



### Stimulating innovation and impact insurance in Africa

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This evaluation has been conducted according to ILO's evaluation policies and procedures. It has not been professionally edited, but has undergone quality control by the ILO Evaluation Office.

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The evaluation consultant hopes that the findings, conclusions and recommendations will contribute to the successful implementation of the project and partnership on Stimulating innovation and impact insurance in Africa between ILO and the AFD, and to the continuous improvement of similar projects in other countries and regions.

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## List of acronyms and abbreviations

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ACRE	Agriculture and Climate Risk Enterprise
AFD	Agence Française de Développement (French Development Agency)
CNAAS	National Agricultural Insurance Company of Senegal

CoP	Community of Practice
COOP	Cooperative
DWCPs	Decent Work Country Programmes
EIA	Equity Insurance Agency
EM	Evaluation Matrix
EQM	Evaluation Question Matrix
FAO	Food and Agriculture Organization of the United Nations
FE	Final Evaluation
FSDA	Financial Sector Deepening Africa
GDP	Growth Domestic Product
HQs	Headquarters
IIF	Impact Insurance Facility
ILO	International Labour Organization
ILO-EVAL	International Labour Organization Evaluation Office
LogFrame	Project Logical Framework
KPIs	Key performance indicators
MFIs	Microfinance institutions
MINAGRI	Ministry of Agriculture and Animal Resources
MNO	Mobile Network Operator
MTE	Mid-Term Evaluation
NAIS	National Agriculture Insurance Scheme
NGO	Non-Governmental Organization
NHIA	National Health Insurance Authority
NHIF	National Health Insurance Fund
OECD/DAC	Organization for Economic Co-operation and Development/Development Assistance Committee
PACE	Product, Access, Cost and Experience
P&B	Project and Budget of ILO
RBM	Results-Based Management
SACCO	Savings and Credit Cooperative Organization
SFSA	Syngenta Foundation for Sustainable Agriculture
SDGs	Sustainable Development Goals
SMEs	Small and medium-sized enterprises
SWOT	Strengths, weaknesses, opportunities and threats
TOC	Theory of Change
ToR	Terms of Reference
UHC	Universal Health Coverage
UN	United Nations
UNDAF	United Nations Development Assistance Framework
USSD	Unstructured Supplementary Service Data
WBCIS	Weather based Crop Insurance Scheme
WHO	World Health Organization
WFP	World Food Programme
2030 Agenda	The 2030 Agenda for Sustainable Development

## Executive Summary

BACKGROUND & CONTEXT	
<b>Summary of the project purpose, logic and structure</b>	<p>This report presents the findings of the mid-term independent evaluation of the project: “Stimulating innovation and impact insurance in Africa”, implemented by International Labour Organization (ILO) The project was funded by the Agence Française de Développement (AFD) through a grant agreement with EUR 2.5 million.</p> <p>The overall project objective was to establish and deliver risk management solutions through public- private partnerships to benefit small enterprises and low-income households. Besides testing new products, processes and business models, the project has also built the capacity of public sector agencies and private players. The present project built on the success of the first collaboration between ILO and AFD. Together, AFD and the ILO have supported five Public-Private Partnerships (PPPs) to develop solutions that achieve social and development impact. The project promotes learnings on impact insurance, innovation and the implementation of PPPs.</p>
<b>Present situation of the project</b>	<p>The International Labour Organization (ILO) has started the implementation of the project on 1 May 2021. At the time of the MTE, the project was in the third year of its implementation. The results of the Mid-term Evaluation (MTE) of the project will be used for measuring its impact to date and the level of achievement of the established project objectives. This MTE has covered the period of project implementation from 1 May 2021 to 30 April 2023.</p>
<b>Purpose, scope and clients of the evaluation</b>	<p>The mid-term independent evaluation has mostly focused on accountability, problem solving and learning. Among other points, this mid-term evaluation (MTE) has identified what worked, what did not work at output, outcome and impact levels, what is sustainable, what is the legacy of the project and what are the recommendations for the future. The evaluation criteria were analyzed at the design stages, together with any mitigation measures that eventually were taken. The Project Logical Framework (LogFrame) was revised during this mid-term evaluation. Additionally, a Theory of Change (TOC) was reconstructed, as there was no TOC at the project design stage.</p> <p>The key tasks of the mid-term evaluation were to: 1. Evaluate the extent to which the project has contributed to strengthening the resilience of low-to-middle income population in Africa by stimulating innovation and impact insurance by piloting and scaling-up innovations that deliver value to low-income households in a viable way. 2. Assess the effectiveness of the a) Enhanced use of Innovation Management for low-income households and Small and Medium Enterprises (SMEs) through public-private partnerships; and b) Capacity built and knowledge developed to facilitate skill building, knowledge exchange and accelerate the evolution of markets. 3. Assess the impact and the sustainability of the project as well as any unintended consequences. 4. Provide lessons learned, good practices, and recommendations for further project implementation</p>

	<p>course and replication of similar initiatives in the future.</p> <p>The evaluation covered all project interventions under the two pilot projects in Rwanda (agricultural insurance) and Kenya (health insurance) from 1 May 2021 to 30 April 2023. The gender dimension was considered a cross-cutting concern throughout the methodology, deliverables, and final report of the evaluation. The primary end users of the evaluation findings are the ILO, the AFD, the project team, public (national Government of Rwanda – Ministry of Agriculture and Animal Resources and the Kisumu County Government Health Care) and private (partners: PharmAccess Kenya, Radiant Yacu Insurance Rwanda) partners and fellows, as well as other project stakeholders.</p>
<p><b>Methodology evaluation</b></p>	<p><b>of</b> Different evaluation tools were combined to ensure an evidence-based qualitative and quantitative assessment. The evaluator emphasized the cross-validation of data through triangulation and an assessment of the plausibility of the results obtained.</p> <p>The methodological approach included a desk review and semi-structured individual interviews. Data was gathered from different sources, by different methods for each of the evaluation questions, and findings were triangulated to draw valid and reliable conclusions. Data was disaggregated, at a minimum, by sex and by other dimensions where available. Conclusions and recommendations were based on evaluation findings (deductive reasoning). The evaluation was conducted as an independent exercise from February to March 2024 in close coordination with ILO’s Evaluation Office and the project team, donor, public (national Government of Rwanda – Ministry of Agriculture and Animal Resources and the Kisumu County Government Health Care) and private (partners: PharmAccess Kenya, Radiant Yacu Insurance Rwanda) partners and fellows, and resulted in the following findings, conclusions, and recommendations.</p>
<p><b>MAIN FINDINGS &amp; CONCLUSIONS</b></p>	<p>Overall, the key conclusions of this mid-term evaluation are:</p> <p>1) The Stimulating innovation and impact insurance in Africa project interventions were consistent with partners' needs and beneficiaries' requirements. The development intervention provided useful technical assistance such as market research, developing quality impact insurance products and digital solutions in different countries and contexts, especially for the pilot countries for this mid-term evaluation: Rwanda (agricultural insurance) and Kenya (health insurance). The project has reinforced organizational capacity building using an effective change management approach. It has produced solutions integrated into partners' business models and global value chains through a project implementation model of using public-private-partnerships (PPPs). The project adopted a client-centric approach responding to beneficiaries' requirements. The project has partially aligned its intervention to the SDGs and financial inclusion, including decent work (tackling notably informal sector issues), food security and protecting smallholder farmers from climate variability and social protection. The Rwandan Ministry of Agriculture and Animal Resources was subsidizing the agricultural insurance in Rwanda. The project protected vulnerable population in Kenya by offering them a free health insurance coverage and subsidizing the informal sector in</p>



their health insurance coverage.2) The Fellowship programme was an appropriate solution to develop and implement more efficiently quality impact insurance products through the PPPs to the vulnerable, informal sector, and low-income populations. The set of targets (key performance indicators) monitored by the project did not entail all important indicators in the results framework, in particular at the output and outcome levels. In order to mitigate this, the evaluation revised the project's logical framework (LogFrame) and prepared a reconstructed Theory of Change (TOC) for the project.

3) The project was successful in achieving most of its expected results at the activity and output level. The development intervention has built five successful public-private partnerships. It included a significant amount of technical assistance assignments, training of trainers (ToTs), training, new products, strategies and processes, changes, capacity-building activities, and knowledge products that were shared with the wider Community of Practice. This project contributed to rethinking existing systems and innovative impact insurance solutions in areas such as agricultural and health products. The project prepared the field to tackle further challenges to achieve higher outcome-level objectives with a notably stronger focus on scaling up by building the capacity of partners.

4) The project duration of three years did not allow for the intervention to achieve project results at the outcome level. To this, it is recommended to grant a project extension until June 2025 so that the outcome-level interventions will be visible, and more time will be available to roll out the training and do more on the capitalization of lessons learned and knowledge sharing. Project resources and inputs allowed to successfully achieve output related expected results. Through the PPPs, the project has prepared the ground to significantly increase the number of vulnerable populations, low-income and informal sector people accessing quality impact insurance products (like tailor-made agricultural insurance in Rwanda and health insurance in Kenya) while constantly improving services and products via an iterative approach.

5) The project is likely to remain sustainable. It can develop its durability by the strong public-private partnerships it has built. There was a strong buy-in of decision-makers, and new solutions were embedded in the partners' business models. The organizational capacity building, particularly in adopting a client-centric approach and setting up relevant digital solutions for further business development, will remain. The sustainability will depend on the partners having enough resources to dedicate to the continuity of projects and strong senior management support. At the time of the mid-term evaluation, it was too early to assess the project's impact.

6) Gender mainstreaming, non-discrimination, and equality were not sufficiently targeted during the project. ILO should target gender mainstreaming specifically and report gender-disaggregated indicators in future interventions, aligning with ILO gender policy.



## RECOMMENDATIONS, LESSONS LEARNED AND GOOD PRACTICES

<b>Main findings &amp; Conclusions</b>	<p>Based on the findings several recommendations have emanated from this project:</p> <ol style="list-style-type: none"> <li>1. The ILO should target gender mainstreaming by reporting gender-disaggregated indicators in future interventions, which should be aligned with its gender policy.</li> <li>2. The national budget should be planned well in advance and contain sufficient subsidies to contribute to the insurance holder’s premium for impact insurance.</li> <li>3. The project should be extended until June 2025 to finalize all project interventions</li> <li>4. The ILO, the fellows, and the donor AFD should improve project design, monitoring, and reporting at the programmatic level (specifically based on a clear description of donor expectations and the ILO’s standard project management good practices).</li> <li>5. Strengthening the communication between the ILO and partners is recommended for a more effective and sustainable project implementation.</li> <li>6. Private partners should consider allocating a resource to work closely with the fellow throughout the intervention to ensure smooth handover after the end of the fellowship.</li> <li>7. Involve more digital technologies in the new innovative solutions for existing and new insurance products.</li> <li>8. ILO should contribute to strengthening insurance literacy together with project’s public and private partners and other stakeholders.</li> <li>9. The project should consider introducing twinning projects between regions or countries for successful project replication and scaling up.</li> <li>10. Initiate another Phase III of this project after the project Phase II ends in June 2025.</li> </ol>
<b>Main lessons learned and good practices</b>	<p>The following lessons were learned from the implementation of the project:</p> <ol style="list-style-type: none"> <li>1. The approach to test and learn new products, processes, and partnerships is performed in the best way as a pilot project in a controlled environment.</li> <li>2 ILO administrative resources and issues (staff, financial resources, design, implementation) should be sufficiently available, especially in</li> </ol>

the project design phase.

3. Learnings on how the PPPs can be designed more effectively can be more efficiently obtained by leveraging the partnership and designing and co-creating it with the Programme Donor.

4. Evidence-based advocacy is necessary in terms of policy changes.

5. When designing an insurance product, a participatory bottom-up approach with the insurer and the insurance users should ensure product sustainability.

6. Time is needed for people to get used to buying insurance.

The following best practices were used during project implementation to date:

1. Continue the practice with pilot projects, as learning is done perfectly through a pilot.

2. Fellowship methodology is the best practice of this project, and fellows are good for accountability and strategic thinking.

3. PPPs are very instrumental in successful insurance client acquisition.

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# 1 Introduction

The International Labour Organization's (ILO's) Impact Insurance Facility commissioned an independent mid-term evaluation of its project: "Stimulating innovation and impact insurance in Africa". This mid-term evaluation was conducted by Ms. Iva Bernhardt.

Guided by the Terms of Reference (ToR), the independent evaluation work was undertaken between February and March 2024 in close coordination with ILO Impact Insurance Facility and the Evaluation Manager, Mr. Pablo Arellano, ILO Headquarters in Geneva.

The project "Stimulating innovation and impact insurance in Africa" implemented by the International Labour Organization (ILO), was funded by Agence Française de Développement (AFD) through a grant agreement with EUR 2.5 million. The International Labour Organization (ILO) formed a partnership with the AFD in 2015. From 2015 to 2019, AFD and the ILO supported seven insurers and distribution channels in sub-Saharan Africa through a systematic innovation management process to design new products, reengineer processes, create technology solutions, and structure internal units to serve the low-income market better. Together, these partners reached nearly 1 million clients during the project engagement period with new products and benefited over 12 million people with technology solutions.

The four-year project under Mid-term evaluation (MTE) is a continuation of the collaboration between ILO's Impact Insurance Facility (the Facility) and AFD in this domain. This new project had the aim of establishing and delivering risk management solutions through public-private partnerships to benefit small enterprises and low-income households. Besides testing new products, processes and business models, the project has also built the capacity of public sector agencies and private players.

The International Labour Organization (ILO) has started the implementation of the project on 1 May 2021. The results of the Mid-term Evaluation (MTE) of the project will be used for measuring its impact to date and the level of achievement of the established project objectives. This MTE has covered the period of project implementation from 1 May 2021 to 30 April 2023.

This MTE will be used to draw lessons learned and recommendations for further project implementation. The central learning agenda for the project is to gain a better understanding of how PPPs can be structured and implemented. In order to maximize the potential of risk management solutions to contribute towards social, economic and environmental development objectives such as achieving universal health coverage and promoting climate change adaptation, partnerships between the public and private sectors are essential. There is a need to better understand how projects can combine the strength of the public sector and private sector more effectively. Effective PPP models, how incentives are aligned, how partnerships can be managed were included in the learning agenda of the project.

## 1.1 Purpose of the Evaluation

The International Labour Organization (ILO) considers evaluation as an integral part of the implementation of technical cooperation activities. As per ILO evaluation policy and procedures all programmes and projects with a budget of more than USD 1 million must have an internal midterm evaluation and a final independent evaluation, which should be managed by an ILO certified evaluation manager and implemented by independent evaluators.

The evaluation intends to be used for project accountability, project improvement and institutional learning. The ILO considers that evaluation is an integral part of the implementation of development cooperation activities. The ILO applies the evaluation criteria established by the OECD / DAC Quality Standards for Development Evaluation and the UNEG Code of Conduct for Evaluation in the UN

System. This evaluation will follow guidelines on results-based evaluation of the ILO Evaluation Department (EVAL) contained in the “ILO policy guidelines for results-based evaluation (4<sup>th</sup> edition)”<sup>1</sup> and, more specifically, the checklist “CHECKLIST 4.2: PREPARING THE EVALUATION REPORT”.<sup>2</sup>

The mid-term evaluation has mostly focused on problem solving and learning. Among other points, this mid-term evaluation (MTE) has identified what worked, what did not work at output, outcome and impact levels, what is sustainable, what is the legacy of the project and what are the recommendations for the future. The evaluation criteria were analyzed at the design stages, together with any mitigation measures that eventually were taken.

The Project Logical Framework (LogFrame) was revised during this mid-term evaluation. Additionally, a Theory of Change (TOC) was reconstructed, as there was no TOC at the project design stage.

## 1.2 Scope of the Evaluation

This mid-term evaluation presents a product of analysis of the implementation of the project in its entirety up to date. It has examined the entire project intervention in two countries (Kenya and Rwanda) from 1 May 2021 to 30 April 2023. The MTE has considered all the documents linked to the design of the project. These included: the project document, periodic reports and implementation of its recommendations as well as documents produced as outputs of the project (e.g. knowledge products, policy strategies).

The evaluation has covered all activities of the following two selected partners and countries (as presented on Table 1 below) out of the five in the project scope by now:

Organization	Type of institution	Country	Matched fellow	Theme
PharmAccess Kenya	NGO	Kenya	Akinyemi Alebiosu	Health insurance (supporting national health insurance scheme)
Radiant Insurance Company	Private Insurer	Rwanda	Jackline Chemutai	Agricultural insurance

**Table 1** Two selected partners and countries in the scope of this mid-term evaluation

The set of evaluation criteria are grouped in seven categories: (A) Relevance; (B) Coherence; (C) Effectiveness, which comprises assessments of the availability of outputs, achievement of outcomes; (D) Efficiency; (E) Likelihood of impact; (E) Sustainability; and (G) Cross-Cutting Issues: Gender Mainstreaming / Consideration.

A complete list of consulted documents for this Inception Report and list of preliminary documents to be consulted for the Mid-term Evaluation Report of the “Stimulating Innovation and impact insurance in Africa” Project can be found in **Annex 2**.

A list of project stakeholders from the International Labour Organization (ILO) consulted in the Inception phase of this Mid-term Evaluation are presented in **Annex 3** of this mid-term evaluation report.

## 2 Evaluation Methods and Analytical Framework

This chapter presents a description of the proposed methodological approach containing its mid-term evaluation approach, main elements, and data collection tools, deepened into a description of the reporting and dissemination phase. It also contains the analytical framework used for this mid-term evaluation.

A preliminary review, evaluation and assessment of all the related documents as listed in **Annex 2** of this report has been undertaken during the inception phase of this Mid-term Evaluation. The documents reviewed include a wide range of documents like the original project document and its revisions, monitoring reports (such as progress and financial reports of ILO and other project implementation reports), output reports (case studies, foresight briefs, publications, action plans, sub-regional strategies, etc.) and relevant correspondence, ILO guidelines for evaluation, programmes, roadmaps, frameworks, implementation and evaluation documents as well as documents related to other climate change practices provided to the evaluator at the beginning of this assignment.

Preliminary consultations were conducted with the project management team in February 2024. Detailed individual interviews with all relevant project stakeholders were held during March 2024. A complete list of interviewees that were interviewed through virtual individual interviews and focus-group discussions is presented in **Annex 3** of this mid-term evaluation report.

Necessary strategic documents and other related material for the assessment / desk evaluation were provided by the ILO Project management team. Additional information was collected during the data collection phase of this mid-term evaluation and the field evaluation mission to the project pilot country Nepal. Key additional questions to be explored included the compilation of relevant data, budget, project logical framework (LogFrame), monitoring plans and the three additional project outputs and their activities, including analyses of relevance.

### 2.1 Mid-term Evaluation Approach and Methodology

The mid-term evaluation of the “Stimulating Innovation and impact insurance in Africa” Project was conducted in accordance with the ILO Evaluation Policy using the OECD/DAC evaluation criteria: relevance and design, coherence, effectiveness, efficiency, impact and sustainability. It was carried out as an independent in-depth evaluation using a participatory approach whereby all key parties associated with the project are kept informed and regularly consulted throughout the evaluation. The evaluator has liaised with the Evaluation Manager and the Project Manager on the conduct of the evaluation and methodological issues.

The evaluator used different methods to ensure that data gathering and analysis deliver evidence-based qualitative and quantitative information, based on diverse sources: desk studies and literature evaluation, statistical analysis, individual face-to-face interviews with representatives of International Labour Organization (ILO) project management team, the donor Agence Française de Développement (AFD); for Kenya: The Kisumu County Government Health Care, the National Hospital Insurance Fund (NHIF), and technology partner CarePay; for Rwanda: Ministry of Agriculture and Animal Resources. University of Rwanda; the two partners from the Public-Private Partnerships (PPPs): PharmAccess Kenya, Radiant Insurance Company Rwanda; and the matched fellows from these companies: Akinyemi Alebiosu for Kenya, and Jackline Chemutai for Rwanda, focus group meetings and direct observation. This approach not only enabled the evaluation to assess causality through quantitative means but also provided reasons for why certain results were achieved or not and to triangulate information for higher reliability of findings.

The evaluation was conducted primarily as a desk evaluation without an evaluation field mission as an independent exercise with oversight from the ILO, Evaluation Office in Geneva. The evaluator has developed individual interview guidelines and questionnaires. Interviews took place in form of face-to-face semi-structured individual interviews.

The methodology was based on the following:

- 1) A desk evaluation of project documents including, but not limited to:
  - The original project document, monitoring reports (such as progress and financial reports of ILO and other project implementation reports), output reports (publications, etc.) and relevant correspondence.
  - Minutes from the meetings of committees involved in the project.
  - Other project-related material produced by the project.
- 2) The evaluator used the available project logical framework (LogFrame) presented on **Annex 5**, the project time schedule and the project monitoring plan.
- 3) Interviews with project management and technical support including staff and management at International Labour Organization (ILO), the donor Agence Française de Développement (AFD); the two partners from the Public-Private Partnerships (PPPs): PharmAccess Kenya, Radiant Insurance Company for Rwanda; and the matched fellows from these companies, as shown in the Stakeholder Analysis Individual Interviews in **Annex 3**.
- 4) Interviews with project partners including Government counterparts from the for Kenya: The Kisumu County Government, the National Hospital Insurance Fund (NHIF), and technology partner CarePay; for Rwanda: Ministry of Agriculture and Animal Resources. University of Rwanda as shown in the Stakeholder Analysis Individual Interviews in **Annex 3**.
- 5) The details on the evaluation methodology used by the evaluator and the evaluation matrix is shown in **Annex 4** of this report.

**Forward-looking approach and learning:** The evaluator has adapted the Results Based Management (RBM) principles, tools and indicators (i.e. the evaluation matrix), based on the needs and context of this Evaluation, with the aim of increasing the potential for learning and focus on the achievements of the project and stimulating innovation and impact insurance in Africa. Lessons learned and recommendation for ILO, AFD, and the National Government Counterparts in Kenya, and Rwanda were one of the focuses of this mid-term evaluation. It focused on best practices, and improvement mechanisms for plans and processes that did not function well in form of lessons learned and recommendation to be used in similar ILO projects.

**Focus on results:** Expected results, key performance indicators, as well as potential risks were identified to ensure coherent and integrated results-based management to frame the mid-term evaluation.

**Participatory approach:** The evaluation process ensured a consultative and collaborative approach with the ILO project staff members, and other relevant counterparts and stakeholders who will be kept informed and regularly consulted throughout the assessment.

**Evidence-based:** The Evaluation aimed to gain insights and conclusions based on a variety of data and data collection methods, and, wherever possible, triangulating information to ensure the reliability and validity of evaluation analysis and conclusions.

Figure 1 below is a representation of the Evaluation process in ILO.



**Figure 1** Diagram representing the evaluation process in ILO

## 2.2 Mid-term Evaluation Phases

The Mid-term Evaluation process was structured in three phases: inception phase; data collection, gathering and analysing phase of information from individual interviews; and Mid-term Evaluation reporting and dissemination phase.

The most detailed phase in the evaluation was the **in-depth documentation review**. During this phase, a comprehensive desk-based document review is done. This enabled the Evaluator to reflect main issues and achievements, while looking out for unanticipated results.

Both **primary and secondary data were collected and analyzed** as part of the Mid-term Evaluation process. Secondary data will be obtained mainly from the ILO project staff, AFD, the partners, fellows, and Government Counterparts in Kenya and Rwanda, as well as other relevant counterparts. Primary data were gathered through qualitative and quantitative methods, including desk evaluations and semi-structured individual interviews and focus-group discussions. Key strategic documents for the “Stimulating Innovation and impact insurance in Africa” project were: project document including all annexes, implementation progress reports, minutes of meetings, webinars, knowledge products, evaluation and main reports done in the project implementation countries: Kenya and Rwanda, that were reviewed and desk studied during the inception phase and then further in-depth examined prior the preparation of the mid-term evaluation report.

**Key informant individual interviews:** The evaluator has conducted adapted semi-structured interviews with representatives of International Labour Organization (ILO) project management team, the donor Agence Française de Développement (AFD); for Kenya: The Kisumu County Government, the National Hospital Insurance Fund (NHIF), and technology partner CarePay; for Rwanda: Ministry of Agriculture and Animal Resources. University of Rwanda; the two partners from the Public-Private Partnerships (PPPs): PharmAccess Kenya, Radiant Insurance Company Rwanda; and the matched fellows from these companies: Akinyemi Alebiosu for Kenya, and Jackline Chemutai for Rwanda. These interviews were primarily semi-structured, based on the evaluation matrix presented in **Annex 4**, and were conducted with a wide array of project stakeholders in order to encompass a global perspective, breadth and accountability of the evaluation.

