:	OP 3	**Total Project Cost:**	$5.09	$3.22
IA:	IBRD	Dates		
Partners involved:	Addis Ababa University, Department of Drug Research, Faculty of Veterinary Medicine, Ministry of Health, Institute of Biodiversity Conservation	Effectiveness/ Prodoc Signature (i.e. date project began):		10/16/01
		Closing Date	Proposed: 12/31/05	Actual: 6/30/06
Prepared by: Josh Brann	Reviewed by: Neeraj Negi	Duration between effectiveness date and original closing (in months):	Duration between effectiveness date and actual closing (in months): 49.5	Difference between original and actual closing (in months): 61.5
Author of TE: Liba C. Strengerowski-Feldblyum		TE completion date: 3/18/08	TE submission date to GEF EO: April 2008	Difference between TE completion and submission date (in months): One month

* Other is referred to contributions mobilized for the project from other multilateral agencies, bilateral development cooperation agencies, NGOs, the private sector and beneficiaries.

2. SUMMARY OF PROJECT RATINGS AND KEY FINDINGS

Please refer to document GEF Office of Evaluation Guidelines for terminal evaluation reviews for further definitions of the ratings.

Performance Dimension	Last PIR	IA Terminal Evaluation	IA Evaluation Office evaluations or reviews	GEF EO
2.1a Project outcomes	S	S	S	S
2.1b Sustainability of Outcomes	**N/A**	Moderate (risk to development outcome)	Moderate (risk to development outcome)	ML
2.1c Monitoring and evaluation	S	Not specified	Modest	MS
2.1d Quality of implementation and Execution	**N/A**	**N/A**	**N/A**	S
2.1e Quality of the evaluation report	**N/A**	**N/A**	S	S

2.2 Should the terminal evaluation report for this project be considered a good practice? Why?

No. The TE does not sufficiently cover some important areas, and does not provide full evidence for some ratings. For example, the TE rates the risk to development outcomes as moderate, but only cites evidence that suggests that the outcomes will be sustained. Thus it is not clear why a rating of "Low" risk to development outcomes is not given.

The TE also has some minor internal inconsistencies, for example stating that some of the project funds were cancelled because the project was over-budgeted, but then later stating that funds were cancelled because the project's disbursement rate was lagging. The TE also does not explain why, if the project was over-budgeted, salary levels of the project were low so that it was difficult to retain staff during the first part of the project.

Also, according to the ICR review, "The Appraised Estimated Project Costs by Component in Annex 1 do not match the appraisal estimates in the PAD."

2.3 Are there any evaluation findings that require follow-up, such as corruption, reallocation of GEF funds, mismanagement, etc.?

None noted.

3. PROJECT OBJECTIVES

3.1 Project Objectives

a. What were the Global Environmental Objectives of the project? Were there any changes during implementation?

According to the Project Appraisal Document, "The overall objective of this project is to initiate support for conservation, management and sustainable utilization of medicinal plants for human and livestock healthcare in Ethiopia." The global environmental objective of the project is to "promote in-situ conservation and sustainable use of medicinal plants in and around a site of global significance -the Bale Mountains National Park."

There were no changes to the design of the project after beginning of implementation.

b. What were the Development Objectives of the project? Were there any changes during implementation? (describe and insert tick in appropriate box below, if yes at what level was the change approved (GEFSEC, IA or EA)?)

According to the Project Appraisal Document, the project's specific objectives are to: "(i) strengthen institutional capacity; (ii) identify and document selected commonly used/indigenous medicinal plants used for the treatment of major human diseases with emphasis on the following three namely tapeworm infections, bronchopneumonia and hypertension and livestock diseases with emphasis on the following three namely tapeworm infections, mastitis and dermatophilosis; (iii) initiate studies for the safe utilization of effective medicinal plant remedies for these three major human diseases and three livestock diseases; (iv) assess the economic benefits derived from medicinal plants in human and livestock healthcare on a national level and for possible export potential; (v) develop a national medicinal plant database; and (vi) support in-situ conservation and management and initiate ex-situ cultivation of medicinal plants."

