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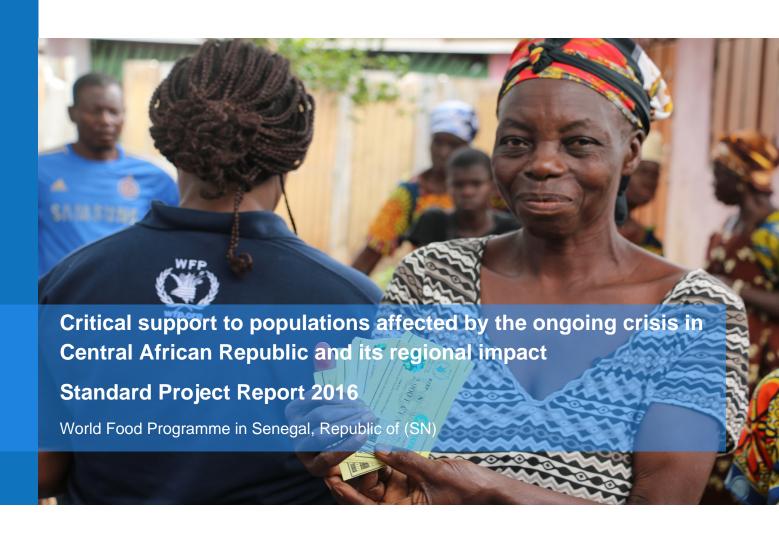
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Further Information
http://www.wfp.org/countries
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Senegal, Republic of (SN)

Regional EMOP - 200799



## **Regional Context**

Insecurity, violence and widespread human rights violations by armed groups against the population in the Central African Republic (C.A.R.) generated new refugee influx into Cameroon, Chad, the Democratic Republic of the Congo (DRC) and the Republic of the Congo (RoC) in 2015.

Against this backdrop, in 2016 WFP aimed to: (i) extend operations through the end of the year; (ii) revise beneficiary numbers taking into account updated assessment data, implementation capacities and funding outlooks requiring a strategic refocus of the operation in C.A.R. and a reduction in the number of refugees to be assisted in Cameroon, Chad and DRC; (iii) re-calibrate programmatic tools to match the latest assessment outcomes with a stronger focus on cash-based interventions and a streamlined nutrition strategy, working towards preventive nutrition programmes and nutrition-sensitive food assistance; (iv) adjust activities to begin a transition towards country-specific responses and recovery activities building on partnerships with the Food and Agriculture Organization of the United Nations (FAO), United Nations Children's Fund (UNICEF) and Office of the United Nations High Commissioner for Refugees (UNHCR); and (v) consolidate the use of the river corridor from DRC and RoC as a contingency planning option to address the continuing complex supply chain challenges into C.A.R.

The prime strategic objective remained saving lives and addressing the food insecurity and malnutrition in C.A.R. and in surrounding affected countries. In order to achieve that, Regional EMOP 200799 provided flexible seasonal support to moderately food-insecure households, supporting the restoration of access to basic services and human capital protection. The operation was based on large scale nutrition and food security assessments and is valid until December 2017.

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## **Project Objectives and Results**

## **Project Objectives**

While the situation in the Central African Republic (C.A.R.) remains volatile and fluid with sporadic outbreaks of extreme violence throughout the country, in 2016 the Regional EMOP 200799 continued to respond to the life-saving needs of populations affected by the ongoing crisis in C.A.R. and consolidated its regional impact in Cameroon, Chad, the Democratic Republic of the Congo (DRC) and the Republic of the Congo (RoC) by assisting 1.2 million people in need – including residents, refugees, internally displaced persons (IDPs) and returnees.

Launched in January 2015, the Regional EMOP 200799 is in line with WFP Strategic Objective 1 "Save lives and protect livelihoods in emergencies". Under a 12-month extension through 31 December 2016, the Regional EMOP continued to improve food consumption, reduce undernutrition, and restore access to basic services of populations affected by the crisis in C.A.R. The Regional EMOP 200799 was further extended until 31 December 2017.

In particular, in 2016, WFP aimed to provide support to severely food-insecure households through: (i) emergency support – nutrition sensitive general food distributions for IDPs, refugees and returnees; (ii) early recovery – conditional assistance through food assistance for assets (FFA) activities and agricultural production support via seed protection programmes carried out in partnership with the Food and Agriculture Organization of the United Nations (FAO); (iii) nutrition – progressive transformation from treatment of moderate acute malnutrition for children aged 6-59 months to prevention of acute malnutrition for children aged 6-23 months; and (iv) education – school meals programme for primary schoolchildren to accompany the back-to-school campaign and strengthen community safety nets in the most affected areas.



### **Approved Budget for Project Duration (USD)**

Cost Category	
Capacity Dev.t and Augmentation	593,200
Direct Support Costs	55,561,880
Food and Related Costs	245,162,032
Indirect Support Costs	24,791,907
Cash & Voucher and Related Costs	52,852,981
Total	378,962,000

## **Project Activities**

#### C.A.R.

In the Central African Republic (C.A.R.), WFP provided food and nutrition assistance to the most vulnerable conflict-affected populations that include refugees, returnees, internally displaced persons (IDPs) and severely food-insecure people.

WFP interventions were implemented in Nana-Gribizi, Ouaka, Ouham, Ouham Pende, Nana Mambere and Mambere-Kadei prefectures where severe food insecurity converges with large population displacements and critical levels of stunting.

In these prefectures, WFP provided a concentrated package of assistance including (i) general food distribution, (ii) treatment and prevention of malnutrition, (iii) Food by Prescription to improve the nutritional status of malnourished people on anti-retroviral therapy (ART), (iv) emergency school meals to support the back-to-school campaign especially for children returning to their neighbourhood and from food-insecure and highly vulnerable households

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from the host communities, (v) food assistance for the creation of productive assets, and (vi) Purchase for Progress (P4P) initiative to connect smallholder farmers to markets.

In collaboration with the Office of the United Nations High Commissioner for Refugees (UNHCR), WFP also maintained relief assistance to Congolese refugees in Zemio (Haut Mbomou), Sudanese in Pladama Ouaka and South Sudanese in Obo through general food distributions.

In a context of limited resources and delivery capacity of 4,000 mt per month, priority was given to life-saving assistance to highly vulnerable conflict-affected populations and severely food-insecure households through general food distribution and nutrition assistance. Activities were implemented in priority areas reaching almost all intended beneficiaries.

WFP assisted more beneficiaries than planned via the general food distribution. However, considering the limited food stocks available to reach all beneficiaries, WFP was forced to adjust the ration distributed to IDPs and severely food-insecure people throughout the year. Resources limitations and security constraints prevented WFP to implement food assistance for assets (FFA) activities as planned to reach all intended beneficiaries. FFA consisted of the seed protection programme was implement jointly with the Food and Agriculture Organization of the United Nations (FAO). In the Nana-Mambere, WFP partnered with Caritas Bouar, Word Vision International and the International Emergency and Development Aid (IEDA Relief) to support the rehabilitation of road, bridges and other community infrastructures. WFP completed the food distributions with cash-based transfers (CBT). Thirty-five (35) percent of general food distribution beneficiaries and 2.39 percent of food assistance for assets activities received value voucher of approximately USD 10, exchangeable for rice, cassava, bean, peanut, meat, fish, oil, sugar, salt and milk in identified network of retailers shops, enough to cover 100 percent of the recommended daily nutritional intake of 2,100 kcal. Critical shortage of food stocks also forced WFP to suspend the school meals distributions in Bangui as of October 2016. Insecurity in several parts of the country and access constraints also prevented WFP from implementing the prevention and treatment of acute malnutrition and Food by Prescription programme in all intended areas to reach all planned beneficiaries.

WFP continued to work to strengthen the national capacities through the capacity augmentation activities. Thus, to improve early warning systems, WFP purchased tablets, mobile phones and internet connections to equip the focal points in sentinel sites.

#### Cameroon

The Regional EMOP provided support to refugee populations installed along the border regions of Cameroon (East, Adamawa and North regions) with C.A.R. through a mix of in-kind and cash-based food transfers and nutrition support activities. Vulnerable host populations were also targeted through nutrition programmes.

Throughout the year, WFP provided continuous monthly general food distributions to refugees in seven established UNHCR refugee sites and 78 off-camp sites situated along the border entry points and local villages. In May, WFP introduced for the first time CBT in Cameroon, which replaced the monthly in-kind food ration for 23,000 refugees installed at the Gado refugee site. The CBT component enabled beneficiaries to meet their food needs from buying diversified food products in local markets in and around the site to meet their food needs. The CBT component started a couple of months later than planned and the CBT value was slightly lower than planned.

In the framework of the WFP-United Nations Children's Fund (UNICEF)-Government Joint Action Plan, WFP's nutrition interventions aimed at preventing all forms of undernutrition in children aged 6 to 23 months, while integrating broader efforts in critical sectors including water, sanitation, hygiene, health, nutrition education and behaviour change communications. During the first half of the year, WFP implemented activities for the prevention of malnutrition in parallel with the programme for treatment of moderate acute malnutrition (MAM) in children aged 6-59 months and undernourished pregnant and lactating women. However, during the second half of the year, an attempt was made to focus limited resources on preventing malnutrition and reaching the most vulnerable populations through strengthening supplementary feeding for all children aged 6-23 months and for children 24-59 months with MAM. Preventive delivery platforms were tested to deliver multiple services to complement nutrition assistance - health care, immunization, water, hygiene and behaviour change communications. Integrating general food distributions (food or cash) with nutrition prevention activities helped maximise synergies and impact. The malnutrition treatment programme was gradually phased out over the year, which explains the relatively low number of beneficiaries reached in this programme as compared to the initial plan. In collaboration with the Joint United Nations Programme on HIV/AIDS (UNAIDS), WFP implemented a Food by Prescription component, targeting malnourished ART clients from both refugee and host populations in five government HIV care and treatment units located in district hospitals in the East and Adamawa regions.

During the last quarter of the year, significant funding challenges forced WFP to reduce the monthly food/cash ration to nearly half of the standard value for all targeted refugee populations. WFP remained concerned about the



negative impact on the C.A.R. refugee population, who depend on food support to sustain their health and well-being.

#### Chad

The Chad component of the Regional EMOP 200799 targeted Chadian returnees who arrived in the region of Salamat in late 2014. The initial objective was to provide general food assistance through CBT to 23,000 persons including returnees and their host communities, in accordance with WFP 2015 accomplishment in the country. Due to limited resources available as well as contributions being confirmed later on in the year, the assistance had to be postponed in the beginning of the year and was resumed in July and targeted 11,000 returnees only. The assistance was provided during the lean season, which represents the most critical time of the year when stocks have been depleted and the new crops are not yet available to harvest.

#### DRC

To achieve the project objectives, the activities for the C.A.R. refugees in the Democratic Republic of the Congo (DRC) in 2016 included:

- Food assistance to refugees settled in four camps located in North and South Ubangi via CBT and in-kind food assistance; and
- Treatment of MAM for children aged 6 to 59 months and pregnant and lactating women.

WFP provided food assistance, through CBT and in-kind, to C.A.R. refugees in four camps in North and South Ubangi provinces. Cash distribution was carried out in two camps – Mole and Boyabu in South Ubangi – with an average actual transfer value of USD 0.48/person/day. In Bili camp in North Ubangi, food assistance was provided through in-kind rations directly distributed by WFP partner, while in Inke, WFP provided assistance using a voucher distribution model.

For the distributions using the commodity voucher model, WFP and the partners organized fairs around the Inke camp. Selected suppliers ensured to make available the food items as agreed with WFP and partners, with a food basket composed of cassava flour, rice, palm oil and salt for the monthly distributions. Registered beneficiaries redeemed the commodities using the voucher. At the end of the distribution process, the suppliers carried out a reconciliation exercise with the partner and then processed the final transaction with WFP financial service provider.

Due to overall limited resource level throughout the year, during the implementation period, the commodity voucher was reduced to 80 percent of the original value of USD 0.64/person/day and direct food distributions to the refugees in Bili camp were also reduced to 80 percent. WFP distributed a food ration of 444 gr/person/day against the 555 grams planned in the original project document. Compared to the project plan figures, the operational plan figures based on food and cash received in 2016 were around 40 percent for food and 55 percent for cash. As a result of limited funding, school meals and FFA activities as well as interventions directed to the host communities and refugees living with host populations planned at the beginning of the year could not be fully implemented during 2016.

In 2016, WFP provided nutrition assistance to malnourished children aged 6-59 months and pregnant and lactating women through MAM programme and nutritional assistance to people living with HIV. On average, this assistance targeted about 30 percent of malnourished refugee children in the camps and 70 percent from host population.

#### RoC

In the Republic of Congo (RoC), the general food distribution provided rations to 21,000 C.A.R. refugees. WFP also provided treatment services for MAM children aged 6-59 months and pregnant and lactating women. In 2016, the Regional EMOP 200799 assisted 18,665 refugees out of 21,000 planned, representing an overall rate of 88.8 percent.

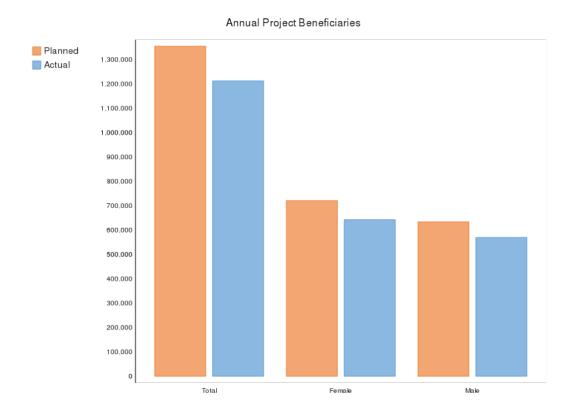
Due to logistics constraints, out of 4,250 mt planned, 2,930 mt of commodities were distributed in 2016, corresponding to a distribution rate of 68.9 percent.

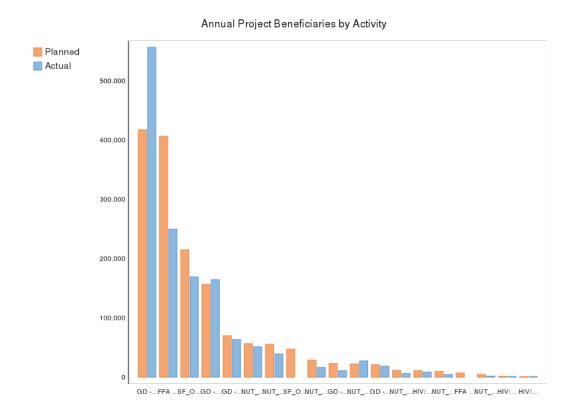
WFP and partners provided treatment services for MAM children aged 6-59 months and pregnant and lactating women in refugee and local communities. Treatment of MAM has been managed by a Canadian non-governmental organization (NGO) *Terre sans Frontière* through nutrition centres. In 2016, the Regional EMOP 200799 assisted 1,907 malnourished, pregnant and lactating women and malnourished children out of 4,600 planned, providing SuperCereal and vegetable oil to women, and ready-to-use supplementary foods, Plumpy'Sup, to children, an overall rate of 41.5 percent. This is mainly due to the funding shortage for the purchase of SuperCereal from January to May. Additionally, due to resource constraints, the treatment of MAM programme was not implemented



across all sites, including Ikpembele which is accessible only by the river.

After an inter-agency needs assessment, UNHCR and WFP started in November to assist around 3,000 additional refugees in the remote area of Moualé. As a result of the agreements with new private transporters, this area became accessible even if the logistical difficulties to reach the beneficiaries remain an important issue.