During the stage of **data analysis and triangulation of information**, the evaluator performed a comprehensive analysis of key relevant quantitative and qualitative data through the integration and comparison of findings from face-to-face and online interviews, and documentation evaluation.

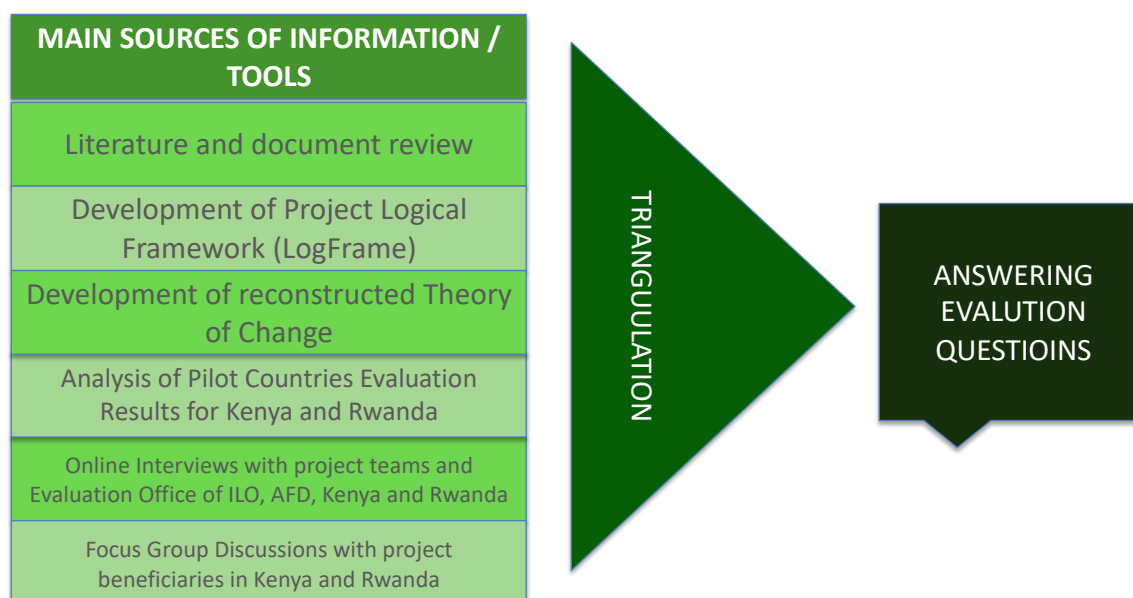
The evaluator compiled and analyzed all collected data on the “Stimulating Innovation and impact insurance in Africa” project achievements towards results, and gaps reported. Quantitative data, where applicable, were analyzed with the appropriate tools. Secondary data sources from International Labour Organization (ILO), the donor Agence Française de Développement (AFD); for



Kenya: The Kisumu County Government, the National Hospital Insurance Fund (NHIF), and technology partner CarePay; for Rwanda: Ministry of Agriculture and Animal Resources. University of Rwanda; the two partners from the Public-Private Partnerships (PPPs): PharmAccess Kenya, Radiant Insurance Company Rwanda; and the matched fellows from the projects in Kenya and Rwanda, were also applied for these analyses.

The evaluator has compiled and analysed all collected data on the Stimulating innovation and impact insurance in Africa project achievements towards results. The evaluation matrix as shown in **Annex 4** has served as a guiding framework through which the evaluator has analysed information, ensured verification of data, and formulated key findings, conclusions and recommendations, as well as lessons learned.

Evaluation analysis is valid if it derives from several sources of information. It requires cross-verification and demonstration of the evidence on which an assessment is based. As it can be seen on Figure 2, triangulation was a key factor in an evaluation to the extent that it fosters quality and soundness and ensures that the findings are supported by clear and multiple lines of evidence; it entails confirmation, enrichment and explanation, and triangulation is finally used as a tool for answering evaluation questions. Three levels of triangulation were used for this evaluation: the evaluator’s level, the methodological level, and the data level. The evaluator has applied both deductive and inductive logic for interpretive analysis of findings in relation to key evaluative criteria.



**Figure 2** Main sources of information and tools, triangulation as a tool for answering evaluation questions for the mid-term evaluation of the ILO-AFD Project: “Stimulating innovation and impact insurance in Africa”

A presentation of preliminary findings from the mid-term evaluation will be done to the ILO Evaluation Office, the Project management team and other project parties at the beginning of April 2024.

Based on these exchanges, in the report drafting and finalization stage, findings were triangulated, and conclusions and recommendations refined and agreed in the final mid-term evaluation report.

### 2.3 Analytical Framework

The analytical framework for this mid-term evaluation of the AFD-ILO project: “Stimulating Innovation and impact insurance in Africa” defined a set of key issues and criteria that frame this evaluation. The mid-term evaluation was conducted in accordance with the ILO Evaluation Policy which are in conformance with UNEG norms and UNEG standards, using the OECD/DAC evaluation criteria:

relevance and design, coherence, effectiveness, efficiency, impact and sustainability, with additional evaluation of the gender dimension. It was carried out as an independent in-depth evaluation using a participatory approach whereby all key parties associated with the project are kept informed and regularly consulted throughout the evaluation. The evaluator will liaise with the Project Manager and the Project Management Team on the conduct of the evaluation and methodological issues.

Two main analytical tools for this evaluation were: the Evaluation Matrix (EM) containing all the Evaluation Questions (EQs) presented in **Annex 4**, the Project Logical Framework (LogFrame) as shown in **Annex 5** and the Reconstructed Theory of Change (TOC) in **Annex 6** of this report.

### **Evaluation matrix**

The Evaluation Matrix (EM) has structured the evaluation process, framing the Evaluation Questions (EQs) detailed in the ToRs that the Evaluator adapted to the specific context of the project, the indicators to be set for each evaluation question, information sources and data collection methods. The evaluation matrix has been elaborated on the basis of the questions, information and structure proposed in the mid-term evaluation Terms of Reference. Therefore, it is divided into seven main sections corresponding to the following evaluation criteria: relevance, validity of project design, coherence, effectiveness, efficiency, impact and sustainability.

The evaluation matrix was designed to answer questions specific to the needs for the mid-term evaluation of this project, and the methods used to obtain the necessary evidence were mainly qualitative and inductive. Objectivity and accuracy are presumed to be achieved through the design of the right questions and through triangulation. Quantitative metrics were used where they will add value and where reliable information may not be obtained. To elaborate the Evaluation Matrix (EM) that is presented in **Annex 4**, the Evaluator first developed the Evaluation Questions (EQs) for this mid-term evaluation from the ToR and the new Project Logical Framework (LogFrame) in **Annex 5** for this mid-term project evaluation.

### **Evaluation criteria and questions (including Cross-cutting issues/ issues of special interest to the ILO)**

This mid-term evaluation was based on the following evaluation criteria: strategic relevance, coherence, validity of project design, effectiveness, efficiency, impact and sustainability. Relevant data were sex-disaggregated and the different experiences and perspectives of women and men should be considered throughout the evaluation process. The evaluation integrated gender equality and non-discrimination, international labour standards, social dialogue, and a just transition to environmental sustainability as crosscutting themes throughout its deliverables and process. These were addressed in line with EVAL Guidance Note 3.1: Integrating gender equality in monitoring and evaluation<sup>1</sup> and Guidance Note 4.5: Stakeholder engagement<sup>2</sup>.

The following questions detailed in the Evaluation Matrix in **Annex 4** were guiding and facilitating the evaluation:

- 1) **Relevance.** - The extent to which the intervention objectives and design respond to beneficiaries', global, country, and partner/institution needs, policies, and priorities, and continue to do so if circumstances change.
  1. Were the project objectives consistent with the national key partners' needs, requirements, and the country needs?
  2. How did the project contribute to the relevant International Labour Organisation Programme

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<sup>1</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746716.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746716.pdf)

<sup>2</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746724.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746724.pdf)

- & Budget Outcomes and development priorities in the countries where the project has been implemented?
3. To what extent did the project build on previous experience of the ILO in the region, and relevant experience of other local and international organizations in the region?
- 2) **Coherence.** - The compatibility of the intervention with other interventions in a country, sector or institution.
1. Was the project design adequate to meet project objectives? Do outputs causally link to the intended outcomes and objectives?
  2. To what extent was the project design adequate and effective in the coherence and complementarity between the different project components?
  3. To what extent did the project build on the comparative advantage of the ILO?
- 3) **Effectiveness.** - The extent to which the intervention achieved, or is expected to achieve, its objectives, and its results, including any differential results across groups.
1. To what extent have the project objectives been achieved?
  2. Have unexpected positive and negative results took place?
  3. What were the main internal and external factors that influenced the achievement or non-achievement of results?
- 4) **Efficiency.** - The extent to which the intervention delivers, or is likely to deliver, results in an economic and timely way.
1. Are the resources (financial, human, time) made available to the project used efficiently regarding obtained outputs?
  2. Have the project developed an M&E strategy that enhance accountability, learning and feed into management?
  3. How have the roles and responsibilities between the project and key partners regarding planning M&E of the project worked?
- 5) Orientation towards **Impact.** - The extent to which the intervention is likely to generate or is expected to generate significant positive or negative, intended or unintended, higher-level effects.
- 6) and **Sustainability.** - The extent to which the net benefits of the intervention continue or are likely to continue.
1. What can be identified as project sustainable impacts in the target groups and other actors as relevant? Are the results integrated or likely to be integrated into national institutions, target populations, and will partners be able to sustain them beyond the project (institutionalization of project components)?
  2. What measures and actions have been put in place to ensure ownership of the project's results within the selected partners and fellows?
  3. Can the project's approach or parts of it, and results be replicated or amplified by national partners or other actors considering institutional and financial dimensions.
- 7) **Cross-cutting issues.** - Gender equality and non-discrimination, international labour standards, social dialogue, and a just transition to environmental sustainability:
1. To what extent has the project identified and integrated into its actions the operational and strategic needs and priorities for men, women, and vulnerable groups, such as persons with disabilities, in the relevant sector of operation?

2. How has the project been able to meet the specific needs of men, women and vulnerable groups, such as persons with disabilities?

## 2.4 Limitations

Various risks and limitations were identified in the methodological proposal and during the inception, data collection analysis and individual interviews phases. The Evaluator, with kind support of the ILO Evaluation Office and project management team found ways how to mitigate them. In most cases, they were addressed or mitigated by triangulating information gathered from various sources to provide evidence-based conclusions pertaining to the evaluation questions.

One of the limitations was that the evaluation did not foresee an evaluation field mission. But this limitation was mitigated by performing detailed individual interviews with all relevant project stakeholders.

## 3 The Project

### 3.1 Project context

The ILO AFD project: “Stimulating innovation and impact insurance in Africa” had the aim of establishing and delivering risk management solutions through public-private partnerships to benefit small enterprises and low-income households. Besides testing new products, processes and business models, the project also builds the capacity of public sector agencies and private players.

The present project built on the success of the first collaboration between ILO and AFD. Together, AFD and the ILO have supported four to five Public-Private Partnerships (PPPs) to develop solutions that achieve social and development impact. The project promotes learnings on impact insurance, innovation and the implementation of PPPs. Lessons learned through this collaboration will be widely disseminated to highlight approaches in which better risk management solutions through PPPs can make meaningful contributions to the Sustainable Development Goals.

The project covered three possible thematic areas, as identified through initial discussions with AFD. These thematic areas were selected because they align closely with development objectives and public policy objectives of the Governments of the countries concerned, related to achieving universal health coverage, ensuring food security and promoting adaptation to the effects of climate change:

- 1) Extending existing national health schemes to unserved population segments;
- 2) Scaling up individual or meso-level agricultural insurance to enhance the resilience of small-scale farmers and promote food security in the region; and
- 3) Introducing integrated risk management solutions for small and medium enterprises through partnerships with public banks, banking associations or other partners at meso-level to promote stronger SMEs, decent work and reduce vulnerability.

### 3.2 Project implementation structure and partners

The International Labour Organization (ILO) was responsible for implementing the Project, through the delivery of the planned outputs and achievement of the expected outcomes and impact. Administrative Unit in the ILO responsible for administering the project was the Social Finance Unit, ENTERPRISES. More concrete, the Impact Insurance Facility is implementing this project.

The project has built five Public-Private Partnerships (PPPs) to develop solutions that achieve social and development impact. The project promoted learnings on impact insurance, innovation and the implementation of PPPs. Special role in the project have the fellows that are chosen and matched by ILO and AFD and sent to work at the selected private partners from the PPP to support them with project implementation. The fellows were previously being coached by the ILO Impact Insurance Facility on project implementation management and modalities sought.

Supervised by the Facility senior management, the project was administered by the Facility and managed by one technical staff. The project manager managed a pool of technical Facility experts, external consultants and fellows. Each innovation partner had one case manager appointed (usually technical staff who provides most of the technical inputs). Case managers managed fellows to make sure their work plan is aligned for the field projects to succeed. The team has gathered few times during the project to share experiences and identify best practices. AFD was involved in the most important project decisions, including partner selection, and kept up to date on project developments through semi-annual progress reports. There was also a possibility for AFD to be part of the overall steering committee for the Impact Insurance Facility.

A Project Steering Committee was not established concretely for this project. However, the Impact Insurance Facility had an overall Steering Committee.

The expected results and main activities for the “Stimulating Innovation and impact insurance in Africa” project can be seen in **Annex 5**, as part of the project logical framework (LogFrame). The LogFrame was revised during this mid-term evaluation.

### 3.3 Changes in design during implementation

The project design was based on a solid and comprehensive presentation of the baseline situation, root causes and barriers. The problem analysis was substantiated by thorough data analysis on all aspects of Stimulating innovation and impact insurance in Africa.

There was a revision of the Project Logical Framework (LogFrame) done during the inception phase of the mid-term evaluation. The evaluation also prepared a Theory of Change (TOC) for this project.

The project did not have any project revisions.

The project is a four-year project. It is planned to end its implementation in May 2025.

### 3.4 Project Logical Framework: Project outputs, outcomes and impact

The revised project logical framework (LogFrame) is shown in **Annex 5**.

The final intended **Impact (general objective)** of the project: “Stimulating Innovation and impact insurance in Africa” is to strengthen the resilience of low-to-middle income population in Africa.

The project includes two components or project outcomes:

- I. Enhanced use of Innovation management for low-income households and Small and Medium Enterprises (SMEs) through public-private partnerships; and
- II. Capacity built and knowledge developed to facilitate skill building, knowledge exchange and accelerate the evolution of markets.

The first component engaged with specific organizations and was intended to push the frontier by testing, and scaling up, new products; while the second component focuses on national, regional and global capacity development.

#### **Component/Project Outcome 1: Innovation management:**

##### **Enhanced use of Innovation management for low-income households and Small and Medium Enterprises (SMEs) through public-private partnerships.**

The first innovation component aimed to catalyze scaling of solutions for the low-income households and SMEs by selected providers. The partnership tested integrated risk management solutions in one of the three thematic areas with 4-5 innovation partners, and publicly shared the resulting lessons and experiences. The Facility supported this effort by providing technical support to assist with project management and implementation. The Facility also measured and documented the impact of the services on clients and partners, and then promoted peer learning and capacity building of other providers to promote the application of lessons learned on this project in other countries. The project expected that each partner to pilot at least two solutions during the four-year programme.

The four project's outputs under project outcome 1 were:

- 1.1. Increased resilience of informal low-income populations to shocks through better access to a range of quality risk management solutions provided through public-private partnerships;
- 1.2. Established, effective appropriate and accessible risk management options for low-income segment in countries of intervention;
- 1.3. Better equipped public and private sector actors and build their capacity to innovative and develop quality integrated risk management solutions that are offered at scales; and
- 1.4. Strengthened integration between partners that create demonstration case for the industry which contributes to a strong financial inclusion landscape, with sustainable portfolio and offering relevant range of financial services to their members.

### **Component/Project Outcome 2: Capacity and knowledge development:**

**Capacity built and knowledge developed to facilitate skill building, knowledge exchange and accelerate the evolution of markets.**

This component / project outcome focused on translating the learning from the innovation projects into training materials and knowledge products that can benefit the wider insurance to manage innovation and the related organizational changes, and that government policymakers can use to design and implement public-private partnerships to achieve policy objectives.

**1. Face-to-face trainings with local training institutes:** The Facility updated training materials with new cases and lessons from the first phase of the AFD project and any new lessons learnt from Component 1. The Facility also proposed developing a new training module for public agencies on how to establish and manage successful PPPs that includes lessons from Component 1. Facility then delivered two trainings per year (one of which will be on PPPs) in new markets through local training institutes. It was expected to deliver at least 6 Training of Trainers (TOTs) and trainings through at least three training institutes and train more than 100 professionals from at least 40 private and public agencies through this activity.

**2. Trainings in other markets for partners:** In addition to technical support, each partner had an opportunity to send up to two representatives for one training or workshop per year in another market to learn about developments in those markets. It was also possible to invite partners to participate in existing peer networks if they are not already members, such as the Joint Learning Network for Universal Health Coverage, Microinsurance Network Working Groups or a similar network for development banks.

**3. Impact Insurance Academy for policy makers:** Through this component, the project sponsored the participation of up to 20 policymakers from selected countries to attend the Academy over the three-year period. The new PPP training module will be included as an elective in the Impact Insurance Academy.

The four project's outputs under project outcome 2 were:

- 1.1. Increased capacity of public agencies to form partnerships that leverage insurance to achieve public policy objectives;
- 1.2. Established, effective institutional training of Partners (public and private) to built their capacities to keep innovating to develop more insurance and integrated risk management solutions;
- 1.3. Enhanced capacities in Sub-Saharan Africa through trainings and dissemination of knowledge from lessons learned through the innovation projects; and

#### 1.4. Strengthened and improved public-private partnerships or schemes formed by Governments using insurance to achieve public policy objectives.

This project did not include a Theory of Change (ToC) at its design phase. Therefore, the Theory of Change was reconstructed as part of this mid-term evaluation and it can be seen in **Annex 6**.

The following impact, outputs and outcomes have been identified shown in the revised Project Logical Framework (LogFrame) in **Annex 5**. The targets from the LogFrame for all the project components that have been met can be found in the text below under the Effectiveness section.

To now, the project has prepared two Progress reports, one covering the period from 1 May 2021 to 30 April 2022, and the second one covering the period from 1 May 2022 to 30 April 2023. The scope of the evaluation will include the activities reported in these two progress reports.

### 3.5 Project Stakeholders

This mid-term evaluation of the “Stimulating Innovation and impact insurance in Africa” Project is commissioned by the Evaluation Office (EO) of the International Labour Organization (ILO), which serves as the primary recipient of the evaluation. The project involved collaboration amongst several key institutions, which were the main project stakeholders and partners, including:

- 1) The International Labour Organization (ILO);
- 2) The donor Agence Française de Développement (AFD) ;
- 3) For Kenya: The Kisumu County Government, the National Hospital Insurance Fund (NHIF), and technology partner CarePay;
- 4) For Rwanda: Ministry of Agriculture and Animal Resources. University of Rwanda
- 5) For Ghana: The Ministry of Agriculture of Ghana;
- 6) For Senegal: Ministry of Agriculture and Economy and Finance of Senegal, Private insurers and reinsurers, and Private financial institutions like Agricultural Bank;
- 7) For Pula Advisors AG for the following countries Zambia, Nigeria and other countries (50% activities in Francophone countries), there are the following possible stakeholders: Multiple insurers and Ministries based on the country; and
- 8) The five partners and matched fellows from the Public-Private Partnerships (PPPs) presented in Table 2.

Organization	Type of institution	Country	Matched fellow	Theme
Ghana Agricultural Insurance Pool	Pool of insurers	Ghana	Ritesh Pandey	Agricultural insurance
PharmAccess Kenya	NGO	Kenya	Akinyemi Alebiosu	Health insurance (supporting national health insurance scheme)
Radiant Insurance Company	Private Insurer	Rwanda	Jackline Chemutai	Agricultural insurance
Pula Advisors	Insurtech	West Africa/Kenya	Djitaba Sachko-Patel	Agricultural insurance
CNAAS	Public insurer	Senegal	Aminata Wane	Agricultural insurance



**Table 2** Five partners and matched fellows from the Public-Private Partnerships (PPPs) for the ILO-AFD project: “Stimulating innovation and impact insurance in Africa”

Annex 3 provides a detailed Stakeholder Analysis. All project stakeholders were interviewed during virtual individual interviews. There will be no field evaluation mission to Kenya and Rwanda.

### 3.6 Project financing

The Project was financed by Agence Française de Développement (AFD)<sup>3</sup> through a grant agreement with EUR 2.5 million. Table 2 below depicts the breakdown of the Project budget at the time at project inception on 1 May 2021.

At the time of its inception, it was planned that the project will have four partners. Consequently, the project budget depicted in Table 2 is planned for a four-years project including four partners. In the course of project implementation, the project decided to finance five partners.

The total project budget for both components amounts to EUR 2,755,751 of which AFD’s share is EUR 2,344,721 for a four-year project with four partners. The main costs under component 1 related to technical supporting partners, hosting fellows, mentorship for the fellows, conducting research, and generating knowledge outputs.

Under component 2, the costs included the time and travel of the technical team, cost of workshop/training venues, and participation in external networks and Impact Insurance Academy. ILO charges 13% overhead to cover operating expenses and the UN has instituted a 1% levy. Upon selection, the budget was supposed to be finalized for specific countries and is subject to ILO’s internal appraisal clearance.

Cost categories	Details	Budget EUR	Share in total	AFD	Share in total AFD	Partners	ILO
<b>1. Innovation management (4 partners)</b>		<b>2,232,758</b>	<b>81.7%</b>	<b>1,944,758</b>	<b>83.8%</b>	<b>204,000</b>	<b>54,000</b>
<i>Personnel costs of technical assistance</i>	Facility technical staff, fellows, project management	1,397,025	51.1%	1,343,025	57.9%	0	54,000
<i>Direct costs</i>	Travel, innovation grants, market studies	612,000	22.4%	378,000	16.3%	204,000	0
<i>Coordination</i>	ILO overhead	223,733	8.2%	223,733	9.6%	0	0
<b>2. Capacity and knowledge development</b>		<b>499,778</b>	<b>18.3%</b>	<b>376,748</b>	<b>16.2%</b>	<b>120,600</b>	<b>2,430</b>
<i>Personnel costs of technical assistance</i>	Facility technical staff	156,735	5.7%	154,305	6.6%	0	2,430
<i>Direct costs</i>	Travel, community of practice and training venue and logistics costs, Impact Insurance Academy fees, publications print costs	299,700	11.0%	179,100	7.7%	120,600	0
<i>Coordination</i>	ILO overhead	43,343	1.6%	43,343	1.9%	0	0
<b>TOTAL</b>		<b>2,732,536</b>	<b>100%</b>	<b>2,321,506</b>	<b>100%</b>	<b>324,600</b>	<b>56,430</b>
<i>1% UN Levy</i>		23,215		23,215			
<b>TOTAL AFD contract</b>		<b>2,755,751</b>		<b>2,344,721</b>			

**Table 3** Budget summary for a four-year project<sup>4</sup>

<sup>3</sup> Agence Française de Développement (AFD)<sup>3</sup> French Development Agency

<sup>4</sup> Project Document ILO AFD II Concept Note revised from 20201008

## 4 Reconstructed Theory of Change (TOC)

TOC is a particularly important framework for assessing project performance and results-achievements during the mid-term evaluation. While it needs to maintain the elements of the original targets and intended results of the project (as the project was designed), it also needs to allow the audience to understand the flow from outputs through to project outcomes and intermediate states, to the long-term impact to which the Project aims to contribute. This chapter contains the reconstructed Theory of Change (TOC) of the ILO-AFD project: “Stimulating Innovation and impact insurance in Africa” that the evaluator has prepared for the Mid-term Evaluation of the Project based on the original project document and the original and revised project logical framework.

There was no ToC for this project. A preliminary analysis of the project design, the documents for project revision and initial interviews informed the reconstructed ToC, presented on **Annex 6**.

The desired impact of this project was to strengthen the resilience of low-to-middle income population in Africa by stimulating innovation and impact insurance.

To realize the desired impact, the project’s end goal was to design and deliver risk management solutions through public- private partnerships to benefit small enterprises and low-income households. Besides testing new products, processes and business models, the project also builds the capacity of public sector agencies and private players.

The project partners AFD and the ILO aimed to establish five public-private partnerships (PPPs) to develop solutions that achieve social and development impact. The project promoted learnings on impact insurance, innovation and the implementation of PPPs. The project idea is to discover different models of PPPs. Furthermore, the PPP models’ functioning were improved in order to strengthen the country’s resilience. Lessons learned through this collaboration were widely disseminated to highlight approaches in which better risk management solutions through PPPs can make meaningful contributions to the Sustainable Development Goals.