There were no changes to the design of the project after beginning of implementation.

Overall Environmental Objectives	Project Development Objectives	Project Components	Any other (specify)

If yes, tick applicable reasons for the change in objectives

Original objectives not sufficiently articulated	Exogenous conditions changed, causing a change in objectives	Project was restructured because original objectives were over ambitious	Project was restructured because of lack of progress	Any other (specify)

4. GEF EVALUATION OFFICE ASSESSMENT OF OUTCOMES AND SUSTAINABILITY

4.1.1 Outcomes (Relevance can receive either a satisfactory rating or a unsatisfactory rating. For effectiveness and cost efficiency a six point scale 6= HS to 1 = HU will be used)

a. Relevance (of outcomes to focal areas/operational program strategies and country priorities) Rating: S

The project can be considered highly relevant, as it fits within the GEF operational programs (as structured at the time of project development), and was also responsive to a specific request from the country for action.

Furthermore, according to the TE, "The [project] was consistent with the objectives of the 2000 CAS and the 2006 Interim CAS, which aims to at least double health expenditures as well as dramatically expand the provision of basic services by local governments, especially in rural areas. The project formed part of Ethiopia's commitment to improve healthcare and facilitate and integrate traditional and modern health systems. Additionally, the project was aligned with Ethiopia's Conservation Strategy and Environmental Policy as well as its Biodiversity Conservation and Development Strategy, in which the conservation and sustainable use of medicinal plants is a priority, and with policies and strategies that directly address the conservation of biodiversity."

A.1. What is the relevance of the project outcomes/results to:

(i) the national sustainable development agenda and development needs and challenges?

As described in the relevance section, the project was highly relevant for Ethiopia's development agenda, needs, and challenges surrounding both healthcare and in-situ conservation.

(ii) the national environmental framework, agenda and priorities?

See relevance section.

(iii) the achievement of the GEF strategies and mandate?

See relevance section. The project was responsive to GEF strategies for in-situ conservation and sustainable use of biodiversity in protected areas.

(iv) the implementation of the global conventions the GEF supports (countries obligations and responsibilities towards the convention as well as the achievement of the conventions objectives)

The most relevant convention for the project is the Convention on Biological Diversity. The project was responsive to various aspects of the convention, including, notably, Article 8j on Traditional Knowledge, Innovations and Practices.

A2. Did the project promote of International (Regional and / or Global) Cooperation and Partnership[1]

The project was focused solely within Ethiopia, however, according to the TE, "In October 2007, the United Nations Educational, Scientific and Cultural Organization (UNESCO) awarded an environmental preservation prize to IBC for establishing systems to ensure the conservation and sustainable use of Ethiopia's biodiversity, including its work to inventory and conserve medicinal plant, forest, and aquatic resources. IBC was recommended for the award by the Bureau of the International Coordinating Council of UNESCO's Man and the Biosphere Program."

b. Effectiveness **Rating: S**

The TE rates the overall outcomes of the project as satisfactory, based on the project's "(i) capacity building to manage development of phytomedicines; (ii) support to community-based development initiatives (pilot alternative livelihood schemes) to reduce pressure on medicinal plant resources; (iii) mass awareness program on conservation and sustainable use of medicinal plants; (iv) participation of local communities and associations in delivering project outputs (to ensure greater responsiveness and ownership); and (v) the effective use of NGOs to provide services (development of the management plan for BMNP) and ensure intensive contact with stakeholders."