GD: General Distribution (GD)

FFA: Food-Assistance-for-Assets

F\_ON: School Feeding (on-site)

GD: General Distribution (GD)

GD: General Distribution (GD)

NUT\_PREV: Nutrition: Prevention of Acute Malnutrition

NUT\_PREV: Nutrition: Prevention of Acute Malnutrition

NUT\_PREV: Nutrition: Treatment of Moderate Acute Malnutrition

GD: General Distribution (GD)

NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition

GD: General Distribution (GD)

NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition

GD: General Distribution (GD)

NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition

HIV/TB: \_CST: HIV/TB: Care&Treatment

NUT\_SAM: Nutrition: Theatment of Moderate Acute Malnutrition

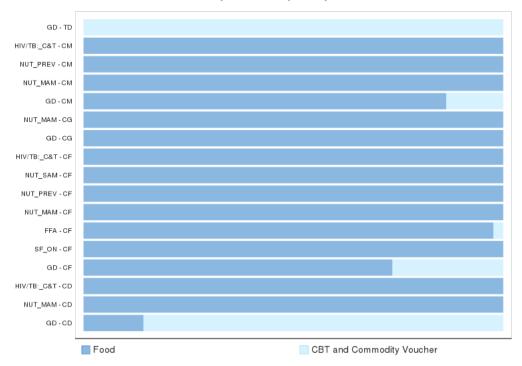
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#### Modality of Transfer by Activity



GD: General Distribution (GD) NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition HIV/TB: \_C&T: HIV/TB: Care&Treatment GD: General Distribution (GD) SF\_ON: School Feeding (on-site) FFA: Food-Assistance-for-Assets NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition NUT\_PREV: Nutrition: Prevention of Acute Malnutrition NUT\_SAM: Nutrition: Therapeutic Feeding (Treatment of Severe Acute HIV/TB: \_C&T: HIV/TB: Care&Treatment GD: General Distribution (GD) NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition GD: General Distribution (GD) NUT\_MAM: Nutrition: Treatment of Moderate Acute Malnutrition NUT\_PREV: Nutrition: Prevention of Acute Malnutrition HIV/TB: \_C&T: HIV/TB: Care&Treatment GD: General Distribution (GD)





Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned		
Food Transfer-Cameroon					
Beans	4,882	802	16.4%		
Corn Soya Blend	4,381	2,480	56.6%		
Dried Fruits	-	36	-		
High Energy Biscuits	-	66	-		
lodised Salt	244	181	74.3%		
Maize	-	1	-		
Ready To Use Supplementary Food	-	37	-		
Rice	17,088	15,682	91.8%		
Split Peas	-	3,224	-		
Sugar	-	10	-		
Vegetable Oil	1,772	1,490	84.1%		
Wheat Soya Blend	-	0	-		
Subtotal	28,367	24,011	84.6%		
Food Transfer-Central African Republ	ic				
Beans	-	980	-		
Canned Pulses	-	7	-		
Corn Sorghum Flour	-	2	-		
Corn Soya Blend	5,425	3,045	56.1%		
High Energy Biscuits	-	5	-		
lodised Salt	545	290	53.2%		
Maize	-	1,403	-		
Maize Meal	-	4,538	-		
Olive Oil	-	8	-		
Peas	-	1,045	-		
Ready To Use Supplementary Food	185	278	149.8%		
Ready To Use Therapeutic Food	-	0	-		
Rice	30,908	14,274	46.2%		
Rice Soya Blend	-	0	-		
Spices	-	0	-		
Split Lentils	-	29	-		
Split Peas	8,430	3,610	42.8%		
Sugar	32	37	114.1%		
Vegetable Oil	3,177	2,130	67.0%		
Wheat Soya Blend	-	72	-		



Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Subtotal	48,702	31,753	65.2%
Food Transfer-Congo (Brazzaville)			
Beans	-	5	-
Corn Soya Blend	363	279	76.9%
lodised Salt	38	17	45.0%
Ready To Use Supplementary Food	30	9	30.1%
Rice	2,646	1,740	65.8%
Split Peas	907	652	71.9%
Vegetable Oil	267	189	70.7%
Subtotal	4,250	2,891	68.0%
Food Transfer-DR of Congo			
Beans	-	16	-
Corn Soya Blend	165	40	23.9%
High Energy Biscuits	5	-	-
lodised Salt	63	12	18.8%
Maize	-	51	-
Ready To Use Supplementary Food	47	27	56.9%
Rice	2,508	883	35.2%
Split Peas	698	244	35.0%
Vegetable Oil	214	72	33.8%
Subtotal	3,700	1,345	36.3%
Total	85,019	59,999	70.6%

# Cash Based Transfer and Commodity Voucher Distribution for the Project (USD)

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned						
Food Transfer-Cameroon									
Cash	3,810,523	2,191,363	57.5%						
Food Transfer-Central African Republ	ic								
Cash	3,346,517	-	-						
Value Voucher	3,573,263	3,203,746	89.7%						
Food Transfer-Chad									
Value Voucher	3,071,438	654,487	21.3%						
Food Transfer-DR of Congo									



Modality	Planned (USD)	Actual (USD)	% Actual v. Planned		
Cash	6,925,248	4,906,237	70.8%		
Commodity Voucher	5,666,112	3,057,708	54.0%		
Total	26,393,101	14,013,541	53.1%		

### **Operational Partnerships**

#### C.A.R.

WFP continued to work closely with the Government, United Nations (UN) agencies, funds and programme including the Food and Agriculture Organization of the United Nations (FAO), United Nations Children's Fund (UNICEF), Office of the United Nations High Commissioner for Refugees (UNHCR), United Nations Population Fund (UNFPA) and the Joint United Nations Programme on HIV/AIDS (UNAIDS), as well as non-governmental organizations (NGOs) to provide emergency food assistance to conflict-affected populations – refugees, internally displaced persons (IDPs) – and severely food-insecure people in the Central African Republic (C.A.R.).

WFP played a key role in supporting the inter-agency coordination. As co-lead of the food security cluster, WFP helped coordinate the food security analysis. WFP worked with the Government, FAO and the cluster's partners to conduct the Integrated Foo Security Phase Classification (IPC) exercises in August 2016. Under the co-leadership of the Government and the Office for the Coordination of Humanitarian Affairs (OCHA), WFP worked with humanitarian partners including Government representatives, UN agencies and NGOs, to support the development of the 2016 Humanitarian Response Plan (HRP) for C.A.R. as well as of other key documents guiding the humanitarian and development cooperation in C.A.R. These include the 2017 Humanitarian Needs Overview (HNO), 2017–2019 Humanitarian Response Plan, Interim Country Strategy 2016–2017 and 2018–2022 United Nations Development Assistance Framework (UNDAF).

In September 2016, through an evaluation process, WFP reviewed the performance of its partners and maintained 16 out of 30 NGOs. This reduction was in accordance with WFP's strategy to align the number of partners to the level of operation anticipated for 2017. That allowed to gradually reinforce their capacities by allocating more resources to each of them and strengthen WFP's supervision. WFP signed 16 field-level agreements, five with national NGOs and 11 with international NGOs for general food distribution to most vulnerable IDPs, refugees and severely food-insecure people in targeted prefectures and Bangui. Partnership with local NGOs was key in allowing WFP to rapidly scale up activity to respond to increased needs. In December, as a result of its partnership with the national partner Esperance, WFP was able to respond within 72 hours to the crisis in Bria – an area previously not covered by WFP – and distributed emergency food rations reaching some 12,850 newly displaced people.

WFP continued to work with Oxfam, *Action contre la Faim* (ACF), World Vision and Plan International for the implementation of the cash-based transfers (CBT). The field-level agreements signed with these partners included the capacity strengthening of national NGOs through training, coaching and close monitoring. Their expertise has been key to accompany local NGOs in developing the capacities to implement and monitor this type of activity and support a gradual transfer of expertise. This will also enable WFP to progressively increase the partnership with local NGOs for the implementation of CBT.

WFP partnered with FAO, Caritas Bouar, Word Vision international and International Emergency and Development Aid (IEDA Relief) for the implementation of food assistance for assets (FFA) activities.

The international NGOs continue to avail their expertise in remote and hard to reach locations. The International Medical Corps provided moderate acute malnutrition (MAM) treatment in Vakaga, where the global acute malnutrition (GAM) prevalence was high. WFP organized periodic meetings with all its cooperating partners to share information and discuss the intervention strategy. The cluster coordination mechanisms, supported by UN agencies, international and national NGOs, government representatives and donors, provided also the forum to harmonise the views with the other stakeholders and streamline resources allocation to avoid duplication of interventions.

WFP worked with the Ministry of Health, UNICEF and nine NGO partners to provide nutrition assistance to malnourished and highly vulnerable children aged 6-23 months. By working with partners, WFP was able to reinforce the screening and referral to the treatment of MAM programme, and strengthened the Government's staff capacities in nutritional programme management. WFP ensured that non-food items (scooping materials, registers and anthropometric materials) were available in assisted centres to efficiently implement the activities.



In order to better coordinate the efforts in supporting the Government in the prevention and treatment of MAM, WFP and UNICEF defined the areas of collaboration and prepared a Memorandum of Understanding (MOU) to formalise the cooperation. The MOU was aligned with the overall strategy agreed at regional level. Both agencies supported the Government's preliminary action aiming at meeting all the requirements to adhere to the Scaling Up Nutrition (SUN) movement. Similar coordinated efforts were undertaken with UNHCR, FAO and UNFPA to rationalise the joint and complementary interventions that maximised the impact.

WFP and UNICEF worked to improve the quality of services offered at primary school through joint targeting in order to ensure that assisted schools received meals, books, didactic materials and access to potable water. A joint home grown school meals project was prepared with FAO under the leadership of the Government to provide a package of interventions in the primary school to gradually develop a sustainable school meals programme across the country. The project will be launched in 2017 and will strengthen smallholder farmers' capacities and offer them increasing market opportunities by creating sustainable links between local agricultural production and the school meals.

#### Cameroon

WFP's response strategy was situated within a broader multi-sector response, implemented alongside UN and NGO partner agencies, to address the needs of the C.A.R. refugees. Positioned within the main inter-agency and partner initiatives in the country such as HRP and the Regional Refugee Response Plan (RRRP), the humanitarian response was closely coordinated through regular meetings in defined sector groups. WFP played a lead role in the food security sector working group and active role in the nutrition working group.

Food assistance activities were carried out through a tripartite agreement with UNHCR and the International Federation of Red Cross and Red Crescent Societies (IFRC), covering 85 refugee sites across the eastern regions. In March, WFP signed an agreement with Catholic Relief Services (CRS) for implementation of the CBT programme. In addition to monitoring transactions between beneficiaries and retailers, CRS provided nutrition education and facilitated an onsite feedback mechanism.

Nutrition interventions were carried out in the framework of the Joint Action Plan for the Fight Against Malnutrition in Cameroon, working in close collaboration with the Ministry of Public Health, UNICEF and a wide network of local and international NGOs, including African Humanitarian Action, International Medical Corps and Association d'Assistance au Développement (ASAD). In addition, through the first half of the year, WFP and UNHCR collaborated with ACF and Médecins sans frontières (MSF) under tripartite agreement for the implementation of nutrition activities in health centres. WFP established effective working relationships with administrative, political and technical government partners at central and local levels, which enabled effective programme implementation and integration in existing regional health systems and structures. WFP worked to strengthen capacity of local and international partners, local government structures, communities and health centre staff through numerous trainings. A network of over 350 community health workers were supported and trained by WFP and partners.

#### Chad

WFP Chad worked with local government authorities, traders and the NGO Islamic Relief Worldwide, to implement food assistance using value voucher model to target vulnerable returnees. Based on 2015 experience, WFP contracted traders in Amtiman and Haraze to supply the market fairs in the distribution sites. The local government authorities were involved in the whole operational process and played key role in the awareness campaign on beneficiaries targeting as the intervention covered only returnee households.

#### DRC

WFP partnership strategy has been following a two-prone approach: a tripartite collaboration with UNHCR, implementing local partners such as Association pour le Développment Social et la Sauvegarde de l'Environnement (ADSSE) and Agence de Développement Economique et Social (ADES) in the refugee camps, and bilateral agreement with WFP partners for assistance in host communities and refugees residing outside the camps.

The tripartite agreement with UNHCR and the same cooperating partners as in 2015, ADSSE for food assistance and ADES for nutrition programmes, covered the activities in the four camps.

In line with the UN agreement with the Government regarding the refugee assistance in the Democratic Republic of the Congo (DRC), WFP and UNHCR worked closely in coordination with the *Commission Nationale pour les Réfugiés* (CNR).



For the activities outside the camps, WFP signed agreements with partners, including World Vision International and Caritas. In 2016, all these agreements were signed to carry out nutrition programmes for refugees and host populations. The nutritional response to C.A.R. refugees was coordinated among WFP, UNHCR and UNICEF at the national and provincial levels.

During the year, operational challenges were encountered in the field and therefore the nutrition programmes had to be re-planned, including new partnerships agreements, in order to ensure quality and achievements of targets.

#### RoC

WFP was well positioned as an effective partner for the Government of the Republic of the Congo in accelerating development and response to emergencies. The Government is WFP's main donor. WFP works currently with the main ministries in coordination with the other UN agencies. The UNDAF 2014–2018 and the WFP country programme were developed in alignment with the National Development Plan of the Government.

A tripartite agreement was signed in 2016 between UNHCR, WFP and a local NGO, Agence d'Assistance aux Rapatriés et Réfugiés au Congo (AARREC) for food distribution.

Throughout 2016, WFP worked closely with UNHCR, which maintains a beneficiaries' database and provides updated lists for food distribution. During general food distribution, supervision was provided by UNHCR and WFP staff. All refugee sites are located on or near the river banks. Local NGOs, particularly AARREC, and local transporters knowledge of the terrains, were a major asset in the organization of timely food distributions. Reaching beneficiaries in remote sites would not have been possible without local partnerships and WFP's transportation facilities (cars and speed boats) available at sub-office level. The Ministry of Social Affairs, Humanitarian Action and Solidarity has been actively following the refugee situation, providing complementary assistance to vulnerable refugees when available. Local officials provided security and intervened as needed. One of the main WFP partners is the Congolese institution *Comité National d'Assistance aux Réfugiés* (CNAR) which represents the government observatory in reference to most humanitarian and social issues.

All the operational partners (UNCHR, CNAR, AARREC) attend monthly coordination meetings at the WFP sub-office with the refugees' committee led by WFP and CNAR, and visit the refugee camps escorted by WFP field monitor assistant or head of sub-office. In spite of the difficult geographical context, WFP continues working in order to improve transport facilities to reach the beneficiaries in the Moualé site which is very remote and difficult to access.

## **Performance Monitoring**

Since its full roll-out in West and Central Africa region in 2016, Country Office Tool for Managing Effectively (COMET) represents WFP's comprehensive online tool to design, implement and monitor programmes and to improve organizational performance.

COMET supports monitoring processes with features that enable country offices to create monitoring plans and use digital data to measure results and to support accountability to beneficiaries.

The sub-offices are responsible for supervising the distributions, coaching the cooperating partners and guiding on WFP strategy. They are also in charge of collecting and reviewing cooperating partners distribution reports prior to uploading them in COMET. Concurrently, the monitoring and evaluation (M&E) staff at country office level proceed with the data cross-checking/quality control in the same platform. Data entry into COMET is decentralised to the sub-offices, although final data validation is performed at the country office level. This allowed timely reporting and accurate planning of upcoming distributions.

#### C.A.R.

WFP activities were monitored within the framework of an established M&E system in the Central African Republic (C.A.R.). Each month, a monitoring plan was developed, based on which the Programme Unit and sub-offices organized regular site monitoring visits. Moreover, WFP aimed to have gender-balanced teams of field monitor assistants and enumerators to ensure that women beneficiaries can report to women monitors in regard to cultural barriers. WFP requested the same from partners through field-level agreements.

During the year, WFP conducted two post-distribution monitoring (PDM) surveys in April and August 2016. This enabled a systematic analysis of the outcomes of the food assistance provided through general food distribution, food assistance for assets (FFA) and nutritional interventions. The qualitative information from PDM reports complemented the quantitative information of quarterly reports submitted by the cooperating partners. WFP also



conducted visits to the distribution sites to discuss with the beneficiaries and get their feedback. Appropriate beneficiaries' feedback were used to adjust the programme implementation. For example, beneficiaries' feedback were key to help determine and adjust the list of commodities that could be bought with the cash-based transfers (CBT) throughout the year.

In order to continuously monitor the food security situation in the most food-insecure areas of the country, particularly the zones facing sporadic violence and inter-community conflict, WFP C.A.R. set up a mobile Vulnerability Analysis and Mapping (mVAM), a mobile food security monitoring system. Relying on mobile phones to collect data removes the need to deploy staff to remote geographical settings where physical access to survey respondents is irregular or otherwise restricted, particularly in conflict zones. In addition, mVAM is cheaper, faster and offers timelier data collection.

More reliable and timely information on food security is valuable for addressing challenges regarding food access, availability and volatility in food prices and population movement. Through mVAM, WFP was able to collect: (i) information about market functionality, food prices and population movement in order to provide earlier warning of potential crises that will trigger emergency assessments; and (ii) information to adjust contingency plans and support programme monitoring, by providing food security information about assisted and unassisted areas.