A central learning agenda for the project was to gain a better understanding of how PPPs can be structured and implemented. In order to maximize the potential of risk management solutions to contribute towards social, economic and environmental development objectives such as achieving universal health coverage and promoting climate change adaption, partnerships between the public and private sectors are essential. There was a need to better understand how projects can combine the strength of the public sector and private sector more effectively. Effective PPP models, how incentives are aligned, how partnerships can be managed were included in the learning agenda of the project.

### **Major causal pathways underlying the reconstructed Theory of Change are described below.**

This project addressed strengthening of the capacity of countries and their innovation and insurance services and authorities. The final intended project impact is the “Strengthen the resilience of low-to-middle income population in Africa by stimulating innovation and impact insurance”.

To achieve this overall impact to strengthen the resilience of low-to-middle income population in Africa by stimulating innovation and impact insurance, the specific two outcomes of the project were:

- 1) “Enhanced use of Innovation management for low-income households and Small and Medium Enterprises (SMEs) through public-private partnerships”; and
- 2) “Capacity built and knowledge developed to facilitate skill building, knowledge exchange and accelerate the evolution of markets”.

The East African Countries: Kenya and Rwanda, as well as other Sub-Saharan African countries could reach the project impact if they pass the intermediate stages of establishing an effective institutional framework for stimulating innovation and impact insurance.

A number of factors are identified as **Drivers**<sup>5</sup> that the project aims to enhance to increase the likelihood of achieving the intended outcome:

- 1) Participatory and multi-stakeholder processes increase national and local ownership and support to stimulate innovation and establish and enhance impact insurance in Africa.
- 2) New innovative solutions and impact insurance products are replicated by other private or public players in form of a Public-Private Partnership (PPP)
- 3) Political will and support will in order to establish an effective institutional framework for stimulating innovation and new insurance solutions in Africa.

To contribute to the achievement of the above-mentioned outcome of enhanced use of Innovation management for low-income households and Small and Medium Enterprises (SMEs) through public-private partnerships, the original project document identified four outputs. The activities outlined in the project logical framework presented in Annex 6 aim to contribute to the following **four project's outputs under project outcome 1**:

- 1.1. Increased resilience of informal low-income populations to shocks through better access to a range of quality risk management solutions provided through public-private partnerships;
- 1.2. Established, effective appropriate and accessible risk management options for low-income segment in countries of intervention;
- 1.3. Better equipped public and private sector actors and build their capacity to innovative and develop quality integrated risk management solutions that are offered at scales; and
- 1.4. Strengthened integration between partners that create demonstration case for the industry which contributes to a strong financial inclusion landscape, with sustainable portfolio and offering relevant range of financial services to their members.

The achievement of the second project outcome of built capacity and developed knowledge to facilitate skill building, knowledge exchange and accelerate the evolution of markets, the original project document identified four outputs. The activities outlined in the project logical framework presented in **Annex 5** aim to contribute to the subsequent **four project's outputs under project outcome 2**:

- 1.1. Increased capacity of public agencies to form partnerships that leverage insurance to achieve public policy objectives;
- 1.2. Established, effective institutional training of Partners (public and private) to built their capacities to keep innovating to develop more insurance and integrated risk management solutions;
- 1.3. Enhanced capacities in Sub-Saharan Africa through trainings and dissemination of knowledge from lessons learned through the innovation projects; and
- 1.4. Strengthened and improved public-private partnerships or schemes formed by Governments using insurance to achieve public policy objectives.

The project was premising on the following **assumptions**<sup>6</sup> to create an enabling environment for achieving planned results:

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<sup>5</sup>Driver refers to a significant external factor that, if present, is expected to contribute to the realization of the intended results of a project. Drivers can be influenced by the project and its partners

<sup>6</sup> Assumption refers to a significant external factor or condition that needs to be present for the realization of the intended results but is beyond the influence of the project and its partners. Assumptions are often positively

1. The political and economic situation enables conducive environment to strengthen the resilience of low-to-middle income population in Africa through stimulating innovation and new innovative impact insurance solutions.
2. There will be enough interested private partners from SMEs, health and / or agriculture insurance to work as partners on this project.
3. There will be enough interested partner individuals attending workshops in new markets and networks.
4. New insurance products and operational solutions will be invented.
5. Half of the new insurance products and operational solutions will be scaled up.
6. There will be sufficient interested men and women in new insurance products and operational solutions.
7. There will be enough lessons learned from the partners in order to be able to publish new knowledge products (papers, webinars, case briefs etc.).
8. There will be sufficient number of best-practices and new know-how generated by the project.
9. There will be certain number of public actors interested in training in insurance offerings
10. There will be interest of public actors to improve insurance offers.
11. New fellows with willingness to develop their skills will be found.
12. There will be enough interested private or public players to implement new solutions.
13. New training of PPPs with lessons from the new project will be developed.
14. There will be certain number of trained participants that have improved or launched insurance products.
15. The political will and politics towards insurance remains stable allowing insurance topics to be strengthened.
16. Government and other relevant stakeholders are found and willing to attend Impact Insurance Academy or participate in local trainings.
17. Number of public agencies willing to implement new approaches to designing PPPs will be found.
18. Sufficient organizations will be found and willing to implement changes based on learnings shared by partners.
19. New champions in government agencies are ready to act on project lessons to improve their social protection solutions, nurture PPPs or design new policies enabling environment.

## 5 Evaluation Findings / Project assessment

### 5.1 Strategic relevance

The assessment of project relevance takes into consideration the project's contribution to the achievement of national objectives regarding innovation management and impact insurance and their obligation within the SDGs in the pilot countries for this mid-term evaluation Rwanda and Kenya. Furthermore, consideration was taken of the strategic priorities of the AFD's micro-financing and insurance policies and the project's relevance to ILO's mandate.

#### 5.1.1 Alignment to ILO's P&B and strategic priorities

Overall, the project is highly relevant with International Labour Organization's (ILO's) mandate, and its programme and budget outcomes and strategic priorities.

The project is fully in line with ILO's mandate and core competencies and can benefit from ILO's comparative advantage as AFD's Implementing Agency in the impact insurance domain, as well as with ILO's work in Rwanda and Kenya.

At the time of project design, the Stimulating innovation and impact insurance in Africa Project has contributed to key commitments outlined in ILO's Programme and Budget (P&B) for the Biennium 2020-2021 and P&B for the Biennium 2022-2023. The project contributed to ILO's P&B biennial outcomes 3, 4 and 6 for both 2020-2021 and 2022-2023.

For P&B outcome 3: Economic, social and environmental transitions for full, productive and freely chosen employment and decent work for all, the project contributed to Output 3.2. Increased capacity of Member States to formulate and implement policies and strategies for creating decent work in the rural economy by: a) improving relevant legal and institutional frameworks, particularly for sectoral social dialogue in the rural economy, based on relevant sectoral standards and tools, including through strengthening capacity of government agencies as well as sectoral and rural workers' and employers' organizations; and b) implementing targeted interventions to promote inclusive productive transformation and decent work and enhance productivity in rural economy sectors, including employment-intensive investment programmes. The project was also aligned with the Output 3.3. Increased capacity of Member States to formulate and implement policies for a just transition towards environmentally sustainable economies and societies by formulating and implementing evidence-based and coherent policy frameworks and programmes for a just transition towards environmentally sustainable economies and societies at the national, sectoral or local levels, including indigenous communities, through a new Just Transition Innovation facility serving as a mechanism to support policy innovation.

For P&B outcome 4: Sustainable enterprises as generators of employment and promoters of innovation and decent work, the project contributed particularly to Output 4.1. Increased capacity of Member States to create an enabling environment for entrepreneurship and sustainable enterprises by supporting national efforts to ensure enterprises' access to knowledge, financial services, domestic and global markets and opportunities for innovation; and providing recommendations on policies that can facilitate access of enterprises to appropriate financial services. It contributed to Output 4.2. Strengthened capacity of enterprises and their support systems to enhance productivity and sustainability by working with national and subnational bodies and institutions that play a key role in the enterprise and entrepreneurship ecosystems, in order to improve business resilience, job retention, productivity and working conditions; and improving access of businesses to relevant financial services and increasing their capacity to update skills, improve working conditions, scale up innovations, adopt more environmentally friendly technologies and more energy- and resource efficient practices, and generate productive employment and decent work. Further it was in line with

Output 4.3. Increased capacity of Member States to develop policies, legislation and other measures that are specifically aimed at facilitating the transition of enterprises to formality through developing or revising strategies, policies, legislation, government support programmes or other measures to foster the transition of economic units and workers to the formal economy; and supporting informal entrepreneurs to organize themselves in cooperatives or other social and solidarity economy units to increase their scale of production and to improve returns on their activities, facilitating transition to the formal economy and strengthening resilience.

For P&B outcome 6: Gender equality and equal opportunities and treatment in the world of work by Inclusive policies and targeted measures for disadvantaged groups have emerged as essential to ensuring an equitable recovery that is gender responsive and tackles discrimination. Policy choices must be based on assessments that address persistent challenges to equal opportunities and treatment for women and groups in situations of vulnerability, including persons with disabilities, indigenous and tribal peoples, ethnic or racial minorities, persons living with HIV, migrant workers and LGBTI+ people.

Furthermore, the project was relevant to the Decent Work for Africa and project countries Decent Work Country Programmes (DWCPs). While the project did not intend to contribute to Decent Work for Africa and project countries' DWCPs, the project contributed to DWCPs to a limited extent based on its development objective and expected impact, explicitly: "More low-income households have better employment resulting from improved productive decisions and enhanced protection that are enabled by quality insurance products offered by microfinance institutions (MFIs) and other intermediaries." The project ultimate beneficiaries are low-income households whose breadwinner mainly works in the informal sector in Sub-Saharan Africa who are intended to have better access to impact microinsurance products as health and agricultural insurance. By increasing the resilience of 66,351<sup>7</sup> vulnerable households (252,134 new clients of health insurance in Kisumu County reached) to shocks through better access to a range of quality health insurance products distributed by project partners, the project was aligned with countries' strategies related to poverty alleviation, managing agriculture, health and small business- related risks that could push people into extreme poverty.

Enterprises are the main engine of job creation and the source of almost nine of every ten formal jobs in the world. Nearly all ILO Decent Work Country Work Programs (DWCP) refer to sustainable enterprise development including all three dimensions of sustainability (financial, social, and environmental). There is a high demand from member countries for support in this area, as evidenced by the many countries that identify "sustainable enterprise development" as one of their top three priorities. Additionally, insurance can improve productivity in small and medium enterprises through insuring productive assets, working capital, and life and health of employees.

### 5.1.2 Alignment to Donor / Partner strategic priorities

The Stimulating innovation and impact insurance in Africa Project is highly relevant to the Agence Française de Développement's (AFD's) strategic priorities.

The project is fully in line with the Donor's – Agence Française de Développement's (AFD's) strategic priorities in the field of Stimulating innovation and impact insurance in Africa, as it is the part of AFD's strategy to stimulate innovation and impact insurance. AFD has allocated a €10 million guarantee to the foundation to support microfinance institutions in Sub-Saharan Africa during the Covid-19 crisis in late 2020<sup>8</sup>.

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<sup>7</sup> Each household has 3.8 people, which means that there was a total of 252,134 new clients of health insurance in Kisumu county.

<sup>8</sup> <https://www.afd.fr/en/actualites/communique-de-presse/afd-group-and-ilo-join-hands-provide-access-inclusive-insurance-most-vulnerable>

AFD, as a group, is working with the public sector, the private sector, and the technical operator expertise in France. Therefore, the main implementation mechanism of using public-private partnerships (PPPs) in this project is the preferred way to stimulate innovation and increase the ratio of impact insurance in Sub-Saharan Africa.

AFD has three main pillars of work, to which this project directly contributes:

- 1) Inclusion - access to financial services - all levels: policy, government, operators, regulators, NGOs, technical partners;
- 2) Transition - supporting system to assure climate finance; and
- 3) Consolidation of financial systems.

The Group AFD puts accent on the inclusion aspect, but also the transition phase to support and protect beneficiaries. AFD was financing many pilots on impact insurance between 2015 and 2020. The project work by using pilots to create innovations and test these innovations. Finally, AFD is interested on how to scale up the pilots and have more impact on the ground by building up sustainable public policies for the insurance market.

### **5.1.3 Relevance to global, regional, sub-regional, and national priorities**

Overall, the Stimulating innovation and impact insurance in Africa project is highly relevant with the national development, insurance, health priorities and strategies of the Governments of the pilot countries Rwanda and Kenya, as well to the regional and sub-regional insurance and financial priorities.

The Stimulating innovation and impact insurance in Africa Project has contributed for the pilot countries Rwanda and Kenya to reduce risks from the shocks and stresses associated with climate change in agriculture and health insurance coverage inequalities of vulnerable populations by conducting targeted activities at the national and county levels. This is in line with global sustainable development agendas and local and national priorities, as articulated in 1) the SDGs, 2) local and national sustainable development policies and strategies in the pilot countries Rwanda and Kenya, 3) the donor's AFD strategic priorities and objectives and 4) ILO's mandate, its P&B outcomes and strategic priorities. Overall, the project is highly relevant.

The Stimulating innovation and impact insurance in Africa project has helped the pilot countries Rwanda and Kenya to reduce risks from the shocks and stresses associated with climate change and health insurance coverage inequalities of vulnerable populations by conducting targeted activities at the national and county levels.

This project supported the achievement of the 2030 Agenda for Sustainable Development. The project's comprehensive and interdisciplinary approach to human security provides it with a broad scope to address a range of cross-cutting threats ranging from food, health and livelihood security to disaster preparedness and promoting peacebuilding efforts. This enabled the project to target the achievement of a number of the Sustainable Development Goals based on specific local contexts and priorities including the Sustainable Development Goal (SDG) 8: "Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all". All project interventions were aligned with decent work and economic growth-related goals.

The project is fully aligned with its project objectives and interventions to the relevant SDGs targets and indicators. The project objectives and intervention were notably aligned with the following SDG Targets, and in particular with SDG 8.10:

- 1) SDG 8.3. "Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the

formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services”.

- 2) SDG 8.10. "Strengthen the capacity of domestic financial institutions to encourage and expand access to banking, insurance and financial services for all." (Financial inclusion)
- 3) Project interventions in Rwanda were aligned with the following SDGs on Climate action and Food security on agricultural insurance depending on climate change. Through SDG 2.3.: "By 2030, double the agricultural productivity and incomes of small-scale food producers, in particular women, indigenous peoples, family farmers, pastoralists and fishers, including through secure and equal access to land, other productive resources and inputs, knowledge, financial services, markets and opportunities for value addition and non-farm employment". Furthermore, there was an alignment to SDG 13.1.: "Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries".
- 4) Project intervention on health insurance in Kenya was aligned with SDG Target 3.8: "Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all".

The project was aligned to national priorities in project countries. It did not intend to contribute directly to national priorities. However, it contributed to a limited extent to financial inclusion, poverty alleviation, better social protection in the form of health insurance coverage, and agriculture extension, which are priorities in the countries where the pilot projects operated. The objective of this regional project was primarily to create sustainable Public-Private-Partnerships (PPPs) made institutions such as ministries, insurers and intermediaries who develop valuable solutions for low-income and emerging consumers.

In Kenya, the project was notably aligned with the National Health Insurance Fund (NHIF). NHIF is a State Corporation established under the NHIF Act No 9 of 1998. It was established in 1966, over 50 years ago as a department of the Ministry of Health providing a contributory health insurance. NHIF works secure financial risk protection against the cost of health care services for all Kenyans through pooling of resources. Contributions are from formal, informal and sponsored program sector members. The pilot project Marwa in Kenya is a collaboration between Kisumu County Government Health Care in Kenya and PharmAccess Kenya for "Marwa" for extending social health insurance in Kisumu County as an effort towards Universal Health Coverage (UHC) under the NHIF.

In Rwanda, the project was aligned to the National Agriculture Insurance Scheme (NAIS) launched in April 2019 by the Ministry of Agriculture and Animal Resources (MINAGRI) under the title "Tekana Urishingiwe Muhinzi Mworozu" ("Smallholder farmer, feel safe, you are insured").<sup>9</sup> By working with Rwanda's premier private insurance companies, the NAIS is developing financially viable insurance products coupled with a 40% subsidy from MINAGRI to manage risks and losses in crops and livestock by the insurant (policy holder). Rwanda's fourth Strategic Plan for Agriculture Transformation (PSTA 4), which began in 2018 and continues to 2024, has prioritized a number of risk mitigation investments such as infrastructure development, technological innovation, and improved management of land, soils, and water. PSTA 4 also prioritizes innovation in financial services as a strategy for risk mitigation aimed at farmers and other value chain actors in the agriculture sector. Agricultural insurance is rapidly emerging as a critical strategy to complement the PSTA four investments in infrastructure, technology, and natural resource management.

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<sup>9</sup> <https://rwanda.ifpri.info/2022/10/24/agricultural-insurance-in-rwanda-principles-products-and-practices-to-inform-the-national-agriculture-insurance-scheme-nais/#:~:text=The%20Ministry%20of%20Agriculture%20and,insurance%20companies%2C%20the%20NAIS%20is>



## 5.2 Validity of Project Design

The validity of project design was not satisfactory at project design phase, as there was not a solid consistency between the description of the project and what was included in the project LogFrame. This did not display a full understanding between outputs and outcomes, which culminated in preparing a revised project logical framework as a product of this mid-term evaluation, which displayed a full understanding between outputs and outcomes and is based on a solid and comprehensive presentation of the baseline situation, root causes and barriers.

The assessment of project design assesses the project's adequateness to thematically focused development objectives set by the AFD and ILO, the attainment of which can be determined by a set of verifiable indicators. The project was prepared in a participatory manner, with the contributions of national stakeholders and target beneficiaries. The design followed the requirement to formulate the project based on a logical framework approach.

The Project document was prepared based on results of various research and studies, and diverse stakeholders were actively involved in the project design. The project was very innovative and there are no other similar initiatives or projects globally where the nexus between Stimulating innovation and impact insurance in Africa is showcased as it was here, by building innovative solutions of public-private-partnerships (PPPs) between the Governments and the insurers that are partners of ILO, the fellows, as well as trust, security and social cohesion between the farmers and the vulnerable populations in the respective pilot countries Rwanda and Kenya.

The intervention was overall an appropriate solution to the development problem at hand. Providing capacity building, notably resources through the Fellowship programme was an appropriate solution and good model for partner organizations to improve systems, processes and to develop quality microinsurance products, and to track their progress and results. The intervention allowed to stimulate innovation through technical assistance to promote quality through the innovative impact insurance products.

The Project was identified and prepared through cooperation with diverse stakeholders. There was no Theory of Change (TOC) developed for this project at design phase, therefore the evaluator prepared a reconstructed TOC in the inception phase of the mid-term evaluation that can be found in **Annex 6**.

The ILO approach of the Impact Insurance Facility projects focuses not only on technical improvement and implementation of demonstration projects or tools but also on improvement in policy, management, investment strategy, operations, and financing. The overall project design is relevant, with strong participation of various stakeholders in project identification.

The original LogFrame at project design phase, with its outcomes and outputs, and target indicators, was not always developed and adequately measured with SMART (Specific, Measurable, Achievable, Relevant, and Time-bound) indicators. SMART indicators allow for proper adaptive management and monitoring of project results. Therefore, during the inception phase of the mid-term evaluation, the evaluation prepared a revised project logical framework (LogFrame) that is shown in **Annex 5**, containing SMART indicators.

In total, the project design was based on a solid and comprehensive presentation of the baseline situation, root causes, and barriers. The problem analysis was substantiated by thorough data analysis on all aspects of Stimulating innovation and impact insurance in Africa. The first project progress report proposed the project's promotion and scaling-up strategy.

The analysis shows three main weaknesses of the project design:

- i. There was no monitoring framework and no budget was allocated for M&E activities.
- ii. The project did not define a strategy related to gender and discrimination issues. Based on desk review and interviews, the project did not have any particular concerns about these

matters.

- iii. The project document lacked a proper assessment of stakeholders' capacity to implement the project's activities.

### 5.2.1 Project Logical Framework (LogFrame)

According to the ILO's project management cycle and principles and quality criteria for programme and project design including equity, participation and empowerment, the new revised LogFrame shows details of the Project's objectives, intervention logic, the objectively verifiable indicators, results achieved, sources of verification and assumptions/risks for each of the project activities, for the project outcomes and overall project impact.

At the project design phase, there was not a solid consistency between the project description and what was included in the project LogFrame in terms of impact, outcomes, and outputs. This did not display a full understanding of outputs and outcomes, which culminated in a revised project logical framework that was produced as part of this mid-term evaluation, as can be seen in **Annex 5**.

## 5.3 Project coherence

It was difficult to evaluate the project coherence, as there were no similar initiatives in innovation management and impact insurance development on a county or national scale. However, the complementarity with other relevant existing interventions and the internal coherence on the donor, implementation agency, and country levels are satisfactory.

The assessment of project coherence and flexibility of operations/interventions takes into consideration to what extent the "Stimulating Innovation and Impact Insurance in Africa" project's interventions captured perspectives that were not covered previously in the Stimulating Innovation and Impact Insurance in the African Countries: Kenya and Rwanda. This included partnerships and linkages and understanding interventions within broader systems.

### 5.3.1 Complementarity with relevant existing interventions/Coherence

The nexus theme of Stimulating innovation and impact insurance in Africa, especially the concept of introducing innovative insurance products through building private-public-partnerships (PPPs) is very new.

Agence Française de Développement (AFD) has established solid internal coherence with a close collaboration of the headquarters in Paris with the country offices of AFD in Kenya and Rwanda, as well as Senegal, Ghana and other pilot project countries. The county AFD offices have built a close collaboration between the Country's ministries and the ILO's private partners from the PPPs.

On a national level, in Kenya there is a good collaboration between this project and other projects and initiatives, as John Martin's Foundation, and especially with CIHEB. The Center for International Health, Education, and Biosecurity—Kenya (Ciheb-Kenya) is a locally registered non-governmental organization whose mission is to improve the human condition, safeguard communities against health-related threats, and promote health equity in Kenya and globally. Ciheb-Kenya collaborates with national and county governments and with communities in Kenya to enhance public health programs by strengthening health systems.

The project mainly complemented and fitted to another similar intervention funded by Financial Sector Deepening Africa (FSDA). FSD Africa is part of a family of ten financial sector deepening projects, or FSD programmes, operating across sub-Saharan Africa, known as the FSD Network. The

FSDA aims to reduce poverty across Sub-Saharan Africa by building financial markets that are efficient, robust, and inclusive. The FSD Africa and ILO Impact Insurance Facility “Change Management to Achieve Impact with Insurance” project was conducted in the past.

More collaboration can be fostered between ILO’s Impact Insurance Facility and other ILO departments in order to share good practices, especially the design thinking. Further collaboration can be developed between ILO and other UN specialized organizations, non-governmental organizations and government entities to strengthen the intervention’s impact at country and international levels. ILO’s Impact Insurance Facility could enhance effectiveness, efficiency and sustainability by informing key organizations in the different countries, starting by ILO offices, on their activities and defining possible collaboration at an early stage of interventions. Furthermore, all country interventions need to be aligned and integrated into the United Nations Development Assistance Framework to be taken into consideration by governments in project countries in order to reach full external coherence of development interventions.

At the general level, UN Member States have signalled a strong commitment to sustainable development with the adoption of the Sustainable Development Goals (SDGs). This project used South-South cooperation as the core delivery mechanism. The knowledge-sharing component of this project constituted another major area of South-South cooperation on Stimulating innovation and impact insurance in Africa.

#### 5.4 Intervention Progress and Effectiveness

The Availability of Project Outputs and Achievement of Direct Outcomes at mid-term of project implementation for the evaluated pilot projects are meeting their expectations. Overall, the eight project outputs of the two project outcomes were achieved to a satisfactory extent. The pilot projects managed to deliver their outputs to date with good quality. The foundational knowledge for Stimulating innovation and impact insurance in Africa, both in capacity within partners and through the publication of various high-quality products, is useful for the pilot project countries Rwanda and Kenya where strong resilience to climate change in agriculture and to health challenges, protection of their income from agriculture, protection of health, and social cohesion between vulnerable population and informal sector population were built. Moreover, they can also be replicated for all countries that do not have universal health coverage and agricultural insurance models worldwide.