As described by the TE, project had three main components with fifteen sub-components. The TE rates eleven sub-components as "achieved," one as "achieved but delayed" and the remaining subcomponents as partially achieved. The components that were partially achieved or delayed constituted approximately one-third of the total estimated project costs in the Project Appraisal Document. However, the total project only ended up using 71% of the initially planned resources. Component 1's actual cost was 135% of the original planned cost, Component 2 used 80% of the initially planned resources, and Component 3 used only 27% of the initially planned resources. The TE does not breakdown the actual cost of sub-components. The TE describes the achievements under each subcomponent in detail, but a summary follows:

Under Component 1: Institutional Strengthening and Capacity Development:

[1] Please consider for regional and global project only

- Strengthening the capacity of the Institute for Biodiversity Conservation was achieved through providing awareness, knowledge, and tools for the conservation and sustainable use of medicinal plants. In addition, collaboration was established between the Institute for Biodiversity Conservation and the Ministry of Health.

- "An assessment of human resource and institutional capacity identified needs for training and other inputs. A training plan was prepared and implemented."

- The project established in strategic locations two field gene banks for medicinal plants, which have collected and conserved a wide variety of species. According to the TE, "The first two field gene banks provide an excellent example of how such banks could be established."

- The development of intellectual property rights policy and guidelines for sharing traditional knowledge was partially achieved, including the development of a Model Knowledge Transfer Agreement.

- A functioning project coordination and management unit was established.

Under Component 2: Studies, Research and Database Development

- The project completed an ethnomedical survey to explore the utilization of traditional medicine practices for preventing HIV/AIDS.

- Research on propagation and cultivation of plants used to treat human and livestock diseases was completed, including laboratory, glasshouse, nursery and field studies.

- Partially achieved were the formulation studies of phytomedicines for three human and three livestock diseases. Progress was made on the extraction, standardization, safety, efficacy, and dosage testing, but the process was not completed.

- Methods were developed to collect, analyze, and interpret quantitative data on socioeconomic benefits derived from medicinal plants used in human and animal healthcare on a national level.

- A national web-based medicinal plant database was developed, and installed at the Instituted for Biodiversity Conservation and the National Herbarium, which was fully operational by the last six months of the project.

Under Component 3: In Situ Conservation and Sustainable Use in Bale Mountains National Park

- An in-depth socioeconomic study of medicinal plant harvesting and use was completed, which revealed that the major threats to conservation of medicinal plants are not harvesting, but increasing human and livestock populations and influx, harvesting of fuelwood, clearing forests for agriculture, and forest fires. Threatened plants have been identified for plant propagation studies.

- Appropriate management options and guidelines for the sustainable harvesting and use of medicinal plants was developed and implemented. According to the TE, "the project helped lay the groundwork for further contributions to the government and GEF objectives of improving environmental protection and reducing poverty." A 10 year management plan for Bale Mountains National Park was developed, organized into five management programs with detailed three year action plans developed for each management program.

- Pilot trials for healers and farmers to grow selected threatened and indigenous species in nurseries and home gardens were achieved. Hundreds of healer/farmers have been trained in propagation methods, and traditional health associations have been established. In addition, alternative livelihood programs have been developed.

- Training of park personnel to conserve, manage, and monitor medicinal plant resources within the park and adjacent farms was completed.

- The implementation of education and mass awareness campaigns related to the conservation and management of medicinal plants and their importance to Ethiopia's biodiversity and long-term healthcare needs was completed through the dissemination of resource management manuals, programs on the radio, and a five-day awareness-raising workshop for community members from Bale Zone primary and secondary schools.

c. Efficiency (cost-effectiveness) **Rating: S**

A large portion of the project budget was cancelled mid-way through the project without changing project objectives. This was apparently due to over-budgeting of the project in the planning stages, but the fact that the project did achieve its objectives within its budget indicates a satisfactory rating for the efficiency of the project. There were implementation issues in the first half of the project, and the rate of disbursement of project funds was initially very slow. Efficiency likely would have been improved even more if there had been a completely smooth implementation process, because the project executing agency would not have had to spend time hiring new staff and wasted effort refocusing the project at the mid-point.

d. To what extent did the project result in trade offs between environment and development priorities / issues (not to be rated)

The project did not "result" in trade-offs between environment and development per se, but it did address these issues to some extent. The project worked on the creation of alternative livelihoods for communities in and around Bale Mountains National Park to improve the conservation of targeted medicinal plant species, and to help improve household incomes.