Performance monitoring was identified as an area of improvement for WFP in C.A.R. in 2016, therefore WFP allocated considerable resources to strengthen its M&E system. An international VAM/M&E officer was recruited to lead the effort. The team was reinforced at both country office level and in all field offices. Several trainings were organized to enhance WFP and partner capacity. The regional M&E advisor was on mission in C.A.R. to support the country office to review the methodology, assist in defining monitoring plans and help develop a strategy to operationalise the plans and further develop the staff capacity in monitoring and reporting on results. The decentralisation of the monitoring activities and the introduction of COMET improved significantly the monitoring of the activities.

#### Cameroon

Major efforts have been taken to strengthen the M&E system, including deploying additional monitoring staff in the country office as well as in the sub- and field offices, and the introduction of mobile devices to improve data collection process. The PDM exercises, carried out on a regular basis throughout the year, allowed WFP to measure the effectiveness and impact of food assistance and to follow up on performance indicators. The quality of monitoring procedures is continuously strengthened through reinforcement of cooperating partners' monitoring capacity; and training in food security and nutrition monitoring and vulnerability analysis of government counterparts. WFP Cameroon ensured the presence of women monitors in the field in order to promote gender parity and to create a conducive environment for women beneficiaries to express themselves and to better assist their needs. Further efforts will be taken to ensure a more equal gender participation among the field staff, including partner staff. WFP field monitor assistants conducted monthly on-site monitoring while COMET has been successfully put in place to facilitate outputs monitoring, baseline and follow-up surveys.

#### Chad

WFP monitoring system is performance-based and involves the comparison of actual against planned, pre-established baseline and target values for outcome indicators as reflected through a country office database. Cooperating partners (distributions and implementation activities progress) reports submitted on a monthly basis are verified, validated and uploaded onto the database by sub-office M&E focal points.

To gauge the quality and timeliness of distributions, WFP and cooperating partner's field monitors conducted monitoring on randomly selected sites/distributions on a monthly basis according to a monthly monitoring plan. Data collection tools (questionnaire and checklist) include module capturing beneficiary's perception on the selection, design and implementation of activities/distributions. The joint field visits allowed capacity strengthening of cooperating partner staff, and concerted actions and recommendations for operational decision-making.

The monitoring of outcomes was performed through a PDM exercise carried out in October 2016. Household questionnaire was managed in accordance with a representative sample of beneficiary households and complemented by focus group discussions within the community and key informants. Data collection using smartphones/tablets allowed timeliness and quality of data and apt report writing.

The country office is going through a staffing reorganization and will take all the necessary measures in order to achieve a higher gender balanced representation within the monitoring teams in spite of the challenges encountered to recruit qualified women candidates on local basis.



#### **DRC**

The country office approved a budget to implement the M&E matrix plan for 2016. All the Regional EMOP outcomes, output and cross-cutting indicators have been collected through an efficient monitoring system. The system encompassed process, post-distribution and food basket monitoring. The new monitoring tool collects distributed food tonnage and all the outputs indicators, namely the number of assisted heath centres. Furthermore, monthly site visits have been conducted regularly, as all the camps were accessible.

In December 2016, WFP conducted a PDM. Around 20 percent of the enumerators were women, and WFP worked in coordination with its partners throughout the project implementation to increase the involvement of women staff in this type of activity in a region where often women are excluded due to lack of capacity. WFP has worked closely with the local government to implement PDM activities while WFP staff focused on regular field visits.

Technology was used widely to improve data collection and processing. Open Data Kit has been used systematically since 2015 to collect the baseline data.

The school meals outputs and outcomes were not collected as this activity was not carried out.

#### RoC

Regarding the Regional EMOP the Republic of the Congo (RoC) component, staff were dedicated to monitoring as follows: an M&E officer and an assistant in Brazzaville who followed up all projects' monitoring activities, and a field monitor assistant who attended the distributions and performed the regular partners' monitoring, through a monitoring toolkit validated by the country office and the regional bureau. In collaboration with the Office of the United Nations High Commissioner for Refugees (UNHCR) and United Nations Children's Fund (UNICEF), WFP organized a Joint Assessment Mission (JAM) in June 2016 to update indicators included in the project logical framework. WFP set up a strong monitoring system with a dedicated field monitor assistant. The field monitor assistant visited between five and ten distribution sites every month including remote sites. To facilitate a timely data collection, analysis and reporting, WFP used tablets equipped with an Open Data Kit – a mobile collection tool which feeds data into a common server and platform on a daily basis. Open Data Kit technology allowed automatic data entering and cleaning. The system also allowed offline data entering which is very valuable feature for data collection since it can accommodate automatic data entering and registration even in the areas with no internet coverage.

Open Data Kit technology trainings have been provided to the field monitor assistant, and questionnaires and checklists have been developed for process and distribution monitoring. For outcome data, enumerators were also specifically trained on nutrition data collection process.

#### Results/Outcomes

#### C.A.R

In 2016, overall humanitarian response in the Central African Republic (C.A.R.) faced critical funding shortfall. As of 22 December, the Humanitarian Response Plan (HRP) had received USD 192.9 million out of the 531.5 million required to address the most critical needs; just over 36 percent of the total requirement. Nonetheless, it is worth noting that WFP was one of the largest recipients of the humanitarian funding in C.A.R. Contributions received were key in allowing WFP to maintain life-saving assistance to highly vulnerable people. However, total resources made available amounted to just over 60 percent of the total budget for the year. The level and timing of funding did not allow to procure stocks in sufficient quantity in time to cover for all the distributions.

Throughout the year, WFP provided relief assistance to highly vulnerable internally displaced persons (IDPs), refugees and returnees through general food distribution using in-kind and cash-based transfers (CBT). WFP relief rations had to be adjusted to 50 percent in June and 25 percent in November of the standard food ration of 2,100 kcal due to lack of food stocks. Despite limited resources WFP was able to scale up assistance to respond to increasing needs in Kaga-Bandoro, Bria and Bambari following the outbreak of violence in the last trimester. During the year, several market, protection and finance assessments were successfully conducted and used to guide the CBT strategy. Results of assessments allowed to expand the use of CBT to new locations and activities. In 2016, in addition to Bangui, Yaloke, Kaga-Bandoro and Zemio, WFP implemented CBT in Begoua, Bouar Carnot and Berberati. Overall during the year, WFP distributed over USD 3 million worth of CBT to beneficiaries; this represents more than three times the amount transferred in 2015 when WFP distributed USD 1.1 million.

WFP provided conditional food assistance to most vulnerable smallholder farmers in the six priority prefectures through the protection programme. WFP distributed CBT and in-kind assistance to 132,300 beneficiaries to protect



their livelihood. The activity was carried out in partnership with the Ministry of Rural Development, the Food and Agriculture Organization of the United Nations (FAO) and 16 national and international non-governmental organizations (NGOs). Alongside the FAO's agricultural production programme providing seeds and agricultural tools, WFP distributed food assistance using in-kind or CBT to reach highly vulnerable smallholder farmers. WFP food assistance contributed to ensuring the food security of smallholder farmer households and preserved the assets or seeds from being sold or eaten during the planting season and until harvest.

WFP partnered with Caritas Bouar, Word Vision International and the International Emergency and Development Aid (IEDA Relief) for the implementation of food assistance for assets (FFA) activities in the Nana-Mambere prefecture. Overall, 129 km of road and two bridges were rehabilitated through the FFA activities. Forty-seven (47) neighbourhood and three community infrastructures were also rehabilitated.

The results of the post-distribution monitoring (PDM) surveys conducted in April and August 2016 indicated that WFP food assistance contributed to improving food and nutrition security of beneficiary households. In April, 65 percent of beneficiary households had an adequate food consumption, while 21 percent were defined as having inadequate food consumption, and 15 percent a very poor diet composed of mainly staples (cassava), occasionally accompanied by oil and vegetables and consumption of sugar and pulses on average less than once a week. In August, the food consumption score (FCS) of beneficiary households improved significantly, majority of them with an adequate or "acceptable" level (77 percent). Nonetheless, there was a relatively high proportion of households, 15 percent, with an inadequate or "borderline" FCS, and 8 percent were considered to consume a poor diet (a FCS below 21) in August. Similarly, the PDM showed that the food assistance provided by WFP, particularly via the CBT modality, allowed to improve the dietary diversity score of the beneficiaries from 5.7 in April to 6.3 in August.

Areas that had high levels of inadequate food consumption (poor and borderline) in August include the prefectures of Ouham (42 percent), Nana Gribizi (35 percent), Basse Kotto (31percent), Ouaka (30 percent) and Haut Mbomou (28 percent).

Households receiving in-kind had worse food consumption (26 percent poor and borderline FCS) than households receiving food assistance through CBT modality (15 percent). Beneficiaries under CBT had a better dietary diversity and are more often consuming pulses (average 3.5 days) and animal protein (average 4.2 days), compared to beneficiaries receiving in-kind (2.9 days of pulses and 3.3 days of animal protein). Better dietary diversity led to an overall better food consumption score for beneficiaries receiving CBT compared to households receiving in-kind.

The reason behind this difference in prevalence of food consumption are due to the fact that households with vouchers received full rations, while those receiving in-kind had their rations reduced by more than half for all food commodities. Furthermore, for the third consecutive year, C.A.R. faced a stagnating agricultural production as such households are relying in addition to food assistance more often upon market purchases versus their own production in order to secure household food access.

WFP continued to provide treatment of moderate acute malnutrition (MAM) to children aged 6-59 months in 161 health facilities. SuperCereal Plus was used to cope with shortage of Plumpy'Sup and ensure uninterrupted supply of assistance throughout the year. WFP worked with the United Nations Children's Fund (UNICEF) in health facilities to support caregivers of severely malnourished children to encourage them to stay in the health facilities to complete the treatment. WFP provided general food distributions whereas UNICEF provided the treatment of these children.

Prevention of acute malnutrition programme was implemented alongside general food distribution amongst children aged 6-23 months. Starting in August, WFP organized active large-scale monthly screening for children aged 6-59 months. Children aged 6-23 months with a mid-upper arm circumference (MUAC) greater or equal to 12.5 cm and in good health received nutritious fortified blended food. During 2016, the prevention of acute malnutrition programme registered a 66 percent coverage rate, below its targeted rate of 70 percent. It should be noted that this result was due to the security situation but also due to the funding shortage for general food distribution since this activity is combined with it.

Active screening helped to strengthen referral of malnourished children to health facilities. The coverage of the treatment of MAM programme increased from 75 percent in 2015 to 80 percent in 2016.

Overall, in 2016 the performance of the treatment of MAM programme continued to improve largely meeting the SPHERE standards.

The Food by Prescription programme in C.A.R. registered improved performance indicators throughout the year, thus meeting the SPHERE standards with annual nutritional recovery rate of 77.34 percent and a default rate of 4.67 percent.

However, insecurity and access constraints hampered the distributions. Clients could not regularly go to the health facilities. Health centres could not function regularly. Delivery of food stocks could not be implemented as planned



in all areas.

WFP provided school meals in 326 schools to cover about 169,140 schoolchildren, or just over 78.7 percent of all planned beneficiaries. Sporadic outbreaks of violence prevented WFP to implement the school meals distributions in all planned areas. In addition, the lack of resources forced WFP to suspend distributions in Bangui and reduce the number of feedings days in November and December from 18 to 15 days per month. The analysis of the monthly distribution reports shows that in areas where security was not alarming, WFP school meals programme encouraged the parents to send and keep their children in school. The retention rate exceeded all project objectives; reaching 75.7 percent for boys and 79.3 for girls. Insecurity negatively impacted the enrolment rate affecting girls in particular. The average annual rate of change in number of boys enrolled in WFP-assisted schools was about six times higher than the average annual rate of change in number of girls enrolled in WFP-assisted schools (0.4 percent).

Through capacity augmentation activities – the technical assistance given to support the completion of the national food security assessment, the two rounds of Integrated Food Security Phase Classification (IPC) exercise, regular vulnerability analysis and mapping, and support given to the sentinel – WFP successfully contributed to the strengthening of food security monitoring and early warning systems.

In 2017, WFP will remain geographically focused on food-insecure prefectures with high stunting rates where IDPs are located, while maintaining its agility to react to a sudden crisis. WFP will assist a reduced number of people focusing on 548,560 highly vulnerable beneficiaries. Focusing the operation in selected areas and communities will allow WFP to optimise resources to achieve the greatest possible impact.

As violence continues to hinder humanitarian access, and in order to assist populations in hard to reach areas, WFP will reinforce humanitarian access by implementing a three-steps process: (i) putting in place flexible operational approaches, such as mobile response teams; (ii) strengthening civil-military coordination at a tactical and strategic level with the Office for the Coordination of Humanitarian Affairs (OCHA) and other partners; and (ii) training staff – through training and technical support both by WFP Headquarters and regional bureau – to identify strategies to overcome access constraints.

#### Cameroon

WFP monitoring results continued to confirm positive trends in the food consumption patterns of the C.A.R. refugees. The proportion of households in the poor food consumption category remained low, though further efforts are needed to reach the project end-date target. Similarly, the WFP and the Office of the United Nations High Commissioner for Refugees (UNHCR) Joint Assessment Mission (JAM) carried out in July 2016, indicated improved food security conditions in the regions compared to previous evaluation. The assessment further revealed that those refugees installed in official camp settings, in which humanitarian assistance has been largely concentrated, reported better food security levels than those located in out of camp structures. Multi-year pledges from donors allowed WFP to plan ahead and mitigate risk of lack of funding. Flexible and timely funding from donors remain key to maximising efficiency and effectiveness of WFP operations. The September 2016 Emergency Food Security Assessment (EFSA) portrayed an alarming deterioration of the food insecurity situation in the Adamawa region, with a food insecurity increased from 19 percent in 2015 to 39 percent in 2016, requiring close attention and follow up.

Beneficiaries reported high level of satisfaction with the CBT programmes, while the monthly injection of USD 330,000 in the economy gave a significant boost to the local market in Gado, thereby generating new income opportunities for refugees and local populations alike.

Performance of nutrition activities were measured against the number of discharged beneficiaries, treatment recovery rate, non-response rate, default rate and treatment mortality rate. Treatment of MAM programme performance indicators reported positive results and within SPHERE standards. Nutritional support was provided to some 1,971 malnourished people living with HIV (PLHIV) from both refugee and host populations in six HIV treatment and care units of the East and Adamawa regions. The planned numbers of malnourished anti-retroviral therapy (ART) clients was slightly underestimated; this is why more beneficiaries than planned received assistance. They benefited from several nutrition education and communication sessions and culinary demonstrations using local products. In 2016, the Government, in collaboration with United Nations (UN) and NGO partners, put in place mobile teams in charge of community screening and the "test and treatment approach", which allowed to detect a large number of HIV patients, which were then enrolled in the Food by Prescription programme.

The nutrition situation stabilised after more than two years of a consolidated multi-sector response to the C.A.R. refugees who arrived in Cameroon in critical conditions, however more efforts are needed to sustain the situation and ensure gains are maintained. WFP screening results at the end of the year indicated proxy levels of global acute malnutrition (GAM) rates of 3.8 percent (red and/or yellow MUAC) amongst children aged 6-59 months, in line with the 2016 Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey, which reported



overall MAM rates of 4 percent in the East region and 6 percent in the Adamawa region.

As indicated by the JAM and other assessment results, continued food support remains critical for the most vulnerable and at-risk groups to stabilise food security and reduce the use of negative coping strategies, while livelihood support will be explored for those refugees who can access land. In 2017, WFP and partner efforts will be consolidated towards self-reliance and resilience initiatives, promoting livelihoods activities to gradually move refugees away from dependency on humanitarian assistance.

With generous donor support, WFP was able to secure a large amount of funding, which enabled a continuous response to the crisis, though a decline in funding level was noted towards the second half of the year. WFP and UNHCR launched an urgent appeal for resources in November 2016 and efforts will continue into 2017 to ensure that assistance continue to the C.A.R. refugees.

WFP advance financing mechanism and immediate response account played a critical role in securing resources at an early stage, before donor pledges were confirmed, enabling WFP to swiftly procure food commodities through the Global Commodity Management Facility (GCMF) in Douala, which contributed to reducing lead time and prevent funds shortage.

#### Chad

An unconditional assistance through CBT covered 11,000 returnees from C.A.R. settled in the Salamat area in 2016. The limited resources did not allow the provision of food assistance the whole year. A six-month distribution of value vouchers with a monthly entitlement of USD 10.2 per person was implemented. WFP provided technical assistance and training to the contracted traders in Amtiman and Haraze in order to facilitate the operation and supply commodities to market fairs at distribution sites. Through these traders, a total voucher value of USD 660,000 was injected into the local economy of these areas. The value vouchers allowed the beneficiaries to exchange commodities estimated to cover a daily ration equivalent to 2,100 kcal per person.

