

Impacts of Development Aid to Mali 2008 – 2021

A Systematic Review of Evaluation Reports

Effects of Development Aid to Mali 2008 – 2021

Part I: Summary Paper

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Introduction

In June 2021, the Policy and Operations Evaluation Department of the Ministry of Foreign Affairs of the Netherlands (IOB) commissioned two systematic reviews, one on the effects of development aid to South Sudan and one for Mali. Both of these are among the most fragile countries in the world, and there is a need to better understand what works and what does not in such contexts.

Systematic reviews are exercises in learning. The objective is to identify all existing evidence on a given topic. Systematic reviews rely on a protocol that contains the search strategy and a set of clear and predefined criteria for determining which reports are to be included in the review. The goal is to produce comprehensive and unbiased evidence concerning the topic chosen.

The main objective of these systematic reviews was to identify and synthesise all evaluation reports on aid to Mali and South Sudan that had been produced by a wide range of relevant bilateral and multilateral actors across all aid sectors. Studies that met all predefined inclusion criteria (see Methods, below) were identified and summarised with regard to the effects of aid across each of the different aid sectors.

The present report is a summary of the main findings from the systematic review of evaluations of aid to Mali. It is based on two underlying, comprehensive reports that offer much more detail than this summary paper. The first of these reports documents detailed findings from 18 country-level evaluations, while the second report documents detailed findings from 86 programme and project evaluations. Both reports provide detailed descriptions of all evaluated interventions, including details on donors, implementers and budgets. Furthermore, they discuss the sustainability of interventions, as well as factors that hindered better implementation and greater effectiveness. Lastly, information is provided on the method used to evaluate the interventions. Findings are structured by aid sector.

Readers are invited to consult these two comprehensive reports for additional information.

Methods

This section briefly summarises the methodological approach used to select relevant studies. For a full description, see the separate report on methods.

This review collects and summarises the available evidence on the impacts of aid to Mali between 2008 and 2021. Searches were conducted in 14 relevant databases, using a specifically developed search string. Websites of 17 important bilateral donors and 24 important multilateral donors were also searched, along with those of 18 major non-governmental development organisations and 24 important repositories of evaluations of international development. In addition, searches were done on google.com and google.fr. Finally, the evaluation departments of multi- and bilateral donors and major NGOs were requested to provide evaluations on aid to Mali. The searches were conducted between June and September 2021.

Title and abstract screening was conducted with *Covidence* screening software. Two researchers had to independently agree or disagree on whether a study met all required inclusion criteria. Conflicting cases were resolved by the principal investigator.

The team screened 6296 studies by title and abstract, and 588 studies in full text.¹ 104 studies on Mali met all the predetermined inclusion criteria.

Studies were included when they met the following criteria:

1. Published in English or French, between 2008 and 2021.
2. Provided an assessment of the outcomes and impacts of projects, programmes, multi-sectoral programmes, and country-level assistance in Mali or South Sudan. Studies that only reported outputs were not included.
3. Studies had to meet one of two thresholds for methodological quality:
 - a. findings based on a logically or statistically measured value for the counterfactual. Studies that met this threshold were deemed to be “**rigorous evaluations**”; or

¹ The search string included both Mali and South Sudan; these numbers are a combination of studies for the two countries. Studies were sorted by country in a second step.

- b. findings based on adequate primary data (typically quantified measures of outcomes, and/or data from interviews) from which it could be demonstrated that the data could plausibly permit the observed outcomes to be attributed to the interventions, without necessarily including a measure for the counterfactual. Studies that met this threshold were deemed to be “**good enough evaluations**”.
4. **Country-level evaluations** of bilateral or multilateral donors were included by default and did not have to meet a threshold for methodological quality.

All included studies were then distributed along 10 predefined aid sectors: women's rights; health; rural development and climate change; rule of law; stabilisation; education; sustainable economic development; nutrition; humanitarian assistance; and good governance. These sectors were defined based on discussions with IOB. When distributing studies among sectors, typically the designations given by the studies themselves were followed. This explains why some types of interventions can be found in more than one sector. For example, Water, Sanitation and Hygiene (WASH) interventions can be found in humanitarian aid, but also in health; and support for village savings and loan associations (VSLAs) can be found in rural development, humanitarian aid and stabilisation.

Evidence Base

The following table summarises the number of included studies per aid sector.

	Included studies, total	Of which "rigorous"	Of which "good enough"
<i>Included by default:</i>			
Country-level programme evaluations	18	n.a.	n.a.
<i>Included when threshold for methodological quality was met:</i>			
Women's Rights and Gender Equality	9	4	5
Health and Nutrition	35	27	8
Rural development, Climate	26	8	18
Rule of Law	0	0	0
Stabilisation	4	0	4
Education	5	3	2
Sustainable economic development	0	0	0
Humanitarian assistance, refugees, migration	3	1	2
Good Governance	4	0	4
Total	104	43	43

Country background Mali

Mali is one of the poorest countries in the world. The landlocked country faces a multitude of development challenges, including high population growth rates, endemic violence and insecurity in the north, and a largely undiversified economy dependent on subsistence agriculture. Mali also experiences recurring natural disasters, such as droughts, irregular rains, and flooding.

In 2020, Mali was ranked 184 out of 189 countries in the Human Development Index (HDI) and was the 16th most fragile country in the world, according to the Fragile States Index (FSI). UNDP's gender inequality index ranked it 155th of 170 countries for 2021.

Mali has been on a sharp downward trajectory since 2012. Prior to that, Mali was considered a "donor darling", with foreign governments keen to provide support for the democratic transition that began in the 1990s, when long-time dictator Moussa Traoré was overthrown and the country began to make significant progress in the field of democracy, human rights, and good governance. There was widespread optimism among donors for Mali's future. In hindsight, analysts note that donors at the time may not have paid sufficient attention to the country's structural deficiencies, such as a dysfunctional justice system, systemic corruption, and lack of government dialogue with civil society.²

A toxic brew of drought, insurgencies, and a military coup ended the positive trajectory of Mali, as well as the overly optimistic outlook of donors. By 2012, Tuareg and Islamist secessionist rebellions in the north had destabilised the country. In reaction to the government's ineffective response to these new threats, the military overthrew the democratically-elected President Touré. Unable to restore its authority in rebel-held areas, the Mali government requested international support. French forces intervened to stabilise the northern regions, followed by the United Nations Multidimensional Integrated Stabilization Mission in Mali (MINUSMA), established in 2013 with a broad mandate to support security and stabilisation. MINUSMA became the UN's most dangerous peacekeeping mission: five years after its launch, 209 peacekeepers out of a force of about 15,000 troops had been killed.

² Norad 2018. Country Evaluation Brief Mali. Report 6/2018. Oslo, April 2018.

Unrest not only gripped the country's northern region. In 2013, violence also erupted in central Mali. The conflict there was mainly fought between agricultural and pastoral communities, fueled by competition for land and water, and exacerbated by climate change.

In June 2015, a peace agreement was brokered between the government and an alliance of various rebel groups. However, that peace deal did not include Islamist insurgency, and insecurity in the north remained high. Important elements of the peace process were the promise of decentralisation, devolution of some authority to the regions, integration of former rebels into a national army, stimulation of the economy in the north, and the introduction of national reconciliation through dialogue and attention to justice.

The implementation of this agreement proved to be extremely difficult and ultimately very little was achieved.³ Constitutional reforms that were promised under the peace agreement remained on hold and the peace process lacked popular support.

In August 2020, another coup d'état took place. Colonel Assimi Goïta overthrew President Ibrahim Boubacar Keïta, declaring himself to be a transitional president and announcing that this transitional period prior to reinstating a democratic regime would extend to five years. The international community condemned the coup, and tension between the government of Mali and Western countries increased. In summer 2021, French president Macron announced that the 5,100-strong French forces serving Mali would be withdrawn. At the same time, it was reported that Mali's military government was becoming increasingly reliant on Russian mercenaries.⁴

In hindsight, it is clear that the escalation of the conflict in northern Mali and the breakdown of the democratic order in 2012 was a watershed for the country and for its relations with donors. During the decade prior to 2012, Mali was treated by the donor community as a positive example of democratic governance. From 2002 – 2011, annual Official Development Assistance (ODA) steadily increased from USD 610.35 million to USD 1.14 billion; see Figure 1.⁵ A substantial part of that aid was channeled through the government in the form of budget support. This support was credited with a positive overall effect on public finances in Mali, and with positive impacts on education and health. It also was seen as having contributed

³ "Mali's Algiers Peace Agreement, Five Years On: An Uneasy Calm". International Crisis Group, June 24, 2020 (Q&A Africa).

⁴ "Russian mercenaries have landed in West Africa, pushing Putin's goals as Kremlin is increasingly isolated". The Washington Post, March 9, 2022.

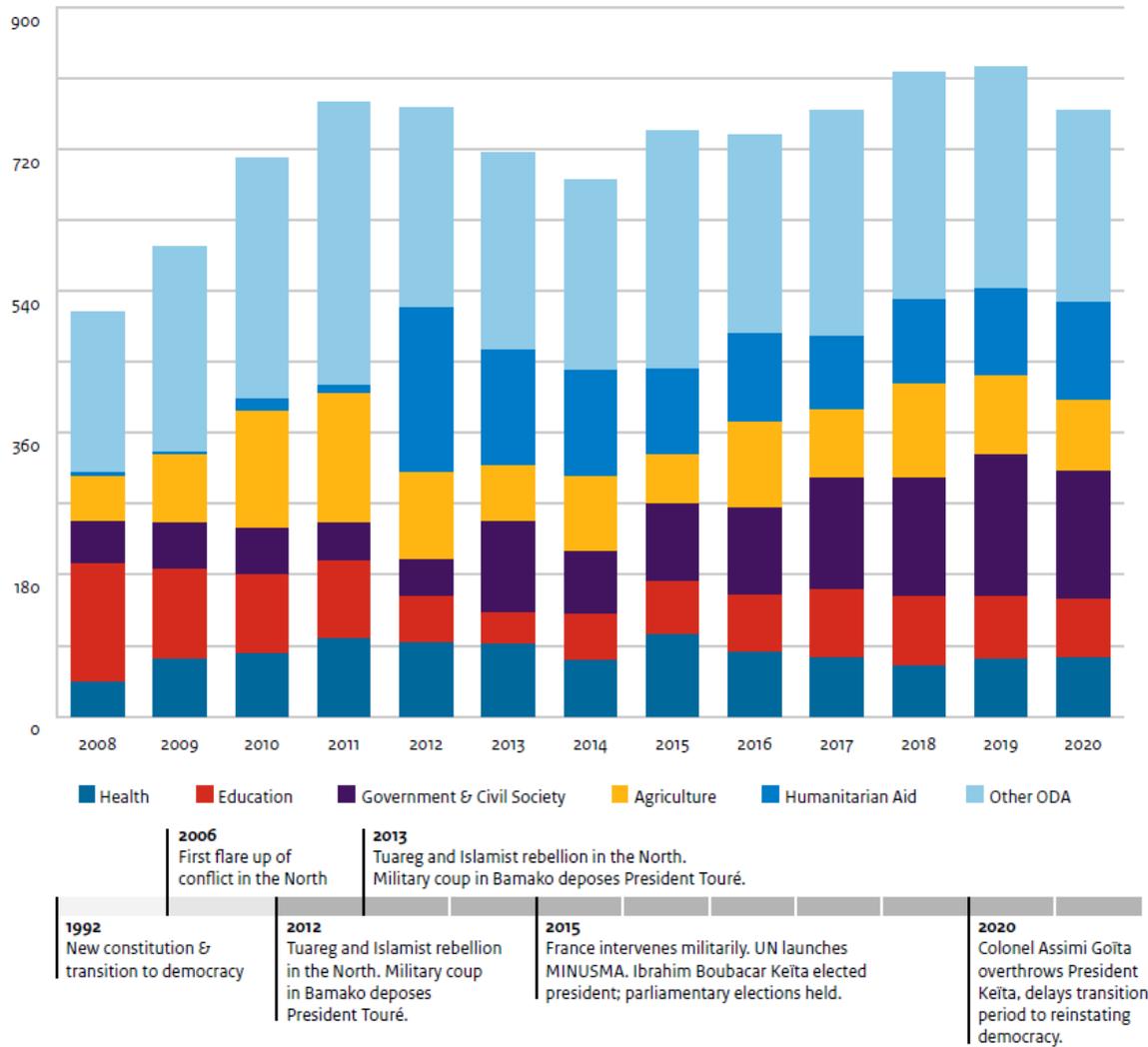
⁵ Norad 2018. Country Evaluation Brief Mali. Report 6/2018. Oslo, April 2018.

significantly to achieving goals in national poverty and growth strategies, macroeconomic management, and public investment in the country's social sectors.