4.1.2 Results / Impacts[2] (Describe Impacts) (please fill in annex 1 – results scoresheet and annex 2 – focal area impacts (against GEF Strategic Priority indicators, where appropriate and possible)

4.2 Likelihood of sustainability. Using the following sustainability criteria, include an assessment of **risks** to sustainability of project outcomes and impacts based on the information presented in the TE. Use a four point scale (4= Likely (no or negligible risk); 3= Moderately Likely (low risk); 2= Moderately Unlikely (substantial risks) to 1= Unlikely (High risk)). The ratings should be given taking into account both the probability of a risk materializing and the anticipated magnitude of its effect on the continuance of project benefits.

a. Financial resources **Rating: L**

Although the project faced some challenges in implementation, there was interest on the part of the country for continued conservation activities. According to the TE, "In October 2007, the Government of Ethiopia, through a letter from the Ministry of Finance, indicated its desire for follow-up activities focusing on: in situ conservation and ex situ cultivation of selected medicinal plants; integration of selected phytomedicines into the Ministry of Health's (MOH's) primary healthcare system; and expanding GEF conservation activities in relevant sites. Justification for a second phase of the project was prepared, an outline for a concept is being finalized, and the government is committed to providing a budget envelope. MOH and Addis Ababa University are providing funds for Department of Drug Research, School of Pharmacy, and Faculty of Veterinary Medicine to continue the preclinical and human clinical trials initiated under the project. IBC continues to provide financial support to the healers' nursery and home garden projects and the field gene banks."

"The Ministry of Health has expressed its commitment to support (and regulate) traditional medicine through its newly established traditional medicine unit."

b. Socio-economic / political **Rating: L**

No socio-political risks are anticipated.

c. Institutional framework and governance **Rating: L**

According to the TE, the "Ministry of Health now has a separate department to review and update national policies and strategies for the use of medicinal plants and for integrating and optimizing collaboration among government institutions and agencies working in the traditional healthcare system. A sustainability strategy was prepared in May 2007."

According to the TE, "A foundation was established for healers to continue maintaining nurseries and home gardens and to expand membership in their associations when approved by Kebele councils.

[2] Please consider direct and indirect global environmental results; any unexpected results; local development benefits (including results relevant to communities, gender issues, indigenous peoples, NGOs and CBOs)

d. Environmental **Rating: ML**
Although the project developed sustainable livelihoods for communities in and around Bale Mountains National Park, the TE also indicates that the greatest threats to plant conservation in the area relates to multiple increasing anthropogenic impacts, such as fuelwood cutting and clearing of land for agriculture. It is not possible to assess the full extent of these influences, but it is clear that the conservations goals are not completely secured.
e. Technological **Rating: UA**
Unable to assess. The most significant project outcome in this regard is the development of the web-based database, which is based in the Institute for Biodiversity Conservation, but there is no information available regarding the potential likelihood of maintenance and continued operation and updating of the database.