During the assistance period, food security situation of returnee households that received WFP assistance improved and/or stabilised. Compared to the same period in 2015, overall food consumption scores improved and the proportion of households with a poor food consumption score reduced by 54 percent (from 9 percent to 4 percent). The dietary diversity score remained more or less stable at 5 and well above the target of 4.5.

In 2017, WFP will continue its efforts with partners, donors and government to advocate for a coverage of immediate food and nutrition needs and strengthening their livelihood and of host community for more integration of returnees into local livelihood and economy.

One targeted contribution was received under the Regional EMOP 200799, and a limited number of beneficiaries (50 percent of the plan) was assisted and only during half of the year. WFP prioritised assistance starting during the lean season until the end of the year to cover the most critical period of the year.

#### **DRC**

Overall, the food consumption score of the C.A.R. refugees who were assisted with cash in the Mole and Boyabu camps (Libenge / Zongo) and with commodity vouchers in the Inke camp (Mobay-Mbongo) performed better than those who were assisted with the in-kind food in the camp of Bili (Bosobolo). The results of the food security assessment conducted by WFP and the Ministry of Agriculture in March 2016 showed that the Bili camp had the highest proportion of households with the poorest food consumption. Likewise, it showed that populations in this camp were more severely affected by food insecurity than the refugees living in the Libenge and Mobay camps. PDM surveys conducted in December 2016 confirmed the improved trends in the food consumption and the dietary diversity scores of refugee households headed by women or men in Libenge and Mobay. Furthermore, the survey indicated the effectiveness of CBT in the food assistance of C.A.R. refugees settled in the North and South Ubangui provinces.

Refugees in Libenge and Mobay camps arrived before those in Bili. Thus, they were able to develop more coping strategies and income generating activities than the latter. PDM results also showed that the distribution of cash allowed the households to obtain a variety of food that meets their eating habits as well as to meet their other basic non-food needs. Some households even invested a part of their entitlement in petty commerce. In comparison, households that received in-kind assistance had a limited access to a variety of food and often tended to solve their non-food needs by selling a portion of the received entitlement.

The treatment of MAM programme was developed and carried out according to the national acute malnutrition protocol, *Protocole national de prise en charge intégrée de la malnutrition aiguë* (PCIMA). However, the target of beneficiaries to be assisted was not fully achieved due to lack of funding between June to August.



The nutritional status of children aged 6-59 months and pregnant and lactating women considerably improved. The programme rations provided to these beneficiaries were Plumpy'Sup for children and SuperCereal Plus and oil for pregnant and lactating women. Recovery rate is 100 percent for pregnant and lactating women, and 97.65 percent for children aged 6-59 months. At the same time, the registered default rate is 1.28 percent in children and 0 percent in pregnant and lactating women.

Performance indicators for the HIV programme were not included in the Regional EMOP logframe. However, related data are available: recovery rate was 92 percent for PLHIV under ART, and 100 percent for people under prevention of mother-to-child transmission (PMTCT) and tuberculosis directly observed treatment, short-course (TB-DOTS). The death rate was 8 percent for PLHIV/ART. There were no default cases.

Furthermore, the excellent cooperation between WFP and cooperating partners such as *Agence de Développement Economique et Social* (ADES) and other partners acting in host communities, has significantly improved planning and increased the effectiveness of distributions.

WFP will continue to improve the implementation of the operation by rolling out WFP's corporate digital beneficiary and transfer-management platform, SCOPE, in those camps that are not yet covered, and also review the implementation modalities together with UNCHR and its partners on a regular basis. In the Democratic Republic of the Congo (DRC), the project generated approximately 50 percent of the 2016 requirement, as directed contributions. Consequent to the limited funding, WFP had to prioritise life-saving interventions as well as nutritional activities.

#### RoC

In the Republic of the Congo (RoC), results from PDM assessment in December 2015 and from the WFP-UNHCR JAM monitoring session undertaken in June 2016, showed that the overall food security situation improved significantly for the refugees. General food distribution took place on a regular basis, with mostly full rations and the rate of refugees who suffer from food insecurity decreased significantly.

The percentage of households with poor food consumption remained stable on a very low level, contributing to consistent food distributions. Percentage of households with reduced/stabilised coping strategy index increased and reached the project end target. The dietary diversity score remained stable.

As a result of the nutrition programme, the nutrition situation for children and pregnant and lactating women improved. Concerning children, the rate of MAM decreased from 4.2 percent in December 2015 to 3.6 percent in June 2016, while the degree of GAM decreased by half, from 10 percent to 5.4 percent.

In agreement with market and feasibility studies and in order to avoid logistics constraints in the Likouala department, WFP is considering to use CBT for general distribution to C.A.R. refugees in 2017.

## **Progress Towards Gender Equality**

For the implementation of the global policy on gender equality, the WFP Regional Bureau in Dakar adopted a regional strategy in 2016 as a guidance in West and central Africa region to mainstream gender into WFP programmes and activities through a needs-based and context-specific approach. In reference to the EMOP, WFP encouraged the adoption of Gender Analysis approach in order to clarify the specific and different needs, vulnerabilities, and coping strategies of women, men, girls and boys to address them more adequately in food and nutrition security response.

#### C.A.R.

In the Central African Republic (C.A.R.), the patriarchal nature of Central African society, the predominance of free unions, polygamy, early marriage and customary rules that privileged men inheritance have a strong influence on relationships between men and women. The 2015 United Nations Development Programme (UNDP) Gender Inequality Index ranks C.A.R. as the 142th out of 148 countries. Seventy (70) percent of women are illiterate and unaware of their rights. The illiteracy rate for young people aged between 15 and 24 years is 74 percent for girls and 52 percent for boys.

WFP worked to strengthen its staff knowledge on the Gender Policy 2015–2020 in order to have a better understanding and adherence to proposed actions both within the organization and in favour of WFP beneficiaries: sensitisation campaigns were held and cooperating partners were also requested to continuously ensure that women concerns are taken into consideration in planning the distributions (market day, ration card holders).



WFP encouraged cooperating partners to continuously carry out sensitisation initiatives in the targeted communities for women and men, on the advantages of promoting the equality, respect and involvement of all various groups in order to facilitate and reinforce the social cohesion and the appropriation of created assets. Women's equal participation in project management committees allow them to weigh on the decision on which community assets to be rehabilitated in priority.

During the post-distribution monitoring (PDM) and other food security evaluations, women's views are systematically collected to better evaluate their concerns, expectations and suggestions on WFP-provided assistance. Women's equal participation was encouraged by organizing focus group discussions as part of PDM modalities. Thus, distribution day were different from the local market days to allow women to go to the market.

In C.A.R., assessments carried out in 2015 highlighted a significant difference in the food security status between households headed by women and those headed by men, resulting in 57.1 percent of households headed by women are severely or moderately food insecure against 48.1 percent of those headed by men. In 2016, gender related aspects were therefore put at the centre of WFP's targeting strategy in order to ensure that the needs of women were properly addressed through the assistance.

Results of the PDM survey conducted in April and August showed that the gender sensitivity of WFP programmes, which give the priority to women as recipients of the assistance, allowed to reduce women vulnerability.

WFP continued to support the participation of women in the project management committees. The project management committees worked through the project implementation period to ensure a good implementation of targeting, distribution and on-site monitoring activities. The project management committees also supported a strong two-way communication between WFP and partners and the communities by acting as medium for information sharing. The majority of, close to 75 percent, the members of the committees were women; 82 percent of them in leadership capacity. Almost all of them, 97 percent, were trained by WFP and partners on modalities of in-kind, cash or voucher distribution.

Women's participation in project management committees and the gender sensitivity of WFP targeting criteria also contributed to promote a greater implication of women in the decision-making over the use of the assistance. Thus, the PDM carried out in August revealed that in the beneficiary households the decision on the use of assistance is mainly made by women (59.2 percent) rather than by men (19.5 percent) or by both (21.3 percent).

#### Cameroon

Cameroon ranks poorly regarding gender equality with a Gender Inequality Index of 0.879 placing it 132nd out of 188 countries (UNDP, 2015).

In the eastern regions of Cameroon, and amongst the C.A.R. refugees, cultural and traditional gender norms often marginalise women's roles within the family and outside community decision-making. In this context, WFP worked with partners and traditional leaders to sensitise on the importance of women's participation in activities of their concern. To mitigate uneven distribution of food in polygamous households, each wife was provided with a ration card for herself and her children, while the husbands were given cards of family size 1.

In the context of cash-based transfers (CBT), agreements with wholesalers and retailers constituted an opportunity to support women's engagement in market activities, considering that cultural barriers often hinder their full participation. In order to increase the number of women participating in the CBT supply chain, WFP carried out training programmes for selected women's groups and women traders.

WFP carried out 700 nutrition education sessions, for around 28,000 participants, out of which 15 percent were men, including culinary demonstrations on the preparation of locally available nutritive products. A significant increase in the number of men participating in these educational session was noticed, partly responding to WFP and partner awareness raising efforts.

As initially explained, the gender considerations have been particularly streamlined through the different programmes in 2016. Measurable outcomes include better participation of women in the activities (20 percent of CBT retailers are women); and improved participation in decision-making for the use of the household's ration (from 20 to 23 percent) according to the last PDM.

#### Chad

Latest Gender Inequality Index ranks Chad as the 153 out of 148 countries (UNDP, 2015).

Almost two-thirds of returnee beneficiary households were led by women, as a considerable proportion of adult male members had either not returned from C.A.R., or left their household in search of work.



WFP and partners ensured representation of women in distribution committees and paid attention to specific vulnerabilities and cultural sensitivity of beneficiaries when setting up distribution sites. Although sensitisation campaigns encouraging women's participation in project management committees were undertaken, their representation in leadership positions remained low at 33 percent due to social and cultural considerations. The totality of women members of the project management committees interviewed reported that they had been trained by WFP cooperating partner, Islamic Relief Worldwide.

The October PDM revealed that decisions over the use of the food assistance were taken by women alone in 57 percent of households, and by both women and men in 24 percent.

Beneficiary ration cards were issued in women's name since studies show a positive effect on households' food security and on women empowerment. Various households configuration were taken into consideration to avoid exclusion of some vulnerable persons.

Finally, during monitoring visits, WFP ensured that women were adequately represented in focus group discussions.

#### **DRC**

Gender sensitisation efforts were regularly carried out in the area by the provincial government and others actors working in the refugees' camps. These gender sensitisation efforts targeted men and women in decision-making in the household on the use of cash distributed and the participation of women in the management committee.

Cooperating partners were involved in gender sensitisation efforts during CBT distributions. CBT was the main assistance modality carried out in the camps and therefore the decision-making process on the use of this assistance was a key factor in ensuring gender balance. Decision-making in the use of cash received from WFP was well balanced between men and women within households. PDM findings show that decision was made by 29.23 percent of men, 36.19 percent of women and 34.58 percent by both. Sensitisation efforts will continue to be performed by WFP and partners to encourage women to equally participate in decision-making at households and community level, though the 2014 Gender Inequality Index shows that the Democratic Republic of the Congo (DRC) stands at 149th with a value of 0.673 (UNDP, 2015).

According to women participating in cash distribution activities, 39.49 percent of women played an active role in CBT distribution as committee members in the camps. In Inke camp, the head of the CBT committee was a woman.

WFP continued to prioritise the needs of women and girls in delivering its assistance. To increase effort in the progress towards gender equality, Gbadolite sub-office was selected at the end of 2016 to participate in the Gender Age Marker pilot project. Following the Inter-Agency Standing Committee (IASC) Gender Age Maker training, WFP staff members adopted a new gender measurement tool and launched it in Gbadolite. WFP trained government partners and humanitarian actors, and encouraged all stakeholders to implement Gender Age Maker related activities under the coordination of the provincial government. Changes in gender-related issues will be analysed in 2017 as the training tool was piloted in December 2016.

In addition, the December 2016 PDM showed that the end line value of the household food consumption score in Bili camp (Bosobolo) did not change compared to baseline value. It remained far below the target value to be reached, indicating that the food consumption situation of refugees receiving food rations did not improve. With regard to the gender of the household head, the results of the PDM show that households headed by men had better food consumption than those headed by women. In the context of the refugees living in camps, men appear to have the advantage of having more opportunities to carry out a variety of coping strategy activities which brings additional income to the household than women. This could explain the observed differences in the food consumption and dietary diversity between households headed by men and those headed by women.

#### RoC

In 2014, the Republic of the Congo (RoC) ranked 137 on the Gender Inequality Index world ranking and its value was 0.593 (UNDP, 2015).

Men, women, boys and girls were all in need of adequate food and nutrition. Upon their arrival, refugees were sensitised on sexual violence and any related issue about gender equity and parity. The names of both the husband and wife were included on ration cards, and women were encouraged to collect food rations and handle the commodities at home, to ensure they were used for household consumption. This allowed women to receive assistance without discrimination.

In a participatory approach, WFP and the Office of the United Nations High Commissioner for Refugees (UNHCR) allowed the refugees to choose the family member in charge to take rations, in accordance with the beneficiaries orientation. UNHCR and WFP followed the "do no harm" principle and did not want to impose strong decisions that



could threaten the family environment and lead to conjugal sexual and gender-based violence practice.

During food distributions, WFP and UNHCR explained the distribution protocol, the composition of food rations, and other issues related to gender equality to all beneficiaries. WFP continued sensitisation efforts to ensure that decisions on the use of food at household level are made by men and women together.

WFP ensured that women refugees were active during food distributions and, together with UNHCR, made sure that women are well represented on refugee committees. The minimum requirement for the composition of committees is the inclusion of 30 percent women. Initially, there was hesitation from women in applying for management positions due to cultural norms, however, the situation is improving with strong advocacy and sensitisation by UNHCR and WFP.

The Joint Assessment Mission (JAM) 2016 and the PDM 2015 showed that the continuing sensitisation of beneficiaries and partners – on gender-related issues and specific nutritional activities towards pregnant and lactating women and malnourished children – allowed to better take into account the specific needs of people in accordance with their gender and to promote women empowerment.

While two WFP Gender Results Network members in the country, including one who is the head of sub-office, have been confirmed, from March 2017, WFP will implement a gender action plan which will target the most vulnerable beneficiaries keeping a gender focus. If the resources are available, WFP will also conduct a gender analysis for each activities implemented.

## **Protection and Accountability to Affected Populations**

As per the initial EMOP design, WFP continued to coordinate and collaborate with the protection clusters and agencies to stay abreast of protection risks and trends impacting its operation. Consequently, WFP aimed to strengthen the integration of protection and accountability towards affected populations into its operations across the five countries. In order to increase safety and protect beneficiaries, WFP considered protection in consultations with the communities assisted on location and timing of distributions. WFP and stakeholders worked together to maximise efforts to ensure protection and accountability towards affected populations are integrated in project design and implementation.

#### C.A.R.

The protection crisis in the Central African Republic (C.A.R.) is one of the most serious in the world: human rights violations are frequent occurrences. These include unlawful killings, acts of torture, rape or the enslavement of civilians. Children, women, people with disabilities, displaced persons and minority groups are the first victims of these abuses. Murder, mutilation and recruitment of children into armed groups – estimated at between 6,000 and 10,000 in 2016 – are also frequent.

A very large number of cases of sexual violence related to the conflict continue to be reported. According to the mid-year monitoring report, during the first half of 2016, 3,077 incidents were recorded including 1,023 cases of sexual violence, including 597 cases of rape. The situation of more people trapped in enclaves in parts of the territory deprived of their freedom of movement is of particular concern. In addition to insecurity, the lives of thousands of people are marked by restricted access to basic services (medical care, water, electricity and education) for prolonged periods of time.

Given the nature and magnitude of the crisis, WFP continues to give special attention to protection, gender and the "do no harm" principle. WFP continued to coordinate with the protection clusters and worked with partners to ensure that all protection issues were appropriately taken into account in the implementation of all activities. Regular communication with communities on Protection from Sexual Exploitation and Abuse were held to ensure that beneficiaries were informed of their rights. Appropriate systems were put in place to allow them to report any case through regular feedback mechanisms. WFP also actively contributed to the 2016 Humanitarian Country Team's protection strategy that clearly promotes beneficiaries' security, dignity and integrity in delivering humanitarian assistance; the document provided an important complementary framework to WFP's protection strategy.