Donor engagement in Mali changed in reaction to the democratic rupture of 2012. While ODA still consistently grew, budget support was drastically reduced: less aid went to the public sector and a larger share was channeled through multilateral organisations and NGOs. Humanitarian assistance, with food security as the most important expenditure, soared.

In reaction to the breakdown of the democratic order, donors notably injected more aid into sectors such as government and elections, probably because they hoped that increasing aid for these sectors would help bring about a return to democracy. In hindsight, we know that this was not to be the case.

After the 2015 peace agreement, donor support for stabilisation initiatives also grew. Notably, interventions in many different areas were lumped together under the label of stabilisation. Some donors referred to stabilisation as re-establishing access to basic services (the "peace-dividend approach"). Other donors pursued stabilisation by promoting economic growth. Still other avenues for stabilisation were support to civil society, building infrastructure for the demobilisation of fighters, and strengthening conflict-resolution capacities at the community level. Finally, providing support for the process of political-administrative decentralisation was seen as another way of rebuilding political stability in the country. Unfortunately, the evaluation reports strongly suggest that initiatives in most of such stabilisation interventions were not effective. Despite an overall investment of USD 5.245 billion in ODA since 2013, Mali today is less secure, less democratic, and more fragile than it was before the breakdown of the democratic order in 2012.



sources: OECD, DAC, CRS

Effectiveness per aid sector

Stabilisation

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	–	
Good enough	Aldrich 2014	Strategic communications, such as messages broadcast through radio programmes, to make young Malian men less vulnerable to recruitment by violent extremist organisations.
	UNITAR 2019	Strengthening the capacities of African Formed Police Units (FPUs).
	USAID 2016. <i>USAID/OTI PDQIII</i>	A wide range of activities in support of electoral processes, the peace process, social cohesion, and countering violent extremism. Activities were communications through mass media, social activities at the local level, and increasing access to basic services.
	Grünewald & Baché 2019	A wide range of activities designed to foster social cohesion and mitigate inter- and intra-community conflict by restoring conflict-management mechanisms. Activities were the establishment of discussion clubs, promotion of savings associations, and the rehabilitation/construction of community infrastructure.
Discussed in country-level evaluations	Norad 2018; Danida 2019; SDC 2020; AfDB 2020; UNDP 2020; PBF 2019	

➤➤➤ **In sum, interventions to facilitate stabilisation were not effective.**

Two findings stand out in this overview of evaluations. First, there is no clarity in these evaluation reports about how to define and measure stabilisation. Available evaluations provide neither a definition nor indicators for measuring the concept. Furthermore, they do not spell out the causal chain (or theory of change) that they assume would link aid interventions to achieving the final outcome of stability. Donors included a bewildering variety of interventions under the label “stabilisation”. At the national level, donors provided support for the Truth, Justice, and Reconciliation Commission (CVJR); support for the peace process through political

communication via mass media; support for political and fiscal decentralisation; and support for cantonment under the framework of Disarmament, Demobilization, and Reintegration (DDR) processes. At the local level, donors supported income-generating activities for the private sector, capacity building for conflict resolution, and restoration of access to basic services. Without more clarity about what stability is, and how to measure it, attempts to assess whether development interventions can lead to greater stability will remain elusive.

Second, the available evidence does not suggest that interventions in any of these areas were effective. Many of the included evaluations cannot demonstrate that immediate outcomes were achieved, and none provide evidence that the interventions contributed to the overarching objective of stability.

Evidence from country-level evaluations

Before 2018, issues of stabilisation were not discussed in country-level evaluations. The first to do so was a report by Norad (Norad 2018). It suggested that many donors had not given sufficient attention to underlying tensions and latent conflicts present in Mali, and it went on to state that aid portfolios were not seen as instruments for preventing a decline in stability.

The second country-level report to discuss stabilisation was produced by Danida (2019). Its report, too, did not assess the effectiveness of stabilisation interventions already implemented, but it did recommend that future stabilisation interventions should aim at strengthening civil society, providing support to the private sector (especially in rural areas), and supporting decentralisation as ways of addressing the political fault lines between regions.

A third country-level evaluation (SDC 2020) suggested that one main cause of instability in Mali was a deep crisis of trust between the government and the population, which armed groups exploited. Rebuilding trust was therefore seen as a necessary element for improving stability.

For the African Development Bank, the lever with which to address instability was support for the country's economic growth: by establishing and enabling its business environment; building the capacity of its rural communities; and developing its basic socio-economic infrastructure through, for example, hydro-agricultural schemes and provision of energy, roads, schools, and water and sanitation facilities (AfDB 2020).

UNDP's programme in Mali intended to contribute to stabilisation by supporting the work of the CVJR. According to UNDP's own evaluation (UNDP 2020), this intervention was not effective, and was insufficient to address the root causes of conflict. Other UNDP stabilisation activities were directed at creating awareness and providing training that focused on conflict prevention and resolution at the community level. In its evaluation the UNDP doubted whether these interventions were effective.

The Peacebuilding Fund Mali sought to promote stabilisation by following a “peace-dividend approach”, meaning that interventions focused on re-establishing basic services such as education, water, sanitation, and healthcare services, which had not been available during the war (PBF 2019). Other interventions were focused on access to economic opportunities, durable solutions for displaced people and returnees, and increased security through the cantonment of ex-combatants. All such interventions were accompanied by efforts to facilitate dialogue and conflict-resolution mechanisms. In its evaluation the Peacebuilding Fund reported (PBF 2019) that the intended outcomes of the portfolio were mostly not achieved and that the portfolio did little to contribute to conflict resolution or expand capacities for dialogue.

One example of a problematic stabilisation project was the cantonment project. In line with the Ouagadougou Preliminary Peace Agreement of 2013, three cantonment sites were built for members of armed insurgent groups. Although the cantonment sites were finished in 2016, they were never used owing to overall delays in the DDR process. Even more worrisome, the report stated that the DDR process might have had unintended negative consequences. It appears that the DDR process sent out a signal that there were potential benefits associated with being a member of an armed group. This could explain the drastic increase in people to be covered by the process. The evaluation report stated that while initial estimates put the number of fighters of the two armed movements at 10,000 each, later both groups each announced a need to include 17,000 former fighters in the process, suggesting that a substantial number of young people had joined these armed groups in the hope of receiving benefits.

From this overview of findings from country-level evaluations, two main observations stand out. First, the notion of stabilisation appears to be vague. Some donors referred to stabilisation as re-establishing access to basic services, e.g. water, education, and healthcare (i.e. the “peace-dividend approach”). Other donors pursued stabilisation by investing in income-generating activities or by promoting economic growth. Still other approaches sought to support civil society and to facilitate networking between existing grass-roots groups that had been demanding

accountability from the State. At an institutional level, providing support for the CVJR was also seen as stabilisation. Still another avenue for stabilisation was to build infrastructure for the demobilisation of fighters, and to restore government buildings in the north. Donors also tried to improve conflict-resolution capacities by providing training for conflict prevention and resolution at the community level. Finally, providing support for the process of political-administrative decentralisation was also seen as another path for rebuilding political stability in the country.

The second observation is that neither in country-level evaluations, nor in those at a project level (see below), can evidence be found that interventions in any of these areas were effective: decentralisation stalled because of lack of political will; the DDR process was not successful; and interventions aimed at income-generating activities, e.g. promoting economic growth and fostering the private sector, were not effective. Furthermore, the CVJR had little impact. Capacity building in conflict resolution at the community level was also not effective, and there is no reason to assume that restoring access to basic services would have had a stabilising effect. These prescriptions might have been theoretically justifiable, but their implementation rarely worked in Mali.

Evidence from project- and programme-level evaluations

Similar findings stated in programme and project evaluations corroborate those of the country-level evaluations. Evaluations of four programmes were selected. The main activities supported were: communication via mass media to promote peace and counter extremism; support for grassroots-level discussion clubs, which were meant to improve social cohesion; restoration of access to basic services, which was expected to mitigate intercommunal conflicts and prevent extremism; and support for international policing. The evaluation reports of these four programmes provide little robust evidence of improvements in stability as a result of any of these activities.

With regard to strategic communication through mass media, the evaluation indicates that the messages “broadcast” did increase access to information about the electoral process and the peace agreement, but the reports cannot demonstrate that this brought about an improvement in stability.

Strategic communication aimed at making youths less vulnerable to extremist recruiting was not effective. When compared to persons who had not heard the messaging, the audiences

targeted showed little change in terms of their beliefs about US efforts to combat terrorism or Islamic justifications for al Qaeda’s activities (Aldrich 2014).

The reports do not, moreover, provide evidence that suggests community mobilisation activities (e.g. sports or cultural events, training in conflict mediation, rehabilitation of community centres and schools, and income-generating activities) were effective as a means for getting community members to work together. It is unclear whether such activities had an immediate effect on social cohesion in communities, and whether this would have had an impact on stability (USAID 2016, USAID/OTI PDQIII).

The evaluations also do not provide evidence that restored access to basic services had an impact on social cohesion or the countering of extremism, as was hoped. Similarly, it is unclear whether providing training to formed police units (FPUs) had an impact on stabilisation (UNITAR 2019).

Good Governance

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	–	
Good enough	Kaboré & Kampo 2017	Strengthening the electoral process
	Wennink et al. 2020	Strengthening participation of civil society
	Lanoué & Barro 2013	Strengthening participation of civil society
	Gouzou & Traoré 2021	Strengthening participation of civil society
Discussed in country-level evaluations	Norad 2018; World Bank 2015; AfDB 2020; UNDP 2020, Danida 2019	

➤➤➤ In sum, the available evidence suggests that very little was achieved in the sector of **good governance**. The included evaluations cover a variety of interventions in various areas,

such as management of public resources, fiscal decentralisation, political decentralisation, rehabilitation of governmental infrastructure, capacity building for government officials and civil society, strengthening the relationship between citizens and public authorities, and establishing arenas for public debate. There is no example of effective interventions in any of these areas. The one area in which donors saw some success was election support, but holding elections alone did not lead to greater democracy.