Achievement of Direct Outcomes is satisfactory, as the project is progressing well to enhance the use of Innovation Management for low-income households and Small and Medium Enterprises (SMEs) through building five successful public-private partnerships between Governments and insurers throughout Africa. Additionally, the project is working towards capacity building and knowledge development to facilitate skill building, knowledge exchange and accelerate the evolution of markets, especially in the health and agricultural insurance markets.

Project effectiveness assesses to what extent the intervention’s immediate objectives were achieved, or are expected to be achieved, taking into account their relative importance.

This section focuses on the Project’s effectiveness within the evaluation scope, until the mid-course of project implementation. This means, the extent to which the Project has achieved its results to date in terms of stated outputs, short- to medium-term outcomes, and progress toward longer-term impact including global innovation, micro-financing and insurance benefits and replication effects. Furthermore, this chapter contains the targets and the results achieved to date by the chosen pilot projects in Rwanda and Kenya. Other elements that contribute to the effectiveness of programmes, including the implementation approach, are included in later sections on project co-ordination and management of this Mid-term Evaluation Report.

#### 5.4.1 Availability of Outputs and Achievement of Direct Outcomes

The pilot projects managed to deliver their outputs to date with good quality. The foundational knowledge for Stimulating innovation and impact insurance in Africa, both in capacity within partners and through the publication of various high-quality products, is useful for the pilot project countries Rwanda and Kenya where strong resilience to climate change in agriculture and to health challenges, protection of their income from agriculture, protection of health, and social cohesion between vulnerable populations were built. Moreover, they can also be replicated for all countries that do not have universal health coverage and agricultural insurance models worldwide.

Generally, the project, and particularly the ILO pilot projects in Rwanda and Kenya are on the way to achieve the expected outputs and the higher-level outcomes. The main achievements on outcome and output level by the Project are discussed in detail below.

The achievement of the project's outcomes was evaluated based on the reconstructed TOC's causal pathways between outputs and outcomes as part of the Reconstructed Theory of Change for the at Mid-term Evaluation shown in **Annex 6**, and the key evaluation questions as they can be found in the Evaluation Matrix in **Annex 4**. The achievement of project outcomes is difficult to evaluate at this mid-term project implementation stage.

**The first project Outcome** engaged with specific organizations and was intended to push the frontier by testing, and scaling up, new products; while the second component focuses on national, regional and global capacity development.

##### **Component/Project Outcome 1: Innovation management:**

##### **"Enhanced use of Innovation management for low-income households and Small and Medium Enterprises (SMEs) through public-private partnerships".**

The first innovation component aimed to catalyze the scaling of solutions for low-income households and SMEs by selected providers. The partnership tested integrated risk management solutions in one of the three thematic areas with 5 innovation partners and publicly shared the resulting lessons and experiences. The Facility supported this effort by providing technical support to assist with project management and implementation. The Facility also measured and documented the impact of the services on clients and partners, and then promoted peer learning and capacity building of other providers to promote the application of lessons learned on this project in other countries. The project expected each partner to pilot at least two solutions during the four-year programme.

The three thematic areas that were the focus of the partnerships were selected because they aligned closely with development objectives and public policy objectives related to achieving universal health coverage, ensuring food security and promoting adaptation to the effects of climate change:

- Extending existing national health schemes to unserved population segments.
- Scaling up individual or meso-level agricultural insurance to enhance the resilience of small-scale farmers and promote food security in the region.
- Introducing integrated risk management solutions for small and medium enterprises through partnerships with public banks, banking associations, or other partners at the micro level to promote stronger SMEs, decent work, and reduced vulnerability. While we do not have any direct SME partner, many SMEs are clients of insurers working within the agriculture space, and we can gather some lessons in serving the needs of these small businesses.

The four project's outputs under project outcome 1 were:

##### **1.1. Increased resilience of informal low-income populations to shocks through better**

**access to a range of quality risk management solutions provided through public-private partnerships.**

- 1.2. Established, effective appropriate and accessible risk management options for low-income segment in countries of intervention.**
- 1.3. Better equipped public and private sector actors and build their capacity to innovative and develop quality integrated risk management solutions that are offered at scales.**
- 1.4. Strengthened integration between partners that create demonstration case for the industry which contributes to a strong financial inclusion landscape, with sustainable portfolio and offering relevant range of financial services to their members.**

At project implementation beginning, it was planned to build four Private-Public Partnerships (PPPs). However, during implementation, it was decided to add on one more partnership presented in Table 2, Chapter 3.5. Project Stakeholders. For the purpose of this mid-term evaluation, it was decided to have a detailed analysis on two PPPs: 1. Kenya: Health Insurance, a PPP between the County Government of Kisumu Health Care and Pharm Access Kenya, and 2. Rwanda: Agricultural Insurance, a PPP between the Ministry of Agriculture and Animal Resources (MINAGRI) and insurer Radiant Yacu Insurance Company.

On whole project level, the outcome 1 and outputs results are presented on Table 4. The first community of practice meeting was held with the International Inclusive Insurance Conference in Ghana in October 2023, where all the project stakeholders, including representatives from ILO, AFD, the partners PharmAccess Kenya, Radiant Yacu Insurance Group Rwanda, Ghana Agricultural Insurance Pool, Pula Insurance West Africa/Kenya and CNAAS Senegal, all fellows, Government representatives from the pilot implementation countries and others were present.

The number of low-income people enrolled to new solutions (new clients or existing clients) plus Number of low-income people enrolled to redesigned existing solutions (new clients) reached 267,134 people (project end target is 800,000). This number includes the results from Pula's redesigned solutions in Senegal, Cote d'Ivoire and Uganda, which will be updated as products get launched in the market. It also includes the results by end of March 2024 for the health insurance Kenyan project - 252,134 persons from vulnerable population and informal sector household members from Kisumu County, Kenya.

KPIs	Targets	Results	Comments
		By April 30, 2023	
<b>Innovation management</b>			
Solutions designed	8-10	12	PharmAccess: 1 GAIP- solutions related more towards institutional restructuring Pula: 9 Radiant: 1 CNAAS: 1
Solutions tested		6	PharmAccess: 1 GAIP Pula: 4 Radiant CNAAS: 1
Solutions scaled-up		4	PharmAccess GAIP Pula 4 Radiant CNAAS
Number of low-income people enrolled to new solutions (new clients or existing clients) * + Number of low-income people enrolled to redesigned existing solutions (new clients)	800,000	267,134	Pula's redesigned solutions in Senegal, Cote d'Ivoire and Uganda. These will be updated as products get launched in the market. Will share more during the ICII 2023 in Ghana. Figure including 252,134 persons from vulnerable population and informal sector household members from Kisumu County, Kenya.
Number of women enrolled			We will request disaggregated data from partners.
Number of other practitioners with improved practice	30		
New solutions replicated by other private or public players	5		
Number of peer learning activities with the project community (community of practice)		4 (Fellows Knowledge sharing sessions) +2 (Capacity building workshops with partners' teams)	

**Table 4** Total project level results from outcome 1 and the four outputs<sup>10</sup>

The pilot project in Kenya is the Marwa initiative, that has built a PPP between the Kisumu County government Health Care and PharmAccess Foundation, and is an outcome of an MoU between them. The Kisumu County Government asked the Pharm Access Foundation for support with technical assistance to help set up the health insurance scheme. "Marwa is the Luo word for "ours", is the name of the Kisumu Solidarity Health Insurance Scheme. Marwa is a digitally enabled health insurance scheme under the umbrella of the Universal Health Coverage (UHC), designed to ensure that the most vulnerable and the non-poor informal sector populations of Kisumu County also have access to affordable and quality healthcare services, whenever they need it, and without suffering financial hardship. Underwritten by the National Hospital Insurance Fund (NHIF), Marwa contributes to UHC by identifying those who can pay and ensuring that they contribute, while subsidizing those who cannot. In parallel, Marwa also helps clinics improve their quality. Marwa has four elements:

- 1) Digitally registering and co-funding health insurance premiums for the most vulnerable households in Kisumu, where the costs of the whole premium are carried by the Kisumu County Government.

<sup>10</sup> ILO Second Progress Report for May 1, 2022 to April 30, 2023, 30 June 2023

- 2) Registering non-poor informal sector workers and others with the ability to pay. The health insurance premium costs KSH 500 per household, where the Kisumu County Government gives a subsidy of the costs of the premium of KSH 200, and the rest KSH 300 are paid by the insurer themselves.
- 3) Deployment of the SafeCare digital assessment tool to enhance the quality of healthcare.
- 4) Digital dashboards to increase transparency, create efficiency and share data to improve institutional decision-making.

The results of the Kenyan pilot project from outcome 1 and its four project outputs can be seen on Table 5. By increasing the resilience of 66,351<sup>11</sup> vulnerable households (252,134 new clients of health insurance in Kisumu county reached) to shocks through better access to a range of quality health insurance products. They were distributed by project partners. The project was aligned with countries' strategies related to poverty alleviation by managing health risks that could push people into extreme poverty through introducing Universal Health Coverage (UHC) that protects the population. More information on the Kisumu County Health Insurance project can be found on the project website: <https://kisumuhealthcover.ke/> .

<b>Marwa Results Outcome 1</b>		
Number of Vulnerable Households Reached	65,973	
Number of Informal Sector Households Reached	378	
<b>Total Number of Households Reached with Health Insurance coverage</b>	<b>66,351</b>	<b>3.8</b>
<b>Total Number of People within Households Reached with Health Insurance coverage (3.8 people per household)</b>	<b>252,134</b>	
Number of Workshops/ Training Organised	22	
Number of Lessons/ Cases Documented	3	
<b>Total Number of people reached with the Training</b>	<b>2916</b>	

**Table 5** The Kenyan PPP Marwa pilot project on UHC results from project outcome 1 and the four outputs

Next steps planned for the Marwa health insurance are:

- 1) Engagement of the Identified distribution channels.
- 2) Mapping of distribution channels/ points.
- 3) Conclusion of Informal Sector Memorandum of Understanding between The County Government of Kisumu & National Health Insurance Fund (NHIF).
- 4) Launch of the Marwa Informal Sector Programme.
- 5) Development of a digital platform for Marwa to facilitate the self-registration by beneficiaries.
- 6) The Kisumu County Health Insurance scheme developed by this project is planned to be replicated on national level in Kenya.

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<sup>11</sup> Each household has 3.8 people, which means that there was a total of 252,134 new clients of health insurance in Kisumu county.

The pilot project in Rwanda focuses on scaling up agricultural insurance in Rwanda through a public-private partnership, leveraging the existing National Agriculture Insurance Scheme through introduction of new products. Key project activities include market research on new crop value chains, initially coffee and tea, product design and development, marketing, promotion, and awareness initiatives, as well as capacity building for staff and stakeholders involved in product development and distribution. Radiant Yacu Limited, a devoted microinsurance company, aims to enhance the lives and future of the people of Rwanda by mitigating the financial losses resulting from insurable risks. RADIANT Yacu is a leading insurer in the National Agricultural Insurance Scheme, building a public-private-partnership (PPP) that is promoted by the Ministry of Agriculture and Animal Resources. The focus of the project is to expand the reach of the insurance to cover more crops, farmers and livestock and include multiple value chains under the scheme. The key activities conducted on the pilot project were:

- 1) Inception Desk Research: Extensive desk research was conducted to gain insights into the agricultural sector, government interventions, and the ongoing National Agriculture Insurance Scheme (NAIS).
- 2) Consultative Meetings: Collaborative meetings were held with MINAGRI (Ministry), NAEB (National Agriculture Export Board), and the Tea Federation to identify value chains of interest, plan market research, and pinpoint areas/cooperatives to visit.
- 3) Market Research: Thorough market research was carried out through focus group discussions with tea and coffee farmers and in-depth interviews with cooperative managers, resulting in a comprehensive understanding of their risks and requirements.
- 4) Data Collection and Analysis: Tea-related data, including production, cost, and price variations, was collected, and analyzed to inform the design of insurance products. Similar data is being collected for coffee.
- 5) Product Design and Development: The findings from market research and the data collected is being used to develop a relevant insurance product that will provide value to the farmers and the associations and cooperatives. Extensive consultation with the tea cooperatives is a part of the process.

The results of the Rwandan pilot project from outcome 1 and its four project outputs can be seen on Table 6. Out of two planned innovative agricultural insurance solutions for tea and coffee cooperatives in Rwanda, only one parametric insurance for tea farmers was developed to date. Also, out of the planned four peer-learning activities with the community of practice, only two were held.

KPIs	Radiant Yacu Limited			
	Targets*	Results		
		By April 30, 2023	As of Date	Comments
<b>Innovation management</b>				
Solutions designed	2	1	1	Parametric Insurance for tea farmers
Solutions tested		0	0	The Tea product is planned to be piloted in April
Solutions scaled-up		0	0	
Number of low-income people enrolled to new solutions (new clients or existing clients)* +	45,000	0	0	No numbers to report yet as the solution is planned to be piloted in April
Number of low-income people enrolled to redesigned existing solutions (new clients)			0	
Number of other practitioners with improved practice		0		
New solutions replicated by other private or public players	2	0	0	
Number of peer learning activities with the project community (community of practice)	4	0	2	Hosted Ritesh and conducted a capacity building training together, AFD community of practice in Accra during ICII

**Table 6** The Rwandan PPP agricultural pilot project results from project outcome 1 and the four outputs



Next steps planned for the agricultural insurance in Rwanda are:

- 1) Reinsurance Arrangements: Ongoing efforts are focused on securing reinsurance arrangements for the designed Tea Index insurance product. Additionally, an innovative approach exploring a hybrid satellite product incorporating NDVI/EVI and F cover is being explored.
- 2) Pilot Testing for Tea: Due to delays in securing reinsurance arrangements, the pilot testing phase is now scheduled to commence in early April 2024.
- 3) Development of Educational and Awareness Materials: Materials aimed at educating and creating awareness about tea insurance were developed.
- 4) Capacity Building: Staff and partners will undergo capacity building initiatives to enhance their knowledge in product development and distribution. Internal sessions with the Fellow have been conducted.

**The second project Outcome** component aimed to build capacity and develop knowledge to facilitate skill building, knowledge exchange and accelerate the evolution of markets.

Component/Project Outcome 2: Capacity and knowledge development:

**Capacity built and knowledge developed to facilitate skill building, knowledge exchange and accelerate the evolution of markets.**

This component / project outcome focused on translating the learning from the innovation projects into training materials and knowledge products that can benefit the wider insurance to manage innovation and the related organizational changes, and that government policymakers can use to design and implement public-private partnerships to achieve policy objectives. The activities under this component include a) face-to-face trainings using local training institutes, b) promoting knowledge exchange across geographies by inviting partners to participate in workshops in other regions, and c) promoting learning by policymakers by participating in the ILO's Impact Insurance Academy.

The four project's outputs under project outcome 2 were:

- 1.1. Increased capacity of public agencies to form partnerships that leverage insurance to achieve public policy objectives.**
- 1.2. Established, effective institutional training of Partners (public and private) to built their capacities to keep innovating to develop more insurance and integrated risk management solutions.**
- 1.3. Enhanced capacities in Sub-Saharan Africa through trainings and dissemination of knowledge from lessons learned through the innovation projects.**
- 1.4. Strengthened and improved public-private partnerships or schemes formed by Governments using insurance to achieve public policy objectives.**

On whole project level, the outcome 2 and outputs results are presented on Table 7. The PPP training module is almost fully prepared to be taught as a subject at the Impact Insurance Academy at the ICT ILO with the examples of all five PPPs in pilot countries and their projects.

In detail presented on Table 7, the following results were reached on project level:

- 1) Face-to-face trainings with local training institutes: ILO has started consolidating lessons from current and previous projects on public-private-partnerships that are in the process of being converted into a training module. Each of the five partners was featured as cases in the module to highlight key lessons and experiences from the projects. The cases into other modules on partnerships or market research based on the lessons. In addition, consolidated lessons learned from the Indian agricultural insurance scheme were used as a case study within the module. These lessons have also been published as a three-part blog series.
- 2) Trainings in other markets for partners:
  - a. Joint AFD-ILO Panel at the International Conference on Inclusive Insurance (2022) featuring AFD, Pula and Radiant. The panel was moderated by ILO and in addition to Hugo LECUE from AFD, had the CEO of Radiant Insurance, Ovia TUHAIRWE and the Founder and CEO of PULA Thomas NJERU. The panelists took a deep dive into various PPP mechanisms, the challenges associated with them highlighted the importance of a multi stakeholder approach.
  - b. Panel at EMW 2022 in Luxembourg: ILO Impact Insurance Facility has facilitated the exclusive session on inclusive insurance with AFD, Radiant Insurance, Access to Insurance Initiative and Microinsurance Network sharing their experiences and perspectives on using technology and digital innovation in inclusive insurance.
  - c. Participation in MIN June member meeting – online. While the meeting was in person, ILO’s Fellow at Radiant Insurance presented insights from their experience with National Agriculture Insurance Scheme related to an integrated risk management approach.

KPIs	Targets	Results	Comments
		By April 30, 2023	
Capacity building tools and broader dissemination (cumulative targets) **			
Knowledge products (papers, webinars, case briefs, bite-sized lesson)	15	7	7 blogs have been published
Expanded training curriculum, adapted with new cases and lessons, including gender-related modules.	6		
New PPP training module	1	1	Module is under development
Number of KM actions to disseminate to broader industry	4		
Training of trainers and trainings	6		
Number of other providers trained	100		
Partner individuals attend workshops in new markets and networks	8-12		
Government and other relevant stakeholders attend Impact Insurance Academy or participate in local trainings	20	7	Participants in the Insurance for Development course
Trained participants have improved or launched insurance products	20		Follow up to be conducted with the IFD participants
Trained public agencies have implemented new approaches to designing PPPs	5		Follow up to be conducted with the IFD participants
New champions in government agencies act on project lessons	5		Follow up to be conducted with the IFD participants

**Table 7** Total project level results from outcome 2 and the four outputs<sup>12</sup>

- 3) Impact Insurance Academy for policy makers: Insurance for Development course: 7 policymakers from Ministries of Health/Agriculture from Kenya (3), Rwanda (2), Uganda (1) and Zimbabwe (1) attended the [2022 online edition of the Insurance for Development course](#) that was offered by the ILO in collaboration with ITC ILO. Four fellows also attended and audited the course. The e-learning course was conducted over a period of five weeks that were structured as a five-week course containing the following modules:
- Week 1: Opening session: Impact insurance: overview and relevance to development. Module 1: Accessing new markets through alternative distribution channels.
  - Week 2 Module 2: Market research: Translating customer insights into improved results.
  - Week 3 Module 3: Product development.
  - Week 4 Module 4: Claims management: The moment of truth.
  - Week 5 Module 5: Responsible insurance and business viability.

Blogs from projects/fellows: The following blogs were published on <https://medium.com/impact-insurance> featuring lessons from ongoing projects and the public private partnerships in India:

- I. How governments can drive demand for crop insurance while protecting their own and their farmers investments- Evidence from Zambia and Kenya.
- II. The journey of India's crop insurance scheme and public private partnerships.
- III. Agriculture insurance: Demystifying the role of public-private partnerships.
- IV. Insurance for Development – Product development: inclusive health insurance.
- V. Increasing health insurance coverage in Kisumu County, Kenya: a model for social health insurance.
- VI. PMFBY agriculture insurance: Lessons for successful implementation of a multi-stakeholder scheme.
- VII. PMFBY agriculture insurance: addressing challenges.

The results of the Kenyan pilot project from outcome 2 and its four project outputs can be seen on Table 8. Through the Marwa project, there were 22 training and workshops on the universal health coverage organized. In these twenty-two workshops participated 2,916 people. Additionally, there were three lessons and cases on UHC documented for the Kisumu County, particularly on including vulnerable population and informal sector households.

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<sup>12</sup> ILO Second Progress Report for May 1, 2022 to April 30, 2023, , 30 June 2023

Marwa Results Outcome 2		
Name of training/ Workshops	No. of Workshops	No. of People Reached
Marwa Strategy workshop	1	15
Training of Sub-county Administrators	2	7
Training of Ward Administrators and Village Chiefs	7	70
Workshops for Market Vendors	2	42
Workshops for Juakali	3	69
Cooperative Workshop	1	22
Workshop for Pastors of Churches	1	15
Workshop for County Staff	2	30
Marwa Launch Event	1	2550
Workshop for Community Health Promoters	2	96
<b>Total number of Training/Workshops and people reached</b>	<b>22</b>	<b>2916</b>

**Table 8** The Kenyan PPP Marwa pilot project on UHC results from project outcome 2 and the four outputs

The results of the Rwandan pilot project from outcome 2 and its four project outputs can be seen on Table 9. Through this pilot project, there were 182 training and workshops on agricultural insurance organized. In these workshops participated 267 people, but additionally 1,000 farmers were trained. Additionally to this, there were five knowledge products, lessons and cases on agricultural insurance documented for the case of Rwanda. There was one expanded training curriculum prepared, and one PPP training module developed.

Host Radiant Yacu Limited				
Capacity building tools and broader dissemination (cumulative targets)**				
Knowledge products (papers, webinars, case briefs, bite-sized lesson)	15	3	5	3 blogs published by the Impact Insurance Facility, part of 2 webinar panel discussions (JMM and IFD 2022)
Expanded training curriculum, adapted with new cases and lessons, including gender-related modules.	6	0	1	Adopted MINAGRI training material on insurance to include content for MFIs
New PPP training module	1	0	1	Developed the Rwanda NAIS case study
Number of KM actions to disseminate to broader industry	4	0	0	
Training of trainers and trainings		0	182	Cooperative managers and agromists trained during the awareness and capacity building training. More than 1000 farmers were also trained
Number of other providers trained	100	0	267	Loan officers from 2 MFIs and Sacco representatives
Partner individuals attend workshops in new markets and networks		0	0	
Government and other relevant stakeholders attend Impact Insurance Academy or participate in local trainings	20	2	6	2 IFD 2022 participants from MINAGRI and BRD (Rwanda Development Bank), MINAGRI participation in our local capacity building training and ICII, 3 DAS Participants in our local capacity building initiatives
Trained participants have improved or launched insurance products	20	0	0	
Trained public agencies have implemented new approaches to designing PPPs	5	0	0	
New champions in government agencies act on project lessons	5	0	0	

**Table 9** The Rwandan PPP agricultural pilot project results from project outcome 2 and the four outputs

## 5.5 Efficiency of Resources Used

The project ensured to produce cost-effectiveness (Efficiency of results delivered) during project implementation. Project partners and fellows have delivered more than in their ToRs. The project was slightly delayed due to the COVID-19 pandemic; however, this did not affect project efficiency. The project management and financial management results at time of the mid-term evaluation suggest that the project was generally perceived as efficient and cost-effective. The project has almost finished the third year of its implementation. Out of the total budget of USD 2,580,279 USD, 61% of the total budget, or USD 1,576,110.82 USD have been spent to date.

This subchapter gives an overview of the extent to which the Project has produced the results (outputs and outcomes) within the expected time frame and funding envelope. Efficiency is a measure of how economically resources/inputs (funds, expertise, time, etc.) are converted to results.

The efficiency assessment answers whether the project was implemented cost-effectively and presents the lowest-cost option. It considers whether the project was delayed and whether the delay affected cost-effectiveness. Efficiency also considers the adequacy of government contributions and the national executing partners' contributions to project implementation.

The project's progress was assessed against the existing LogFrame and corresponding targets and indicators, as well as the submitted annual progress reports indicated progress against the planned timeline of targets. Although the project was delayed due to the COVID-19 pandemic, and some activities were behind schedule, the stakeholders interviewed did not raise any serious issues regarding the timing of their delivery and the timing of project completion. A non-cost project extension is envisaged for the project, in order to finish all the planned project activities.

### 5.5.1 Lowest cost option for the demonstration project solution

The cost-effectiveness of the Project has been assessed through the perception of the stakeholders interviewed and is assessed as being good. The resources and inputs (funds, expertise, time, etc.) were allocated efficiently and used strategically to achieve the expected results.

In terms of cost effectiveness and timeliness of project execution, the project made use of and built upon pre-existing experiences, institutions, agreements and partnerships, data sources, etc. from the project phase 1 with the same project donor to increase project efficiency.

The project's governance structure and management approach on its efficiency was solid, by implementing the project activities on time once the PPPs were built. Project partners and fellows for all five pilot project outputs have delivered beyond their responsibilities in their Terms of References (ToRs).

At time of closure of year 2023, the expenditure rate of the project was 61.1%. Taken that the project has exceeded mid-term of its implementation, the implementation rate, and hence the efficiency is satisfactory. Out of the approved project budget of USD 2,580,278.51, ILO has received from AFD the amount of USD 1,746,025.42 (67.7% of the total planned project budget) by December 2022. On 21 December 2023, ILO's expenditures amounted to USD 1,576,110.82, which presents 90.3% of the budget received by AFD to date, or 61.1% of the total planned project budget of USD 2,580,278.51 to be received by ILO until project closure.