4.3 Catalytic role[3]

a. INCENTIVES: To what extent have the project activities provide incentives (socio-economic / market based) to catalyze changes in stakeholders
The project developed and supported alternative livelihoods for communities in and around Bale Mountains National Park. Also according to the TE, "Because the project enabled traditional healers to gain recognition, organize into associations, and establish home gardens, there was a change in attitude among participating communities. Traditional healers are no longer seen as "root diggers." They can share their knowledge and work openly."
b. INSTITUTIONAL CHANGE: To what extent have the project activities changed institutional behaviors
The project has significantly developed capacity among participating institutions, and has created greater collaboration between institutions such as the Institute for Biodiversity Conservation and the Ministry of Health.
c. POLICY CHANGE: To what extent have project activities led to policy changes (and implementation of policy)?
One of the subcomponents of the project focused on policy development. The objectives of this subcomponent were only partially achieved, but significant progress was made. As described by the TE: "Develop IPR policy and guidelines for sharing traditional knowledge (partially achieved): A Model Knowledge Transfer Agreement (KTA) was developed to address intellectual property claims on the use and transfer of traditional medicines and was shared with traditional healers. The Model KTA is harmonized with the proclamation on Access to Genetic Resources and Community Knowledge and Benefit Sharing, ratified by Parliament in February, 2006. A draft IPR policy and its corresponding guidelines, produced in consultation with traditional healers, researchers, and government institutions, await government approval. In addition, the project initiated development of regulations for traditional medicine, which are to be submitted by MOH to the Council of Ministers for approval. The traditional medicine unit being established under MOH will give official recognition and support to the sector."
d. CATALYTIC FINANCING: To what extent did the project led to sustained follow-on financing from Government and / or other donors? (this is different than co-financing)
As described in section 4.2.a. on financial sustainability, there has been some sustained financing for the future, as well as national level support for continued GEF support. According to the TE, "In October 2007, the Government of Ethiopia, through a letter from the Ministry of Finance, indicated its desire for follow-up activities focusing on: in situ conservation and ex situ cultivation of selected medicinal plants; integration of selected phytomedicines into the Ministry of Health's (MOH's) primary healthcare system; and expanding GEF conservation activities in relevant sites. Justification for a second phase of the project was prepared, an outline for a concept is being finalized, and the

[3] Please review the 'Catalytic Role of GEF: How is it measured and evaluated – A conceptual framework' prior to addressing this section.

government is committed to providing a budget envelope. MOH and Addis Ababa University are providing funds for Department of Drug Research, School of Pharmacy, and Faculty of Veterinary Medicine to continue the preclinical and human clinical trials initiated under the project. IBC continues to provide financial support to the healers' nursery and home garden projects and the field gene banks."

e. PROJECT CHAMPIONS: To what extent have changes (listed above) been catalyzed by particular individuals or institutions (without which the project would not have achieved results)?

For this project there wasn't necessarily one individual project champion at a high level that ensured success, although the fact that there was a single Task Team Leader from the World Bank throughout the course of the project likely contributed greatly to the project's achievements.

The TE highlights the role of multiple project champions at the local level which help the project reach its objectives. One of the key lessons learned from the TE is that, "Focal champions at the stakeholder and beneficiary level who understand the project's objectives and activities help ensure successful implementation."

4.4 Assessment of processes and factors affecting attainment of project outcomes and sustainability.

a. Co-financing. To what extent was the reported cofinancing (or proposed cofinancing) essential to achievement of GEF objectives? If there was a difference in the level of expected co-financing and actual co-financing, then what were the reasons for it? Did the extent of materialization of co-financing affect project's outcomes and/or sustainability? If it did, then in what ways and through what causal linkages?

The TE does not specifically discuss the co-financing situation of the project. According to the ICR review, "Actual borrower contributions were slightly less than anticipated (US$0.56 million versus $0.78 million at appraisal)." However, this could be considered proportional to the cancellation at mid-term of a portion of the appraised GEF and World Bank funding, as both the World Bank funds and the co-financing funds were reduced 28%. As noted by the TE, since the project was over-budgeted at approval due to uncertainties in costing some of the planned activities, the cancellation of funds did not affect the project outcomes and sustainability. Instead, the cancellation of funds reduced potential waste of resources.

The TE does state that the level of counter-part funding was a problem in the initial stages of implementation, and that this partially contributed to the slow rate of progress. Apparently this issue was resolved, since the anticipated level of co-financing was received by the end of the project.

b. Delays. If there were delays in project implementation and completion, then what were the reasons for it? Did the delay affect the project's outcomes and/or sustainability? If it did, then in what ways and through what causal linkages?