Evidence from country-level evaluations

Prior to 2012, many donors had noted some positive trends in the governance sector. However, after the breakdown of democratic order in 2012, the available country-level evaluations increasingly suggest that the governance sector had gravely deteriorated, with ineffective institutions, weak capacities, lack of accountability, endemic corruption, and entrenched patronage (Norad 2018).

A World Bank evaluation stated in 2015 that most objectives in the areas of governance reforms, management of public resources, and fiscal decentralisation were not achieved (World Bank 2015). The same report also noted that the World Bank had overestimated the capacity and political will of the government of Mali for institutional reform.

The African Development Bank noted in 2020 that 15 years of support for capacity building may have prevented the government's collapse, but this was not enough to foster inclusive economic growth (AfDB 2020: 45).

UNDP also noted that its support for the rehabilitation and reconstruction of infrastructure for the government in the north of Mali had had little impact, since the public servants assigned to those tasks rarely occupied the buildings established for them (UNDP 2020).

Interventions in the area of decentralisation were also not effective. After the 2015 peace agreement, administrative decentralisation was seen as one way to promote stability and better governance. As a result, many donors supported the process of decentralisation. However, little was achieved (Danida 2019; World Bank 2015), mainly because there was no political buy-in from the central government for decentralisation, which it saw as strengthening the political position of the north.

One area in which donors saw some success was election support. UNDP’s support for elections in 2013 and 2016 was judged to be mainly effective in the sense that the technical assistance enabled the government to conduct elections (UNDP 2020). It should be noted, however, that conducting elections did not result in greater democracy, as democracy in Mali has been in steady decline since 2008.

In short, the evidence from country-level evaluations suggests that interventions in the broad area of governance were not effective. One reason for this is that donors generally overestimated Mali’s state capacity and its political will to improve governance, leading to over-ambitious programmes that had little effect.

Evidence from project- and programme-level evaluations

Four programme and project evaluations were selected. One report chosen evaluated a project designed to strengthen the electoral process in Mali (Kaboré & Kampo 2017). Two other reports assessed programmes aimed at strengthening the relationship between citizens and public authorities, with one focusing on youth-led participation (Wennink et al. 2020) and the other on strengthening the participation of civil society in decision-making by local authorities (Lanoue & Barro 2013). The fourth report evaluated a programme that aimed to strengthen local mechanisms for land management and citizen control of citizen-based management of natural resources (Gouzou & Traoré 2021).

The main activities of these programmes were capacity building (delivery of training modules and civic education materials on a variety of topics, such municipal budgeting, exercising citizenship, management of basic social services, local leadership, and participatory budgeting), and establishing of arenas for public debate (i.e. electoral committees, land commissions, and community associations). Unfortunately, none of the four evaluations provides credible evidence that results were achieved.

Humanitarian Assistance

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	Gelli et al. 2018	General food distribution, school feeding and targeted

		supplementary feeding
Good enough	Kara-consult 2014	cash-for-work to improve food security
	Sacko 2019	WASH in the context of a humanitarian aid programme
Discussed in country-level evaluations	WFP 2018, 2019; Norad 2018; Danida 2019; SDC 2020	

➤➤➤ In sum, humanitarian assistance contributed to a rudimentary social safety net in Mali and helped to mitigate malnutrition. It appears that the response of donors to the threat of a humanitarian crisis after 2012 was adequate. However, the evaluation reports very rarely discuss to what extent, if at all, humanitarian aid strengthened the resilience of vulnerable people. Also, there is no discussion about the concept of do-no-harm, which seems to be a glaring omission in a context like Mali's.

Evidence from country-level evaluations

After the collapse of the democratic order and the onset of war in 2012, most donors dramatically increased their humanitarian aid, much of which was channeled through multilateral organisations. Humanitarian assistance, with food and in-kind aid, as well as income-generating activities in rural areas, grew in importance and contributed to the rudimentary social safety net in Mali. The World Food Programme (WFP) was one of the biggest donors in the area. In its sole evaluation (WFP 2019) the WFP notes that: its interventions helped to prevent malnutrition in the conflict areas of the north; its school-feeding programme had positive effects on enrolment and attendance; and that the increased use of cash-based transfers (for example for school feeding and for nutrition support) increased overall efficiency. Especially promising were programmes that combined food aid (such as cash, vouchers or food transfers) with providing assets such as irrigation channels, flood protection measures and home gardens. Several donors also stressed that a key challenge in Mali for the years to come will be to manage the nexus between humanitarian aid and development cooperation.

Evidence from project- and programme-level evaluations

Three programme- and project-level evaluations were selected. All of the interventions were classified by the donors themselves as humanitarian. The findings from these project-level evaluations echo the findings of the country-level evaluations. By and large, humanitarian interventions were effective.

Food assistance in regions with high exposure to violence led to increased household expenditure on food and non-food items. Also, school feeding did have a positive short-term impact on nutrition and school enrolment.

A cash-for-work scheme, which combined cash grants with training in agricultural techniques, natural resource management and household nutrition, had a positive impact on households' capacity to respond to natural disasters and other exogenous shocks and (Kara-consult 2014) .

A WASH programme was able to provide 23,000 crisis-affected people better access to WASH services (Sacko 2019).

Rural Development

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	Beaman et al. 2013	Fertiliser and productivity
	Pettersson & Wikström 2016	Fertiliser and productivity
	Beaman et al. 2014a	Rural credit; savings groups
	Beaman et al. 2014b	Rural credit; savings groups
	Dao et al. 2021	Cash transfers
	Dillon 2011a	Irrigation
	Dillon 2011b	Irrigation
	Mitchell et al. 2018	The Millennium Villages Projects
	Osei et al. 2018	Extension services Voice message reminders for best harvest practices
Good enough	Bureau de la Coopération Suisse au Mali 2015a	Food security

	GIZ 2019	Irrigation
	CARE 2017	Cash transfers
	Bureau de la Coopération Suisse au Mali 2015b	Resilience in dryland areas; adaptation to climate change
	Dianka & Nienta 2017	Resilience in dryland areas; adaptation to climate change
	Drylands Coordination Group 2015	Resilience in dryland areas; adaptation to climate change
	FAO & WFP 2019	Resilience in dryland areas; adaptation to climate change
	Halle & Doumbia 2020	Resilience in dryland areas; adaptation to climate change
	Hodge & Bosma 2015	Livestock
	JAICA 2010	Water supply
	Oxfam America 2013	Rural credit; savings groups
	Nelen et al. 2019	Resilience in wetland areas
	Touré et al. 2013	Resilience in wetland areas
	Transition International & Transtec 2020	Value chains
	USAID 2013. <i>Integrated Initiatives for Economic Growth in Mali</i>	Value chains
	USAID 2020. <i>Cereal Value Chain Activity in Mali</i>	Value chains
Discussed in country-level evaluations	SDC 2011; IFAD 2013; World Bank 2015; WFP 2018; Danida 2019; UNDP 2020; SDC 2020	

➤➤➤ In sum, interventions in rural development were effective in improving coping strategies, but did not improve productivity beyond subsistence levels.

Three results stand out. First, for most donors, rural development was an important aspect of their aid portfolios. Before the onset of violence in 2012, donors were optimistic about the long-

term prospects for Mali's agricultural sector. After 2013, however, many interventions in the rural sector increasingly focused on food security, coping mechanisms, and resilience. Results appear to have been satisfactory, and interventions in areas such as rural credit, cash and in-kind transfers, saving associations, introduction of new crops, and irrigation projects, were all to some extent effective.

Second, the available evaluation reports by and large agree that rural-development interventions aimed at increasing productivity beyond subsistence farming were rarely successful. For example, support for agricultural value chains or for small agribusinesses were not effective.

Third, some evaluations point out that cooperation with the government of Mali in this sector was satisfactory and that capacity building and training of government officials at the subnational level in technical aspects related to rural development was effective. This is in contrast to most other areas, where capacity building was rarely effective.

Evidence from country-level evaluations

For many donors, rural development was an important aspect of their aid portfolios. Agricultural aid peaked in 2011, then representing 21.1 percent of the total aid. At this time, one evaluation even expressed the hope that Mali would become an important "agricultural power" and recommended increased investments in the productivity of farming households (SDC 2011). In the same vein, an evaluation in 2013 by the International Fund for Agricultural Development (IFAD) concluded that its multifaceted investment in rural development had produced satisfactory results (IFAD 2013). IFAD supported agricultural production, helped improve the health of livestock, established savings and microcredit banks, built small-scale infrastructure, supported farmers' organisations, and strengthened the capacities of rural actors. The evaluation also noted that the cooperation with the government of Mali had continued to improve and that capacity building and training of government officials at the subnational level in technical aspects related to rural development was effective.

Such unequivocally positive assessments are not found in later evaluations. After 2013, results appear to be mixed. One evaluation found that food assistance combined with providing small-scale assets such as irrigation channels, flood protection measures and home gardens showed promise and was judged by beneficiaries as being effective (WFP 2018). By contrast, a

comprehensive World Bank evaluation found interventions aimed at increasing productivity in rural development and reducing poverty were not successful (World Bank 2015). Similarly, the African Development Bank found that programmes in agricultural and multisector operations (mostly related to services, such as water, irrigation and energy) were not effective. However, the evaluation also noted that some positive results were achieved in building local capacity in the agricultural sector (AfDB 2020). Mixed results were also reported for value chains. Although a 2020 Swiss evaluation found that results for projects aimed at supporting value chains for potatoes and milk were satisfactory (SDC 2020), two other evaluations noted that support for value chains were not very effective. UNDP (2020) found little effect for support of value chains in mango, shea and gum arabic, and a 2019 report by Danida (2019) found that support for agricultural value chains for small and medium enterprises (SMEs) was not effective and that it was difficult to link farmers to SMEs. Farmers live, by and large, in rural areas and not relatively close to the country's capital city, where SMEs are usually to be found.

Evidence from project- and programme-level evaluations

Some 26 studies on rural development, covering a wide variety of interventions (see Evidence base above), were selected for review.

Six studies were concerned with strengthening resilience and adaptation to climate change in the drier areas, but two of these did not provide any evidence on impacts (Dianka & Nienta 2017; FAO & WFP 2019). Drylands Coordination Group (2015) reported that their project increased agricultural resilience to climate hazards by transferring new agricultural technologies and crops (Bureau de la Coopération Suisse au Mali 2015a). Similar results are reported by Halle & Doumbia (2020).

A programme aimed at strengthening resilience and improving food security in wetland areas was also effective (Touré et al. 2013). Clearing water channels of vegetation had a positive impact on the viability of rice growing – by improving the reliability of water supply, resulting in increased yields. Market gardening facilitated by water channels on the village perimeter was also particularly successful.

Three studies discussed the effects of irrigation projects (Dillon 2011a, b; GIZ 2019). Irrigation projects were found to lead to increased agricultural production and, as a result, income. Interestingly, small-scale agriculture projects fared better than large scale.

Positive results were also reported from in-kind and cash transfers (Dao et al. 2021; CARE 2017; Beaman et al. 2014b). Cash transfers, and cash transfers combined with in-kind transfers (goats), increased food security. Village-based savings and loans groups also had a positive impact on household food security (Beaman et al. 2014a).

One study assesses the impact of mobile-phone distributed reminders on best harvest-related practices. The reminders reduced pre-harvest grain losses significantly. There was also a significant positive impact on the adoption of improved grain-storage methods (Osei et al. 2018).