WFP also strengthened accountability to affected populations by adopting participatory approaches to identify protection concerns in order to reach those most in need without creating additional risks. WFP and partners consulted women's committees, representative of vulnerable groups and others to identify their concerns and discuss mitigation measures to be put in place. The post-distribution monitoring (PDM) surveys conducted in April and August show that the majority of surveyed households reported no security problems on their way to and from the distribution site: 82 percent in April and 86 percent in August. This is due in part to the measures put in place to mitigate security risks, e.g. proximity of the distributions sites, peers groups.



Nevertheless, for the households who reported in August encountering security problems, they were mainly incidents related to burglary and racketeering (7.4 percent), attacks against their physical integrity (3 percent) and harassment or psychological threats (1.3 percent). In the cases when serious protection incidents occurred, certain mitigation measures were implemented during the following food distributions including: the identification of new secured distribution sites closer to beneficiaries' villages of origin; consulting beneficiaries on their self-protection capacities such as walking in groups to ensure the protection among the more vulnerable beneficiaries; and where feasible, WFP liaised with the United Nations (UN) peacekeeping mission to conduct area patrols to strengthen protection of beneficiaries when walking to and from the programme sites.

In general, WFP used armed escorts for certain corridors only as a means of last resort and on a case by case basis adhering to humanitarian principles, also considering the negative implications of using the UN peacekeeping force that is often perceived as a party to the conflict on the safety of communities WFP and partners assisted.

Stakeholders were working together to maximise the impact of humanitarian actors on people's protection. Coordination meetings are in place to analyse and follow up on the evolving security situation.

To strengthen WFP's accountability to affected populations, feedback mechanisms were instituted by implementing partners in all distribution sites, whilst sensitising beneficiaries on where to complain. To enhance beneficiaries' understanding of their entitlements, sensitisation was carried out in local languages to explain the rations and quantities to be distributed.

WFP and partners met regularly with community leaders to share and discuss information regarding the programme implementation strategy including beneficiaries targeting, modalities, change in rations, and communities' comments and suggestions on intervention, thus, ensuring a strong two-way communication between the communities and the organization.

Beneficiaries were also called to play a role in the implementation of the programme through the different committees established to participate in beneficiary selection, consultation and distributions.

WFP worked with partner organizations to ensure that focal points were present during the distributions to collect any complaint, and transmit them to partners or WFP for follow-up.

WFP also piloted feedback mechanisms on its cash-based transfer (CBT) activities that will be gradually rolled out to all distribution sites in 2017.

#### Cameroon

Programmes were designed and implemented with due consideration for the protection concerns of the population: safety issues to, from and at the site, altered intra-household dynamics when distributing cash, or barriers for persons with specific needs to contribute to a safe and dignified access to food assistance. WFP worked within the protection sector ensuring that food assistance contributes to the protection of beneficiaries.

In 2016, as part of its commitment to accountability towards affected populations, WFP established gender-balanced complaints management committees in most distribution sites and a fully operational toll-free hotline, through which beneficiaries could express complaints and feedback, in a safe and dignified manner. The feedback and response mechanism ensured that beneficiaries could easily and without fear of repercussion, communicate issues such as sexual exploitation, abuse of power or non-compliance by any key actor, aspects of programme and/or transfer modality that caused unintended adverse impacts. Moreover, the toll-free hotline was designed to collect any concerns related to food quality, safety and entitlement. Questions on protection were also included in the PDM surveys to ensure systematic follow up on concerns.

The complaints and response mechanism is structured around complaints management committees where beneficiaries and other stakeholders participate actively. WFP and its partners responded to complaints submitted to ensure follow up and sufficient feedback to beneficiaries were guaranteed through communication and sensitisation. The complaints management system enabled WFP to detect programme and service delivery issues in a timely manner and take corrective actions to improve programming and to meet the needs of the affected communities.

Formal workshops on gender, protection and accountability to affected populations were organized to familiarise WFP staff and partners on WFP gender policy, sexual exploitation and abuse. WFP sensitised partners at the field level on Sexual Exploitation and Abuse module through trainings, consultations and the mechanism of reporting on sexual abuse.



#### Chad

To ensure sustainability of the intervention, beneficiaries were involved during the targeting, implementation and evaluation phases. As WFP was facing funding constraints, the decision was taken to focus on assistance regarding returnees only and not to support host communities. Communities were consulted and an agreement was reached on the reasons behind this decision that is the need to support the most vulnerable.

Complaint and feedback committees are established for a representative proportion of the distribution sites. Beneficiary committees and a non-governmental organization (NGO) partner, Islamic Relief Worldwide, analyse any complaints made by beneficiaries of food assistance. Information was compiled and raised with WFP sub-office for swift resolution of issues. In reference to information about the programme and selection criteria, approximately 62 percent of respondents (63 among households headed by women and 57 in those headed by men) to the PDM survey conducted in August declared they were fully aware of WFP assistance and were either informed by cooperating partner (59 percent) or by the community leaders (41 percent).

In addition, WFP conducted regular monitoring visits during which all aspects of food assistance were analysed, including possible protection concerns. The findings of the August PDM showed that the majority (92 percent) of the households interviewed had not encountered any security problems related to the assistance on their way to or back from the distribution sites. However, few respondents (8 percent) reported verbal assaults regardless of gender of the interviewee. The concerns were shared with the cooperating partners and awareness sessions on the respect of the dignity and safety of beneficiaries were conducted for management committee members and community leaders before the following distributions.

#### DRC

According to the draft (preliminary findings) of the Joint Assessment Mission (JAM), despite the organization of elections in C.A.R. and the establishment of a new Government, the majority of refugees are not ready to return. The JAM assessed that particularly out of camp refugees located along the border are exposed to certain protection risks. The JAM further noted that, due to the reduced food assistance rations, in camp refugees are facing some protection risks, including the risk of conflicts between refugees and host communities. Main concerns were related to access to natural resources, the search for income and livelihoods and/or theft of crops.

In the 2016, the Office of the United Nations High Commissioner for Refugees (UNHCR) C.A.R. Regional Refugee Response Plan (RRRP) conducted a biometric registration. As a result of this exercise, the number of refugees decreased from 71,000 (February 2016) to around 55,000 refugees. This difference can be explained by (i) the absence of refugees in camps at the time of registration, (ii) limited spontaneous return, and (iii) elimination of double counting. The biometric registration allowed to better target and optimise limited resources for the humanitarian assistance. This ensured that resources were distributed to the most vulnerable. In turn, targeting the most vulnerable households is likely to reduce associated protection risks of women potentially at risk of engaging in negative coping strategies such as survival sex. In addition, food assistance to vulnerable host community members, based on identified vulnerability criteria rather than status-based model, lessened conflicts between refugees and host communities, contributing to social cohesion.

UNHCR, WFP and its partners ensured that the different components of accountability to affected populations, namely information provision, consultation and complaints and feedback mechanism were respected in the delivery of assistance to the in-camp refugees. For example, regular information sessions and community sensitisation were carried out before each monthly distribution, and interventions were jointly implemented with UNCHR that has dedicated protection staff. Additionally, the interventions were jointly planned and implemented between UNHCR, Commission Nationale pour les Réfugiés (CNR) and non-governmental organizations (NGOs). Complaints were addressed during or after distributions. A formal independent complaints and feedback mechanism will be launched by WFP soon.

In relation to WFP's target to deliver the food assistance in a safe, accountable and dignified way, this was partly achieved. All protection indicators showed a positive trend in 2016 compared to 2015. However, the proportion of assisted persons informed about the programme – which is a composite indicator on information about who is included in the programme (targeting), what assistance people will receive (ration) and where people can complain – is still below the set target. Particularly, the information regarding the targeting and where to complain will need further improvements. Complaint and feedback mechanisms were set up at camp sites through complaint and feedback committees (comprised of UNHCR, WFP, CNR, cooperating partner and refugee representatives) that addressed concerns related to the distributions. WFP is also planning to pilot a complaint and feedback hotline in 2017.



#### RoC

Refugees did not experience safety problems travelling to and/or from the 22 various distribution sites or the WFP programme sites in the reporting period. Assisted sites in Bétou were adequately set up and secured through the collaboration of a non-governmental partner organization, ensuring that distributions were carried out peacefully. Distributions took place on a monthly or bi-monthly basis at sites close to where the refugees are living. The distribution sites are situated at a distance of less than 5 km from refugee sites (as per UNHCR standards) in order to meet protection criteria necessary for a safe journey to the distribution point.

In one of the largest distribution sites in Bétou, refugees were divided into groups according to the size of their household and received distributions on a designated day of the week. This facilitates efficient distributions by regulating the influx of refugees waiting for and receiving food rations.

During the distribution, the Government provided security to prevent thefts, fraud, crowd movements, and resale of food which often take place to the detriment of the most vulnerable refugees (indigenous refugees, women, old people). They worked in conjunction with WFP and UNHCR field monitors, the national committee *Agence pour l'Assistance des Réfugiés Congolais* (AAREC). They were reported not armed during distributions and have previously been sensitised by UNHCR regarding protection measures.

On a bi-monthly basis, the head of sub-office met the refugees of Bétou and Ipkembele to receive their feedback, exchange on the WFP assistance, and sensitise them on protection issues. WFP, with UNHCR, regularly sensitised on refugees rights and duties (towards local communities, authorities, other refugees) to develop and maintain a peaceful environment. The Protection from Sexual Exploitation and Abuse policy is also part of WFP's mandate. On a regular basis, United Nations (UN) agencies in Bétou organised a reminder of the Code of Conduct and the ethic of the UN staff and their partners.

In 2016, WFP created a box for feedback, and put it at the disposal of refugees during each distribution in order to get their questions, suggestions, ideas or problems. WFP received 125 messages in Bétou Centre in 2016. The sub-office team carefully reviewed the messages and tried to take each one into account. Responses were given on the field, during monthly WFP meetings with partners and refugees but also during quarterly meetings between the head of sub-office and refugees in the site. Eighteen (18) contributions concerned the ration being too small, some were messages of gratitude (24), and some related problems in relationships with the partner during the distribution.

Regarding these kinds of issues, WFP shared more information and documentation during general food distribution, and the field monitor sensitises refugees on WFP's dynamic and methodology in the field. Through the adoption of a transparent approach and sensitisation towards the refugees, the sub-office was able to improve accountability and understanding of WFP mandate, objectives, resources and tools. This approach consolidated the relationship between beneficiaries and the sub-office. Besides, most of the technical issues were addressed (hours of distribution not suitable, scoring mistakes) and some will be resolved through the launch of the cash-based transfer modality (commodity diversification). Complaints about specific protection issues (demand of repatriation, person who asks to be register) were transferred to UNHCR.

Before each distribution, the sub-office gathered the Bétou and Ikpembele refugees committees, UNCHR and local partner, *Agende d'Assistance pour le Rapatriement des Réfugiés au Congo (AARREC)*, in order to apply lessons learned, and to exchange information on the ongoing distribution and improve the upcoming distributions.

During senior management field visits, a questions and answers session was regularly organized with refugee committees to allow open discussions regarding the operation and any other issues of concern for the refugees. These platforms are also adopted to keep refugees informed on hand-over processes, the resourcing situation and any predictable lack of funding.

## **Supply Chain**

#### C.A.R.

Central African Republic (C.A.R.) is a land-locked country. The entire country relies on the supply corridor route from Douala to Bangui for all imported cargo, including relief items. The transport lead time, including custom clearance between the port of entry Douala in Cameroon and Bangui in C.A.R., is 25 days on average. For international purchase and in-kind donations the shipping time varies from two to four months. During the rainy season between June/July to October/November, additional time needs to be considered as the road conditions worsen.

Internal transport is also a challenge in the country. The conflict also caused further damage to already dilapidated infrastructure, including roads, and an almost total collapse of the transport sector. Limited logistics capacity,



insufficient transport, and an inadequate number of storage service providers render much of the country inaccessible. Access to the provinces for humanitarian workers and relief items from the capital Bangui is further hindered by widespread banditry and armed elements controlling various regions and stretches of road.

As insecurity continues to be a key constraining factor affecting supply routes into C.A.R., WFP identified the use of alternate supply corridors for humanitarian cargo, complementing the direct trucking from Douala to Bangui. These routes include a combination of road and rail transport from Douala to Bangui via the transhipment location of Belabo (Cameroon), and the Ubangi river road from the Democratic Republic of the Congo (DRC) to Bangui (navigable from June to December).

In 2016, WFP launched a new regional special operation to augment WFP and humanitarian agencies capacity to respond to the C.A.R. crisis. The regional special operation granted WFP the way to address, through enhanced coordination, some of the logistics gaps and bottlenecks on the main access route from the port of Douala in Cameroon by opening alternate supply corridors for humanitarian cargo.

Early flexible funding allowed WFP to optimise the procurement of food stocks. The use of the Global Commodity Management Facility (GCMF) allowed WFP to procure readily-available food in the region and reduced lead time to receive food in the country. The use of WFP own fleet of off-road trucks was also key to ensure that food arrived in a timely manner to hard-to-reach locations in the country not covered by commercial transporters.

#### Cameroon

Logistics infrastructure in Cameroon is organized around the port of Douala, which accounts for more than 90 percent of the country's imports and is the main entry point for cargo destined for Chad and C.A.R. In 2016, the port of Douala was less congested compared to previous years, due to decline in traffic and new procedures put in place by port authorities.

The logistics hub established in Bertoua, in the East region helped avoid congestion in the other extended delivery points in the region. Part of the 23,000 mt of food received during the year was pre-positioned in this hub and re-forwarded as needed to the other central stores. However, secondary transport remained a major challenge, especially during the rainy season as some bridges collapsed during the year, obliging trucks to take longer paths to deliver the food to distributions sites. However, the establishment of new storage facilities in the main refugee camps managed by non-governmental organization (NGO) partners facilitated the pre-positioning of food.

The cash-based transfers (CBT) modality, launched for the first time in Cameroon in 2016, provided opportunities for a more efficient response and to mitigate supply chain challenges, which constituted a major hindrance for the operation in the past. Agreements with wholesalers and retailers constituted an opportunity to support women's engagement in market activities, considering that cultural barriers often hinder their full participation. The enrolment of a competent wholesaler to supply retailers helped to avoid interruptions at shops during distributions.

#### Chad

In Chad, WFP provided food assistance to C.A.R. returnees through the distribution of value vouchers. Contracting experienced traders in market fairs management from 2015 operation, provision of information on the programme well ahead of the distributions and stocks checks by WFP Supply Chain personnel, allowed the traders to prepare for and supply the food market fairs with quality food even during the lean season.

#### DRC

In 2016, the procurement strategy focused on reducing the delivery lead time, whilst contributing to the creation of economic value chains through the injection of capital into the local economy. This approach was carried out in the zones that are closer to WFP programmatic areas.

WFP attached importance to sourcing quality commodities from the local market, mainly rice and beans. This approach catalysed smallholder farmer's motivation to continue production and agricultural development. In 2016, an increased quantity of rice was purchased locally in the Equateur province, complemented with beans from the Eastern provinces of the country. WFP complemented the sourcing of other commodities from the GCMF, which also contributed to reducing the lead times.

Poor infrastructure remained the limiting factor in reaching the refugee intervention areas. The poor state of the road infrastructure prevented a timely replenishment of markets and had a significant impact on the cost of fuel and goods in the local markets. Continuous efforts by WFP focused on the reaching the refugees in a timely, cost-effective manner, despite the land-locked locations of the refugees.



Significant measures were taken to strengthen the management of the operation by setting up a single, consolidated warehouse in Gbadolite, which is the main transhipment point closer to the refugees. Furthermore, to increase efficiency, two additional warehouses were closed and prioritisation of direct deliveries to beneficiaries was considered in most locations. Two WFP off-road trucks have also been deployed in order to reinforce the transport capacity. In addition, 19 commercial transporters (road and river) were contracted in order to surge operational flexibility to meet WFP demands.

For the Inke camp, in collaboration with the Vulnerability Analysis and Mapping (VAM) unit, supply chain analysed market conditions before contracting retailers, in combination with regular monitoring.

In DRC, 0.09 percent of losses out of the total tonnage handled incurred comparing to 1.33 percent registered in 2015. These losses resulted due mostly to multiple handling at cooperating partner level and transportation constraints.

#### RoC

As the Republic of the Congo (RoC) is a food-deficit country, with a low agricultural production, no local purchases were possible in 2016. Food transportation from the port of Pointe Noire to WFP warehouses in Brazzaville was performed through rail with the national railway company, and subsequently on private barges from Brazzaville to the Likouala province. In 2016, the Douala corridor was reopened and 620 mt of food was transported to Betou through Douala.