### 5.5.2 No-cost project extensions due to the COVID-19 Pandemic

The external operating context (prevalence of conflict, natural disasters, and political upheaval) was favourable and peaceful. The project did not face an unusually challenging operational environment that negatively affected project performance, such as conflicts or security issues. The Governments

where the pilot projects were implemented were stable. The natural disasters did not affect project performance.

The project started its implementation in the middle of Covid-19 pandemics. This caused slight delays in the first project phases when the partners organizations, project and matching fellows were chosen. The same did not affect project performance.

Due to the Covid-19 pandemics, the project was adapted by undertaking virtual missions in the pilot countries Rwanda and Kenya where needed and possible. Face-to-face Training of Trainers (ToTs) were also common practice. When it was not possible to hold face-to-face training and workshops, project implementation was successfully continued through virtual pieces of training and in-person training in the pilot countries.

## 5.6 Effectiveness of Management Arrangements

Project supervision and management by the ILO is highly satisfactory. The M&E strategy was not developed, and this risk was mitigated by developing a new revised LogFrame using SMART indicators. Project reporting, both annual reports and financial reporting for the donor was satisfactory.

This chapter will discuss the extent to which management capacities and arrangements put in place support the achievement of results.

ILO's Impact Insurance Facility was the Implementing Agency (IA) and had the overall lead of the project. Project resources (financial, human, time) were made available to the project, and the same was used efficiently regarding obtained outputs. The Project Manager was highly dedicated to project implementation as the project is regional and requires a vast amount of experience and expertise. There were two project managers managing the project, but this did not negatively affect project performance. All project team members, consultants and experts had a solid overview of the project and understood its importance. The ILO supported the project and gave it guidance when needed, but also gave the project room to flow. Particularly, it supported the pilot projects, partners, and fellows in terms of adaptive management and project reporting.

The project did not develop an M&E strategy that enhanced accountability, learning, and feed-in to management. The roles and responsibilities of M&E and reporting of results were given to the fellows reporting to the Project Manager. With the revised project logical framework and its SMART indicators, M&E will be made easier during the second phase of project implementation. This will allow for swift adaptive management.

All main reports for the donor AFD were completed with satisfactory quality, particularly the annual reports and the financial reporting. The reporting was very detailed, always with current results updated against the LogFrame. It also contained the challenges faced during implementation and management actions taken to overcome them.

## 5.7 Impact Orientation and Sustainability of the Intervention Progress

At the mid-term evaluation, ILO's expected long-term accomplishments and its contribution to realizing the strategic priorities of the funding partner AFD are considered likely. Policymakers and stakeholders were willing to engage in capacity-building activities to address stimulating innovation and impact insurance in the pilot countries. Communities were willing to engage with the project and ready to accept and become part of the agricultural and health insurance schemes in Rwanda and Kenya. The Stimulating innovation and impact insurance in Africa project has helped the pilot countries Rwanda and Kenya to reduce poverty and inequality from climate shocks and stresses

associated with climate change, and health hazards by conducting targeted activities at the national and local levels, also by including the vulnerable groups, women and youth. ILO and AFD are helping pilot project countries Rwanda and Kenya to build strong resilience to climate change in agriculture and to health challenges, protection of their income from agriculture, protection of health, and social cohesion between vulnerable populations. These pilot projects and PPP models on stimulating innovation and impact insurance can be replicated nationally and globally all countries that do not have universal health coverage and agricultural insurance models.

The intervention notably achieved successful results in developing quality products and processes, and setting up digital solutions together with partners, integrating a client-centric approach. The quality should constantly remain on top of impact insurance and microinsurance providers' agendas, in order to be sustainable. Additionally, stronger focus should be put on achieving quality at scale during the remaining of project implementation. Partners could scale up or replicate such interventions provided they have enough internal and financial resources, evolve in an enabling environment and further build capacity to tackle the numerous challenges. The project at the time of the mid-term evaluation is likely to continue to be sustainable in all its sustainability dimensions: socio-political, financial, institutional and environmental sustainability.

The project is enabling full capitalization of the Private-Public-Partnerships (PPP) model. This should be replicated by ILO in various countries worldwide.

Since the beginning of its partnership in 2015, the Agence Française de Développement (AFD) and ILO are implementing the Phase II of establishing and delivering risk management solutions through public-private partnerships to benefit small enterprises and low-income households. This is a continuation of Phase I of the project implemented from 2015 to 2019 that supported seven insurers and distribution channels in sub-Saharan Africa through a systematic innovation management process to design new products, re-engineer processes, create technology solutions, and structure internal units to serve the low-income market better. These two phases of the project have also built the capacity of public sector agencies and private players. In order to ensure the continuation of Stimulating innovation and impact insurance in Africa, Phase III of the project is needed. Especially bearing in mind that time is needed for societal and habit changes for people to grasp the need for having insurance. The Phase III will enable the replication of the successful model of building Private-Public-Partnerships (PPPs) throughout other countries and other domains in Africa. It can also be broadened to other continents where stimulating innovation and impact insurance is necessary, like Asia and South America, with similar economic situations.

Impact orientation assesses to what extent was the project strategic orientation towards making a significant contribution to broader, long-term, sustainable development changes. The likelihood that the results of the intervention are sustainable and durable and can be maintained or even scaled up and replicated by intervention partners after major assistance has been completed.

The assessment of sustainability at the time of the mid-term evaluation should explain how the risks to project outcomes will affect continuation of benefits after the project ends, including both exogenous and endogenous risks.

### 5.7.1 Impact orientation

The Project "Stimulating Innovation and impact insurance in Africa" was developed with the intended **Impact** (general objective) to strengthen the resilience of low-to-middle income population in Africa by stimulating innovation and impact insurance.

The impact was supposed to be reached through the activity to pilot and scale-up innovations that deliver value to low-income households in Africa in a viable way. The impact target (Key Performance Indicator – KPI) was that the piloted and scaled-up innovations deliver value to 800,000 low-income households in a viable way. To date, the number of low-income people enrolled to new solutions

(new clients or existing clients) plus the number of low-income people enrolled to redesigned existing solutions (new clients) reached 267,134 people (which is 33%)<sup>13</sup>.

The Drivers, like assessment methods and tools that enable identification and response to climate change-induced security risks in agricultural insurance and health protection from health hazards to vulnerable population were present at the time of project implementation. There were participatory and multi-stakeholder processes that increased national and local ownership and support to address these risks. Moreover, integrated approaches and field interventions demonstrated an increased vulnerable community resilience to climate change and health risks at the time of project implementation and mid-term evaluation.

The assumptions were fully supported at the time of the mid-term evaluation, with national and regional government institutions, ILO, AFD and AFD Country Offices, and other bilateral actors willing to engage to identify policy response options. Furthermore, policymakers and stakeholders were willing to engage in capacity-building activities to address stimulating innovation and impact insurance in the pilot countries. Communities were willing to engage with the project and ready to accept and become part of the agricultural and health insurance schemes in Rwanda and Kenya.

Public-private-partnership (PPPs) were built between the respective governments and the insurance or technology companies in order to implement the project successfully and ensure ownership of project results with the selected partners and fellows. Fellows were trained on ILO methodologies and were supporting the private partners in executing their roles in stimulating innovation and impact insurance in Africa.

The mid-term evaluation did not find that the project resulted in any unintended negative effects—for example, vulnerable groups, including those living with disabilities and/or women and children, were not disproportionately affected by the project. In contrary, the Stimulating innovation and impact insurance in Africa project has helped the pilot countries Rwanda and Kenya to reduce poverty and inequality from climate shocks and stresses associated with climate change, and health hazards by conducting targeted activities at the national and local levels, also by including the vulnerable groups, women and youth. ILO and AFD are helping pilot project countries Rwanda and Kenya to build strong resilience to climate change in agriculture and to health challenges, protection of their income from agriculture, protection of health, and social cohesion between vulnerable populations. These pilot projects and PPP models on stimulating innovation and impact insurance can be replicated nationally and globally all countries that do not have universal health coverage and agricultural insurance models.

The project has played a catalytic role and promoted scaling up of building strong resilience in form of impact insurance for working against negative effects of climate change and health hazards, especially between vulnerable populations as a condition for long-lasting impact of Sustainable Development and fulfilling the UN Agenda 2030. The project did not contribute substantially to relevant SDGs as it did not achieve sufficient scale to do so. However, the intervention allowed to set the stage for product development and innovation life cycle that are required to provide vulnerable population and informal sector (low-income) households with relevant means to protect themselves against the effects of risk such as climate change and health risks, and for promoting quality at scale.

ILO's expected long-term accomplishments and its contribution to realizing the strategic priorities of the funding partner AFD, are considered likely.

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<sup>13</sup> It should be noted that the 3<sup>rd</sup> Annual Reporting to AFD is still under preparation, so this figure is probably much higher to date. Furthermore, it should be noted that during the first one to two years of project implementation, the accent was put on establishing sustainable public-private-partnerships (PPPs), matching and training the fellows to work for them. Consequently, the end results should be higher in the last two years of project implementation.



## 5.7.2 Sustainability of the intervention progress

The projects' results are sustainable, as the project developed appropriate public-private-partnerships (PPPs) that could sustain the gains beyond the project duration. This enables for the planned results of the project to be durable and can be maintained and even scaled up and replicated by other partners and countries after major assistance has been completed. The results were integrated and are likely to be integrated into national institutions, target populations. It is likely that the partners will be able to sustain them beyond the project, because the project has contributed to institutionalisation of project components, like the agricultural insurance in Rwanda and health insurance in Kisumu County, Kenya.

The project's approach of PPP in agricultural insurance in Rwanda is a successful model. The Rwandan pilot results can be replicated or amplified by other countries where agricultural insurance does not exist. The project established national ownership in this intervention, and it engaged systematically with the national government – the Rwandan Ministry of Agriculture and Animal Resources to facilitate national ownership and aid effectiveness at country levels. In the frames of the PPP, the public and public insurance sector are working closely, supported by strong senior management buy-in.

The Kisumu County's health insurance coverage PPP model can be replicated with other counties or even at national level throughout Kenya to achieve the nationally intended Universal Health Coverage (UHC) in Kenya. The project established local ownership in all its interventions. It has successfully engaged with the county government and other organizations to facilitate local ownership and aid effectiveness at county levels.

Therefore, this project can be seen as a primer project enabling the replication of sustainable innovation stimulation and establishing and increasing impact insurance rates in Africa. Furthermore, there are additional project benefits due to building strong long-lasting partnerships on stimulating innovation and impact insurance between the ILO, the AFD, the National Government of Rwanda - Ministry of Agriculture and Animal Resources, the County Government of Kisumu Health Care, the partners: PharmAccess Kenya, Radiant Yacu Insurance Group Rwanda, Ghana Agricultural Insurance Pool, Pula Insurance West Africa/Kenya and CNAAS Senegal, all fellows, as well as Government representatives from all the pilot countries.

## 5.8 Cross-Cutting Issues

### 5.8.1 Gender mainstreaming, equality and non-discrimination

A specific Gender Mainstreaming Approach and human rights consideration were not part of the project design phase. However, gender was precisely mentioned on numerous occasions in the project document. It was also part of the indicators pinpointing that gender disaggregated data should be reported in the indicators, which was not always the case. There are 60% of women participation under the fellows included in the PPPs. During project implementation, efforts were made to ensure that project capacity building activities achieve a gender balance, including amongst meeting participants and trainers. The training curricula included information on gender aspects of Stimulating innovation and impact insurance in Africa. Gender perspectives were also incorporated into project knowledge and data products when applicable. The project has been able to meet the specific needs of women, men, and vulnerable groups, such as persons with disabilities through targeting the vulnerable population and informal sector to become health insurant in the Kisumu Country Marwa Health Insurance, Kenya.

ILO did not develop a specific Gender Mainstreaming Approach in the project design phase. However, gender was precisely mentioned on numerous occasions in the project document. It was also part of the indicators pinpointing that gender disaggregated data should be reported in the indicators. This was not always the case.

During the fellow matching phase, gender was strictly considered as three women were picked out of five fellows in the projects in Rwanda, West Africa/Kenya and Senegal. There are 60% of women participation under the fellows included in the PPPs.

During project implementation, efforts were made to ensure that project capacity building activities achieve a gender balance, including amongst meeting participants and trainers. The training curricula included information on gender aspects of Stimulating innovation and impact insurance in Africa. Gender perspectives were also incorporated into project knowledge and data products when applicable.

Equality of gender is a priority to the ILO. The ILO policy on equality between women and men that is expressed in the Director-General's Circular no. 564 from year 1999 calls for integrating gender equality into all aspects of ILO work. Challenges in impact insurance and microinsurance and in specific countries go beyond ensuring an equal number of men and women participating in ILO interventions.

Evaluation interviewees included 47% of women (with 50% of women among ILO interviewees, 60% of women among fellows, 50% of women among donors).

ILO should be encouraged to mainstream gender and disability in future interventions, working with other ILO departments and organizations, and defining tailor-made strategies. The latter should be aligned with existing national strategies and policies, taking also into consideration if project countries have ratified the UN Convention on the Rights of Persons with Disabilities (UNCPRD). Gender related data should be captured and analysed on a systematic basis by insurance providers. While low-income people with disability often lack access to affordable healthcare, for example the Kenyan health insurance pilot project is currently tackling the issue of how to reach out to vulnerable population and informal sector most efficiently.

Gender mainstreaming, equality and non-discrimination, international labour standards, social dialogue, and a just transition to environmental sustainability has been assessed through interviews and desk evaluation of reporting of the gender balance in beneficiaries and the perception of gender balance, as well as the extent to which gender was considered during the design and implementation of the project.

For the tea cooperatives parametric insurance product under the Rwandan agricultural insurance project, out of 44,012 tea cooperative members, 33% were females and 67% males. The tea cooperatives market study showed that 14,589 women were potential agricultural insurers, as Table 10 shows.

S/N	Cooperative	Male	Female	Members	Area (ha)	Cell	Sector	District	Province	Status/comments
1	KOBACYAMU	3,886	1,665	5,551	863	KAGANO	KITABI	NYAMAGABE	SOUTHERN	Ready for launch
2	COOTHEGIM	2,763	955	3,718	1014	GAKUTA	TWUMBA	KARONGI	WESTERN	
3	COOTPFUNDA	887	1,205	2,092	796	TERIMBERE	NYUNDO	RUBAVU	WESTERN	
4	COOTHEVM	2,923	1,269	4,192	1524	MULINDI	KANIGA	GICUMBI	NORTHERN	
5	COOPTHEVIGI	709	278	987	326	BUVUNGIRA	BUSHEKERI	NYAMASHEKE	WESTERN	The other 5 Coops engaged during market research
6	COTHENYA	1,248	693	1,941	356	RWAMIKO	MATA	NYARUGURU	SOUTHERN	
7	COTRAGAGI	719	434	1,153	594	MASHYA	MUHANDA	NGORORERO	WESTERN	
8	RUTEGROC	1,616	462	2,078	1,180	MATABA	GIHANGO	RUTSIRO	WESTERN	
9	ASSOPTHE	2,268	1,829	4,097	1,134	KAREGAMAZI	KINIHIRA	RULINDO	NORTHERN	
10	UMACYAGI	1,962	1,676	3,638	735	GIHEKE	GIHEKE	RUSIZI	WESTERN	
11	COTHENK	1,657	986	2,643	792	MISHUNGERO	NYABIMATA	NYARUGURU	SOUTHERN	
12	COTHEMLUKI	898	217	1,115	854	MUAGANZA	MUGANZA	NYARUGURU	SOUTHERN	
13	KATECOGRO	2,339	553	2,892	502	BYOGO	MUTUNTU	KARONGI	WESTERN	
14	COTHEGA	2,271	1,165	3,436	1,412	RUSHYARARA	KARAMBI	NYAMASHEKE	WESTERN	
15	COTHEGAB	1,213	243	1,456	631	GATARE	GATARE	NYAMAGABE	SOUTHERN	
16	COOPTHEGA	198	118	316	104	KADAHENDA	KARAGO	NYABIHU	WESTERN	
17	COOPTHE Mulindi	787	213	1,000	619	MULINDI	KANIGA	GICUMBI	NORTHERN	
18	COOPTHE Shagasha	478	354	832	601	KIGENGE	GIHEKE	RUSIZI	WESTERN	
19	COOPTHE Gisakura	487	210	697	601	BUVUNGIRA	BUSHEKERI	NYAMASHEKE	WESTERN	
20	COOTHECYAKA	114	64	178	101	SUSA	KANJONGO	NYAMASHEKE	WESTERN	
<b>Total Number of persons</b>		<b>29,423</b>	<b>14,589</b>	<b>44,012</b>	<b>14,737.61</b>					

**Table 100** Gender disaggregated data for the Rwandan PPP agricultural pilot project list of tea cooperatives for project design

The project has identified and integrated into its actions the operational and strategic needs and priorities for men, women, and vulnerable groups, such as persons with disabilities, in the Kisumu health project. The project has been able to meet the specific needs of women, men, and vulnerable groups, such as persons with disabilities, through targeting the vulnerable population and informal sector to become health insurant in the Kisumu Country Marwa Health Insurance, Kenya. The disaggregated data on vulnerable households and informant sector health were not available.

## 6 Conclusions and Recommendations

### 6.1 Key Findings and Conclusions

Overall, the key findings of this mid-term evaluations are:

- 1) The Stimulating Innovation and Impact Insurance in Africa project interventions were consistent with partners' needs and beneficiaries' requirements. The development intervention provided useful technical assistance such as market research, developing quality impact insurance products and digital solutions in different countries and contexts, especially for the pilot countries for this mid-term evaluation: Rwanda (agricultural insurance) and Kenya (health insurance). The project has reinforced organizational capacity building using an effective change management approach. It has produced solutions integrated into partners' business models and global value chains through a project implementation model using public-private-partnerships (PPPs). The project adopted a client-centric approach responding to beneficiaries' requirements. The project has partially aligned its intervention to the SDGs and financial inclusion, including decent work (tackling notably informal sector issues), food security and protecting smallholder farmers from climate variability and social protection. The Rwandan Ministry of Agriculture and Animal Resources was subsidizing the agricultural insurance in Rwanda. The project protected vulnerable populations in Kenya by offering them free health insurance coverage and subsidizing the informal sector in their health insurance coverage.
- 2) The Fellowship programme was an appropriate solution to develop and implement more efficient quality impact insurance products through the PPPs to the vulnerable, informal sector, and low-income populations. The set of targets (key performance indicators) monitored by the project did not entail all important indicators in the results framework, in particular at the output and outcome levels. In order to mitigate this, the evaluation revised the project logical framework (LogFrame) and prepared a reconstructed Theory of Change (TOC) for the project.
- 3) The project was successful in achieving most of its expected results at the activity and output level. The development intervention has built five successful public-private partnerships. It included a significant amount of technical assistance assignments, training of trainers (ToTs), training, new products, strategies and processes, changes, capacity-building activities, and knowledge products that were shared with the wider Community of Practice. This project contributed to rethinking existing systems and innovative impact insurance solutions in areas such as agricultural and health products. The project prepared the field to tackle further challenges to achieve higher outcome-level objectives with a notably stronger focus on scaling up by building the capacity of partners.
- 4) The project duration of three years did not allow for the intervention to achieve project results at the outcome level. To this, it is recommended to grant a project extension until June 2025 so that the outcome-level interventions will be visible, and more time will be available to roll out the training and do more on the capitalization of lessons learned and knowledge sharing. Project resources and inputs allowed to

successfully achieve output related expected results. Through the PPPs, the project has prepared the ground to significantly increase the number of vulnerable populations, low-income and informal sector people accessing quality impact insurance products (like tailor-made agricultural insurance in Rwanda and health insurance in Kenya) while constantly improving services and products via an iterative approach.

- 5) The project is likely to remain sustainable. It can develop its durability by the strong public-private partnerships it has built. There was a strong buy-in of decision-makers, and new solutions were embedded in the partners' business models. The organizational capacity building, particularly in adopting a client-centric approach, and setting up relevant digital solutions for further business development will remain. The sustainability will depend on the partners having enough resources to dedicate to the continuity of projects and strong senior management support. At the time of the mid-term evaluation, it was too early to assess the project impact.
- 6) Gender and non-discrimination mainstreaming, and equality were not sufficiently targeted during the course of the project. ILO should target specifically gender mainstreaming with reporting gender-disaggregated indicators in future interventions. The same should be aligned with ILO gender policy.

## 6.2 Recommendations

Based on the findings of this report, the evaluator prepared several recommendations that can contribute to stimulating innovation and impact insurance in Africa, that derive from the implementation of the Project.

<b>Recommendation #1:</b>	ILO should target specifically gender mainstreaming with reporting gender-disaggregated indicators in future interventions. The same should be aligned with ILO gender policy.
<b>Challenge/problem to be addressed by the recommendation:</b>	Gender mainstreaming was not sufficiently targeted during this project's phases.
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO, Impact Insurance Facility / Social Finance
<b>Resource implications:</b>	Low
<b>Proposed implementation time-frame:</b>	Immediately

<b>Recommendation #2:</b>	The national budget should be planned well-off in advance and contain sufficient subsidies to contribute to the insurant holder's premium for impact insurance.
<b>Challenge/problem to be addressed by the recommendation:</b>	The subsidies were not always ready to be contributed to pay the insurant holder's premium for agricultural or health insurance.