According to the TE, "Closing dates for both the IDA credit and the GEF were extended for six months to permit some final activities to be completed. The IDA credit was extended until June 30, 2006 (original closing date was December 31, 2005) and the GEF was extended until June 30, 2007 (original closing date was December 31, 2006). The GEF closing date differed from the IDA closing date because of the longer time frame for community based activities."

c. Country Ownership. Assess the extent to which country ownership has affected project outcomes and sustainability? Describe the ways in which it affected outcomes and sustainability highlighting the causal links.

This project presents a good example of the challenges surrounding the principle of country ownership, and the need for a clear understanding and definition of what constitutes country ownership. According to the TE, the project was initially developed and approved based on a clear request from the Deputy Prime Minister. However, as described by the TE, "Government performance was moderately satisfactory, despite an initial lack of commitment and institutional ownership among Federal and Regional Government counterparts. At first the project was not seen as a government priority. It was regarded as a "small" project. Traditional medicine was not perceived as very relevant. No institution could champion traditional medicine, because no institution was in charge of traditional medicine. Constant changes in the Regional Offices meant that different focal persons met at different times. After the MTR, support increased at the federal and regional levels. With the appointment of Regional Coordinators, implementation picked up."

As described by the ICR review, "Although the project was highly sought after by the then Deputy Prime Minister, both central government and the regional administration in Oromia lacked initial commitment to the project."

4.5 Assessment of the project's monitoring and evaluation system based on the information in the TE

a. M&E design at Entry	**Rating (six point scale): MU**
According to the TE, "the lack of systematic M&E at the start of the project partly explains the laxity of the project coordination office and IBC with regard to monitoring. The initial M&E effort was an input/output system, which produced reports on indicators, tracked procurement activities, and tracked surveys, meetings, and workshops. Reporting was compromised, however, because information was not available on time from the large number of participants. This was recognized as a major weakness during the early part of project implementation, and a revised M&E system, which also included a set of monitoring indicators, was finalized during the MTR. Subsequently, the timeliness of reporting improved."	
b. M&E plan Implementation	**Rating (six point scale): MS**
Implementation of the M&E system in the first half of the project was poor, but improved in the second half following revisions to the M&E system. According to the TE, "Reporting was compromised because information was not available on time from the large number of participants." As also described by the TE, "Because a systematic monitoring and evaluation (M&E) mechanism was not in place early on, information was not available on time. As a result, an intensive review of M&E for the project was proposed during the MTR." Once the revised M&E system was in place, "the timeliness of reporting improved."	
b.1 Was sufficient funding provided for M&E in the budget included in the project document? This does not appear to have been a problem.	
b.2a Was sufficient and timely funding provided for M&E during project implementation? This does not appear to have been a problem.	
b.2b To what extent did the project monitoring system provided real time feed back? Was the information that was provided used effectively? What factors affected the use of information provided by the project monitoring system? According to the TE, "Because a systematic monitoring and evaluation (M&E) mechanism was not in place early on, information was not available on time."	
b.3 Can the project M&E system (or an aspect of the project M&E system) be considered a good practice? If so, explain why. In this case, part of the difficulty of the M&E system was that it was unfamiliar to the executing parties. To help alleviate this problem, the project focused special attention on this issue, including creating a manual. According to the TE, "An expert in M&E for the project helped develop the MIS; determined data availability, identified data gaps, and suggested measures to improve data collection; prepared formats for monthly, quarterly, and annual reports; devised a system to obtain timely reports from project implementers; and prepared a user-friendly manual, which was used as the base for all M&E activities."	