River transport between Brazzaville and Likouala can only be considered during the rainy season (July–December) when the Ubangi River is navigable. Transport from extended delivery points to final distribution points was performed using small barges contracted from private owners while food handling, loading and offloading at the entry port – the extended delivery points and the final delivery points – were also carried out by private companies. Minor post-delivery losses were caused mainly by deterioration during transport by barge.



Commodity	Local	Regional/International	Total
Beans	988	100	1,088
lodised Salt	119	403	521
Rice	1,219	-	1,219
Sorghum/Millet	80	-	80
Vegetable Oil	-	18	18
Total	2,405	521	2,926
Percentage	82.2%	17.8%	

# Annual Global Commodity Management Facility Purchases Received for the Project (mt)

Commodity	Total
Corn Soya Blend	3,146
High Energy Biscuits	7
Ready To Use Supplementary Food	248
Rice	15,814

Senegal, Republic of (SN) 27 Regional EMOP - 200799



Commodity	Total
Split Peas	3,390
Vegetable Oil	1,628
Total	24,233

# **Implementation of Evaluation Recommendations and Lessons Learned**

#### C.A.R.

Nationally representative assessments and several vulnerability analysis and mapping (VAM) food security bulletins informed WFP response to humanitarian needs in the Central African Republic (C.A.R.) in 2016 and planning for 2017.

The national market assessment, conducted in June 2016, found that commercial and trading activities resumed, especially in urban areas, and allowed the expansion of cash-based transfer (CBT) modality in C.A.R. In 2016, in addition to Bangui, Yaloke, Kaga-Bandoro and Zemio, WFP implemented CBT in Begoua, Bouar Carnot and Berberati. CBT was first introduced as a modality in the food assistance for assets (FFA) activities. Thus, some 5,000 smallholder farmers received assistance through CBT in Berberati and Carnot.

Based on the results of the market assessment, WFP also undertook a feasibility assessment in Kaga-Bandoro in August 2016. The assessment found that local markets were functional and well supplied, and that retailers were able to appropriately respond to an increase in demand. Therefore, CBT was scheduled to start in October in Kaga-Bandoro for an initial number of 5,000 internally displaced persons (IDPs) living on site. Nevertheless, this could not be implemented because of the violence that broke in Kaga-Bandoro in October. The CBT distributions will be conducted in 2017 if the security situation allows it.

The national food security assessment conducted in October 2016 was used to inform WFP strategy for 2017. In particular, the results of the assessment were used to fine-tune the geographical targeting of WFP interventions. The priority was given to the prefectures with highest food insecurity and malnutrition rates where IDPs are located. Relief assistance was maintained through general food assistance and nutrition intervention for highly vulnerable populations, in particular refugees and IDPs, who continued to rely on humanitarian assistance as their only source of food. As the survey confirmed a decrease of agricultural practice for the third consecutive year, mainly because of lack of access to agricultural inputs and tools including seeds, WFP's 2017 response will include an increase of the livelihood saving activities such as FFA activities and Purchase for Progress (P4P) to support the resilience of most vulnerable population.

WFP has implemented several of the key recommendations of the Inter-Agency Humanitarian Evaluation by strengthening the monitoring and evaluation (M&E) system through the launch of the Country Office Tool for Managing Effectively (COMET), and capacity development efforts for staff and cooperating partners on M&E tools and processes. WFP reinforced the coordination structures of the Food Security Cluster by hiring a coordinator since mid-2016 who is in charge of providing strategic orientation and facilitating the overall coordination process at national and regional level. In an effort of defining common targeting criteria, WFP has been working closely with the Government to align its key interventions with Government priorities by signing a Memorandum of Understanding (MOU) with the Institute of Statistics. The MOU aimed to provide capacity development to government staff on food and nutrition security indicators and jointly conduct the annual food security assessment.

#### Cameroon

The CBT modality, launched for the first time in Cameroon in 2016, proved effective. The post-distribution monitoring (PDM) – 4 PDMs were conducted in 2016 – not only revealed a significant improvement of the CBT beneficiaries dietary diversity (approximately 6 food groups rather than 4 in the past), but also showed a positive perception of this modality by the beneficiaries (approximately 98 percent of the beneficiaries are satisfied with the assistance mechanism). Another positive lesson from this modality is the inclusion of some refugees (including women) as retailers in the supply chain. Thus after only nine months since the launching of the modality, the families of these refugee retailers can be removed from the beneficiary list, as they became economically self-sufficient. WFP Cameroon initiated a participatory lessons learned process in order to improve the programme implementation and design of the future interventions. CBT introduced a nutrition education component to strengthen promotion of nutrition practices among CBT beneficiaries and encourage them to prioritise nutritious



foods in their choice of food basket to be purchased.

Other concerns, raised by the evaluations of WFP in-country projects such as the PRRO and Regional EMOP 200777 evaluations regarding cross-cutting issues, were also addressed – including gender and protection and accountability to affected populations. The establishment of the beneficiary feedback mechanism is a significant illustration of the recommendations' implementation. WFP also conducted a gender and market analysis of food sectors in two target regions of Cameroon to ensure innovative gender mainstreaming in the design of future market support activities.

WFP and the Office of the United Nations High Commissioner for Refugees (UNHCR) carried out a Joint Assessment Mission (JAM) in July 2016. The assessment recommendations found that continued food support remains a key for the most vulnerable and at-risk refugees, and host community groups, to stabilise food security and reduce the use of negative coping strategies – while livelihood support will be explored for those refugees who can access land. In 2017, WFP, UNHCR and other partner efforts will be consolidated towards self-reliance and resilience initiatives, promoting livelihoods activities to gradually move refugees away from dependency on humanitarian assistance.

#### Chad

Road access to most areas in the Salamat region was very limited during the rainy season, including villages hosting C.A.R. returnees. Consequently, transportation to distribution points (food fairs) was time consuming and costly. Since transportation costs tended to exceed the price of goods sold in local markets, WFP worked with local traders that built up food stock before the wet season in order to ensure an adequate food supply for WFP's value voucher transfers. Due to inadequate road and poor access, particularly in the rainy season between July and October, WFP organized food fairs in a distribution cycle of every two months instead of monthly distributions. This reduced extensive travel time and transportation costs for project stakeholders (WFP staff, cooperating partners, local authorities).

The introductory meetings held with all stakeholders – including beneficiary representatives, cooperating partners, traders and local authorities to properly explain the programme objectives and operational strategy – determined the success of the operation.

Country office checked not only the quantity that beneficiaries received from local traders in exchange for their value vouchers, but also the quality of the food supplied in the market place before and during the food fairs. This prevented the food infestation.

The validation of WFP's beneficiary lists performed by local authorities, cooperating partners and beneficiary representatives reduced complaints and attempts of fraud.

In order to avoid operational delays, traders should ensure that all food stocks are available at the distribution point/food fair at least 48 hours before the start of the distributions. Moreover, food fairs should be launched before midday, in order to avoid that beneficiaries have to transport their rations at night time.

#### **DRC**

While a formal evaluation has not been conducted in the Democratic Republic of the Congo (DRC) for this Regional EMOP, the management and implementation of the activities have been informed by several assessments and reviews, including an ongoing Joint Assessment Mission (JAM) with UNHCR, an in-depth food security assessment together with the provincial government and a market assessment.

Food assistance continued to be the main source of food and income for the refugees in the camps. The draft findings of the JAM recommended to continue this assistance, and subsequently, WFP extended the Regional EMOP for 2017. The JAM further suggested to conduct a vulnerability survey that will target the most vulnerable households, as already recommended by the nutrition, food security and health survey in September 2014.

WFP continued to review its implementation strategy, including the modality of food assistance (in-kind and CBT), to ensure that the assistance was provided in the most efficient and effective way. Based on the above mentioned assessments, WFP will therefore change the transfer modality for one of the camps from in-kind to CBT (most likely value vouchers) in 2017.

Operational and funding constraints regarding the delivery of food assistance outside the camps led to a review of the activities in 2016, and subsequently, school meals programme was suspended in 2016, and will not be implemented in 2017. For the same reasons, nutrition activities and FFA will focus on in-camp refugees as well as host communities in the surroundings of the camps, especially as the implementation of those activities required technical and operational capacity from cooperating partners.



#### RoC

In agreement with market and feasibility studies and in order to avoid logistics constraints in the Likouala department, in 2017, WFP will start a hybrid approach combining in-kind food distribution with CBT modality. Specific communication actions must be reinforced in order to better inform and sensitise partners on WFP activities and more specifically during the United Nations International Day observances with an emphasis on those which echo the strategic priorities of the WFP.

WFP is planning to strengthen its approach to address gender issues by developing action plan through a gender analysis of the context, a specific budget allocated to gender activities implementation, and an integrated approach with all the partners.

The United Nations (UN) agencies planned to develop inter-agency working group in Betou in 2017, in order to tackle cross-cutting issues faced by refugees. First joint working committees were set up at the end of the year, focusing on health and education through a common plan and the mutualisation of resources.

WFP identified some areas in which it will work to strengthen its programme delivery. Emphasis will be put on reinforcing the approach to protection with its partners in order to tackle current gaps. Moreover, a protection and accountability to affected populations analysis will focus on the main challenges related to WFP assistance that refugees are facing and, concurrently, will develop specific recommendations. "Feedback and complaints" and "participation" of beneficiaries in all phases of the project cycle are the two major WFP commitments and will receive particular attention. A new group of refugees, in Mouale area, started receiving assistance in 2016 and WFP will continue to support this disadvantaged group whose condition is more strenuous than the other refugees.

Furthermore, refugees would benefit from more focused efforts in order to improve their self-sufficiency, and these needs will be analysed and addressed in close collaboration with UNHCR.

## **Story Worth Telling**

Three years of violence took a heavy toll on the people of the Central African Republic (C.A.R.). In the capital Bangui, the markets have recovered relatively quickly. For thousands of people who have been formerly displaced or affected by the crisis, WFP's food vouchers bring a glimmer of hope and comfort.

Madeleine Wayembo lives in Bangui with her eight children, five grandchildren and her elderly mother. When renewed fighting erupted near her home in September 2015, Madeleine was forced to flee with her family to safety. They lived in M'Poko hosted in the internally displaced people sites.

It has been some time since they returned home but their situation remains precarious. "We have been living without any resources. Sometimes we go for two days without eating, and for three months we could not afford to buy any meat or fish." says Madeleine – a widow and sole provider for the family.

Between April and June, Madeleine received food assistance from WFP and its partner in the form of food vouchers. This enabled her to buy oil, manioc (a root vegetable also called cassava, a staple food in many central African diets), flour, groundnuts, meat, fresh and dried fish, and several other items. She can cook for her family, and stock some of the items to feed her family throughout the rest of the month.

The food assistance came at a critical moment for her family, she says. "Without this support, our situation would have become even worse," she says. Though the vouchers can only be used to purchase certain items from markets or shops that are part of the programme, Madeleine says the freedom to choose from a range of items and buy the quantity that she needs is invaluable. "The vouchers are like money. I can go to the market with them and buy what my family needs," she says.



# **Figures and Indicators**

### **Data Notes**

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A woman showing the vouchers she received from WFP as part of general food distribution using cash-based transfers, in Bangui.

# **Overview of Project Beneficiary Information**

**Table 1: Overview of Project Beneficiary Information** 

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)	
Total Beneficiaries	633,340	720,960	1,354,300	569,594	642,314	1,211,908	89.9%	89.1%	89.5%	
Total Beneficiaries (Food Transfer-DR of Congo)	58,200	67,100	125,300	30,403	34,284	64,687	52.2%	51.1%	51.6%	
Total Beneficiaries (Food Transfer-Central African Republic)	469,060	528,940	998,000	430,090	485,488	915,578	91.7%	91.8%	91.7%	
Total Beneficiaries (Food Transfer-Congo (Brazzaville))	11,200	10,200	21,400	8,768	9,887	18,655	78.3%	96.9%	87.2%	
Total Beneficiaries (Food Transfer-Cameroon)	84,530	102,070	186,600	95,396	106,622	202,018	112.9%	104.5%	108.3%	
Total Beneficiaries (Food Transfer-Chad)	10,350	12,650	23,000	4,937	6,033	10,970	47.7%	47.7%	47.7%	
Food Transfer-DR of C	ongo	-								
By Age-group:										
Children (under 5 years)	8,506	8,778	17,284	3,234	3,881	7,115	38.0%	44.2%	41.2%	
Children (5-18 years)	30,791	35,720	66,511	10,997	12,291	23,288	35.7%	34.4%	35.0%	
Adults (18 years plus)	18,903	22,602	41,505	16,172	18,112	34,284	85.6%	80.1%	82.6%	
By Residence status:										
Refugees	35,421	40,838	76,259	24,840	26,910	51,750	70.1%	65.9%	67.9%	
Residents	22,779	26,262	49,041	6,210	6,727	12,937	27.3%	25.6%	26.4%	
Food Transfer-Central	African Repub	lic								
By Age-group:										



Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Children (under 5 years)	95,808	96,806	192,614	81,853	89,573	171,426	85.4%	92.5%	89.0%
Children (5-18 years)	155,688	191,616	347,304	178,299	193,240	371,539	114.5%	100.8%	107.0%
Adults (18 years plus)	217,564	240,518	458,082	169,938	202,675	372,613	78.1%	84.3%	81.3%
By Residence status:	,								
Refugees	3,643	4,108	7,751	6,838	7,719	14,557	187.7%	187.9%	187.8%
Internally displaced persons (IDPs)	59,181	66,736	125,917	101,880	115,003	216,883	172.1%	172.3%	172.2%
Returnees	3,254	3,670	6,924	3,028	3,418	6,446	93.1%	93.1%	93.1%
Residents	402,982	454,426	857,408	318,343	359,349	677,692	79.0%	79.1%	79.0%
Food Transfer-Congo (	(Brazzaville)	l							
By Age-group:									
Children (under 5 years)	2,838	2,090	4,928	2,052	1,679	3,731	72.3%	80.3%	75.7%
Children (5-18 years)	2,433	2,140	4,573	2,239	1,866	4,105	92.0%	87.2%	89.8%
Adults (18 years plus)	5,929	5,970	11,899	4,477	6,342	10,819	75.5%	106.2%	90.9%
By Residence status:	1	1	-			-			
Refugees	10,989	10,011	21,000	-	-	-	-	-	-
Residents	209	191	400	8,768	9,887	18,655	4,195.2%	5,176.4%	4,663.8%
Food Transfer-Camero	on	1	-			-			
By Age-group:									
Children (under 5 years)	39,746	41,239	80,985	32,206	32,066	64,272	81.0%	77.8%	79.4%
Children (5-18 years)	24,071	31,535	55,606	31,045	31,643	62,688	129.0%	100.3%	112.7%
Adults (18 years plus)	20,713	29,296	50,009	32,145	42,913	75,058	155.2%	146.5%	150.1%
By Residence status:	1	1	-			-			
Refugees	60,581	73,152	133,733	86,480	94,766	181,246	142.8%	129.5%	135.5%
Residents	23,949	28,918	52,867	9,985	10,787	20,772	41.7%	37.3%	39.3%
Food Transfer-Chad		,							
By Age-group:									
Children (under 5 years)	2,070	2,530	4,600	987	1,207	2,194	47.7%	47.7%	47.7%
Children (5-18 years)	3,450	4,600	8,050	1,646	2,194	3,840	47.7%	47.7%	47.7%
Adults (18 years plus)	4,830	5,520	10,350	2,304	2,632	4,936	47.7%	47.7%	47.7%
By Residence status:	I	l							
Returnees	10,350	12,650	23,000	5,419	5,551	10,970	52.4%	43.9%	47.7%