<b>recommendation:</b>	
<b>Priority Level:</b>	Medium
<b>Responsibility:</b>	Local-level Governments, National Governments
<b>Resource implications:</b>	High
<b>Proposed implementation time-frame:</b>	Immediately

<b>Recommendation #3:</b>	The project should be extended until June 2025 to finalize all project interventions.
<b>Challenge/problem to be addressed by the recommendation:</b>	It is not feasible to finish all project activities by the planned project end in May 2025.
<b>Priority Level:</b>	High
<b>Type of Recommendation:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance and donor AFD recommendation
<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance and donor AFD
<b>Resource implications:</b>	Low
<b>Proposed implementation time-frame:</b>	Immediately

<b>Recommendation #4:</b>	The ILO, the fellows and the donor AFD should improve project design, monitoring and reporting at the programmatic level (specifically based on a clear description of donor expectations and ILO's standard project management good practices).
<b>Sub-recommendations:</b>	<ol style="list-style-type: none"> <li>1) Formalize templates for project progress reports (produced by the Facility and the fellows) notably based on donor expectations. Include project progress against all indicators in the logical framework and against milestones; Include on a systematic basis all learning questions and specific KPIs for all interventions; Include results from previous years in the cumulative dashboard; All progress reports should systematically include financial statements for donors; Share progress reports with fellows for feedback; Include main training evaluation results; collect gender disaggregated data for all activities.</li> <li>2) Develop relevant strategies to mainstream gender and disability and define specific KPIs allowing to track project progress in implementing these strategies.</li> </ol>

	<ol style="list-style-type: none"> <li>3) Monitor all indicators (in particular at the output and outcome levels), project expenses on a regular basis and timeliness of outputs.</li> <li>4) Clarify / review (i) the roles of fellows to manage their expectations (in all relevant communications in the recruitment process), (ii) objectives with clear targets (including in-house capacity building) and reporting lines.</li> <li>5) Conduct feasibility studies prior to project implementation, stakeholder analysis and regular risk assessment.</li> <li>6) Set up a more robust change management process to initiate, record, assess, approve and resolve project changes and involve donor in changes.</li> </ol>
<b>Challenge/problem to be addressed by the recommendation:</b>	No M&E plan and disorganized reporting.
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance
<b>Resource implications:</b>	Medium
<b>Proposed implementation time-frame:</b>	Immediately

<b>Recommendation #5:</b>	Strengthening the communication between the ILO and partners is recommended for a more effective and sustainable project implementation.
<b>Challenge/problem to be addressed by the recommendation:</b>	There is no tripartite communication between ILO, the fellow and the private partner to ensure sustainability of the project and the PPP after the fellow leaves ILO's private partner.
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance, private partner, fellows
<b>Resource implications:</b>	Low
<b>Proposed implementation time-frame:</b>	Immediately

<b>Recommendation #6:</b>	Private partners should consider allocating a resource to work closely with the fellow throughout the intervention to ensure smooth handover after the end of the fellowship.
<b>Challenge/problem to be</b>	Knowledge will be lost if the fellow does not regularly share knowledge

<b>addressed by the recommendation:</b>	with ILO's private partners
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance, fellow, private partner
<b>Resource implications:</b>	Medium
<b>Proposed implementation time-frame:</b>	Immediately

<b>Recommendation #7:</b>	Involve more digital technologies in the new innovative solutions for existing and new insurance products.
<b>Challenge/problem to be addressed by the recommendation:</b>	Digitalization of the whole insurance process will make getting the insurance, the claims and the payment easier, simpler, and more affordable. Everything is to be done through an App. The App should contain all information, assessment, evaluation. Take an example of India being very far with the technology in the insurance. Link with telephone companies, to use mobile money to pay. Digitalization will help into better delivery, transparency, service.
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance and ILO-wide, fellow, Private and Public (Government) Partners
<b>Resource implications:</b>	Medium
<b>Proposed implementation time-frame:</b>	Near future

<b>Recommendation #8:</b>	ILO should contribute to strengthening insurance literacy together with project's private and public partners and other stakeholders.
<b>Sub-recommendations:</b>	<ol style="list-style-type: none"> <li>1) ILO should conduct capacity building activities (especially with government and regulators) at the country level.</li> <li>2) ILO should find a way how to organize in a more efficient way the skills sharing between all five PPPs.</li> </ol>
<b>Challenge/problem to be addressed by the recommendation:</b>	ILO's added value in the project implementation modalities is more about the capacity building and ability to share knowledge between the PPPs, countries, regionally and globally, as well as among other development organizations, like UNDP, IFAD, GIZ etc..
<b>Priority Level:</b>	High

<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance
<b>Resource implications:</b>	Medium
<b>Proposed implementation time-frame:</b>	Near future

<b>Recommendation #9:</b>	The project should consider introducing twinning projects between regions or countries for successful project replication and scaling up.
<b>Challenge/problem to be addressed by the recommendation:</b>	A mode should be found on how to capitalize on scaling up the projects within the countries nationally and scaled up in another country.
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO-wide, Private and Public (Government) Partners
<b>Resource implications:</b>	Medium
<b>Proposed implementation time-frame:</b>	Near future

<b>Recommendation #10:</b>	Initiate another Phase III of this project after the project Phase II ends in June 2025.
<b>Challenge/problem to be addressed by the recommendation:</b>	In Phase III, the successful model of building Private-Public Partnerships (PPPs) from Project II should be replicated throughout other countries and other domains of stimulating innovation and impact insurance in Africa.
<b>Priority Level:</b>	High
<b>Responsibility:</b>	ILO's Department of Enterprises; Impact Insurance Facility/Social Finance, Agence Française de Développement (AFD)
<b>Resource implications:</b>	High
<b>Proposed implementation time-frame:</b>	After June 2025

### 6.3 Lessons Learned

Lessons learned are used to bring together any insights gained during the project that can be usefully applied in the further course of project implementation until project closure and future projects. Capturing lessons learned from the project implementation is of extreme importance, as it may result



in more effective and efficient future rollout of project activities and organizational learning. Seizing lessons learned and turning that hindsight into best practices will achieve far greater long-term project success, which can be captured and possibly replicated within ILO and broader. The following lessons were learned from the implementation of this project:

<b>Lesson Learned #1:</b>	The approach to test and learn new products, processes, and partnerships is performed in a best way as a pilot project in a controlled environment.
Context/comment:	During the intervention for the Rwandan agricultural insurance project, a new tea parametric insurance product was developed using the test and learn principle to test new products, processes, and partnerships in a controlled environment from the first phase of this project.
<b>Lesson Learned #2:</b>	ILO administrative resources and issues (staff, financial resources, design, implementation) should be sufficiently on disposal, especially in project design phase.
Context/comment:	Additional resources would need to be allocated by ILO in the project design phase, especially when constructing the Theory of Change (TOC) and the Project Logical Framework (LogFrame).
<b>Lesson Learned #3:</b>	Learnings on how the PPPs can be designed more effectively can be more efficiently by leveraging on the partnership and designing & co-creating it with the Programme Donor.
Context/comment:	The project private partner, like Pharm Access helps in technical cooperation. Another project private partner like Radiant Yacu is an insurance company. Political goodwill is of utmost importance in order to build a successful partnership. There should be an efficient approach of engaging stakeholders and community members. If the insurance product is co-developed (co-produced) between the insurant, the insurer and the subsidizing government body, there is a stronger ownership of the product, and greater chance of the insurant to purchase the product. Government commitment is crucial, as legislating an act is a challenging step that requires a lot of advocacy and lobbying.
<b>Lesson Learned #4:</b>	Evidence-based advocacy is necessary in terms of policy changes.
Context/comment:	In the case of the health insurance in Kenya, the Kisumu country health insurance project has caused policy changes in the Universal Health Coverage (UHC) act on national level.
<b>Lesson Learned #5:</b>	A participatory bottom-up approach with the insurer, with the users of the insurance in order to ensure product sustainability should be used when designing an insurance product.
Context/comment:	A participatory bottom-up approach with the insurer, with the users of the insurance to ensure product sustainability was used then designing the products of tea and coffee parametric insurance. When Governments are involved in the process, they can design policies and regulations connected to the products.
<b>Lesson Learned #6:</b>	Time is needed for people to get used to buying insurance.

Context/comment:	In order to get used to buy insurance products, it is necessary for the people to change their mindset by increasing the trust in the product and their benefits from the product. Hereto would help the insurer's swift agreements to compensation of claims and payout of benefits. Time is needed and it is a crucial factor for new products development and winning new impact insurance customers. A mass media campaign with success stories and mindset changers can be done by the Government to win trust of people in insurance.
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## 6.4 Emerging Good Practices

The following good practices have emerged as a result of this project's implementation to date:

<b>Good Practice #1:</b>	Continue the practice with pilot projects, as learning is done perfectly through a pilot.
Context/comment:	Pilot projects are very useful learning mechanisms. They are very instrumental for continuous improvement.
<b>Good Practice #2:</b>	Fellowship methodology is the best practice of this project, and fellows are good for accountability and strategic thinking.
Context/comment:	Fellows are ILO's trained and knowledge based persons at the ILO's private partners. They are on the ground, and the execution of ILO's pilot project is done through the fellow.
<b>Good Practice #3:</b>	PPPs are very instrumental in successful insurance client acquisition
Context/comment:	PPPs helps a lot in the client acquisition phase. Because the Government is involved as the public partner, it is an automatic trustworthy product. Government premium subsidy, like the case of MINAGRI's premium subsidy of 40% in case of the Rwandan agricultural insurance are welcomed incentives for people to join insurance schemes.

## **7 Annexes**

**Annex 1** Terms of Reference (ToR) for the Mid-term Evaluation of the ILO Project: “Stimulating innovation and impact insurance in Africa”

Terms of Reference Mid-term evaluation  
**“Stimulating Innovation and Impact Insurance in Africa”**

**1. Key facts**

Title of project being evaluated	Stimulating Innovation and Impact Insurance in Africa
Project DC Code	RAF/20/02/FRA
Type of evaluation (e.g. independent, internal)	Independent
Timing of evaluation (e.g. midterm, final)	Midterm
Donor	Agence Française de Développement (AFD), France
Administrative Unit in the ILO responsible for administrating the project	Social Finance Unit, ENTERPRISES
Technical Unit(s) in the ILO responsible for backstopping the project	
P&B outcome (s) under evaluation	3, 4 and 6
SDG(s) under evaluation	8
Budget	2,580,279 USD
Period of evaluation	December 2023 – February 2024
Evaluation Manager	Pablo Arellano

## 2. Background information

### Description of the project

The ILO's Impact Insurance Facility (the Facility) proposes a four-year collaboration with the Agence Française de Développement (AFD) to design and deliver risk management solutions through public-private partnerships to benefit small enterprises and low-income households. Besides testing new products, processes and business models, the project also builds the capacity of public sector agencies and private players.

From 2015 to 2019, AFD and the ILO supported seven insurers and distribution channels in sub-Saharan Africa through a systematic innovation management process to design new products, reengineer processes, create technology solutions, and structure internal units to serve the low-income market better. Together, these partners reached nearly 1 million clients during the project

engagement period with new products and benefited over 12 million people with technology solutions.

The current project builds on the success of the first collaboration. Together, AFD and the ILO supports four to five public-private partnerships (PPPs) to develop solutions that achieve social and development impact. The project promotes learnings on impact insurance, innovation and the implementation of PPPs. Lessons learned through this collaboration will be widely disseminated to highlight approaches in which better risk management solutions through PPPs can make meaningful contributions to the Sustainable Development Goals.

The project considers three possible thematic areas, as identified through initial discussions with AFD. These thematic areas were selected because they align closely with development objectives and public policy objectives of the Governments of the countries concerned, related to achieving universal health coverage, ensuring food security and promoting adaptation to the effects of climate change:

- 1) Extending existing national health schemes to unserved population segments
- 2) Scaling up individual or meso-level agricultural insurance to enhance the resilience of small-scale farmers and promote food security in the region
- 3) Introducing integrated risk management solutions for small and medium enterprises through partnerships with public banks, banking associations or other partners at meso-level to promote stronger SMEs, decent work and reduce vulnerability

A central learning agenda for the project is to gain a better understanding of how PPPs can be structured and implemented. In order to maximize the potential of risk management solutions to contribute towards social, economic and environmental development objectives such as achieving universal health coverage and promoting climate change adaptation, partnerships between the public and private sectors are essential. There is a need to better understand how projects can combine the strength of the public sector and private sector more effectively. Effective PPP models, how incentives are aligned, how partnerships can be managed will be included in the learning agenda of the project.

### Project components

The project includes two components: i) Innovation management for low-income households and SMEs through public-private partnerships; and ii) capacity and knowledge development to facilitate skill building, knowledge exchange and accelerate the evolution of markets. The first component engages with specific organizations and is intended to push the frontier by testing, and scaling up, new

products; while the second component focuses on national, regional and global capacity development.

### Component 1: Innovation management

The innovation component aims to catalyse scaling of solutions for the low-income households and SMEs by selected providers. The partnership tests integrated risk management solutions in one of the three thematic areas with 4-5 innovation partners, and publicly share the resulting lessons and experiences. The Facility supports this effort by providing technical support to assist with project management and implementation. The Facility also measures and document the impact of the services on clients and partners, and then promote peer learning and capacity building of other providers to promote the application of lessons learnt on this project in other countries. The project expects that each partner will pilot at least two solutions during the four-year programme.

### Component 2: Capacity and knowledge development

This component focuses on translating the learning from the innovation projects into training materials and knowledge products that can benefit the wider insurance to manage innovation and the related organizational changes, and that government policymakers can use to design and implement public-private partnerships to achieve policy objectives.

1. **Face-to-face trainings with local training institutes:** The Facility updates training materials with new cases and lessons from the first phase of the AFD project and any new lessons learnt from Component 1. The Facility also proposes developing a new training module for public agencies on how to establish and manage successful PPPs that includes lessons from Component 1. Facility then delivers two trainings per year (one of which will be on PPPs) in new markets through local training institutes. It is expected to deliver at least 6 Training of Trainers (TOTs) and trainings through at least three training institutes and train more than 100 professionals from at least 40 private and public agencies through this activity.

2. **Trainings in other markets for partners:** In addition to technical support, each partner has an opportunity to send up to two representatives for one training or workshop per year in another market to learn about developments in those markets. It may also be possible to invite partners to participate in existing peer networks if they are not already members, such as the Joint Learning Network for Universal Health Coverage, Microinsurance Network Working Groups or a similar network for development banks.

3. **Impact Insurance Academy for policy makers:** Through this component, the project sponsors the participation of up to 20 policymakers from selected countries to attend the Academy

over the three-year period. The new PPP training module will be included as an elective in the Impact Insurance Academy.

The design of the project does not currently include a Theory of Change (ToC). However, the following objectives, outputs and outcomes have been identified.

Project outcomes

General Objective	Specific Objectives	Component	Activities	Outputs	Outcomes
Strengthen the resilience of low-to-middle income population in Africa	Increase the resilience of informal low-income populations to shocks through better access to a range of quality risk management solutions provided through public-private partnerships;	Innovation Management (component 1)	4-5 partners pilot at least 8-10 new products or operational solutions with a gender-specific approach, and scale up at least half of them	The piloted and scaled-up innovations deliver value to 800,000 low-income households in a viable way	Appropriate and accessible risk management options for low-income segment in countries of intervention
	Better equip public and private sector actors and build their capacity to innovative and develop quality integrated risk management solutions that are offered at scale;		Partners answer key learning questions through action research projects	Partners (public and private) built their capacities to keep innovating	Partners create demonstration case for the industry which contributes to a strong financial inclusion landscape, with sustainable portfolio and offering relevant range of financial services to their members
			Peer learning through a practitioner learning group results in better skills among partners and more insightful lessons	Partners develop more insurance and integrated risk management solutions	Partners create demonstration case for the industry which contributes to a strong financial inclusion landscape, with sustainable portfolio and offering relevant range of financial services to their members
			15 knowledge products (papers, webinars, case briefs, bite-sized lesson) based on lessons from partners, with at least one on gender-related aspects	Increased awareness and use of best-practices by more than 30 other players that access new know-how generated by the project	Governments form better public-private partnerships or schemes or
			4-5 new fellows with developed skills available to support insurance development	New solutions are replicated by at least 5 other private or public players	g insurance to achieve public policy objectives

	<p>Increase the capacity of public agencies to form partnerships that leverage insurance to achieve public policy objectives</p>	<p><b>Capacity building and knowledge development (component 2)</b></p>	<p>Expanded training curriculum, adapted with new cases and lessons, including gender-related modules.</p> <p>One new training on PPPs with lessons from the new projects</p> <p>6 TOTs at 3 local training institutes and trainings that result in 100 professionals from more than 40 private or public actors trained on how to improve insurance offerings</p>	<p>At least 20 trained participants have improved or launched insurance products</p> <p>At least 5 trained public agencies have implemented new approaches to designing PPPs</p>	
	<p>Enhance capacities in Sub-Saharan Africa through trainings and dissemination of knowledge from lessons learned through the innovation projects</p>		<p>8-12 partner individuals attend workshops in new markets and networks</p> <p>At least 20 government and other relevant stakeholders attend Impact Insurance Academy or participate in local trainings</p>	<p>At least 10 organizations implement changes based on learnings shared by partners</p> <p>At least 5 new champions in government agencies act on project lessons to improve their social protection solutions, nurture PPPs or design new policies enabling environment</p>	

**Current status of the project**

The project has initiated the third year. Out of the total budget of 2,580,279 USD, it has been spent 1,128,314 USD, which represent 44% of the total budget. Also, it has elapsed 43% of the time of the total project duration.

During the first year of the project five partners and the marched fellows were selected:



Organization	Type of institution	Country	Matched fellow	Theme
Ghana Agricultural Insurance Pool	Pool of insurers	Ghana	Ritesh Pandey	Agricultural insurance
PharmAccess Kenya	NGO	Kenya	Akinyemi Alebiosu	Health insurance (supporting national health insurance scheme)
Radiant Insurance Company	Private Insurer	Rwanda	Jackline Chemutai	Agricultural insurance
Pula Advisors	Insurtech	West Africa/Kenya	Djitaba Sachko-Patel	Agricultural insurance
CNAAS	Public insurer	Senegal	Aminata Wane	Agricultural insurance

At present, the project has prepared two Progress reports, one covering the period from May 1, 2021, to April 30, 2022, and the second one covering the period from May 1, 2022 to April 2023. The scope of the evaluation will include the activities reported in these two progress reports and all the information will be shared with the evaluator.

**Purpose, objectives, and scope of the evaluation**

**Purpose**

ILO considers evaluation as an integral part of the implementation of technical cooperation activities. As per ILO evaluation policy and procedures all programmes and projects with a budget of USD 1 million + must have an internal midterm evaluation and a final independent evaluation, which should be managed by an ILO certified evaluation manager and implemented by independent evaluators. The evaluation will be used, for project accountability, project improvement and institutional learning. The ILO considers that evaluation is an integral part of the implementation of development cooperation activities. The ILO applies the evaluation criteria established by the OECD / DAC Quality Standards for Development Evaluation and the UNEG Code of Conduct for Evaluation in the UN System. This evaluation will follow guidelines on results-based evaluation of the ILO Evaluation Department (EVAL) contained in the "ILO policy guidelines for results-based evaluation (4<sup>th</sup> edition)"<sup>1</sup> and, more specifically, the checklist "CHECKLIST 4.2: PREPARING THE EVALUATION REPORT".<sup>2</sup> Among other points the evaluations identify what worked, what did not work at output, outcome and impact levels, what is sustainable, what is the legacy of the project and what are the recommendations for the future. As well as the design stages and any mitigation measures that eventually was taken.

**Scope**

This evaluation, as a product of analysis of the implementation of the project in its entirety, will examine the entire project intervention in two countries (Kenya and Rwanda) from May 1st 2021 to April 30th 2023. It will consider all the documents linked to the design of the project. This includes the project document, periodic reports and implementation of its recommendations as well as documents produced as outputs of the project (e.g. knowledge products, policy strategies)

It will cover all activities of the following selected partners and countries:

Organization	Type of institution	Country	Matched fellow	Theme
PharmAccess Kenya	NGO	Kenya	Akinyemi Alebiosu	Health insurance (supporting national health insurance scheme)
Radiant Insurance Company	Private Insurer	Rwanda	Jackline Chemutai	Agricultural insurance

**Clients of the evaluation**

Clients of the evaluation are ILO’s constituents, national and international partners. Furthermore, the findings of this final evaluation are destined for ILO’s management (the project team, SFU, ENTERPRISES, and the Regional Office for Africa) overseeing the implementation of the project, as well as for the project’s donor (AFD).

The knowledge generated by this evaluation will also benefit other stakeholders that may not be directly targeted by the project’s intervention such as: key government institutions, civil society organizations, donors, UN agencies, international organizations that work in relevant fields, and other units within the ILO.

**Evaluation criteria and questions (including Cross-cutting issues/ issues of special interest to the ILO)**

The evaluation will be based on the following evaluation criteria: strategic relevance, coherence, validity of project design, effectiveness, efficiency, impact and sustainability. Relevant data should be sex-disaggregated and the different experiences and perspectives of women and men should be

considered throughout the evaluation process. The evaluation will integrate gender equality and non-discrimination, international labour standards, social dialogue, and a just transition to environmental inactivity as crosscutting themes throughout its deliverables and process. It should be addressed

in line with EVAL Guidance Note 3.1: Integrating gender equality in monitoring and evaluation<sup>3</sup> and Guidance Note 4.5: Stakeholder engagement<sup>4</sup>

The following questions, while not an exhaustive list, are intended to guide and facilitate the evaluation. Other aspects can be added as identified by the evaluator in accordance with the given purpose and in consultation with the evaluation manager. Any fundamental changes to the evaluation criteria and questions should be agreed between the evaluation manager and the evaluator, and reflected in the inception report.

#### Relevance.<sup>5</sup>

1. Were the project objectives consistent with the national key partners' needs, requirements, and the country needs?
2. How did the project contribute to the relevant International Labour Organisation Programme & Budget Outcomes and development priorities in the countries where the project has been implemented?
3. To what extent did the project build on previous experience of the ILO in the region, and relevant experience of other local and international organizations in the region?

#### Coherence<sup>6</sup>.

1. Was the project design adequate to meet project objectives? Do outputs causally link to the intended outcomes and objectives?
2. To what extent was the project design adequate and effective in the coherence and complementarity between the different project components?
3. To what extent did the project build on the comparative advantage of the ILO?

#### Effectiveness<sup>7</sup>

1. To what extent have the project objectives been achieved?
2. Have unexpected positive and negative results took place?
3. What were the main internal and external factors that influenced the achievement or non-achievement of results?

<sup>3</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746716.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746716.pdf)

<sup>4</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746724.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746724.pdf)

<sup>5</sup> The extent to which the intervention objectives and design respond to beneficiaries', global, country, and partner/institution needs, policies, and priorities, and continue to do so if circumstances change.

<sup>6</sup> The compatibility of the intervention with other interventions in a country, sector or institution.

<sup>7</sup> The extent to which the intervention achieved, or is expected to achieve, its objectives, and its results, including any differential results across groups.

#### Efficiency<sup>8</sup>

1. Are the resources (financial, human, time) made available to the project used efficiently regarding obtained outputs?
2. Have the project developed an M&E strategy that enhance accountability, learning and feed into management?
3. How have the roles and responsibilities between the project and key partners regarding planning M&E of the project worked?

#### Orientation towards Impact<sup>9</sup> and Sustainability<sup>10</sup>.

1. What can be identified as project sustainable impacts in the target groups and other actors as relevant? Are the results integrated or likely to be integrated into national institutions, target populations, and will partners be able to sustain them beyond the project (institutionalisation of project components)?
2. What measures and actions have been put in place to ensure ownership of the

project's results within the selected partners and fellows?

3. Can the project's approach or parts of it, and results be replicated or amplified by national partners or other actors considering institutional and financial dimensions?

#### Cross-cutting issues:

1. To what extent has the project identified and integrated into its actions the operational and strategic needs and priorities for men, women, and vulnerable groups, such as persons with disabilities, in the relevant sector of operation?

2. How has the project been able to meet the specific needs of men, women and vulnerable groups, such as persons with disabilities?

### 3. Methodology

The independent mid-term evaluation will comply with evaluation norms and standards and follow ethical safeguards, all as specified in ILO's evaluation procedures. The ILO adheres to the United Nations Evaluation Group (UNEG) evaluation norms and standards as well as to the OECD/DAC Evaluation Quality Standards. The evaluation is an independent evaluation and the final methodology and evaluation questions will be determined by the consultant in consultation with the Evaluation Manager. The evaluation will apply methodology that should include multiple methods, with analysis of both quantitative and qualitative data, and should be able to capture intervention's contributions

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<sup>8</sup> The extent to which the intervention delivers, or is likely to deliver, results in an economic and timely way.

<sup>9</sup> The extent to which the intervention is likely to generate or is expected to generate significant positive or negative, intended or unintended, higher-level effects.

<sup>10</sup> The extent to which the net benefits of the intervention continue or are likely to continue

to the achievement of expected and unexpected outcomes, including triangulation to increase the validity and rigor of the evaluation findings, engaging with tripartite constituents, stakeholders and partners of the project, as much as feasible, at all levels during the data collection and reporting phases. The data and information should be collected, presented and analyzed with appropriate gender disaggregation even if project design did not take gender into account. Also, the data collection, analysis and presentation should be responsive to and include issues relating to ILO's normative work, social dialogue, diversity and non-discrimination, including disability issues. The specific detailed elaboration of the evaluation method will be defined in consultation between the evaluation team and the evaluation manager and will be described in detail in the inception report to be submitted accordingly to the agreed schedule of deliverables. The evaluator may adapt the methodology, but any fundamental changes should be agreed between the evaluation manager and the evaluator, and reflected in the inception report. For required quality control of the whole process, the evaluator will follow the EVAL evaluation policy guidelines and the ILO/EVAL checklists available in the Annex I.

The methodology will ensure involvement of key stakeholders in the implementation as well as in the dissemination processes (e.g. stakeholder workshop, debriefing of project manager, etc.). The methodology should clearly state the limitations of the chosen evaluation methods, including those related to representation of specific group of stakeholders.

The methodology will include examining the intervention's Theory of Change (or request if feasible that evaluator reconstructs one if the TOC is not in place), with particular attention to the identification of assumptions, risk and mitigation strategies, and the logical connect between levels of results and their alignment with ILO's strategic objectives and outcomes at the global and national levels, as well as with the relevant SDGs and related targets.

The evaluation methodology will include:

- **Desk review:** desk review of all relevant documents: project document and its logical framework, funding agreement, relevant minute sheets, implementation plan, performance evaluation plan, progress reports, other relevant documents and studies.

Desk review, including the following information sources:

- Project Document;
- ToC, logframe, results framework, work plans, budget;
- List of key stakeholders to be interviewed with contact details;
- List of names and positions of current and former technical assistance project staff and contacts;
- All technical progress reports including the inception phase;
- Research, strategy documents and study reports (including baseline studies if existing) conducted by the Project;
- All key project finance documents and records;
- Newspaper articles;
- Mission reports; and
- Any other available relevant document on the project.

The desk review may suggest a number of preliminary findings that could be useful in reviewing or fine-tuning the evaluation questions. The desk review will include briefing interviews with the project team and the donor.

The evaluator / evaluation team will ensure that women's views and perceptions are also reflected in databases, interviews and that gender-specific questions are included in the questionnaires.

- **Initial meetings**, this will include at least:
  - with the project staff: the evaluator will meet the project staff to reach a common understanding for the evaluation process.
  - with backstopping units and the donor: the evaluator will meet with the technical backstopping in HQ through Teams or other online platform. These meetings aim to reach a common understanding in relation of the technical and financial status of the project.
- **Interviews with stakeholders for collection of primary data:** the evaluator will meet with the national key partners of the project. The evaluator will meet with number of project beneficiaries (partners / fellows) and organize focus group discussions with them. During the data collection process, evaluator / evaluation team will compare and cross-validate data from different sources (constituents, project staff, project partners and beneficiaries) to verify their accuracy, and different methodologies (review documentary and interviews) that will complement each other.