4.6 Assessment of Quality of Implementation and Execution

a. Overall Quality of Implementation and Execution (on a six point scale): S
b. Overall Quality of Implementation – for IA (on a six point scale): S
Briefly describe and assess performance on issues such as quality of the project design, focus on results, adequacy of supervision inputs and processes, quality of risk management, candor and realism in supervision reporting, and suitability of the chosen executing agencies for project execution. A major design flaw of the project was over estimation of the expected expenditure. According to the TE, "Owing to uncertainties associated with several activities, project costing was generous and conservative." The IA made amends for this after the mid-term review by canceling a significant portion of the project financing. The TE suggests that partial cancellation of the funding did have any negative consequences for achievement of the expected project outcomes. As described by the TE, "Actual costs turned out to be less than estimated, and funds could thus be canceled without significantly reducing planned activities or discarding the original objectives. As a consequence, a total of

SDR 779,746 (equivalent $1,206,938) of the IDA credit and $977,000 of the GEF was cancelled after the MTR in January 2005."

The TE rates the quality of project design as moderately satisfactory, with the main shortcoming being that "it was somewhat ambitious and challenging, owing to the involvement of numerous agencies and stakeholders, the limited cooperation between collaborating institutes, and consequent delays."

Overall, the project supervision by the World Bank appears to have been attentive and responsive. According to the TE, there were an average of two supervision missions per year, with a total of 15 over the life of the project. According to the TE, the Bank "built a solid partnership with the borrower." The level and quality of supervision also helped ensure that the project's slow and slightly problematic start did not have long-term negative implications for the achievement of objectives. According to the TE, "Consistent supervision, support, and technical assistance by the Bank helped overcome the operational challenges, turn the unsatisfactory ratings around, and gain a good assessment for the project during the MTR in March 2004. The action plan developed after the MTR helped to improve project performance and collaboration among the institutions." This was no doubt aided by the fact that the supervision team personnel remained the same throughout the life of the project.

c. Quality of Execution – for Executing Agencies[4] (rating on a 6 point scale): MS

Briefly describe and assess performance on issues such as focus on results, adequacy of management inputs and processes, quality of risk management, and candor and realism in reporting by the executive agency.

The TE notes both positive and negative aspects of the execution of the project. On the positive side, once the project was refocused at the mid-term, and the Project Coordination and Management Unit was fully staffed, then the project was able to nearly fully achieve its objectives. The project helped build management capacity and technical capacity to further develop phytomedicines in participating institutions such as the Department of Drug Research, School of Pharmacy and Faculty of Veterinary Medicine.

At the same time, during the first part of the project, "Project implementation was delayed for several reasons. Implementation was slow during the initial stages because of the innovative nature of the project's activities, weak institutional capacity, and insufficient experience in the government and Project Implementation Unit (PIU) with respect to Bank requirements and procedures, especially in procurement and financial management. Staff turnover was high (partly for external reasons, such as higher salaries paid by other projects). Other delays were caused by inadequate counterpart funds, insufficient commitment to project objectives among collaborating institutions, the absence of a mechanism to implement and enforce memoranda of understanding (MOUs), and inadequate follow-up by the Institute of Biodiversity Conservation (IBC). The absence of clear guidelines, procedures, and protocols for the validation of phytomedicines also impeded progress.

Because of the considerable number of agencies and stakeholders involved, coordination was cumbersome, and cooperation between the 13 participating institutions was limited. By the end of 2003, the disbursement rate was lagging the original estimates by 63 percent, resulting in a partial cancellation of funds in January 2005." (As previously described.)

It is not clear from the TE why salary levels were a problem for the project when the project was apparently significantly over-budgeted at approval. The TE states that this was an "external" reason for problems for the project, but it could be considered an internal project management and administration issue.

The mid-term review of the project resulted in multiple changes to the implementation arrangements of the project, as well as changes to some project activities.