# **Participants and Beneficiaries by Activity and Modality**

**Table 2: Beneficiaries by Activity and Modality** 

Activity	Planned (food)	Planned (CBT)	Planned (total)	Actual (food)	Actual (CBT)	Actual (total)	% Actual v. Planned (food)	% Actual v. Planned (CBT)	% Actual v. Planned (total)	
Food Transfer-DR of Congo										
General Distribution (GD)	9,000	61,000	70,000	9,081	54,378	63,459	100.9%	89.1%	90.7%	
School Feeding (on-site)	47,292	-	47,292	-	-	-	-	-	-	
Food-Assistance-for-Assets	7,000	-	7,000	-	-	-	-	-	-	
Nutrition: Treatment of Moderate Acute Malnutrition	11,470	-	11,470	6,300	-	6,300	54.9%	-	54.9%	
HIV/TB: Care&Treatment	1,547	-	1,547	1,228	-	1,228	79.4%	-	79.4%	
Food Transfer-Central Africa	n Republic									
General Distribution (GD)	250,000	167,300	417,300	409,647	146,931	556,578	163.9%	87.8%	133.4%	
School Feeding (on-site)	215,000	-	215,000	169,141	-	169,141	78.7%	-	78.7%	
Food-Assistance-for-Assets	351,500	55,000	406,500	243,952	5,835	249,787	69.4%	10.6%	61.4%	
Nutrition: Treatment of Moderate Acute Malnutrition	22,394	-	22,394	27,409	-	27,409	122.4%	-	122.4%	
Nutrition: Prevention of Acute Malnutrition	56,530	-	56,530	51,297	-	51,297	90.7%	-	90.7%	
Nutrition: Therapeutic Feeding (Treatment of Severe Acute Malnutrition)	9,603	-	9,603	4,631	-	4,631	48.2%	-	48.2%	
HIV/TB: Care&Treatment	11,200	-	11,200	8,622	-	8,622	77.0%	-	77.0%	
Food Transfer-Congo (Brazza	aville)									
General Distribution (GD)	21,000	-	21,000	18,665	-	18,665	88.9%	-	88.9%	
Nutrition: Treatment of Moderate Acute Malnutrition	4,600	-	4,600	1,907	-	1,907	41.5%	-	41.5%	
Food Transfer-Cameroon										
General Distribution (GD)	156,704	23,000	156,704	164,624	25,899	164,624	105.1%	112.6%	105.1%	
Nutrition: Treatment of Moderate Acute Malnutrition	28,900	-	28,900	16,675	-	16,675	57.7%	-	57.7%	
Nutrition: Prevention of Acute Malnutrition	55,510	-	55,510	39,217	-	39,217	70.6%	-	70.6%	
HIV/TB: Care&Treatment	1,000	-	1,000	1,139	-	1,139	113.9%	-	113.9%	
Food Transfer-Chad			-							
General Distribution (GD)	-	23,000	23,000	-	10,970	10,970	-	47.7%	47.7%	



## **Annex: Participants by Activity and Modality**

Activity	Planned (food)	Planned (CBT)	Planned (total)	Actual (food)	Actual (CBT)	Actual (total)	% Actual v. Planned (food)	% Actual v. Planned (CBT)	% Actual v. Planned (total)	
Food Transfer-DR of Congo										
General Distribution (GD)	2,800	12,200	15,000	1,016	10,875	12,692	36.3%	89.1%	84.6%	
School Feeding (on-site)	46,278	-	46,278	-	-	-	-	-	-	
Food-Assistance-for-Assets	1,400	-	1,400	-	-	-	-	-	-	
Nutrition: Treatment of Moderate Acute Malnutrition	11,470	-	11,470	6,300	-	6,300	54.9%	-	54.9%	
HIV/TB: Care&Treatment	1,547	-	1,547	1,228	-	1,228	79.4%	-	79.4%	
Food Transfer-Central Africa	n Republic	-	'						ı	
General Distribution (GD)	250,000	35,860	285,860	409,647	31,544	441,191	163.9%	88.0%	154.3%	
School Feeding (on-site)	215,000	-	215,000	169,141	-	169,141	78.7%	-	78.7%	
Food-Assistance-for-Assets	70,300	11,000	81,300	49,290	1,167	50,457	70.1%	10.6%	62.1%	
Nutrition: Treatment of Moderate Acute Malnutrition	22,394	-	22,394	27,409	-	27,409	122.4%	-	122.4%	
Nutrition: Prevention of Acute Malnutrition	56,530	-	56,530	51,297	-	51,297	90.7%	-	90.7%	
Nutrition: Therapeutic Feeding (Treatment of Severe Acute Malnutrition)	9,603	-	9,603	4,631	-	4,631	48.2%	-	48.2%	
HIV/TB: Care&Treatment	11,200	-	11,200	8,622	-	8,622	77.0%	-	77.0%	
Food Transfer-Congo (Brazza	aville)									
General Distribution (GD)	4,200	-	4,200	3,733	-	3,733	88.9%	-	88.9%	
Nutrition: Treatment of Moderate Acute Malnutrition	4,600	-	4,600	1,907	-	1,907	41.5%	-	41.5%	
Food Transfer-Cameroon									<u> </u>	
General Distribution (GD)	29,506	7,150	29,506	44,679	6,835	44,955	151.4%	95.6%	152.4%	
Nutrition: Treatment of Moderate Acute Malnutrition	28,900	-	28,900	16,675	-	16,675	57.7%	-	57.7%	
Nutrition: Prevention of Acute Malnutrition	55,510	-	55,510	39,217	-	39,217	70.6%	-	70.6%	
HIV/TB: Care&Treatment	1,000	-	1,000	1,139	-	1,139	113.9%	-	113.9%	
Food Transfer-Chad			I							
General Distribution (GD)	-	23,000	23,000	-	10,970	10,970	-	47.7%	47.7%	

# Participants and Beneficiaries by Activity (excluding nutrition)



# **Table 3: Participants and Beneficiaries by Activity (excluding nutrition)**

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Food Transfer-DR of Congo									
General Distribution (GD)									
People participating in general distributions	7,050	7,950	15,000	5,965	6,727	12,692	84.6%	84.6%	84.6%
Total participants	7,050	7,950	15,000	5,965	6,727	12,692	84.6%	84.6%	84.6%
Total beneficiaries	32,900	37,100	70,000	29,826	33,633	63,459	90.7%	90.7%	90.7%
School Feeding (on-site)		l	I					I	l
Children receiving school meals in primary schools	22,070	22,970	45,040	-	-	-	-	-	-
Activity supporters	594	644	1,238	-	-	-	-	-	-
Total participants	22,664	23,614	46,278	-	-	-	-	-	-
Total beneficiaries	22,836	24,456	47,292	-	-	-	-	-	-
Food-Assistance-for-Assets		l	I					I	l
People participating in asset-creation activities	966	434	1,400	-	-	-	-	-	-
Total participants	966	434	1,400	-	-	-	-	-	-
Total beneficiaries	4,830	2,170	7,000	-	-	-	-	-	-
HIV/TB: Care&Treatment		,	,					,	
ART Clients receiving food assistance	372	512	884	130	415	545	34.9%	81.1%	61.7%
TB Clients receiving food assistance	264	178	442	94	297	391	35.6%	166.9%	88.5%
PMTCT Clients receiving food assistance	-	221	221	-	292	292	-	132.1%	132.1%
Total participants	636	911	1,547	224	1,004	1,228	35.2%	110.2%	79.4%
Total beneficiaries	636	911	1,547	224	1,004	1,228	35.2%	110.2%	79.4%
Food Transfer-Central African I	Republic								
General Distribution (GD)									
People participating in general distributions	142,359	143,501	285,860	207,397	233,794	441,191	145.7%	162.9%	154.3%
Total participants	142,359	143,501	285,860	207,397	233,794	441,191	145.7%	162.9%	154.3%
Total beneficiaries	207,816	209,484	417,300	258,202	298,376	556,578	124.2%	142.4%	133.4%
School Feeding (on-site)								1	1



Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Children receiving school meals in primary schools	129,000	86,000	215,000	93,280	75,861	169,141	72.3%	88.2%	78.7%
Total participants	129,000	86,000	215,000	93,280	75,861	169,141	72.3%	88.2%	78.7%
Total beneficiaries	129,000	86,000	215,000	93,280	75,861	169,141	72.3%	88.2%	78.7%
Food-Assistance-for-Assets		1							
People participating in asset-creation activities	48,780	32,520	81,300	23,389	27,068	50,457	47.9%	83.2%	62.1%
Total participants	48,780	32,520	81,300	23,389	27,068	50,457	47.9%	83.2%	62.1%
Total beneficiaries	202,437	204,063	406,500	114,743	135,044	249,787	56.7%	66.2%	61.4%
HIV/TB: Care&Treatment			I						
ART Clients receiving food assistance	2,184	3,016	5,200	1,301	2,891	4,192	59.6%	95.9%	80.6%
Activity supporters	2,988	3,012	6,000	2,206	2,224	4,430	73.8%	73.8%	73.8%
Total participants	5,172	6,028	11,200	3,507	5,115	8,622	67.8%	84.9%	77.0%
Total beneficiaries	5,172	6,028	11,200	3,507	5,115	8,622	67.8%	84.9%	77.0%
Food Transfer-Congo (Brazzav	ille)	ı							
General Distribution (GD)									
People participating in general distributions	1,890	2,310	4,200	1,680	2,053	3,733	88.9%	88.9%	88.9%
Total participants	1,890	2,310	4,200	1,680	2,053	3,733	88.9%	88.9%	88.9%
Total beneficiaries	11,000	10,000	21,000	8,773	9,892	18,665	79.8%	98.9%	88.9%
Food Transfer-Cameroon		1	I						
General Distribution (GD)									
People participating in general distributions	14,155	15,334	29,489	21,578	23,377	44,955	152.4%	152.5%	152.4%
Activity supporters	9	8	17	-	-	-	-	-	-
Total participants	14,164	15,342	29,506	21,578	23,377	44,955	152.3%	152.4%	152.4%
Total beneficiaries	77,412	79,292	156,704	79,020	85,604	164,624	102.1%	108.0%	105.1%
HIV/TB: Care&Treatment		ı				I			
ART Clients receiving food assistance	260	740	1,000	296	843	1,139	113.8%	113.9%	113.9%
Total participants	260	740	1,000	296	843	1,139	113.8%	113.9%	113.9%
Total beneficiaries	260	740	1,000	296	843	1,139	113.8%	113.9%	113.9%
Food Transfer-Chad	1					I		ı	
General Distribution (GD)									
People participating in general distributions	10,350	12,650	23,000	4,937	6,033	10,970	47.7%	47.7%	47.7%



Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Total participants	10,350	12,650	23,000	4,937	6,033	10,970	47.7%	47.7%	47.7%
Total beneficiaries	10,350	12,650	23,000	4,937	6,033	10,970	47.7%	47.7%	47.7%

### **Nutrition Beneficiaries**

#### **Nutrition Beneficiaries**

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Food Transfer-DR of C	ongo								
Nutrition: Treatment of	Moderate Acu	te Malnutrition	ı						
Children (6-23 months)	2,136	2,138	4,274	1,125	1,125	2,250	52.7%	52.6%	52.6%
Children (24-59 months)	2,138	2,138	4,276	1,125	1,125	2,250	52.6%	52.6%	52.6%
Pregnant and lactacting girls (less than 18 years old)	-	730	730	-	450	450	-	61.6%	61.6%
Pregnant and lactating women (18 plus)	-	2,190	2,190	-	1,350	1,350	-	61.6%	61.6%
Total beneficiaries	4,274	7,196	11,470	2,250	4,050	6,300	52.6%	56.3%	54.9%
Food Transfer-Central	African Repub	lic							
Nutrition: Treatment of	Moderate Acu	te Malnutrition	ı						
Children (6-23 months)	3,650	3,740	7,390	4,255	4,791	9,046	116.6%	128.1%	122.4%
Children (24-59 months)	7,435	7,569	15,004	8,666	9,697	18,363	116.6%	128.1%	122.4%
Total beneficiaries	11,085	11,309	22,394	12,921	14,488	27,409	116.6%	128.1%	122.4%
Nutrition: Prevention of	f Acute Malnut	trition							
Children (6-23 months)	27,926	28,604	56,530	23,156	28,141	51,297	82.9%	98.4%	90.7%
Total beneficiaries	27,926	28,604	56,530	23,156	28,141	51,297	82.9%	98.4%	90.7%
Nutrition: Therapeutic	Feeding (Treat	ment of Severe	Acute Malnut	rition)					
Activity supporters (18 plus)	960	8,643	9,603	1,068	3,563	4,631	111.3%	41.2%	48.2%
Total beneficiaries	960	8,643	9,603	1,068	3,563	4,631	111.3%	41.2%	48.2%
Food Transfer-Congo (	(Brazzaville)								



Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Nutrition: Treatment of	Moderate Acu	te Malnutrition							
Children (6-23 months)	1,800	1,800	3,600	467	486	953	25.9%	27.0%	26.5%
Pregnant and lactacting girls (less than 18 years old)	-	450	450	-	429	429	-	95.3%	95.3%
Pregnant and lactating women (18 plus)	-	550	550	-	525	525	-	95.5%	95.5%
Total beneficiaries	1,800	2,800	4,600	467	1,440	1,907	25.9%	51.4%	41.5%
Food Transfer-Camero	on	-							
Nutrition: Treatment of	Moderate Acu	te Malnutrition							
Children (6-23 months)	5,124	5,673	10,797	2,566	2,841	5,407	50.1%	50.1%	50.1%
Children (24-59 months)	3,660	3,843	7,503	1,833	1,924	3,757	50.1%	50.1%	50.1%
Pregnant and lactacting girls (less than 18 years old)	-	4,558	4,558	-	3,230	3,230	-	70.9%	70.9%
Pregnant and lactating women (18 plus)	-	6,042	6,042	-	4,281	4,281	-	70.9%	70.9%
Total beneficiaries	8,784	20,116	28,900	4,399	12,276	16,675	50.1%	61.0%	57.7%
Nutrition: Prevention o	f Acute Malnut	rition				1			1
Children (6-23 months)	26,645	28,865	55,510	18,824	20,393	39,217	70.6%	70.6%	70.6%
Total beneficiaries	26,645	28,865	55,510	18,824	20,393	39,217	70.6%	70.6%	70.6%

# **Project Indicators**

#### **Outcome Indicators**

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Food Transfer-DR of Congo				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and	d lactating wom	ien		
MAM treatment recovery rate (%)				
EQUATEUR ENFANTS 6/59 MOIS, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2015.03, Secondary data, SPR 2015, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports 2016	>75.00	90.52	99.42	97.65



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM treatment mortality rate (%)				
EQUATEUR ENFANTS 6/59 MOIS, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2015.03, WFP programme monitoring, CP reports, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports	<3.00	0.00	0.00	0.00
MAM treatment default rate (%)				
EQUATEUR ENFANTS 6/59 MOIS, <b>Project End Target</b> : 2016.12, SPR 2015, <b>Base value</b> : 2015.03, Secondary data, SPR 2015, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports 2016	<15.00	6.80	0.23	0.00
MAM treatment non-response rate (%)				
EQUATEUR ENFANTS 6/59 MOIS, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2015.03, WFP programme monitoring, CP reports, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports	<15.00	2.66	0.35	1.07
MAM treatment recovery rate (%)				
EQUATEUR PLW, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2015.03, Secondary data, SPR 2015, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports 2016	>75.00	95.35	97.33	100.00
MAM treatment mortality rate (%)				
EQUATEUR PLW, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2015.03, WFP programme monitoring, CP reports, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports	<3.00	0.35	0.00	0.00
MAM treatment default rate (%)				
EQUATEUR PLW, <b>Project End Target</b> : 2016.12, SPR 2015, <b>Base value</b> : 2015.03, Secondary data, SPR 2015, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports 2016	<15.00	3.50	2.67	1.28
MAM treatment non-response rate (%)				
EQUATEUR PLW, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2015.03, WFP programme monitoring, CP reports, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP reports	<15.00	0.86	0.00	0.00
Stabilized or improved food consumption over assistance period for targeted household	s and/or individ	uals		
FCS: percentage of households with poor Food Consumption Score				
BOSOBOLO, <b>Project End Target</b> : 2016.12, PDM in december 2016, <b>Base value</b> : 2015.12, WFP programme monitoring, PDM in december 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	=3.40	17.00	<del>-</del>	17.28
FCS: percentage of households with poor Food Consumption Score (female-headed)				
BOSOBOLO, <b>Project End Target</b> : 2016.12, PDM in december 2016, <b>Base value</b> : 2015.12, WFP programme monitoring, PDM in december 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	=3.20	16.00	<u>-</u>	33.33
FCS: percentage of households with poor Food Consumption Score (male-headed)				
BOSOBOLO, <b>Project End Target</b> : 2016.12, PDM in december 2016, <b>Base value</b> : 2015.12, WFP programme monitoring, PDM in december 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	=3.60	18.00	-	16.00