The evaluator / evaluation team should develop the final evaluation methodology, including a theory of change (ToC), in consultation with the evaluation manager, once the evaluator submits the inception report. The methods should be selected for their rigor and their ability to produce empirical evidence to meet the evaluation criteria, answer the evaluation questions and meet the objectives of the evaluation.

An indicative list of persons to be interviewed will be prepared by the project in consultation with the Evaluation Manager. The project will provide logistical support in the organization of these interviews.

Main stakeholders to be consulted: will include key national partners; workers and employers organizations; the donor; ILO relevant staff and others actors involved in the project. A details list of contact will be determined with the evaluator.

#### 4. Main deliverables

The following products will have to be produced and delivered by the evaluation team:

- **Inception report** (incl. methodological note) (refer to Checklist 4.8 "Writing the Inception

Report”<sup>11</sup> ) the extension will be not more than 20 pages excluding the annexes, upon the review of available documents and an initial discussion with the project management and the donor (EVAL Guidelines –Checklist 4.8) will be developed. The inception report will:

- Describe the conceptual framework that will be used to undertake the evaluation;
  - Elaborate the methodology proposed, including developing a ToC, in the TOR with changes as required;
  - Set out in some detail the data required to answer the evaluation questions, data sources by specific evaluation questions,(emphasizing triangulation as much as possible) data collection methods, and purposive sampling
  - Selection criteria for individuals for interviews (as much as possible should include men, youth and women);
  - Detail the work plan for the evaluation, indicating the phases in the evaluation, their key deliverables and milestones;
  - Set out the list of key stakeholders to be interviewed and the tools to be used for interviews and discussions;
  - Set out the agenda for the stakeholders workshop;
  - Set out outline for the final evaluation report;
  - Interview guides and other data collection tools
- **A first draft of the evaluation report** that will have to be written in English, answer the questions related to the evaluation criteria, including the recommendations, lessons learned,

<sup>11</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746817.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746817.pdf)

good practices, technical recommendations for the key stakeholders. The report will be sent to the evaluation manager (refer to “Checklist 4.2: Preparing the evaluation report”<sup>12</sup> and Checklist 4.9: Rating The Quality Of An Evaluation Report <sup>13</sup>). The Evaluation Manger is responsible for reviewing and approving this draft. The draft review report will be shared with all relevant stakeholders by the evaluation manager. They will be asked to provide comments within five working days.

1. Cover page with key project and evaluation data
2. Executive Summary
3. Acronyms and abbreviations
4. Context and description of the project including reported key reported results
5. Methodology and limitations
6. Findings (this section’s content should be organized around evaluation criterion and questions), including a table showing output and outcome level results through indicators and targets planned and achieved and comments on each one.
7. Conclusions
8. Recommendations (i.e. for the different key stakeholders and project partners), indicating per each one priority, timeframe and level of resources required. Suggested: maximum 8-10 recommendations in total).
9. Lessons learned and good practices
10. Annexes:
  - TOR
  - List of persons consulted
  - Schedule of work (briefings, data collection, interviews, field visits, workshop/s)
  - Documents consulted
  - Evaluation matrix
  - Data collection tools
  - Logical framework analysis matrix

- Lessons learned
- Emerging good practices

<sup>12</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/--ed\\_mas/--eval/documents/publication/wcms\\_746808.pdf](https://www.ilo.org/wcmsp5/groups/public/--ed_mas/--eval/documents/publication/wcms_746808.pdf)

<sup>13</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/--ed\\_mas/--eval/documents/publication/wcms\\_746818.pdf](https://www.ilo.org/wcmsp5/groups/public/--ed_mas/--eval/documents/publication/wcms_746818.pdf)

- **The final evaluation report**, which must be written in English, must be about 30-40 pages maximum (excluding annexes and executive summary), follow the structure presented in appendix III and include a cover page. Appendices should include the questions matrix, the interview and focus groups guides, field work schedule, a list of interviewees, and a list of documents analysed, a PowerPoint summary in English. The quality of the report in English will be assessed based on the ILO checklist 6 (see above).
- **A summary of the final evaluation report** (ILO/EVAL template) will be sent, together with the final report, in English to the evaluation manager based on the executive summary of the evaluation report.
- **Lessons learnt and good practices** (template for lessons learned and good practices can be found in the "Checklist 4.2: Preparing the evaluation report"<sup>14</sup> and Checklist 4.9: Rating The Quality Of An Evaluation Report <sup>15</sup>)

Final Approval of Report by EVAL.: quality of the report will be reviewed and comments/feedback may be provided before final approval of the report

- **Dissemination:** the evaluation report will be submitted to the key stakeholders by the CO, a workshop will be organised to inform the main stakeholders, and also the report will be uploaded in the EVAL public repository of evaluation reports (e-discovery)

## 2. Management arrangements and work plan (including timeframe)

The organization and coordination of the evaluation assignment will be provided by Mr Pablo Arellano ([arellano@ilo.org](mailto:arellano@ilo.org)), the designated Evaluation Manager at ILO level. The evaluator / evaluation team will discuss with him all technical and methodological issues when needed. The consultant, with the support of the evaluation manager, will be able to coordinate with the CTA to provide the main documents and any information that they will need to carry out the evaluation. It will facilitate contacts with the different partners. Meetings will be organized on this occasion with the authorities, partners and beneficiaries concerned by the project. The evaluator / evaluation team will also receive technical, logistical, and administrative support from the project team.

The evaluation manager is responsible for completing the following specific tasks:

<sup>14</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/--ed\\_mas/--eval/documents/publication/wcms\\_746808.pdf](https://www.ilo.org/wcmsp5/groups/public/--ed_mas/--eval/documents/publication/wcms_746808.pdf)

<sup>15</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/--ed\\_mas/--eval/documents/publication/wcms\\_746818.pdf](https://www.ilo.org/wcmsp5/groups/public/--ed_mas/--eval/documents/publication/wcms_746818.pdf)

- Draft and finalize the evaluation TOR with inputs from key stakeholders;
- Develop the Call for expression of interest and select the independent evaluator in coordination with EVAL;
- Brief the evaluator on ILO evaluation policies and procedures;



- Initial coordination with the project team on the development of the data collection process and the preliminary results workshop;
- Review and provide comments on all evaluation deliverable
- Circulate the first draft of the evaluation report to the key stakeholders requesting written comments within 5 working days;
- Consolidate the received written comments received into a master evaluation report to send the evaluator / evaluation team; and
- Ensure the final version of the evaluation report addresses the stakeholders' comments (or an explanation why any has not been addressed) and meets ILO requirement

Proposed work days for the evaluation

<b>Task</b>	<b>Responsible</b>	<b>Number of work days</b>	<b>Date</b>
Selection evaluator / evaluation team consultants	Evaluation Manager		
Recruit evaluator / evaluation team consultants	Evaluation Manager, Evaluation Focal Point, Project Manager		<b>22/12/2023</b>
<b>Inception phase:</b> briefing with the evaluation manager, project manager, documents review and development and approval of the inception report	Evaluation Manager, Project Manager, Evaluator	<b>3</b>	
<b>Data collection phase</b> (interviews )	Evaluator	<b>6</b>	
<b>Post-fieldwork debrief call</b>	Evaluation Manager		
<b>Report drafting:</b> preparation of draft preliminary report (full draft with annexes) submitted to the evaluation manager for review	Evaluator	<b>6</b>	<b>02/02/2024</b>

<b>Circulating the draft report for comments from stakeholders</b>	Evaluation Manager		
<b>Workshop with stakeholder</b>	Evaluation Manager, Project Manager, Evaluator		<b>16/02/2024</b>
<b>Consolidate feedback from stakeholders and send feedback to the consultant.</b>	Evaluation Manager	<b>1,5</b>	
<b>Preparation of Final Evaluation Report</b> and separate Evaluation Summary and submits to ILO. the evaluator will incorporate the feedback as appropriate, and send the final report to the evaluation manager	Evaluator		
<b>Review and approval of the</b> evaluation report by the evaluation manager and the Department Focal Point	Evaluation Manager		
<b>EVAL provides final approval</b>	Evaluation Manager		
<b>Total</b>		<b>16,5</b>	

### Timeline

The evaluation will be undertaken over 1,5 months December 2023- February 2024. A detailed timetable will be included in the inception report developed by the evaluator.

All logistics costs will be covered by the project.

### Resources

Estimated resource requirements:

- Evaluator: 16,5 days of honorarium,
- Stakeholders online workshop (as needed)

### Payment Schedule

The fees of the evaluator / evaluation team, corresponding to approximately XX days of effective work, will be made once the products are received to the satisfaction of the ILO as follows:

- Payment 1: 30% (US\$ XXX) upon delivery and approval of the **Inception report**.
- Payment 2: 70% (US\$ XXX) against delivery and approval of the **Final Evaluation Report**,

including **the summary of the final evaluation report** and the **lessons learnt and good practices**

### 3. Profile of the evaluation team

The evaluation will be conducted by an experienced evaluator.

#### Main qualifications:

- Advanced university degree preferably in economics, business management or related qualifications,
- A minimum of 7 years of professional experience in evaluating international programmes and projects, development initiatives, logical framework and other strategic approaches, M&E methods and approaches, and information analysis and report writing,
- Recent experience with result-based management monitoring and evaluation methodologies
- Previous involvement and understanding of ILO procedures is an advantage and extensive national / international experience in the fields of project formulation, execution, and evaluation is required.
- Work experience in the African region will be an asset.
- Excellent communication and interview skills,
- Excellent report writing skills,
- Demonstrated ability to work in group and deliver quality results within strict deadlines,
- Excellent knowledge and excellent drafting skills in English.
- Excellent communication and interview skills,
- Knowledge of gender equality and disability inclusion within evaluations
- Demonstrated ability to work in group and deliver quality results within strict deadlines,

#### Main duties:

- Responsible for conducting the evaluation
- Coordinate with evaluation manager, project team and stakeholders to conduct the entire evaluation process
- Conduct a desk review of all relevant documents and meet main stakeholders
- Elaborate the inception report (incl. methodological elaborations), the first draft and final report, executive summary and templates for lessons learned and good practices in deadlines and in conformity with ILO and international standards
- Conduct an online workshop with main stakeholders at the end of the evaluation
- Participate to debriefings with main stakeholders on the main results and recommendations of the evaluation

## 2. Legal and ethical matters

All data and information received from the ILO or other stakeholders for the purposes of this assignment shall be treated as confidential and shall be used only for the purpose of executing this mandate. All intellectual property rights arising from the execution of this mandate are attributed to the ILO. The contents of the written documents obtained and used in connection with this assignment may not be disclosed to third parties without the prior written consent of the ILO or the relevant stakeholders.

This evaluation complies with the United Nations norms and standards for evaluation and will ensure that ethical safeguards regarding the independence of the evaluation are taken into account. Please see UNEG ethical guidelines [here](#).

- <sup>1</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_571339.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_571339.pdf)
- <sup>2</sup> Available at: [https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746808.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746808.pdf)

## Annex I. All relevant ILO evaluation guidelines and standard templates

1. Code of conduct form (To be signed by the evaluator)  
[http://www.ilo.org/eval/Evaluationguidance/WCMS\\_206205/lang-en/index.htm](http://www.ilo.org/eval/Evaluationguidance/WCMS_206205/lang-en/index.htm)
2. Checklist 4.8 Writing the inception report  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746817.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746817.pdf)
3. Checklist 4.2: Preparing the evaluation report  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746808.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746808.pdf)
4. Checklist 4.9: Rating The Quality Of An Evaluation Report  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746818.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746818.pdf)
5. Guidance Note 5.5: Dissemination of Lessons Learned and Emerging Good Practices  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746730.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746730.pdf)
6. Guidance Note 3.1 Integrating Gender Equality in Monitoring & Evaluation of Projects.  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746716.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746716.pdf)
7. Guidance Note 4.5: Stakeholder engagement  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746724.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746724.pdf)
8. Guidance Note 3.2: Adapting evaluation methods to the ILO's normative and tripartite mandate  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746717.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746717.pdf)
9. Checklist 4.3: Filling in the Evaluation Title Page  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746810.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746810.pdf)
10. Template for executive summary  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_mas/---eval/documents/publication/wcms\\_746822.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---eval/documents/publication/wcms_746822.pdf)

**Annex 2** List of documents consulted during the mid-term evaluation phase

1. Terms of Reference for the Mid-Term Evaluation of the ILO-AFD Project: “Stimulating innovation and impact insurance in Africa”
2. Project Document / Concept Note for the ILO-AFD Project: “Stimulating innovation and impact insurance in Africa”, October 2020
3. Project Logical Framework (LogFrame)
4. ILO Evaluation Tools/Guidelines
5. Manuel de Procédures for partnership between the Agence Française de Développement (AFD) and the ILO’s Impact Insurance Facility for the ILO-AFD Project: “Stimulating innovation and impact insurance in Africa”
6. Financial Agreement n° CZZ 2767 01K (the “Agreement”) between Agence Française de Développement (AFD) and International Labour Organization (ILO)
7. Call for Fellowship applications, The ILO’s Social Finance Programme, June 2021
8. Call for proposals – Submission guidelines: “Delivering risk management solutions through public-private partnerships in Africa, July 31
9. AFD-ILO Partner selection process, July 2022
10. First Progress Report for May 1, 2021 to April 30, 2022 for the ILO-AFD Project: “Stimulating innovation and impact insurance in Africa”, ILO Technical Cooperation, 30 June 2022
11. Second Progress Report for May 1, 2022 to April 30, 2023 for the ILO-AFD Project: “Stimulating innovation and impact insurance in Africa”, ILO Technical Cooperation, 30 June 2023
12. Etat des recettes et dépenses au 31-Déc-22 pour France, Agence Française de Développement pour Projet RAF/20/02/FRA (108193) - Accord RAF/20/02/FRA (502729) - Réf. Donateur: CZZ276701K, Organisation Internationale du Travail (OIT)
13. Statement of Income and Expenditure as at 21-Dec-23 for France, Agence Française de Développement for Project RAF/20/02/FRA (108193) - Accord RAF/20/02/FRA (502729) - Réf. Donateur: CZZ276701K, International Labour Organization (ILO)
14. Financial report and audited consolidated financial statements for the year ended 31 December 2021, International Labour Conference, 110th Session, 2022, ILC.110/FIN
15. Financial report and audited consolidated financial statements for the year ended 31 December 2022, International Labour Conference, 111th Session, 2023, ILC.111/FIN
16. Programme and budget for the biennium 2020–21, ILO
17. Programme and budget for the biennium 2022–23, ILO
18. ILO programme implementation 2020–21, ILC.110/Report I(A), ILO
19. <https://www.afd.fr/en/actualites/communiquede-presse/afd-group-and-ilo-join-hands-provide-access-inclusive-insurance-most-vulnerable>
20. <https://rwanda.ifpri.info/2022/10/24/agricultural-insurance-in-rwanda-principles-products-and-practices-to-inform-the-national-agriculture-insurance-scheme-nais/#:~:text=The%20Ministry%20of%20Agriculture%20and,insurance%20companies%2C%20the%20NAIS%20is>

**Annex 3 Stakeholders Analysis – Individual Interviews and Focus-Group Discussions Participants and Schedule of Work for the Mid-term Evaluation of the Stimulating innovation and impact insurance in Africa Project**

Organization / Institution	Name	Position	Country	Date of Interview
International Labour Organization (ILO)	Mr. Craig Churchill	Head Social Finance, ILO	Switzerland	12.03.2024
International Labour Organization (ILO)	Mr. Pranav Prashad	Project Manager (2023 onwards); “Mentor” for Fellow and coordinator of 3 sub projects	Switzerland	13.02. & 11.03.2024
International Labour Organization (ILO)	Mr. Aparna Dalal	Project Manager 2021-23; coordinator of sub projects	Switzerland	12.03.2024
International Labour Organization (ILO)	Ms. Lisa Morgan	Mentor for 1 Fellow and coordinator technical inputs for one sub project	Switzerland	15.03.2024
International Labour Organization (ILO)	Ms. Camyla Fonseda	Capacity Building Officer	Switzerland	14.03.2024
International Labour Organization (ILO)	Mr. Pablo Arellano	Senior Evaluation Officer	Switzerland	13.02.2024
Agence Française de Développement (AFD), France	Ms. Solene Le Bleis	Project Team Leader - Financial System (mid 2023 onwards)	France	28.03.2024
Agence Française de Développement (AFD), France	Mr. Hugo Lecue	Project Team Leader - Solene Predecessor (if required)	France	08.04.2024

Organization / Institution	Name	Position	Country	Date of Interview
Radiant Yacu Insurance, Rwanda	Mr. Ovia Tuhairwe	CEO Radiant Yacu Insurance Rwanda	Rwanda	19.03.2024
Radiant Yacu Insurance, Rwanda	Ms. Jackline Chemtai Kapsukut	ILO Social Finance Fellow	Rwanda	14.03.2024
Radiant Yacu Insurance, Rwanda	Mr. James Gakuru	Radiant Yacu Insurance Rwanda (TBD)	Rwanda	19.03.2024
Radiant Yacu Insurance, Rwanda	Mr. Joseph Museruka	National Agriculture Insurance Programme Manager	Rwanda	01.04.2024
PharmAccess, Kenya	Ms. Sauline Phanice Ajore	Ministry of Health, Kisumu Country	Kenya	15.03.2024
PharmAccess, Kenya	Mr. Edward Yano	UHC Coordinator, PharmAccess, Kenya	Kenya	15.03.2024
PharmAccess, Kenya	Mr. Aknyemi Alebiosu	ILO Social Finance Fellow	Kenya	14.03.2024



**Annex 4** Evaluation Matrix and Data Collection Instruments: Mid-term Evaluation of the Stimulating innovation and impact insurance in Africa Project

Title of Evaluation		Data sources				
		Document review	Literature review	Interviews Focus-Group Discussions	Case studies	Survey questionnaire
Stimulating innovation and impact insurance in Africa						
Evaluation criteria	Evaluation question					
1. <u>Relevance</u>						
The extent to which the objectives of a development intervention are consistent with beneficiaries' requirements, country needs, global priorities and partners' and donor' policies.  The extent to which the approach is strategic and the ILO uses its comparative advantage.	To what extent was the project relevant to the national development priorities?	x	x	x	x	
	To what extent were the project objectives consistent with the national key partners' needs, requirements, and the country needs?	x	x	x	x	
	Was the Project responding to Agence Française de Développement (AFD)'s strategic priorities, and how (qualitative and quantitative contributions?)	x	x	x	x	

Title of Evaluation		Data sources				
		Document review	Literature review	Interviews Focus-Group Discussions	Case studies	Survey questionnaire
Stimulating innovation and impact insurance in Africa						
Evaluation criteria	Evaluation question					
	To what extent did the project contribute to the relevant International Labour Organisation Programme & Budget Outcomes and development priorities in the countries where the project has been implemented?	x	x	x		
	To what extent did the project build on previous experience of the ILO in the region, and relevant experience of other local and international organizations in the region?	x	x	x	x	
<u>2. Validity of intervention design</u>						
The extent to which the design is logical and coherent.	Was the project design adequate to meet project objectives?	x	x	x		
	Do outputs causally link to the intended outcomes and objectives?	x	x	x		
	To what extent was the project design adequate and effective in the coherence	x	x	x	x	

Title of Evaluation		Data sources				
		Document review	Literature review	Interviews Focus-Group Discussions	Case studies	Survey questionnaire
Stimulating innovation and impact insurance in Africa						
Evaluation criteria	Evaluation question					
	and complementarity between the different project components?					
<u>3. Project Coherence</u>						
The extent to which the intervention's is compatible with other interventions in a country, sector or institution. Coherence and flexibility of operations/interventions: To what extent did the "Stimulating Innovation and impact insurance in Africa" Project capture perspectives that were not covered previously in the stimulating innovation and impact insurance in the African countries: Kenya and Rwanda? This should include partnerships and linkages, and to understand interventions within broader systems.	Complementarity with existing interventions - Is the "Stimulating Innovation and impact insurance in Africa" project working holistically alongside other stimulating innovation and impact insurance projects in African countries, do they collaborate and complement each other?	x	x	x	x	
	To what extent did the Project, at design and/or mobilization phase, take account of ongoing and/or planned initiatives?	x	x	x		
	To what extent did the Project team make efforts to ensure that the Project was complementary to other ILO and UN interventions, and optimize any	x	x	x	x	

Title of Evaluation		Data sources				
		Document review	Literature review	Interviews Focus-Group Discussions	Case studies	Survey questionnaire
Stimulating innovation and impact insurance in Africa						
Evaluation criteria	Evaluation question					
	synergies?					
	Are there any partnerships built with other projects with similar objectives in climate change and adaptation in the region?	x	x	x	x	x
<u>4. Intervention progress and effectiveness</u>						
The extent to which the intervention's immediate objectives were achieved, or are expected to be achieved, taking into account their relative importance.	<p>Availability of Outputs</p> <ul style="list-style-type: none"> <li>- Were Outputs and milestones delivered on time and as planned? If not, what were the reasons of delay/changes?</li> <li>- What is the quality of these Outputs?</li> <li>- To what extent do the Outputs contribute to their planned Outcomes?</li> <li>- How useful, relevant and appropriate did beneficiaries find the Outputs produced by the Project?</li> </ul> <p>Which factors contributed to the achievement of Outputs (and/or what were the reasons Outputs were not</p>	x	x	x	x	

Title of Evaluation  Stimulating innovation and impact insurance in Africa		Data sources				
		Document review	Literature review	Interviews Focus-Group Discussions	Case studies	Survey questionnaire
Evaluation criteria	Evaluation question					
	produced)?					
	<p>Achievement of direct outcomes</p> <p>To what extent have the project objectives been achieved?</p> <p>What direct Outcomes (as per reconstructed Theory of Change (TOC)) have been achieved?</p> <p>Are these Outcomes a result of Project intervention?</p> <p>Would these have been achieved without the direct involvement of ILO? Why?</p>	x	x	x	x	

Title of Evaluation		Data sources					
Stimulating innovation and impact insurance in Africa		Document review	Literature review	Interviews	Case studies	/ Survey questionnaire	
		Evaluation criteria	Evaluation question				
<u>5. Efficiency of resource use</u>							
<p>A measure of how economically resources/inputs (funds, expertise, time, etc.) are converted to results.</p>	<p>Cost effectiveness and timeliness of project execution</p> <ul style="list-style-type: none"> <li>- Were any cost or time-saving measures put in place to maximize results within the secured budget and agreed Project timeframe?</li> <li>- Did the Project make use of / build upon pre-existing institutions, agreements and partnerships, data sources, etc. to increase Project efficiency? How?</li> <li>- What factors have caused delays (if any) and have affected Project execution, costs and effectiveness? How?</li> <li>- Were events leading to completion of activities sequenced efficiently?</li> <li>- What was the role of the Project's governance structure and management approach on its efficiency?</li> </ul>	x	x	x			

Title of Evaluation		Data sources				
		Document review	Literature review	Interviews	Case studies	Survey questionnaire
Stimulating innovation and impact insurance in Africa						
Evaluation criteria	Evaluation question					
	<p>Aspects related to external operating context (considering the prevalence of conflict, natural disasters, and political upheaval).</p> <p>-Has the Project faced an unusually challenging operational environment that negatively affected project performance, such as:</p> <ul style="list-style-type: none"> <li>➤ Conflicts or security issues?</li> <li>➤ Government instability?</li> <li>➤ Risks of natural disasters?</li> </ul> <p>Covid-19 pandemics?</p>	x	x	x	x	x
<u>6. Effectiveness of management arrangements</u>						
The extent to which management capacities and arrangements put in place support the achievement of	Have unexpected positive and negative results took place, and why?	x	x	x		
	Have unexpected positive and negative	x	x	x		

Title of Evaluation		Data sources				
		Document review	Literature review	Interviews	Case studies	Survey questionnaire
Stimulating innovation and impact insurance in Africa						
Evaluation criteria	Evaluation question					
results.	results took place?					
	Are the resources (financial, human, time) made available to the project used efficiently regarding obtained outputs?	x	x	x		
	Have the project developed an M&E strategy that enhance accountability, learning and feed into management?  How have the roles and responsibilities between the project and key partners regarding planning M&E of the project worked?	x	x	x		
<u>7. Impact orientation and sustainability of the intervention</u>						
The strategic orientation of the project towards making a significant contribution to broader, long-term, sustainable development changes.  The likelihood that the results of the	<b>To what extent are project's results sustainable?</b>  SQ: Did the project develop appropriate partnerships that could sustain the gains	x	x	x		