Following the changes at the mid-term the project was able to make progress towards the achievement of objectives. According to the TE, "The establishment of coordination offices at the zonal level compensated for the initial delays and enabled the project to achieve most of its objectives during the last two years (see section 3.2). Following the MTR, the appointment of a full-time Coordinator to work closely with the woreda focal persons and traditional healers facilitated the work, despite staff turnover."

It is likely that many of the initial problems related to implementation had to do with inconsistency of personnel.

[4] Executing Agencies for this section would mean those agencies that are executing the project in the field. For any given project this will exclude Executing Agencies that are implementing the project under expanded opportunities – for projects approved under the expanded opportunities procedure the respective executing agency will be treated as an implementing agency.

According to the TE, "Staffing problems slowed implementation at first. The PCMU was not fully staffed, there was considerable turnover in key positions (Procurement Officer, Financial Manager), and the Project Coordinator, as well as the first Financial Manager and Procurement Specialist, lacked knowledge of Bank procedures. Disbursements lagged. There were problems in providing funds to field operations and to stakeholders, as well as problems in getting goods and equipment to the districts. Project management improved considerably after a new General Manager was selected for IBC and the project hired a new Procurement Specialist, Financial Manager, and M&E expert."

5. LESSONS AND RECOMMENDATIONS

Assess the project lessons and recommendations as described in the TE

a. Briefly describe the key lessons, good practice or approaches mentioned in the terminal evaluation report that could have application for other GEF projects

Technical: "Preclinical and human clinical trial protocols should be in place, and the appropriate agencies responsible for their clearances should be identified, at project implementation."

"Too many implementing agencies and collaborating institutions can increase transaction costs and reduce the quality of implementation."

"Participatory assessments and planning of activities are critical in promoting ownership and subsequently mobilizing communities."

"The initial assessment undertaken through the project indicates that medicinal plants are a frequently hidden but sizable sector in the economy, one that is particularly important for poor people as suppliers/producers as well as consumers. More work is needed to understand the potential for commercialization through formal channels in parallel with providing incentives to conserve medicinal plants."

b. Briefly describe the recommendations given in the terminal evaluation

No recommendations beyond the lessons learned in section 5.a. above.

6. QUALITY OF THE TERMINAL EVALUATION REPORT

6.1 Comments on the summary of project ratings and terminal evaluation findings based on other information sources such as GEF EO field visits, other evaluations, etc.

No additional sources available.

Provide a number rating 1-6 to each criteria based on: Highly Satisfactory = 6, Satisfactory = 5, Moderately Satisfactory = 4, Moderately Unsatisfactory = 3, Unsatisfactory = 2, and Highly Unsatisfactory = 1. Please refer to document GEF Office of Evaluation Guidelines for terminal evaluations review for further definitions of the ratings. Please briefly explain each rating.

6.2 Quality of the terminal evaluation report	Ratings
a. To what extent does the report contain an assessment of relevant outcomes and impacts of the project and the achievement of the objectives?	S
b. To what extent the report is internally consistent, the evidence is complete/convincing and the IA ratings have been substantiated? Are there any major evidence gaps? The TE contains some evidence gaps, and has some internal inconsistencies regarding project financing and the cancellation of some of the project funding.	MS
c. To what extent does the report properly assess project sustainability and /or a project exit strategy? The TE does not provide sufficient rationale/evidence for its rating on project sustainability. The TE provides only positive evidence, but then gives a rating that is below the highest level.	MU

d. To what extent are the lessons learned supported by the evidence presented and are they comprehensive?	S
e. Does the report include the actual project costs (total and per activity) and actual co-financing used?	S
f. Assess the quality of the reports evaluation of project M&E systems?	S

7. SOURCES OF INFORMATION FOR THE PRERATATION OF THE TERMINAL EVALUTION REVIEW REPORT EXCLUDING PIRs, TERMINAL EVALUATIONS, PAD.
None.

8 Project stakeholders and Key Contacts (Names, addresses, emails etc – mandatory for field visit countries)

9. Information Gaps (for Field visit countries only)