The three available studies on agricultural value chains, along with the two studies on fertiliser projects, are inconclusive and do not provide evidence of effectiveness.

Education

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	Aurino et al. 2019	School feeding
	USAID 2017. <i>Nos Enfants Apprennent à Lire</i>	Literacy training
	USAID 2020. <i>USAID/Mali Education Emergency Support Activity</i>	Infrastructure for education
Good enough	Safarha et al. 2020	Literacy training
	Traoré et al. 2017	Vocational Training
Discussed in country-level evaluations	Évaluation conjointe 2011; GAC 2013; Ponty & Keïta 2015; Norad 2018; WFP 2018; GPE 2020; UNICEF 2019	

➤➤➤ In sum, some gains were made in education, leading to improved enrolment and student retention. Before 2012, widespread budget support helped to increase enrolment rates in basic education. After 2012, school-feeding programmes had a positive impact on both nutrition and

student retention. Also noteworthy is that donors recorded the strong commitment of the Mali government to the education sector, even after 2012. Similarly, there was high level of buy-in for the educational sector by local administrations communities. However, although access to education increased, it appears that the quality of learning did not improve.

Evidence from country-level evaluations

Before the collapse of the democratic order in 2012, donors allocated a substantial part of their aid as direct budget support. Budget support was credited with improvements in the education sector, especially with increasing enrolment rates in basic education (Évaluation conjointe 2011). Other evaluations also note that progress was achieved in the education sector, without giving further details (GAC 2013; GPE 2020). Similarly, a 2015 evaluation by a multi-donor emergency-aid fund noted that both access to and quality of education had improved (Ponty & Keita 2015; also Norad 2018). However, an evaluation in 2020 by the Global Partnership for Education (2020) warned that, while access to basic education had improved, there was “very little data indicating that good quality learning takes place in schools” (GPE 2020: 25).

It is noteworthy that donors, even after the events of 2012, reported the strong commitment of the Mali government to the education sector. Similarly, there was high level of buy-in for the educational sector by local administrations communities (GPE 2020; UNICEF 2019).

Evidence from project- and programme-level evaluations

Five project and programme evaluations in the sector of education were chosen for review. The evaluations report on the impact of interventions in school feeding, teacher training, educational infrastructure and vocational training.

Most of these interventions were relatively effective. Food assistance, especially conditional food transfers, increased school attendance, and training in innovative teaching methods increased literacy rates. However, one evaluation found that a programme in support of vocational training was neither effective nor sustainable (Traoré et al. 2017).

Women's Rights and Gender Equality

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	Heath et al. 2020	Impacts of cash transfers on IPV (intimate partner violence)
	Koloma & Alia 2014	Education outcomes for girls
	Plouffe et al. 2020	Effect of user fees for health services on women's empowerment
	Johnson et al. 2012	Effect of user fees for health services on women's empowerment
Good enough	Keita et al. 2015	Impacts of a village savings and loan association (VSLA) on gender equality and agricultural productivity
	Tango International 2016	Impacts of a village savings and loan association (VSLA) on gender equality and agricultural productivity
	Desumaux & Ballo 2014	Education against the practice of Female Genital Mutilation (FGM)
	UNPSO & TMC Consulting Group 2018	Access to justice and support for female victims of gender-based violence (GBV)
	Vigneri & Lombardini 2017	Impact of microcredit on poverty alleviation for female beneficiaries
Discussed in country-level evaluations	Danida 2019; PBF Peacebuilding Fund 2019; Norad 2018; UN Women 2019	

➤➤➤ In sum, the political and cultural context in Mali made it difficult to make tangible progress on women's rights and gender equality, and Mali remains a country with one of the greatest gender-equality gaps in the world: in the UNDP's 2021 gender inequality index ranked it 155th of 170 countries. Nevertheless, there have been some pockets of success. Some positive results have been achieved with regard to legislative and normative change. Donors pushed for new laws on gender quotas in the Mali parliament, better protection of victims of gender-based violence (GBV), and better representation of women in formal and informal institutions dealing with issues of peace. It is not clear, however, whether such normative changes have actually delivered greater gender equality, or whether such reforms remain donor-driven paper tigers.

Support from the government and its willingness to implement such reforms appear to be rather low.

At the local level, projects aimed at producing tangible benefits for women often were effective. For example, village savings and loans associations helped to improve women's economic status. Interventions aimed at better educational outcomes for girls were also effective. Available evidence also shows that it is possible to reduce the acceptance of female genital mutilation (FGM). Finally, reports noted that removing user fees increased access to healthcare for women.

Evidence from country-level evaluations

In light of the available country-level evaluations, it appears that the overall context in Mali has made it difficult to achieve tangible progress on gender equality.

An evaluation of the UN Women's country programme (UN Women 2019) noted that the most significant aspect of its programme was its normative and coordination mandates. The evaluation points out that UN Women and other donors successfully lobbied for the adoption of a law requiring a 30 percent quota of women in elected positions. UN Women also lobbied for participation of women in peace and security efforts and it launched training programmes for some 40 women peace builders. However, representation of women in various peace mechanisms (Disarmament, Mobilization, and Reintegration, Security Sector Reform, and others) remained extremely low at around 3 percent. UN Women also pushed for the creation of gender focal points in ministries involved in the implementation of UN Security Council Resolution 1325 (Women, Peace, and Security), but it appears that there was little buy-in from these ministries. Danida (2019) noted that the UN Women's country programme for Mali, which was supported by Denmark, was not likely to achieve its objectives because of the lack of buy-in and leadership from the government.

Norad (2018) discussed three evaluations of gender-focused projects. While programmes aimed at increasing school enrolment and retention of female students appeared to have had some positive effects, little was achieved in terms of changing gender relations, or changing attitudes towards family planning. A capacity-building project for women's associations was also not effective.

In its 2019 evaluation, the Peacebuilding Fund assessed a project aimed at reducing GBV and found that some institutional and normative changes were successfully promoted. A draft law on GBV was supported through capacity development and advocacy, and also the penal chain (police, paralegals, magistrates, etc.). In addition, the project provided support for the drafting of a national action plan for the implementation of UN Security Council Resolution 1325. This led to the creation of a sub-committee on gender within the CVJR. Unfortunately, the CVJR was itself ineffective, and it is unclear whether the creation of this subcommission led to a more meaningful inclusion of women in issues of security.

Evidence from project- and programme-level evaluations

Nine programme and project evaluations were selected for review. Three of these focus on bodily integrity (one on FGM, one on intimate partner violence (IPV), and one on access to justice for women). Two studies focus on the utilisation of healthcare services, while another two focus on the impact of VSLAs. Of the remaining two studies, one focuses on education outcomes for girls and the other on poverty alleviation through microcredit. Results are mixed.

Village Savings and Loan Associations (VSLAs)

VSLAs appeared to have a positive effect on women's economic situation and decision-making powers. They led to increased savings, to improved perceptions of women's economic decision-making, and to improved awareness of women's bodily autonomy, including changed attitudes towards the acceptability of GBV among women (Keita et al. 2015; TANGO International 2016).

Health

Positive results were also reported for health interventions. Two studies reported that removing user fees contributed to improving women's capability to make autonomous health decisions and increased their access to healthcare services (Johnson et al. 2012; Plouffe et al. 2020).

Education

Vigneri & Lombardini (2017) found that a combination of activities (mothers' associations, micro-finance activities, girls' clubs, school-staff training, and parental meetings) had a small positive effect on perceptions of girls' empowerment (measured by a survey-based composite index), and also increased educational outcomes for girls.

Bodily harm

Awareness raising, coupled with training of healthcare professionals, showed some positive trends in the elimination of the practice of FGM (Desumaux & Ballo 2014). It is unclear, however, how sustainable the intervention was.

One study found that cash transfers to households led to a decrease in IPV in polygamous households. There were, however, no effects noted in monogamous households (Heath et al. 2020).

At the institutional level, interventions resulted in improved legislation and some institutional change, but it is unclear whether there were tangible effects. A project led by UN Women, focusing on better access to justice for female victims of GBV, found that, over time, more GBV cases were brought to justice. However, since there are no reliable baselines associated with these trends, it is not possible to attribute these outcomes to the project. Other interventions were aimed at the creation of a national action plan on Women, Peace, and Security (WPS), the creation of a gender subcommittee within the Truth, Justice, and Reconciliation Commission and the establishment of an adviser to the National Commission on Demobilization, Disarmament, and Reintegration.

Nutrition

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	Alvarez Morán et al. 2018	The effectiveness of treatment of severe acute malnutrition delivered by community health workers as compared against a traditional facility-based model
	Lopez-Ejeda et al. 2020	The effectiveness of treatment of severe acute malnutrition delivered by community health workers as compared against a traditional facility-based treatment
	Rogers et al. 2018	The effectiveness of treatment of severe acute malnutrition delivered by community health workers as compared against a traditional facility-based treatment
Good enough	AIER 2019	Multidimensional interventions for nutrition outcomes of vulnerable groups
	CARE International 2019	Multidimensional interventions for nutrition outcomes of vulnerable groups

	Government of Canada 2016	Multidimensional interventions for nutrition outcomes of vulnerable groups
	ICF Consulting Services 2016	Multidimensional interventions for nutrition outcomes of vulnerable groups
	Iknane et al. 2019	Multidimensional interventions for nutrition outcomes of vulnerable groups
	Tilford 2009	Multidimensional interventions for nutrition outcomes of vulnerable groups
	Bonde 2016	Impact of agronomy and livestock interventions on women's and children's dietary diversity in Mali
Discussed in country-level evaluations	Not discussed in country-level evaluations	

➤➤➤ **In sum, interventions in nutrition proved to be mostly effective.** Multidimensional interventions for nutrition outcomes for vulnerable groups led to a decrease in acute malnutrition and underweight among young children and women, to higher uptake of breastfeeding, and to better deworming treatment and control of diarrhea. Community health workers appeared to have a large impact on changes in hygiene and nutrition-related behaviours. There is also evidence that healthcare provided by community health workers was often more effective than services provided in permanent health facilities and that community health workers could be cost-effective. Furthermore, there is evidence that the introduction of drought-resistant crops and small livestock had a positive impact on increasing dietary diversity in recipient households and helped to prevent malnutrition in mothers and children.

Evidence from country-level evaluations

Nutrition was not discussed in any of the county-level evaluations reviewed.

Evidence from project- and programme-level evaluations

Ten studies were included for review. The outcome of interest for all studies was better nutrition and better health outcomes.

Six studies assessed the impact of multidimensional interventions on nutrition outcomes of vulnerable groups (Allier, 2019; CARE International, 2019; Government of Canada, 2016; ICF Consulting Services 2016; Iknane et al. 2019; Tilford, 2009). Three studies assessed the impact and efficiency of treatment of severe acute malnutrition (SAM) by community health workers as compared against treatment provided by traditional facility-based healthcare (Alvarez Morán et al. 2018; Lopez-Ejeda et al. 2020; Rogers et al. 2018). Finally, one study assessed the impact of agronomy and livestock interventions on nutrition and dietary diversity (Bonde 2016). All of the evaluated interventions were effective.