Title of Evaluation		Data sources				
Stimulating innovation and impact insurance in Africa		Document review	Literature review	Interviews	Case studies	/ Survey questionnaire
		Evaluation criteria	Evaluation question			
intervention are durable and can be maintained or even scaled up and replicated by intervention partners after major assistance has been completed.	beyond the project?					
	What can be identified as project sustainable impacts in the target groups and other actors as relevant? Are the results integrated or likely to be integrated into national institutions, target populations, and will partners be able to sustain them beyond the project (institutionalisation of project components)?		x	x		
	What measures and actions have been put in place to ensure ownership of the project's results within the selected partners and fellows?	x	x	x	x	

Title of Evaluation		Data sources				
Stimulating innovation and impact insurance in Africa		Document review	Literature review	Interviews	Case studies	/ Survey questionnaire
		Evaluation criteria	Evaluation question			
	Can the project's approach or parts of it, and results be replicated or amplified by national partners or other actors considering institutional and financial dimensions?	x	x	x	x	

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Annex 5 Updated Revised Project Logical Framework (LogFram) of the Stimulating innovation and impact insurance in Africa Project<sup>14</sup>

<b>ILO - AFD PROJECT TITLE</b>				
<b>Stimulating innovation and impact insurance in Africa</b>				
<b>IMPACT</b>	<b>Activity</b>	<b>Impact Indicator</b>	<b>Target (Key Performance Indicator - KPI)</b>	<b>Assumptions</b>
Strengthen the resilience of low-to-middle income population in Africa through Public-Private Partnerships (PPPs) by stimulating innovation and impact insurance	Pilot and scale-up innovations that deliver value to low-income households in a viable way	Number of piloted and scaled-up innovations that deliver value to low-income households in a viable way	The piloted and scaled-up innovations deliver value to 800,000 low-income households in a viable way	The political and economic situation enables conducive environment to strengthen the resilience of low-to-middle income population in Africa through stimulating innovation and new innovative impact insurance solutions.
<b>COMPONENT 1 - OUTCOME 1</b>				
<b>Enhanced use of Innovation Management for low-income households and Small and Medium Enterprises (SMEs) through Public-Private Partnerships (PPPs)</b>				
<b>OUTPUT 1.1</b>	<b>Activity 1.1.1</b>	<b>Output Indicator 1.1.1</b>	<b>Target (Key Performance Indicator - KPI)</b>	<b>Assumptions</b>
Increased resilience of informal low-income populations to shocks through better access to a range of quality risk management solutions provided through Public-Private Partnerships (PPPs)	Partners to pilot new products found	Number of partners that will pilot new products or operational solutions with a gender-specific approach, and scale them up	4-5 partners that will pilot new products or operational solutions with a gender-specific approach, and scale up at least half of them	There will be enough interested private partners from SMEs, health and / or agriculture insurance to work as partners on this project.  There will be enough interested partner individuals attending workshops in new markets and networks.
	Activity 1.1.2	Output Indicator 1.1.2	Target (Key Performance Indicator - KPI)	
	Partners answered key learning questions through action research projects	Number of partners individuals attend workshops in new markets and networks	8-12 partner individuals attend workshops in new markets and networks	
<b>OUTPUT 1.2</b>	<b>Activity 1.2.1</b>	<b>Output Indicator 1.2.1</b>	<b>Target (Key Performance Indicator - KPI)</b>	<b>Assumptions</b>
Established, effective appropriate and accessible risk management options offered by PPPs for low-income segment in countries of intervention	Partners pilot new products or operational solutions with a gender-specific approach, and scale them up	Number of new products or operational solutions with a gender-specific approach piloted and scaled up	At least 8-10 new products or operational solutions with a gender-specific approach pilot, and scale up at least half of them (4-5)	New insurance products and operational solutions will be invented. Half of the new insurance products and operational solutions will be scaled up. There will be sufficient interested men and women in new insurance products and operational solutions.  There will be enough lessons learned from the partners in order to be able to publish new knowledge products (papers, webinars, case briefs etc.) .
	Activity 1.2.2	Output Indicator 1.2.2	Target (Key Performance Indicator - KPI)	
	Developed new knowledge products (papers, webinars, case briefs, bite-sized lesson) based on lessons from partners, with at least one on gender-related aspects	Number of new knowledge products (papers, webinars, case briefs, bite-sized lesson) based on lessons from partners, with at least one on gender-related aspects	15 knowledge products (papers, webinars, case briefs, bite-sized lesson) based on lessons from partners, with at least one on gender-related aspects	

<sup>14</sup> ILO CCS Project Revision from 1 June 2020

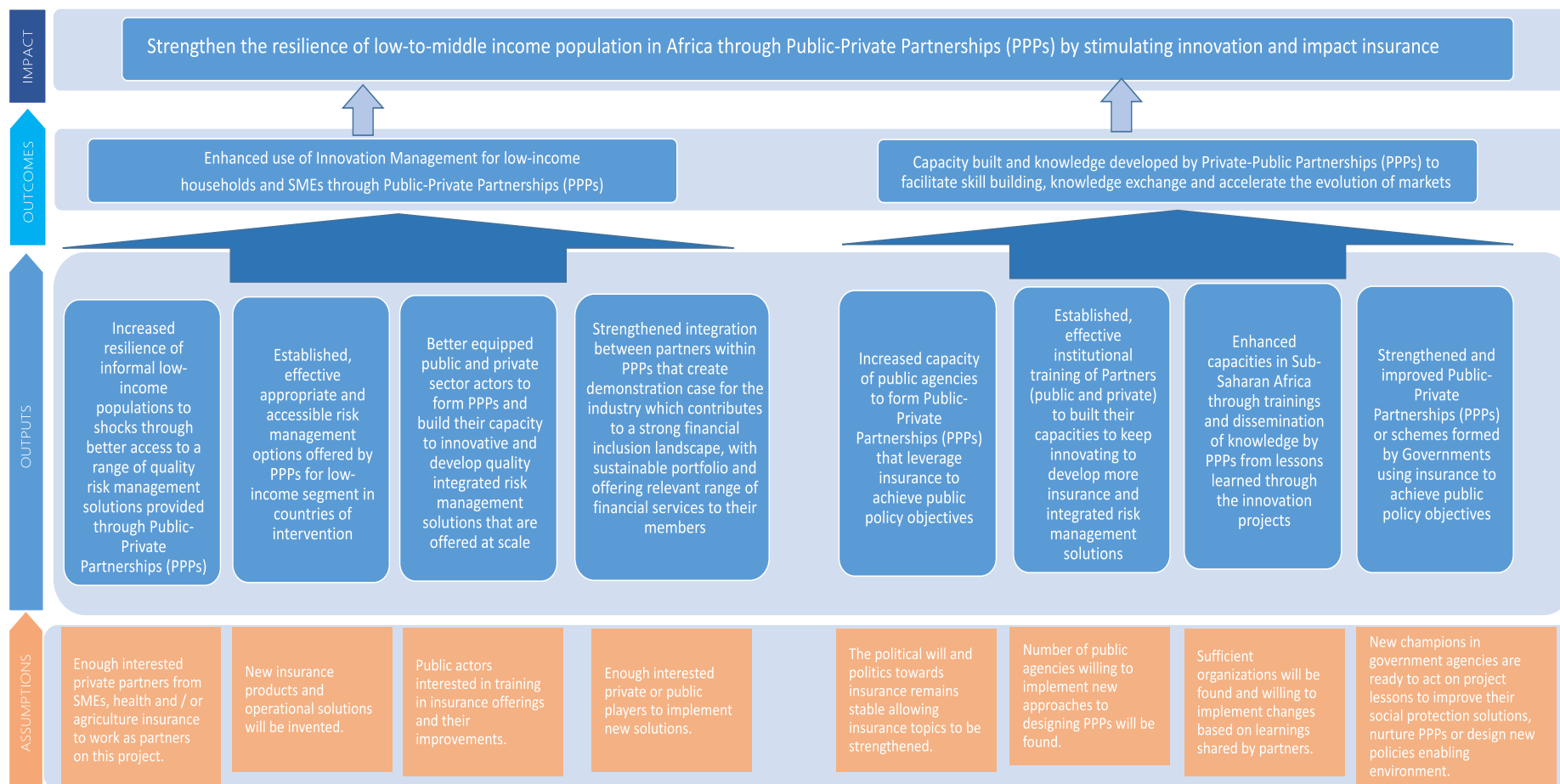
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ILO - AFD PROJECT TITLE		Stimulating innovation and impact insurance in Africa		
COMPONENT 1 - OUTCOME 1				
Enhanced use of Innovation Management for low-income households and Small and Medium Enterprises (SMEs) through Public-Private Partnerships (PPPs)				
OUTPUT 1.3	Activity 1.3.1	Output Indicator 1.3.1	Target (Key Performance Indicator - KPI)	Assumptions
Better equipped public and private sector actors Public-Private Partnerships (PPPs) and build their capacity to innovative and develop quality integrated risk management solutions that are offered at scale	Increased awareness and use of best-practices by multiple other players that access new know-how generated by the project	Number of other players with increased awareness and use of best-practices that access new know-how generated by the project	Increased awareness and use of best-practices by more than 30 other players that access new know-how generated by the project	There will be sufficient number of best-practices and new know-how generated by the project. There will be certain number of public actors interested in training in insurance offerings There will be interest of public actors to improve insurance offers. New fellows with willingness to develop their skills will be found.
	<b>Activity 1.3.2</b>	<b>Output Indicator 1.3.2</b>	<b>Target (Key Performance Indicator - KPI)</b>	
	Peer learning through a practitioner learning group results in better skills among partners and more insightful lessons	Number of TOTs at local training institutes	6 TOTs at 3 local training institutes and trainings that result in 100 professionals from more than 40 private or public actors trained on how to improve insurance offerings	
	<b>Activity 1.3.3</b>	<b>Output Indicator 1.3.3</b>	<b>Target (Key Performance Indicator - KPI)</b>	
	Trainings performed that result in training of number of professionals from number of private or public actors trained on how to improve insurance offerings	Number of trainings that result in training of number of professionals from number of private or public actors trained on how to improve insurance offerings	Trainings that result in 100 professionals from more than 40 private or public actors trained on how to improve insurance offerings	
<b>Activity 1.3.4</b>	<b>Output Indicator 1.3.4</b>	<b>Target (Key Performance Indicator - KPI)</b>		
Expanded training curriculum, adapted with new cases and lessons, including gender-related modules.	Number of new fellows with developed skills available to support insurance development	4-5 new fellows with developed skills available to support insurance development		
OUTPUT 1.4	Activity 1.4.1	Output Indicator 1.4.1	Target (Key Performance Indicator - KPI)	Assumptions
Strengthened integration between partners within PPPs that create demonstration case for the industry which contributes to a strong financial inclusion landscape, with sustainable portfolio and offering relevant range of financial services to their members	Replication of new solutions by other private or public players	Number of new solutions are replicated by other private or public players	New solutions are replicated by at least 5 other private or public players	There will be enough interested private or public players to implement new solutions. New training of PPPs with lessons from the new project will be developed. There will be certain number of trained participants that have improved or launched insurance products.
	<b>Activity 1.4.2</b>	<b>Output Indicator 1.4.2</b>	<b>Target (Key Performance Indicator - KPI)</b>	
	Trained participants have improved or launched insurance products	Number of trained participants have improved or launched insurance products	At least 20 trained participants have improved or launched insurance products	

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ILO - AFD PROJECT TITLE		Stimulating innovation and impact insurance in Africa		
COMPONENT 2 - OUTCOME 2				
Capacity built and knowledge developed by Public-Private Partnerships (PPPs) to facilitate skill building, knowledge exchange and accelerate the evolution of markets				
OUTPUT 2.1	Activity 2.1.1	Output Indicator 2.1.1	Target (Key Performance Indicator - KPI)	Assumptions
Increased capacity of public agencies to form Public-Private Partnerships (PPPs) that leverage insurance to achieve public policy objectives	Attending of Impact Insurance Academy or participate in local trainings by government and other relevant stakeholders attend	Number of government and other relevant stakeholders attend Impact Insurance Academy or participate in local trainings	At least 20 government and other relevant stakeholders attend Impact Insurance Academy or participate in local trainings	The political will and politics towards insurance remains stable allowing insurance topics to be strengthened. Government and other relevant stakeholders are found and willing to attend Impact Insurance Academy or participate in local trainings.
OUTPUT 2.2	Activity 2.2.1	Output Indicator 2.2.1	Target (Key Performance Indicator - KPI)	Assumptions
Established, effective institutional training of partners (public and private) to built their capacities to keep innovating to develop more insurance and integrated risk management solutions	Trained public agencies have implemented new approaches to designing PPPs	Number of trained public agencies have implemented new approaches to designing PPPs	At least 5 trained public agencies have implemented new approaches to designing PPPs	Number of public agencies willing to implement new approaches to designing PPPs will be found.
	Activity 2.2.2	Output Indicator 2.2.2	Target (Key Performance Indicator - KPI)	
	New training on PPPs with lessons from the new projects developed	Number of developed new trainings on PPPs with lessons from the new projects	One new training on PPPs with lessons from the new projects	
OUTPUT 2.3	Activity 2.3.1	Output Indicator 2.3.1	Target (Key Performance Indicator - KPI)	Assumptions
Enhanced capacities in Sub-Saharan Africa through trainings and dissemination of knowledge by PPPs from lessons learned through the innovation projects	Organizations that have implemented changes based on learnings shared by partners	Number of organizations that have implemented changes based on learnings shared by partners	At least 10 organizations implement changes based on learnings shared by partners	Sufficient organizations will be found and willing to implement changes based on learnings shared by partners.
OUTPUT 2.4	Activity 2.4.1	Output Indicator 2.4.1	Target (Key Performance Indicator - KPI)	Assumptions
Strengthened and improved Public-Private Partnerships (PPPs) or schemes formed by Governments using insurance to achieve public policy objectives	Improved social protection solutions, nurtured PPPs and / or designed new policies enabling environment with new champions in government agencies based on project lessons	Number of new champions in government agencies act on project lessons to improve their social protection solutions, nurture PPPs or design new policies enabling environment	At least 5 new champions in government agencies act on project lessons to improve their social protection solutions, nurture PPPs or design new policies enabling environment	New champions in government agencies are ready to act on project lessons to improve their social protection solutions, nurture PPPs or design new policies enabling environment.

**Annex 6 Reconstructed Theory of Change for the Mid-term Evaluation of the ILO Project: “Stimulating innovation and impact insurance in Africa”**



**Annex 7** Lessons Learned

**Stimulating innovation and impact insurance in Africa**

**Project DC/SYMBOL:** RAF/20/02/FRA

**Name of Evaluator:** Iva Bernhardt

**Date:** 8 August 2024

*The following lessons learned have been identified during the course of the evaluation:*

LESSON LEARNED ELEMENT 1	TEXT
<b>Brief description of lessons learned</b>	The approach to test and learn new products, processes, and partnerships is performed in a best way as a pilot project in a controlled environment.
<b>Context and any related preconditions</b>	During the intervention for the Rwandan agricultural insurance project, a new tea parametric insurance product was developed using the test and learn principle to test new products, processes, and partnerships in a controlled environment from the first phase of this project.
<b>Targeted users /Beneficiaries</b>	Parametric insurance products users / Ministry of Agriculture / Insurance companies
<b>Challenges /negative lessons - Causal factors</b>	Tea was a very difficult product to test, as the tea producers were not structurally organized.
<b>Success / Positive Issues - Causal factors</b>	A new tea parametric insurance product will be on the Rwandan market as a result of this project.
<b>ILO Administrative Issues</b>	Staff, Resources

LESSON LEARNED ELEMENT 2	TEXT
<b>Brief description of lessons learned</b>	ILO administrative resources and issues (staff, financial resources, design, implementation) should be sufficiently on disposal, especially in project design phase.
<b>Context and any related preconditions</b>	Additional resources would need to be allocated by ILO in the project design phase, especially when constructing the Theory of Change (TOC) and the Project Logical Framework (LogFrame).
<b>Targeted users /Beneficiaries</b>	ILO Department of Enterprises; Impact Insurance Facility/Social Finance,
<b>Challenges /negative lessons - Causal factors</b>	The LogFrame was not developed always using SMART indicators.
<b>Success / Positive Issues - Causal factors</b>	A new tea updated LogFrame and reconstructed Theory of Change were developed during the mid-term evaluation.
<b>ILO Administrative Issues</b>	Staff, Resources, Design

LESSON LEARNED ELEMENT 3	TEXT
<b>Brief description of lessons learned</b>	Learnings on how the PPPs can be designed more effectively and more efficiently by leveraging on the partnership and designing & co-creating it with the Programme Donor.
<b>Context and any related preconditions</b>	The project private partner, like Pharm Access helps in technical cooperation. Another project private partner like Radiant Yacu is an insurance company. Political goodwill is of utmost importance in order to build a successful partnership. There should be an efficient approach of engaging stakeholders and community members. If the insurance product is co-developed (co-produced) between the insurant, the insurer and the subsidizing government body, there is a stronger ownership of the product, and greater chance of the insurant to purchase the product. Government commitment is crucial, as legislating an act is a challenging step that requires a lot of advocacy and lobbying.
<b>Targeted users /Beneficiaries</b>	ILO Department of Enterprises; Impact Insurance Facility/Social Finance; AFD; Project Partners
<b>Challenges /negative lessons - Causal factors</b>	Sometimes there was a lack of engagement of the whole stakeholders chain: insurant, insurer and the government body when designing an insurance product.
<b>Success / Positive Issues - Causal factors</b>	At the end, all insurance product were developed engaging sufficient stakeholders to develop a good product,.



<b>ILO Administrative Issues</b>	Staff, Resources, Design, Planning
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<b>LESSON LEARNED ELEMENT 4</b>	<b>TEXT</b>
<b>Brief description of lessons learned</b>	Evidence-based advocacy is necessary in terms of policy changes.
<b>Context and any related preconditions</b>	In the case of the health insurance in Kenya, the Kisumu country health insurance project has caused policy changes in the Universal Health Coverage (UHC) act on national level.
<b>Targeted users /Beneficiaries</b>	Insurance holders / Ministry of Health / Insurance companies
<b>Challenges /negative lessons - Causal factors</b>	It was difficult to convince people to pay for their health insurance.
<b>Success / Positive Issues - Causal factors</b>	Adopting policy changes in the Universal Health Coverage (UHC) act on national level based on evidence of a functioning health insurance scheme in the Kisumu County, Kenya
<b>ILO Administrative Issues</b>	Resources, Design, Implementation

<b>LESSON LEARNED ELEMENT 5</b>	<b>TEXT</b>
<b>Brief description of lessons learned</b>	A participatory bottom-up approach with the insurer, with the users of the insurance in order to ensure product sustainability should be used when designing an insurance product.
<b>Context and any related preconditions</b>	A participatory bottom-up approach with the insurer, with the users of the insurance to ensure product sustainability was used then designing the products of tea and coffee parametric insurance. When Governments are involved in the process, they can design policies and regulations connected to the products.
<b>Targeted users /Beneficiaries</b>	Insurance products users / Ministries / Insurance companies
<b>Challenges /negative lessons - Causal factors</b>	At first, insurers did not involve insurance holders since project design phase.

<b>Success / Positive Issues - Causal factors</b>	Involved the insurance holders since project design phase.
<b>ILO Administrative Issues</b>	Staff, Resources, Design, Implementation

<b>LESSON LEARNED ELEMENT 6</b>	<b>TEXT</b>
<b>Brief description of lessons learned</b>	Time is needed for people to get used to buying insurance.
<b>Context and any related preconditions</b>	In order to get used to buy insurance products, it is necessary for the people to change their mindset by increasing the trust in the product and their benefits from the product. Hereto would help the insurer's swift agreements to compensation of claims and payout of benefits. Time is needed and it is a crucial factor for new products development and winning new impact insurance customers. A mass media campaign with success stories and mindset changers can be done by the Government to win trust of people in insurance.
<b>Targeted users /Beneficiaries</b>	Parametric insurance products users / Ministries / Insurance companies
<b>Challenges /negative lessons - Causal factors</b>	Insurance products are difficult to market.
<b>Success / Positive Issues - Causal factors</b>	Slow societal change to convince people that insurance is good to have in order to increase social cohesion.
<b>ILO Administrative Issues</b>	Staff, Resources, Implementation

**Annex 8** Emerging Good Practices

## Stimulating innovation and impact insurance in Africa

**Project DC/SYMBOL:** RAF/20/02/FRA

**Name of Evaluator:** Iva Bernhardt

**Date:** 8 August 2024

*The following emerging good practices have been identified during the course of the evaluation:*

GOOD PRACTICE ELEMENT 1	TEXT
<b>Brief summary of the good practice</b> (link to project goal or specific deliverable, background, purpose, etc.)	Continue the practice with pilot projects, as learning is done perfectly through a pilot.
<b>Relevant conditions and Context: limitations or advice in terms of applicability and replicability</b>	Pilot projects are very useful learning mechanisms. They are very instrumental for continuous improvement.
<b>Establish a clear cause- effect relationship</b>	Pilot projects are controlled, small-scale project that enable learnings on how one can upscale insurance and innovative insurance products in certain markets and countries.
<b>Indicate measurable impact and targeted beneficiaries</b>	More insurance holders in agricultural and health insurance (targeted beneficiaries) are positive measurable impact of the pilot projects in Rwanda and Kenya.
<b>Potential for replication and by whom</b>	Pilot insurance projects can be replicated in similar conditions and countries.

<b>Upward links to higher ILO Goals</b> (DWCPs, Country Programme Outcomes or ILO's Strategic Programme Framework)	There is a clear upward link to ILO's DWCPs, Country Programme Outcomes and ILO's Strategic Programme Framework to strengthen social justice, decent work and improve economic sustainable development and growth.
<b>Other documents or relevant comments</b>	

<b>GOOD PRACTICE ELEMENT 2</b>	<b>TEXT</b>
<b>Brief summary of the good practice</b> (link to project goal or specific deliverable, background, purpose, etc.)	Fellowship methodology is the best practice of this project, and fellows are good for accountability and strategic thinking.
<b>Relevant conditions and Context: limitations or advice in terms of applicability and replicability</b>	Fellows are ILO's trained and knowledge based persons at the ILO's private partners. They are on the ground, and the execution of ILO's pilot project is done through the fellow.
<b>Establish a clear cause- effect relationship</b>	Fellows are knowledge-carriers and consultants that are teaching the insurance companies / ILO's partners accountability, best business practices and strategic thinking.
<b>Indicate measurable impact and targeted beneficiaries</b>	More beneficiaries and insurance holders are attracted due to the new methodologies and market products developed by the fellows.
<b>Potential for replication and by whom</b>	Fellowship methodology can be replicated throughout other ILO-programmes, wherever suited.
<b>Upward links to higher ILO Goals</b> (DWCPs, Country Programme Outcomes or ILO's Strategic Programme Framework)	There is a clear upward link to ILO's DWCPs to strengthen decent work and increase economic growth.
<b>Other documents or relevant comments</b>	

GOOD PRACTICE ELEMENT 3	TEXT
<b>Brief summary of the good practice</b> (link to project goal or specific deliverable, background, purpose, etc.)	PPP's are very instrumental in successful insurance client acquisition.
<b>Relevant conditions and Context: limitations or advice in terms of applicability and replicability</b>	PPP's helps a lot in the client acquisition phase. Because the Government is involved as the public partner, it is an automatic trustworthy product. Government premium subsidy, like the case of MINAGRI's premium subsidy of 40% in case of the Rwandan agricultural insurance are welcomed incentives for people to join insurance schemes.
<b>Establish a clear cause- effect relationship</b>	PPP's is a very effective and efficient tool for insurance holders to build trust in an insurance product. Government's involvement and subsidizing is a quality seal for the insurance product.
<b>Indicate measurable impact and targeted beneficiaries</b>	More insurance holders of agricultural and health insurance (targeted beneficiaries) are positive measurable impact of the pilot projects in Rwanda and Kenya, where local and national Governments were subsidizing the insurance products.
<b>Potential for replication and by whom</b>	PPP's can be replicated and upscaled by more potential governments in health and agricultural insurance.
<b>Upward links to higher ILO Goals</b> (DWCPs, Country Programme Outcomes or ILO's Strategic Programme Framework)	There is a clear upward link to ILO's DWCPs, Country Programme Outcomes and ILO's Strategic Programme Framework to strengthen social justice, social trust and cohesion, decent work and improve economic sustainable development and growth.
<b>Other documents or relevant comments</b>	