Multidimensional interventions for nutrition outcomes of vulnerable groups

The ECHO Sahel Strategy (ICF Consulting Services 2016) was a massive programme aimed at improving the treatment of malnutrition in the Sahel region. The programme set out to reduce mortality by funding screening activities to increase the number of malnutrition cases detected, by expanding the number of healthcare centres capable of treating malnutrition, and by funding supplies of therapeutic foods and medicine. Infant mortality declined from 155 per 1,000 births in 2007 to 118 per 1,000 in 2014. The report concluded that the reduction in child mortality observed was likely to be attributable – at least in part – to ECHO, since ECHO, together with UNICEF, was the main international donor supporting the treatment of malnutrition in the Sahel region.

Smaller multidimensional programmes were also effective. These programmes contained a wide variety of activities, including: the promotion of healthcare services; provision of nutrition education; teaching about changes in social behaviour; education on water, hygiene, and sanitation; training for existing village savings and loan associations in the identification of food-processing micro-enterprises; training on improved agricultural practices; screening for and treatment of malnourishment in children; training of community health workers; support for village cereal banks; support for market gardening; and the construction of grain-storage warehouses. All evaluations noted that such multidimensional interventions led to better nutrition and better health outcomes (Allier 2019; CARE International 2019; Government of Canada. 2016; Iknane et al. 2019; Tilford 2009).

Impacts of community health workers (CHWs) on malnutrition

Three studies assessed the impact of treatment of severe acute malnutrition by community health workers (CHWs) as compared against traditional facility-based healthcare (Alvarez Morán et al.

2018; Rogers et al. 2018; Lopes-Ejeda et al. 2020). All studies concluded that community healthcare workers had a positive effect on the reduction of malnutrition. Alvarez Morán et al. (2018) show that treatment by CHWs was effective and not inferior to that provided by traditional facility-based healthcare. Rogers et al. (2018) and Lopez-Ejeda et al. (2020) showed that CHWs could be a cost-effective instrument for the provision of healthcare.

Impacts of agronomy and livestock interventions on nutrition

Bonde (2016) showed the introduction of drought-resistant crops and small livestock had a positive impact on increasing dietary diversity in recipient households and this helped to prevent malnutrition in mothers and children.

Health

Evidence base

Type of study	Author	Main Intervention(s) discussed in the study
Rigorous	Ponsar et al. 2011	Malaria Abolishing user fees for malaria-related interventions
	Diawara et al. 2017	Malaria Seasonal malaria chemoprevention
	Druetz 2018	Malaria Seasonal malaria chemoprevention
	Clarke et al. 2017	Malaria Malaria intervention package in schools
	Kayentao et al. 2018	Malaria Malaria control interventions
	Mangam et al. 2016	Malaria Mobilising households for indoor residual spraying
	Chard et al. 2018	WASH Interventions in schools
	Trinies et al. 2016	WASH Interventions in schools
	Trinies et al. 2015	WASH Interventions in schools
	Koita et al. 2016	WASH Effects on child and mother welfare

	Kone et al. 2019	WASH Effects on child and mother welfare
	Allegranzi et al. 2010	WASH Effects in a hospital
	Alzúa et al. 2020	Open defecation Community mobilisation
	Pickering et al. 2015	Open defecation Community mobilisation
	Whidden et al. 2018	Child mortality The role of community health workers in improving child health
	Perez et al. 2009	Child mortality The role of community health workers in improving child health
	Trevant 2009	Child mortality The role of community health workers in improving child health
	Ravit et al. 2018	Child mortality Abolishing user fees for caesarean delivery
	Simonyan et al. 2013	Child mortality Telehealth programme for training
	Bagayoko et al. 2017	Child mortality Telehealth programme for training
	Le Port et al. 2019	Child mortality Conditional cash transfers
Good enough	Rotondo et al. 2009	Open defecation Community mobilisation
	Guèye & Nikièma 2008	Child mortality Multiple interventions
Discussed in country-level evaluations	SDC 2011; GAC 2013; Évaluation conjointe 2011; World Bank 2015; Ponty & Keïta 2015; UNDP 2020	

➤➤➤ **In sum, interventions in the health sector were mostly effective.** The sustainability of many of the effective health practices relies on continued funding.

Evidence from country-level evaluations

The health sector is discussed in six country-level evaluations. There is broad agreement among these reports that there were some positive outcomes, especially in maternal, newborn, and child health; access to health for women; and in mobilising resources to fight HIV/AIDS.

A 2011 evaluation of Swiss aid noted the country's impressive progress in basic health over the preceding decade (SDC 2011). This is echoed in a 2013 Canadian evaluation (GAC 2013). An evaluation of budget support finds that aid provided in this form contributed to better access to healthcare (Évaluation conjointe 2011). None of the evaluations clearly attribute this progress to the interventions, but they all strongly suggest that international aid played a role bringing about improvements in the health sector.

The positive assessment of effectiveness in the health sector continued beyond Mali's 2012 watershed. The World Bank notes in 2015 that progress in maternal health was achieved (World Bank 2015). An evaluation by a multi-donor trust fund (*Fonds national de stabilisation économique et sociale*) states that the fund helped to strengthen the health system and reduce maternal, infant and neonatal morbidity and mortality (Ponty & Keïta 2015). Finally, UNDP (2020) notes that progress was made in access to health for women and in mobilising resources to fight HIV/AIDS.

Evidence from project- and programme -level evaluations

A total of 25 studies were included, of which 23 were classed as "rigorous". Interventions focused on malaria management, WASH, open defecation, and child mortality. All these interventions were to various degrees effective.

Malaria

Malaria constitutes the largest cause of mortality and morbidity among children under five in Mali. Evaluation reports suggest that seasonal chemoprevention of malaria greatly reduces rates of malaria and anaemia among children (Diawara et al. 2017; Druez 2018). The abolition of medical fees for children under five and mothers with fever led to a significant increase in healthcare utilisation, as well as a reduction in the prevalence of malaria and illness in children (Ponsar et al. 2011). Malaria interventions in schools led to a significant increase in the use of bed netting (Clark et al. 2017).

WASH

WASH interventions in schools led to a reduction in food- and water-transmitted enteric disease, as well as person-to-person-transmitted enteric disease among pupils. WASH interventions also led to a substantial improvement in nutrition in children of age 6–23 months, along with improved home sanitation facilities, handwashing practices and facilities, and safe drinking water (Chard et al. 2018; Trinies et al. 2015, 2016). WASH interventions in hospitals increased compliance with hand-hygiene practices across all levels and categories of healthcare workers (Alleganzi et al. 2010). WASH interventions appear to be largely sustainable.

Open defecation

Open defecation, common in Mali, can lead to health complications and sicknesses. Community-led total sanitation (CLTS) projects were found to increase private latrine ownership and utilisation. CLTS also had an effect in reducing stunting in children (Pickering et al. 2015; Alzúa et al. 2020).

Child mortality

Community Health Workers (CHWs) appear to be effective in reducing child mortality (Perez et al. 2009; Trevant, 2009, Whidden et al. 2018). CHW were found to be effective in the promotion of basic child health services, as well as mobilising populations to change their care-seeking behaviours. CHWs mobilisation of community members also led to increased use of bed netting, at-home treatment of child diarrhea, modern methods of family planning, and utilisation of village drug kits. While the work of these health workers depends on continued financing and is, per se, not sustainable, it appears that CHWs can offer effective and efficient healthcare to communities.

Another effective tool for reducing child mortality was providing financial or other incentives for using healthcare services (Ravit et al. 2018; Simonyan et al. 2013). Abolition of user fees for caesarean sections led to a one-third increase in its use, thereby reducing neonatal mortality also by one-third. Sustainability depends on funding, approximately USD 50 per intervention. Handing out lipid-based nutrient supplements for children served as an incentive for mothers to attend growth-monitoring visits at regional health centres.

Telemedicine training for health workers and teleconsulting were used effectively to improve the health of mothers and children (Bagayoko et al. 2017). Limited availability of the Internet may, however, be a barrier to scaling up telemedicine in countries such as Mali.

Other findings

Capacity building as cross-cutting aid

➤➤➤ **In sum, capacity building for Mali's central government was by and large not effective and did not lead to an increase in institutional strength.** An exception is the health sector, where capacity building appears to have contributed to greater institutional capacity. Also effective was skills training in the health sector, for example for community health workers, nurses and midwives, leading to better health outcomes. Capacity building for government institutions stood a better chance of success if it focused on technical, rather than political, skills and was targeted at subnational administrations. Agricultural and healthcare skills and practices are clear examples of this. Finally, development of technical skills for rural development was also effective for beneficiaries.

Capacity building is an important cross-cutting area. Most aid interventions include activities aimed at building the capacities of beneficiaries and implementing partners. Although there is only one report in the sample dedicated exclusively to evaluating capacity building,⁶ many evaluation reports on aid in other sectors include at least some information on capacity building. Unfortunately, very few of these seek to investigate the effectiveness of capacity building measures in a systematic way. Nevertheless, despite the sparsity of robust evidence, some patterns can still be identified.⁷

⁶ UNICEF (2020) is a formative evaluation of UNICEF's programming for capacity building in sectors related to health, education and protection of children.

⁷ To distil information on capacity building from the 104 included studies, the qualitative data-analysis software ATLAS.ti was used. In all included studies searches were carried out for paragraphs that contain

There is no evidence that capacity building was effective at the level of central governance. As noted above in the section on good governance, prior to 2012 many donors saw some positive trends in the governance sector. After the breakdown of democratic order in 2012, the evaluation reports suggest that state capacities and governance were on a downward trend (Norad 2018). The World Bank reported that objectives in the areas of governance reform, management of public resources and fiscal decentralisation were not achieved (World Bank 2015). The same report noted that the Bank had overestimated the capacity and the political will of Mali's government for institutional reform. The African Development Bank stated in 2020 that 15 years of support for capacity building for the Mali government may have prevented its collapse, but that it had not been enough to foster inclusive economic growth (AfDB 2020: 45).

Only the International Fund for Agricultural Development (IFAD) recorded that their programmes had implemented capacity-building components for communes and decentralised government services that were "beginning to show significant results" (IFAD 2013: 47); no further details are given. This review covers the years 2007–2012 and therefore does not reflect the change in context that occurred after the breakdown of the democratic order and onset of war in 2012. Other evaluations indicate that decentralisation had stalled, hence reason to treat IFAD's positive assessment with some caution.

While capacity building for the central government was usually not effective, there were some pockets of success, almost exclusively in very technical, apolitical sectors at the subnational level, for example in education, rural development and health.

Several evaluations note that capacities in the health sector improved. For example, IFAD (2013) reported that capacity-building interventions were effective, resulting in better vaccination coverage and improvements in maternal and child health. UNDP (2020) reports that as part of its capacity-building activities, midwives and nurses were trained, with good results, to perform the treatments required of them, thereby addressing the shortage of doctors in community health centres (UNDP 2020). A large health and nutrition programme for the Sahel was effective in helping to build national capacity by training healthcare workers (especially community health workers) (ICF Consulting Services 2016). Another evaluation found that progress had been made on enhancing the capacity of Ministry of Health personnel (Tilford 2009). UNICEF (2020)

the words "capacity" and "impact", and their synonyms (e.g. result, effect, outcome, consequence). All paragraphs were retained that contained statements about the effects, or lack thereof, of capacity building. Coding and searches were done per sector, to keep the information about effectiveness in a given sector separate from the other sectors.

reports that capacity-building measures across its activities in Mali showed some good results in sectors related to health.

Pockets of success also occurred in rural development. For example, irrigation schemes, combined with capacity building, led to an increase in productivity and yields (GIZ 2019). A household-level training course in agricultural skills, market gardening, nutrition and hygiene practices appeared to have had some sustainable results. And skills training related to new crops, new techniques and market gardening led to better livelihoods (Dianka & Nienta 2017). The same evaluation also reports that the intervention increased the technical capacity of subnational government structures in relation to these new agricultural techniques and the role they played in the mitigation of climate change (Dianka & Nienta 2017).

Finally, it seems that capacity building that was intended to strengthen organisations in civil society was rarely effective. Norad (2018) reports that various capacity-building initiatives for civil society, including for women's associations, were not effective. One evaluation report did, however, find that support for youth organisations – the programme supported youth leaders in 180 communes in Mali – increased capacity in civil society. One of its main objectives was to strengthen civil society in order to hold the government to be more accountable, especially concerning issues of land rights and land usage. Capacity building of young leaders and the equipping of youth centres contributed to the creation of a sustainable youth movement (Wennink et al. 2020).

Sustainability

Evidence on sustainability is sparse, and somewhat sketchy at that, since many project evaluations did not address their project's prospects for sustainability. Nevertheless, some patterns emerge. A number of projects were thought to be unsustainable because their impact depended entirely on continuing external resource flows. In some instances, this was the case by design. For example, projects aimed at increasing school attendance through food emergency aid are by definition not sustainable, since the effects will end once the related cash transfers stop. Likewise, cash transfers to households showed some positive effects on reducing instances of GBV in the household, but the effect would fade once cash transfers ended. The same is the case for the sustainability of many effective health interventions, which rely on continued funding.

In other cases, the lack of sustainability was attributed to the absence of buy-in and local ownership, and/or a lack of supporting and follow-up activities, which would have made the initial intervention more sustainable. There is no shortage of examples among the selected studies. For example, a project for the provision of small livestock was thought to be not sustainable because no provision for animal feed and veterinary services had been made. A project on training formed police units was seen as mostly unsustainable since it was entirely dependent on foreign funding and there was little buy-in from the government. Another project that was to set up discussion and peace clubs was said to be unsustainable because there was little ownership among community members, and the project's lifespan of 18 months was judged to be too short to change this situation. A project aimed at providing support for job-oriented vocational training was thought to be not sustainable because of a lack of local ownership and a lack of interest and capacity from the underdeveloped private sector. In another case, a project aimed at disseminating knowledge about land reform and land management was thought to be unsustainable because there was little evidence that the communication campaign would continue once funding ended, or that the communication had had an impact on knowledge. Likewise, a project on reducing acceptance of FGM through strategic communication showed some early positive effects but the evaluators worried that the effects could vanish once funding for the communication and outreach activities came to an end.

The evaluations chosen also contain examples of projects that were thought to be sustainable. A number of studies pointed out that VSLAs were probably sustainable institutions. In addition, activities that piggyback on existing VSLAs were also thought to be sustainable: for example, the dissemination of hygiene and WASH practices and the establishment of VSLA-run sanitation shops in which local communities could access hygiene products were thought to be sustainable. Farmer Field Schools helped build capacity among small-scale producers, and those who had received training in turn shared their knowledge with neighbours. Mobilisation and knowledge dissemination by newly-trained community health workers was also expected to have an ongoing impact. Training and capacity-building of healthcare providers at community healthcare centres improved the knowledge and skills of the community on good hygiene and nutrition practices, leading to sustainable progress. Similarly training in agricultural techniques and market gardening was also thought to provide sustainable results.

In sum, it appears that among the more sustainable interventions were those that provided tangible benefits, such as VSLAs, better health and nutrition practices, or small-scale agricultural and gardening skills. Training and capacity building in these sectors would often

lead to sustainable results. Combining new interventions with existing ones that were perceived as useful by communities (e.g. VSLAs) also facilitated sustainable outcomes. By contrast, interventions were rarely sustainable when they required continued resource transfers or they relied heavily on communication or training that had no “tangible benefit component”, or for which there was little community or government buy-in.

Barriers

Just as with sustainability, evidence on barriers to implementation is somewhat sketchy since not every evaluation report addressed this issue. Apparently, by far the largest threat to implementation was lack of security. Many projects reported implementation barriers as a result of unstable and violent contexts. Often, access to potential beneficiaries was not possible in certain villages and regions of Mali owing to security concerns; petty crime and banditry led to theft of equipment and vehicles. With the emergence of armed jihadist groups, travel in certain areas was prohibited, thus making it increasingly difficult to reach recipient communities and , which strongly impacted project activities. Around half of all evaluations in the rural development sector report security-related barriers.

A second barrier that is often mentioned, especially for projects focusing on women as primary beneficiaries, is traditional gender roles. For example, women found it more difficult to attend district meetings since this often involved travel outside their village, which in itself could be challenging because of bad roads, but also as it often requires authorisation from husbands to travel. Traditional gender roles also make it more difficult for women to access services, including healthcare, outside their communities.

Finally, some projects reported that a lack of capacity on the part of the national and subnational administrations made it difficult to implement some initiatives. Unfortunately, there are not enough examples from which to arrive at a fuller picture of this aspect.

Budget support

Budget support was widely used in the decade prior to 2012 and it is credited with an overall positive effect on public finances in Mali. Specifically, it had positive impacts on education and health, as well as also contributing significantly to achieving goals set for reducing national poverty, pursuing growth strategies, implementing macroeconomic management, and funding public investment in social sectors. However, the reports also note that applying conditionality led to declining coherence in implementation and also higher transaction costs. It appears that budget support can be an effective tool in countries with a strong will for political reform. Since budget support ended in 2012, the case of Mali does not provide lessons about budget support for an unstable, unconsolidated country.

Appendix 1: Data sources for the search

Data sources

Databases	Bilateral donors	Multilateral and International Organisations	Repositories of impact evaluations in international development	Major developmental NGOs
Academic Search Complete	US / USAID (Development Experience Clearinghouse)	African Development Bank (AfDB)	3ie RIDIE (Registry for International Development Impact Evaluations)	ACTED
AfricaBib.org	UK (Foreign, Commonwealth & Development Office, formerly DFID)	African Union	3ie Development Evidence Portal	ActionAid
Cairn	Canada (GAC)	European Bank for Reconstruction and Development (EBRD)	AgEcon	Aga Khan Development Network
EconLit	Australia (DFAT)	European Investment Bank	AGRIS	CARE International
Érudit	New Zealand (MFAT)	European Bank for Reconstruction and Development (EBRD)	BREAD	Catholic Relief Services
GenderWatch	Germany (KfW, GIZ and BMZ)	European Investment Bank	Center for Effective Global Action (CEGA)	Danish Refugee Council
Global Health	France (Agence française de développement (AFD))	European Union	CGIAR: Consultative Group on International Agricultural Research	International rescue Committee (IRC)
International Pol. Sci. Abstracts	Italy (Italian Agency for Development Cooperation (AICS))	International Bank for Reconstruction and Development (IBRD; part of the World Bank Group)	DEval	Médecins sans Frontières
MEDLINE	Sweden (Sida)	International Fund for Agricultural Development (IFAD)	GEF (Global Environmental Facility)	Mercy Corps
PAIS Index	Norway (Norad)	International Monetary Fund (IMF)	Global Facility for Disaster Reduction and Recovery	Oxfam International
Pascal (up to 2015)	Denmark (Danida)	International Organization for Migration (IOM)	ICNL Research Centre	Plan International

RePEc / IDEAS	Finland (Finnida)	UNMAS, United Nations Mine Action Service	IFPRI	Samuel Hall
Web of Science	Belgium (Enabel)	United Nations (UN)	Independent Development Evaluation, AfDB	Save the Children
Worldwide Pol. Sci. Abstracts	Netherlands (Ministry of Foreign Affairs)	United Nations Children's Fund (UNICEF)	J-Poverty Action Lab (J-PAL)	Welthungerhilfe
	Switzerland (DEZA)	United Nations Conference on Trade and Development (UNCTAD)	Millennium Challenge Cooperation	World Vision
	Japan (JICA)	United Nations Development Programme (UNDP), Evaluation Resource Centre	RePEc / IDEAS	HALO Trust
	China (China International Development Cooperation Agency (CIDCA))	United Nations Environment Programme (UNEP)		Oxfam Novib
		United Nations High Commissioner for Refugees (UNHCR)		Save the Children NL
		United Nations Industrial Development Organization (UNIDO)		
		World Bank Group (esp. World Bank e-library, CAS Completion Report Review, Country Performance Portfolio Review, IEG Evaluations, Impact Evaluation)		
		World Food Programme (WFP), Evaluation Library		
		World Health Organization (WHO)		
		UN Women, GATE System		
		OECD DEReC		

Appendix 2: References

Country-level evaluations

AfDB 2020. *Mali: Evaluation of the AfDB's Country Strategy and Program (2005–2019)*. Summary Report, September 2020. IDEV, Independent Development Evaluation, African Development Bank.

Danida 2019. *Mali. Programme pays Danemark: Mali 2017–2022*. Revue à mi-parcours aide-mémoire. Version finale. Danida, Décembre 2019.

Direction Suisse 2011. Direction Suisse 2011 du développement et de la coopération. *Rapport d'évaluation prospective de la stratégie de coopération au Mali 2007–2011*.

Évaluation conjointe 2011. *Évaluation conjointe des opérations d'aide budgétaire au Mali 2003 – 2009*. Évaluation conjointe pour le compte de la Commission de l'Union européenne, de la Belgique et du Canada comme exercice pilote du Comité d'aide au développement de l'OCDE

FIDA 2013. République du Mali. Évaluation du programme de pays. IOE. Bureau indépendant de l'évaluation.

GAC 2013. *Mali Country Program Evaluation 2006–2007 – 2010–2011: Synthesis Report*. Global Affairs Canada. May 2013.

GPE 2020. Meysonnat, A. & Torrano I. 2020. *Prospective evaluation of GPE's country level support to education*. Mali – Second Annual Report. January 2020.

IEG 2015. CLR Review Mali. Independent Evaluation Group.

Norad 2018. *Country Evaluation Brief: Mali*. Report 6/2018. Oslo, April 2018.

ONU Femmes 2019. *Évaluation du portefeuille Pays. Rapport Final. République du Mali 2014 – 2019*.

PBF 2019. Evaluation of the Peacebuilding Fund (PBF) Portfolio in Mali 2014–2018. 30 July 2019.

Ponty, N. & Keïta S. 2015. *Évaluation du fonds national de stabilisation économique et sociale (FNSES)*.

SDC 2020. *Évaluation de la Stratégie de Coopération Mali 2017 – 2021.* Département fédéral des affaires étrangères (DFAE / SDC). Berne, février 2020.

UNDP 2020. *Independent country programme evaluation: Mali* (Independent Evaluation Office).

UNICEF 2019. *Évaluation sommative de l'approche de Programmation intégrée dans les régions de Mopti et Sikasso au Mali.* Rapport d'évaluation présenté à UNICEF Mali. 31 janvier 2019.

UNICEF 2020. *Évaluation formative des stratégies de renforcement des capacités au Mali (2015–2018).* Rapport final (janvier 2020). Évaluation commanditée par le bureau pays de l'UNICEF au Mali.

WFP 2018. *Mali: Une évaluation du portefeuille du PAM.* (2013–2017).

WFP 2019. Heirman, J., Jenkins, M., & Rosenzweig, J. 2019. *Lessons learned from evaluations of the impact of WFP programmes on moderate acute malnutrition in the Sahel.* Field Exchange issue 60, July 2019.

Programme- and project-level evaluations

Aubra, L., Le Port, A., Kameli, Y. et al. 2019. Conditional cash transfer and/or lipid-based nutrient supplement targeting the first 1000 d of life increased attendance at preventive care services but did not improve linear growth in young children in rural Mali: results of a cluster-randomized controlled trial. *American Journal of Clinical Nutrition*, 110, 1476–1490. Available at: <https://doi.org/10.1093/ajcn/nqz238>

AIER. 2019. *Évaluation Finale "Dans les Zones de Feed the Future" du Projet USAID / Nutrition et Hygiène / CARE dans la région de Mopti – Mali.* (2019). Available at: http://careevaluations.org/wp-content/uploads/Rapport-d%C3%A9valuation-FTF_Agri_-F-Juin-19.pdf/.

Aldrich, D.P. 2014. First Steps Towards Hearts and Minds? USAID's Countering Violent Extremism Policies in Africa. *Terrorism and Political Violence*, 26, 523–546. Available at <https://www.tandfonline.com/doi/abs/10.1080/09546553.2012.738263>

Alleganzi, B., Sax, H., Bengaly, L., et al. 2010. Successful implementation of the World Health Organization Hand Hygiene Improvement Strategy in a referral hospital in Mali, Africa. *Infection Control and Hospital Epidemiology* 31(2), 133–141. Available at: <https://doi.org/10.1086/649796>

Alvarez Morán, J.L., Alé, F.G.B., Charle, P. et al. 2018. The effectiveness of treatment for Severe Acute Malnutrition (SAM) delivered by community health workers compared to a traditional facility based model. *BMC Health Services Research*, 18, 207-2016. Available at: <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-018-2987-z>

- Alzúa, M.L., Djebbari, H. & Pickering, A.J. 2020. A Community-Based Program Promotes Sanitation. *Economic Development and Cultural Change*, 68(2), 357–90. Available at: <https://doi.org/10.1086/701214>
- Aurino, E., Tranchant, J.P., Diallo, A.S. & Gelli A. (2019). School feeding or general food distribution? Quasi-experimental evidence on the educational impacts of emergency food assistance during conflict in Mali. *Journal of Development Studies*, 55 (Suppl.1), 7–28. Available at <https://doi.org/10.1080/00220388.2019.1687874>
- Bagayoko, C.-O., Niang, M., Anne, A. et al. 2017. The delegation of tasks in the era of e-health to support community interventions in maternal and child health: Lessons learned from the Pact-Denbaya Project. *Médecine et Santé Tropicales*, 27(4), 354–359. Available at: <https://doi.org/10.1684/mst.2017.0727>
- Beaman, L., Karlan, D., Thuysbaert, B., & Udry, C. 2013. Profitability of Fertilizer: Experimental Evidence from Female Rice Farmers in Mali. *American Economic Review: Papers and Proceedings*, 103(3), 381–386. Available at: <https://www.aeaweb.org/articles?id=10.1257/aer.103.3.381>
- Beaman, L., Karlan, D., & Thuysbaert, B. 2014a. Saving for a (not so) Rain Day: A Randomised Evaluation of Savings Groups in Mali. Working Paper 20600. National Bureau of Economic Research. Available at: <https://www.nber.org/papers/w20600>
- Beaman, L., Karlan, D., Thuysbaert, B., & Udry, C. 2014b. Self-Selection into Credit Markets: Evidence from Agriculture in Mali. NBER Working Paper Series. Available at: <http://www.nber.org/papers/w20387>
- Bernier, A., Yattassaye, A., Beaulieu-Prévost, D. et al. 2018. Empowering Malian women living with HIV regarding serostatus disclosure management: Short-term effects of a community-based intervention. *Patient Education and Counseling* 101(2), 248–255. Available at: <https://doi.org/10.1016/j.pec.2017.07.030>
- Bonde, D. 2016. *Impact of agronomy and livestock interventions on women's and children's dietary diversity in Mali*. *Field Exchange*, 51. Available at: <https://www.ennonline.net/fex/51agronomylivestockmali>
- Bureau de la Coopération Suisse au Mali. 2015a. *Programme « Accompagnement des initiatives des organisations paysannes pour la sécurité alimentaire, la gestion des ressources naturelles et la promotion des exploitations familiales »*.
- Bureau de la Coopération Suisse au Mali. 2015b. « *Programme de Développement Social en milieu Urbain PDSU / Sigida Kura* » – Phase 3 - Programme de développement économique local et de sécurité alimentaire.
- Cabinet Africain d'Études et Conseils (CAEC). 2016. *Évaluation finale de la 1ère phase du « Projet d'Appui à la Restauration du Système Faguibine (PARF) » : Rapport Final*.
- CARE. 2017. *Cash Assistance to Households Affected by Food Insecurity in Goundam and Niafunké Districts (Rapport d'Évaluation Finale du projet)*.
- CARE International. 2019. *Nutrition and Hygiene: End of Project Report*. Available at: https://www.washagendaforchange.org/wp-content/uploads/2020/04/care_mali_nutrition_and_hygiene_final_report_2019.pdf

Chard, A. N, Trinies, V., Moss, D.M. et al. 2018. The impact of school water, sanitation, and hygiene improvements on infectious disease using serum antibody detection. *PLoS Neglected Tropical Diseases*, 12(4), e0006418–e0006418. Available at: <https://doi.org/10.1371/journal.pntd.0006418>

Clarke, S.E, Rouhani, S., Diarra, S. et al. 2017. Impact of a malaria intervention package in schools on plasmodium infection, anaemia and cognitive function in schoolchildren in Mali: A pragmatic cluster-randomised trial.” *BMJ Global Health*, 2(2), e000182–e000182. Available at: <https://doi.org/10.1136/bmjgh-2016-000182>

Dao, T.H., Daidone, S., &Kangasniemi, M. 2021. *Evaluating the Impacts of the FAO Cash+ Programme in Mali*. FAO. Available at: <https://www.fao.org/documents/card/en/c/cb4454en>

Desumaux, A. & Ballo, B. 2014. « Protéger la prochaine génération » : promouvoir l'abandon des mutilations génitales féminines dans le district sanitaire de Kayes au Mali. *Cairn Info*, 51–58.

Dianka, M. & Nienta, I. 2017. *Rapport d'évaluation finale du projet: « Renforcer la capacité d'adaptation et la résilience des communes de Sandare, Massantola, Cinzana et M'Pessoba face aux changements climatiques dans le secteur agricole au Mali »*. Canadian International Development Agency / UNDP.

Diawara, F., Steinhardt, L. C., Mahamar, A. et al. 2017. Measuring the impact of seasonal malaria chemoprevention as part of routine malaria control in Kita, Mali. *Malaria Journal*, 16(1), 325–325. Available at: <https://doi.org/10.1186/s12936-017-1974-x>

Dillon, A. 2011a. Do differences in the scale of irrigation projects generate different impacts on poverty and production. *Journal of Agricultural Economics*, 62(2), 474-492. Available at: <https://doi.org/10.1111/j.1477-9552.2010.00276.x>

Dillon, A. 2011b. The effect of irrigation on poverty reduction, asset accumulation, and informal insurance: Evidence from Northern Mali. *World Development*, 39(12), 2165–2175. Available at: <https://ideas.repec.org/a/eee/wdevel/v39y2011i12p2165-2175.html>

Druetz, T. 2018. Evaluation of direct and indirect effects of seasonal malaria chemoprevention in Mali.” *Scientific Reports*, 8(1), 8104–9. Available at: <https://doi.org/10.1038/s41598-018-26474-6>

Drylands Coordination Group. 2015. *Évaluation d'impact du projet d'« Établissement des cultures vivrières dans les zones sahéliennes et soudano sahélienne du Mali »*.

FAO & WFP. 2019. *Organisation des Nations Unies pour l'Alimentation et l'Agriculture et Programme Alimentaire Mondial. 2019. Évaluation conjointe FAO/PAM du projet « Appui à la résilience des populations vulnérables au nord du Mali »*.

Gelli, A., Tranchant, J.-P., Bliznashka, L. et al. 2018. *The impact of food assistance on food insecure populations during conflict in Mali*. Grantee Final Report. International Initiative for Impact Evaluation. Available at: <https://www.3ieimpact.org/sites/default/files/GFR-TW6.1039-food-insecure-population-mali.pdf>

GIZ. 2019. *Central Project Evaluation: Support of the National Program for Sustainable Small Scale Irrigation in Mali*.

Gouzou, J. & Traoré, K. 2021. *l'Évaluation du programme de gouvernance locale démocratique 2018–2020, Mali*. Sida Decentralized Evaluation. Available at : https://cdn.sida.se/app/uploads/2021/06/24132738/DE2021_23_62413fr.pdf

Government of Canada. 2016. *Rapport d'évaluation finale du projet "Initiative for Food Security and Nutrition in Ségou"*. Available at: <https://www.careevaluations.org/wp-content/uploads/evaluations/ifons-linkages-evaluation-final.pdf/>

Grünewald, F. & Baché, J. 2019. Évaluation du Projet "IRF 217 Peers for Peace Building, Social Cohesion in Mopti and Segou regions". Available at <https://www.wfp.org/publications/mali-evaluation-joint-project-peers-peace-building-social-cohesion-mopti-and-segou>

Guèye, M. & Nikièma, A. 2008. *USAID / Kénéya Ciwara Health Program: Analysis Report of the final evaluation survey*. Bamako: USAID / Kénéya Ciwara Health Programme. Available at: http://careevaluations.org/wp-content/uploads/Ciwara_Evaluation-Final_Version_Finale_24_09_2008_Gue%CC%80ye-2_.pdf

Halle, B. & Doumbia, S. 2020. *Évaluation finale du projet financé par le LDCF « Renforcement de la résilience des groupements de femmes productrices et des communautés vulnérables aux changements climatiques au Mali » ou « Projet Mali-Femmes »*. UNDP.

Heath, R., Hidrobo, M., & Roy, S. 2020. Cash transfers, polygamy, and intimate partner violence: Experimental evidence from Mali. *Journal of Development Economics*, 143, 102410. <https://doi.org/10.1016/j.jdeveco.2019.102410/>

Hodge, S. & Bosma, R. 2015. *Terminal evaluation report of the sustainable management of globally significant endemic ruminant livestock of West Africa*. UNOPS.

ICF Consulting Services. 2016. *Evaluation of ECHO's intervention in the Sahel (2010–2014): Final Report*. Available at: <https://www.alnap.org/help-library/evaluation-of-echo%E2%80%99s-intervention-in-the-sahel-2010-2014>

Iknane, A.A., Kone, Y. & Kaloga, M. 2019. *Évaluation finale du projet USAID « Nutrition dans les régions de Koulikoro, Ségou et Mopti »*. Available at: https://www.careevaluations.org/wpcontent/uploads/Rapport_Care_final_30_Septembre_19_rev_ue.pdf/

JAICA. 2010. *Ex-Post evaluation of project for water supply in the regions of Kayes, Ségou and Mopti in Mali*

Johnson, A., Goss, A., Beckerman, J. & Castro, A. 2012. Hidden costs: the direct and indirect impact of user fees on access to malaria treatment and primary care in Mali. *Social Science and Medicine*, 75(10):1786–92. Available at: <https://www.sciencedirect.com.proxy.bib.uottawa.ca/science/article/pii/S027795361200556/>.

Kara-consult. 2014. *Final evaluation of Catholic Relief Services; (CRS) Mali 'Duwute' Project. AID-FFP-G-12-00056*. Available at: https://pdf.usaid.gov/pdf_docs/PA00KFZH.pdf

Kayentao, K., Florey, L.S., Mihigo, J. et al. 2018. Impact evaluation of malaria control interventions on morbidity and all-cause child mortality in Mali, 2000–2012." *Malaria Journal* 17(1), 424–424. Available at: <https://doi.org/10.1186/s12936-018-2573-1>

- Keita, M., Bleck, J. & Mahamane, F. 2015. *Women's Empowerment Program Mali. Evaluation: 2009–2013*. International Law and Policy Institute, Care Report 3/8.
- Koita, N., Diarra, D. & Diarra, F. 2016. *Évaluation finale du projet WASHPLUS de CARE Mali dans la région de Mopti*. Koita Consulting.
- Koloma, Y. & Alia, H. 2014. Gendered impact of microcredit in Mali: An evaluation by propensity score matching. *Strategic Change*, 23(7–8), 517–530. Available at: <https://doi.org/10.1002/jsc.1993/>
- Kone, Y., Iknane, A. A. & Kaloga, M. 2019. *Final evaluation of the project USAID / Nutrition - Wash in the regions of Koulikoro, Ségou et Mopti*.
- Lanoue, É. & Barro, D. 2013. *Partenariats pour l'exercice d'une gouvernance appropriée : Revue externe du programme*. Bureau de la coopération suisse au Mali.
- Le Port, A., Zongrone, A., Savy, M. et al. 2019. Program impact pathway analysis reveals implementation challenges that limited the incentive value of conditional cash transfers aimed at improving maternal and child healthcare use in Mali. *Current Developments in Nutrition*, 3(9). Available at: <https://doi.org/10.1093/cdn/nzz084>
- Lopez-Ejeda, N., Charle-Cuellar, P., Alé, F.G.B. et al. 2020. Bringing severe acute malnutrition treatment close to households through community health workers can lead to early admissions and improved discharge outcomes. *PLoS ONE*, 15(2), e0227939. Available at: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0227939>
- Mangam, K., Fiekowsky, E., Bagayoko, M. et al. 2016. Feasibility and effectiveness of health for mobilizing households for indoor residual spraying to prevent malaria: A case study in Mali. *Global Health Science and Practice* 4(2), 222–237. Available at: <https://doi.org/10.9745/GHSP-D-15-00381>
- Mitchell, S., Gelman, A., Ross, R., et al. 2018. The Millennium Villages Project: A retrospective, observational, endline Evaluation. *The Lancet: Global Health*, 6(5), E500–E513. Available at: [https://doi.org/10.1016/S2214-109X\(18\)30065-2](https://doi.org/10.1016/S2214-109X(18)30065-2)
- Nelen, J., Barry, I., Keita, A. et al. *Évaluation finale du « Programme d'Aménagement du Delta Intérieur du Niger » (PADIN-II) pour la période de septembre 2013 à mars 2019 : Rapport Final*. Institut Royal des Tropiques (KIT), Amsterdam. Available at: https://careevaluations.org/wp-content/uploads/F05.-Rapport-final_EF-PADIN-II_KIT_v190601.pdf
- Osei, R.D., Dzanku, F.M., Osei-Akoto, I. et al. 2018. *Impact of voice reminders to reinforce harvest aggregation services training for farmers in Mali. Impact Evaluation Report 90*. International Initiative for Impact Evaluation. Available at: https://3ieimpact.org/sites/default/files/2018-12/IE90_TW4_1016_Mali_aggregation_centres.pdf
- Oxfam America. 2013. *Final impact evaluation of the Saving for Change Program in Mali (2009–2012)*.
- Perez, F., Ba, H., Dastagire, S.G. & Altmann, M. 2009. The role of community health workers in improving child health programmes in Mali. *BMC International Health and Human Rights* 9(1), 28–28. Available at: <https://doi.org/10.1186/1472-698X-9-28>

- Pettersson, J. and Wikström, J. 2016. Human Fertilizer and the Productivity of Farming Households. *Agroecology and Sustainable Food Systems*, 40(1), 46-68. Available at: <https://www.tandfonline.com/doi/full/10.1080/21683565.2015.1100694>
- Pickering, A.J., Djebbari, H., Lopez, C. et al. 2015. Effect of a community-led sanitation intervention on child diarrhea and child growth in rural Mali: a cluster-randomised controlled trial." *The Lancet: Global Health* 3(11), e701–e711. Available at: [https://doi.org/10.1016/S2214-109X\(15\)00144-8](https://doi.org/10.1016/S2214-109X(15)00144-8)
- Plouffe, V., Bicaba, F., Bicaba, A. & Druetz, T. 2020. User fee policies and women's empowerment: A systematic scoping review. *BMC Health Services Research*, 20(1), 982. Available at: <https://doi.org/10.1186/s12913-020-05835-w/>
- Ponsar, F. Van Herp, M., Zachariah, R. et al. 2011. Abolishing user fees for children and pregnant women tripled uptake of malaria-related interventions in Kangaba, Mali. *Health Policy and Planning*, 26 (Suppl.2), ii72–ii83. Available at: <https://doi.org/10.1093/heapol/czr068>
- Ravit, M., Audibert, M., Ridde, V. et al. 2018. Removing user fees to improve access to caesarean delivery: A quasi-experimental evaluation in Western Africa. *BMJ Global Health* 3(1), e000558–e000558. Available at: <https://doi.org/10.1136/bmjgh-2017-000558>
- Kaboré, R.B. & Kampo, I. 2017. *Évaluation Finale du Projet D'appui au Processus Electoral du Mali (PAPEM)*.
- Rogers, E., Martínez, K., Alvarez Morán, J.L. et al. 2018. Cost-effectiveness of the treatment of uncomplicated severe acute malnutrition by community health workers compared to treatment provided at an outpatient facility in rural Mali. *Human Resources for Health*, 16, 12-20. Available at: <https://human-resources-health.biomedcentral.com/articles/10.1186/s12960-018-0273-0>
- Rotondo, L. A, Ngondi, J. Rodgers, A.F. et al. 2009. Evaluation of community intervention with pit latrines for trachoma control in Ghana, Mali, Niger, and Nigeria." *International Health* 1(2), 154–162. Available at: <https://doi.org/10.1016/j.inhe.2009.08.001>
- Sacko, M. 2019. *Humanitarian WASH Programme in the Regions of Mopti and Ménaka: Final Evaluation Report*. Available at: <https://www.kirkensnodhjelp.no/en/news/publications/evaluations/emergency-wash-mali-final-evaluation/>
- Safarha, E., Hoffman, V., Zaas, D. et al. 2020. *Food for Education and Child Nutrition Program, Phase III in Mali: Endline Evaluation Report*. Available at <https://impaqint.com/sites/default/files/project-reports/MGD-Mali-Endline-Evaluation-Report.pdf>.
- Simonyan, D., Gagnon, M.-P., Duchesne, T., & Roos-Weil, A. 2013. Effects of a telehealth programme using mobile data transmission on primary healthcare utilisation among children in Bamako, Mali. *Journal of Telemedicine and Telecare* 19(6), 302–6. Available at: <https://doi.org/10.1177/1357633X13503429>
- Tango International. 2016. *CARE Mali Pathways (Projet Nyeleni): Final Evaluation*. Available at: https://www.careevaluations.org/wp-content/uploads/evaluations/care_mali_pathways_endline_report_final.pdf
- Tilford, K.M. 2009. *Synergy and Action for Nutrition+ (SAN+): Child Survival Project – Koulikoro Region, Mali: Final Evaluation Report*. USAID / Helen Keller International.

Touré, M.M., Béhima, M. & Boubacar, M. 2013. *Revue externe du « Programme d'appui aux économies locales des collectivités de Youwarou et de Niafunké » (PACY) Phase 2 de 01.03.2010 au 31.12.2013 : Rapport final*. Bureau de la Coopération Suisse au Mali.

Transition International & Transtec. 2020. *Évaluation finale du « Programme de renforcement des chaînes de valeurs oignon/échalote et poisson/pisciculture au Mali : Rapport d'évaluation finale*. Embassy of The Netherlands, Bamako.

Traoré, S., Kessler, D. & Kehl, F. 2017. *Revue externe du Programme d'Appui à la Formation Professionnelle (PAFP)*. Bureau de la coopération suisse au Mali. Available at <https://www.eda.admin.ch/countries/mali/fr/home/internationale-zusammenarbeit/projekte.html/dezaprojects/SDC/en/1998/7F00736/phase7>

Trevant, C. 2009. *Scaling-up community-based services in the Sikasso Region of Mali: Final Evaluation Report*. Save the Children.

Trinies, V., Ghulamali, S., & Freeman, M.C. 2015. *Dubai Cares: WASH in schools initiative in Mali: Impact evaluation report January 2013 – May 2014*. Rollins School of Public Health.

Trinies, V., Garn, J.V., Chang, H.H. & Freeman, M.C. 2016. The impact of a school-based water, sanitation, and hygiene program on absenteeism, diarrhea, and respiratory infection: A matched-control trial in Mali. *American Journal of Tropical Medicine and Hygiene*, 94(6), 1418–1425. Available at: <https://doi.org/10.4269/ajtmh.15-0757>

UNITAR (United Nations Institute for Training and Research). 2019. Independent evaluation of the Sustaining Peace in Mali and the Sahel Region through Strengthening Peacekeeping Training Capacities Project (Phase II). Available at: <https://unitar.org/results-evidence-learning/evaluation/independent-evaluation-sustaining-peace-mali-and-sahel-region-through-strengthening-peacekeeping>

UNPSO & TMC Consulting Group. 2018. *Projet d'amélioration de l'accès des femmes victimes de violences sexuelles et basées sur le genre à la justice et à la sécurité dans le processus de consolidation de la paix au Mali*. United Nations Peacebuilding Support Office and TMC Consulting Group Afrique.

USAID (United States Agency for International Development). 2013. *Performance evaluation of 'Integrated Initiatives for Economic Growth in Mali'*.

USAID (United States Agency for International Development), 2016. *Mali Transition Initiative: Final Evaluation*. USAID/OTI PDQIII Task Order #10, Activity #3.

USAID (United States Agency for International Development). 2017. *End of project report: « Nos Enfants Apprennent à Lire » (Our Children Learn to Read)*.

USAID (United States Agency for International Development). 2020a. *Final evaluation of the USAID / Mali Education Emergency Support Activity (EESA)*. Available at: https://pdf.usaid.gov/pdf_docs/PA00X2KJ.pdf

USAID (United States Agency for International Development). 2020b. *Final performance evaluation of the Cereal Value Chain activity in Mali*.

Vigneri, M. & Lombardini, S. 2017. *Women's empowerment in Mali: Impact evaluation of the educational project "Girls CAN – Promoting Secondary Education in West Africa*. Oxfam Policy & Practice.

Wennink, B., Keïta A. & Fomba B. 2020. *Evaluation finale du Programme Gouvernance Locale Redevable au Mali*. Royal Tropical Institute (KIT), Amsterdam.

Whidden, C., Kayentao, K., Liu, J.X. et al. 2018. Improving community health worker performance by using a personalized feedback dashboard for supervision: a randomized controlled trial. *Journal of Global Health* 8(2), 020418–020418. Available at: <https://doi.org/10.7189/jogh.08.020418>