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score				
BOSOBOLO, <b>Project End Target</b> : 2016.12, PDM in december 2016, <b>Base value</b> : 2015.12, WFP programme monitoring, PDM in december 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>5.05	5.05	-	4.85
Diet Diversity Score (female-headed households)				
BOSOBOLO, <b>Project End Target</b> : 2016.12, PDM in december 2016, <b>Base value</b> : 2015.12, WFP programme monitoring, PDM in december 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>5.10	5.10	-	4.00
Diet Diversity Score (male-headed households)				
BOSOBOLO, <b>Project End Target</b> : 2016.12, PDM in december 2016, <b>Base value</b> : 2015.12, WFP programme monitoring, PDM in december 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>5.00	5.00	-	4.92
FCS: percentage of households with poor Food Consumption Score				
LIBENGE, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, WFP survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP survey, PDM in december 2016	=5.12	25.60	18.60	6.60
FCS: percentage of households with poor Food Consumption Score (female-headed)				
LIBENGE, Project End Target: 2016.12, JAM, Base value: 2014.06, Joint survey, JAM, Previous Follow-up: 2015.12, WFP survey, PDM december 2015, Latest Follow-up: 2016.12, WFP survey, PDM in december 2016	=5.14	25.70	22.03	8.24
FCS: percentage of households with poor Food Consumption Score (male-headed)				
LIBENGE, Project End Target: 2016.12, JAM, Base value: 2014.06, WFP survey, JAM, Previous Follow-up: 2015.12, WFP survey, PDM december 2015, Latest Follow-up: 2016.12, WFP programme monitoring, PDM in december 2016	=5.10	25.50	14.57	5.31
Diet Diversity Score				
LIBENGE, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>4.47	4.47	4.90	5.29
Diet Diversity Score (female-headed households)				
LIBENGE, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>4.62	4.62	5.10	5.14
Diet Diversity Score (male-headed households)				
LIBENGE, Project End Target: 2016.12, JAM, Base value: 2014.06, Joint survey, JAM, Previous Follow-up: 2015.12, WFP survey, PDM december 2015, Latest Follow-up: 2016.12, WFP programme monitoring, PDM in december 2016	>4.46	4.46	4.80	5.43
FCS: percentage of households with poor Food Consumption Score				
MOBAYI BONGO, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP survey, PDM in december 2016	=3.94	19.20	24.11	2.10



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score (female-headed)				
MOBAYI BONGO, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP survey, PDM in december 2016	=3.92	19.60	19.51	0.00
FCS: percentage of households with poor Food Consumption Score (male-headed)				
MOBAYI BONGO, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	=3.82	19.10	26.76	4.08
Diet Diversity Score				
MOBAYI BONGO, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, Joint survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>4.77	4.77	4.60	5.60
Diet Diversity Score (female-headed households)				
MOBAYI BONGO, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, WFP survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>4.78	4.78	4.90	5.59
Diet Diversity Score (male-headed households)				
MOBAYI BONGO, <b>Project End Target</b> : 2016.12, JAM, <b>Base value</b> : 2014.06, Joint survey, JAM, <b>Previous Follow-up</b> : 2015.12, Joint survey, PDM december 2015, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, PDM in december 2016	>4.77	4.77	4.42	5.61
Restored or stabilized access to basic services and/or community assets				
Retention rate in WFP-assisted primary schools				
EQUATEUR, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2014.09, WFP programme monitoring, CP reports, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports	>95.34	95.34	92.08	-
Retention rate (girls) in WFP-assisted primary schools				
EQUATEUR, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2014.09, WFP programme monitoring, CP reports , <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports	>95.50	95.50	90.75	-
Retention rate (boys) in WFP-assisted primary schools				
EQUATEUR, <b>Project End Target</b> : 2016.12, CP distribution reports, <b>Base value</b> : 2014.09, WFP programme monitoring, CP reports, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, CP reports	>96.40	96.40	94.06	-
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
EQUATEUR, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2014.09, WFP programme monitoring, CP reports	>6.00	4.55	-	-
Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools				
EQUATEUR, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2014.09, WFP programme monitoring, CP reports	>6.00	5.83	-	-



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools				
EQUATEUR, <b>Project End Target</b> : 2016.12, CP reports, <b>Base value</b> : 2014.09, WFP programme monitoring, CP reports	>6.00	5.09	-	-
Food Transfer-Central African Republic	J			
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and	d lactating wom	en		
MAM treatment recovery rate (%)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, <b>Base value</b> : 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016	>75.00	92.00	85.90	85.90
MAM treatment mortality rate (%)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, <b>Base value</b> : 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016	<3.00	0.10	0.10	0.10
MAM treatment default rate (%)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, <b>Base value</b> : 2015.12, WFP programme monitoring, Monthly CP/Healt center Activity report, WFP Programme Monitoring, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016	<15.00	7.00	8.80	8.80
MAM treatment non-response rate (%)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, <b>Base value</b> : 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016	<15.00	4.10	5.20	5.20
Proportion of target population who participate in an adequate number of distributions				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Monthly CP /Healt center Activity report, WFP Programme Monitoring, <b>Base value</b> : 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, Programme Monitoring, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016	>66.00	88.00	65.00	86.00
Proportion of eligible population who participate in programme (coverage)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Monthly CP /Healt center Activity report, WFP Programme Monitoring, <b>Base value</b> : 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, CP monthly monitoring report 2016	>70.00	65.00	80.00	80.00
2010.12, 111. programme monitoring, or monthly monitoring report 2010	>10.00	00.00	00.00	00.00



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM Avril 2016, <b>Base value</b> : 2016.04, WFP survey, PDM Avril 2016, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	<2.20	11.00	11.00	8.40
FCS: percentage of households with borderline Food Consumption Score				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM Avril 2016, <b>Base value</b> : 2016.04, WFP survey, PDM Avril 2016, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	=3.86	19.30	19.30	15.00
FCS: percentage of households with poor Food Consumption Score (female-headed)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM Avril 2016, <b>Base value</b> : 2016.04, WFP survey, PDM Avril 2016, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	<2.28	11.40	11.40	10.00
FCS: percentage of households with poor Food Consumption Score (male-headed)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM Avril 2016, <b>Base value</b> : 2016.04, WFP survey, PDM Avril 2016, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	<2.14	10.70	10.70	7.70
FCS: percentage of households with borderline Food Consumption Score (female-headed)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM Avril 2016, <b>Base value</b> : 2016.04, WFP survey, PDM Avril 2016, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	=4.28	21.40	21.40	15.70
FCS: percentage of households with borderline Food Consumption Score (male-headed)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM Avril 2016, <b>Base value</b> : 2016.04, WFP survey, PDM Avril 2016, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	=3.48	17.40	17.40	14.60
Diet Diversity Score				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Avril 2016 Post Distribution Monitoring, <b>Base value</b> : 2016.04, WFP survey, Avril 2016 Post Distribution Monitoring, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	>5.70	5.70	5.70	6.30
Diet Diversity Score (female-headed households)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Avril 2016 Post Distribution Monitoring, <b>Base value</b> : 2016.04, WFP survey, Avril 2016 Post Distribution Monitoring, <b>Previous Follow-up</b> : 2016.04, WFP survey, April 2016 PDM, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	>5.70	5.70	5.70	6.21
Diet Diversity Score (male-headed households)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, PDM; EFSA, <b>Base value</b> : 2016.04, WFP survey, Avril 2016 Post Distribution Monitioring, <b>Previous Follow-up</b> : 2016.04, WFP survey, PDM April 2016, <b>Latest Follow-up</b> : 2016.08, WFP survey, August 2016 PDM	>5.80	5.80	5.80	6.34
Restored or stabilized access to basic services and/or community assets	>5.00	5.50	5.00	0.54



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Retention rate in WFP-assisted primary schools				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Ministry of Education; school records; quarterly Education report and Checklist, <b>Base value</b> : 2015.12, WFP programme monitoring, Ministry of Education, schools records, quaterly CP reports, <b>Previous Follow-up</b> : 2015.12, Secondary data, Ministry of Education, schools records, quaterly CP reports, <b>Latest Follow-up</b> : 2016.12, Secondary data, Governement report and Cmonthly CP monitoring report 2016	=70.00	85.50	85.50	90.40
Retention rate (girls) in WFP-assisted primary schools				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Ministry of Education; school records; quarterly Education report and Checklist, <b>Base value</b> : 2015.12, WFP programme monitoring, Ministry of Education, schools records, quaterly CP reports, <b>Previous Follow-up</b> : 2015.12, Secondary data, Ministry of Education, schools records, quaterly CP reports, <b>Latest Follow-up</b> : 2016.12, Secondary data, Governement report and Cmonthly CP monitoring report 2016	=70.00	83.00	83.00	79.30
Retention rate (boys) in WFP-assisted primary schools				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Ministry of Education; school records; quarterly Education report and Checklist, <b>Base value</b> : 2015.12, WFP programme monitoring, Ministry of Education, schools records, quaterly CP reports, <b>Previous Follow-up</b> : 2016.12, Secondary data, Ministry of Education, schools records, quaterly CP reports, <b>Latest Follow-up</b> : 2016.12, Secondary data, Ministry of Education, schools records, quaterly CP reports	=70.00	88.00	80.00	80.00
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Ministry of Education, schools records, <b>Base value</b> : 2015.12, WFP programme monitoring, Ministry of Education, Schools records, quaterly CP reports, <b>Previous Follow-up</b> : 2015.12, Secondary data, Ministry of Education, Schools records, quaterly CP reports, <b>Latest Follow-up</b> : 2016.12, Secondary data, Government report and Cmonthly CP monitoring report 2016	=6.00	5.40	5.40	2.60
Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Ministry of Education, School records, <b>Base value</b> : 2015.12, WFP programme monitoring, Ministry of Education, schools records, quaterly CP reports, <b>Previous Follow-up</b> : 2015.12, Secondary data, Ministry of Education, schools records, quaterly CP reports, <b>Latest Follow-up</b> : 2016.12, Secondary data, Government report and Cmonthly CP monitoring report 2016	=6.00	1.90	1.90	0.40
Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, Ministry of Education/School records, <b>Base value</b> : 2015.12, WFP programme monitoring, Ministry of Education, schools records, quaterly CP reports, <b>Previous Follow-up</b> : 2015.12, Secondary data, Ministry of Education, schools records, quaterly CP reports, <b>Latest Follow-up</b> : 2016.12, Secondary data, Government report and Cmonthly CP monitoring report 2016	=6.00	4.50	4.50	2.50
ART Default Rate (%)				
200799.CF LOCATIONS, <b>Project End Target</b> : 2016.12, CP/Health center report, <b>Base value</b> : 2015.12, WFP programme monitoring, CP Health Center Report, <b>Previous Follow-up</b> : 2015.12, WFP survey, CP monthly monitoring, <b>Latest Follow-up</b> : 2016.12, WFP survey, CP monthly monitoring report 2016	<15.00	4.40	4.40	4.70
Food Transfer-Congo (Brazzaville)				



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and	d lactating wom	en		
MAM treatment recovery rate (%)				
LIKOUALA, <b>Project End Target</b> : 2015.12, Cooperating partner report, <b>Base value</b> : 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	>75.00	95.00	90.12	90.12
MAM treatment mortality rate (%)				
LIKOUALA, <b>Project End Target</b> : 2015.12, WFP Monitoring Check lis, <b>Base value</b> : 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	<3.00	0.00	0.76	0.76
MAM treatment default rate (%)				
LIKOUALA, <b>Project End Target</b> : 2015.12, Monthly cooperatiing partner report, <b>Base value</b> : 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans  Frontiere	<15.00	5.00	0.67	0.67
MAM treatment non-response rate (%)				
LIKOUALA, <b>Project End Target</b> : 2015.12, WFP Monitoring Check lis, <b>Base value</b> : 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	<15.00	2.00	0.00	0.00
Proportion of eligible population who participate in programme (coverage)				
LIKOUALA, <b>Project End Target</b> : 2015.12, Nutritional survey, <b>Base value</b> : 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, <b>Previous Follow-up</b> : 2016.12, WFP programme monitoring, Desk calculation, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, Desk calculation	>90.00	54.32	81.66	81.66
Stabilized or improved food consumption over assistance period for targeted households	s and/or individ	uals		
FCS: percentage of households with poor Food Consumption Score				
LIKOUALA, <b>Project End Target</b> : 2015.12, <b>Base value</b> : 2015.08, WFP survey, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	=6.24	4.40	5.20	3.61
FCS: percentage of households with poor Food Consumption Score (female-headed)				
LIKOUALA, <b>Project End Target</b> : 2015.12, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, WFP programme monitoring, JAM	=6.20	3.70	4.30	4.57
FCS: percentage of households with poor Food Consumption Score (male-headed)				
LIKOUALA, <b>Project End Target</b> : 2015.12, Post Distribution Monitoring, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	=6.00	1.70	5.80	2.86



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score				
LIKOUALA, <b>Project End Target</b> : 2015.01, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	>6.50	4.72	4.60	4.72
Diet Diversity Score (female-headed households)				
LIKOUALA, <b>Project End Target</b> : 2015.01, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	>6.50	4.70	4.60	4.58
Diet Diversity Score (male-headed households)				
LIKOUALA, <b>Project End Target</b> : 2017.01, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	>6.50	4.74	4.70	4.83
CSI (Food): Percentage of households with reduced/stabilized Coping Strategy Index				
LIKOUALA, <b>Project End Target</b> : 2015.01, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	>80.00	30.26	71.24	84.88
CSI (Food): Percentage of female-headed households with reduced/stabilized Coping Strategy Index				
LIKOUALA, <b>Project End Target</b> : 2015.12, <b>Base value</b> : 2015.08, WFP survey, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	>80.00	28.98	66.59	76.97
CSI (Food): Percentage of male-headed households with reduced/stabilized Coping Strategy Index				
LIKOUALA, <b>Project End Target</b> : 2015.12, <b>Base value</b> : 2015.08, WFP programme monitoring, PDM Survey, <b>Previous Follow-up</b> : 2015.12, WFP programme monitoring, PDM Survey, <b>Latest Follow-up</b> : 2016.06, Joint survey, JAM	>80.00	31.09	74.34	89.06
Food Transfer-Cameroon	1			
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and	d lactating wom	en		
MAM treatment recovery rate (%)				
CAMEROUN, <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2015.03, WFP programme monitoring, CPR, <b>Previous Follow-up</b> : 2016.06, WFP programme monitoring, <b>Latest Follow-up</b> : 2016.09, WFP programme monitoring	>75.00	82.00	87.10	96.00
MAM treatment mortality rate (%)				
CAMEROUN, <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2015.03, WFP programme monitoring, CPR, <b>Previous Follow-up</b> : 2016.06, WFP programme monitoring, <b>Latest Follow-up</b> : 2016.09, WFP programme monitoring	<3.00	0.00	0.00	0.20
MAM treatment default rate (%)				
CAMEROUN, <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2015.03, WFP programme monitoring, CPR, <b>Previous Follow-up</b> : 2016.06, WFP programme monitoring, <b>Latest Follow-up</b> : 2016.09, WFP programme monitoring	<15.00	11.00	11.40	2.50



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM treatment non-response rate (%)				
CAMEROUN, <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2015.03, WFP programme monitoring, CPR, <b>Previous Follow-up</b> : 2016.06, WFP programme monitoring, <b>Latest Follow-up</b> : 2016.09, WFP programme monitoring	<15.00	1.00	4.30	1.50
Proportion of target population who participate in an adequate number of distributions				
CAMEROUN, <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2015.03, WFP programme monitoring, CPR, <b>Previous Follow-up</b> : 2016.07, WFP survey, PDM, Distribution Data, <b>Latest Follow-up</b> : 2016.09, WFP survey, PDM, Distribution Data	>66.00	90.00	43.70	49.60
Proportion of eligible population who participate in programme (coverage)				
CAMEROUN, <b>Project End Target</b> : 2015.12, PDM & JAM, <b>Base value</b> : 2015.02, Joint survey, SENS, <b>Previous Follow-up</b> : 2016.11, WFP programme monitoring, Distribution Sites Registers, <b>Latest Follow-up</b> : 2016.12, WFP programme monitoring, Health Center Registers	>90.00	72.08	70.81	83.96
Stabilized or improved food consumption over assistance period for targeted household	s and/or individ	uals		
FCS: percentage of households with poor Food Consumption Score				
CAMEROUN, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2014.09, WFP programme monitoring, PDM, <b>Previous Follow-up</b> : 2016.09, WFP survey, PDM, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=0.24	1.20	1.10	1.70
FCS: percentage of households with poor Food Consumption Score (female-headed)				
CAMEROUN, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2014.09, WFP programme monitoring, PDM, <b>Previous Follow-up</b> : 2016.09, WFP survey, PDM, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=0.24	1.20	0.80	1.30
FCS: percentage of households with poor Food Consumption Score (male-headed)				
CAMEROUN, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2014.09, WFP programme monitoring, PDM, <b>Previous Follow-up</b> : 2016.09, WFP survey, PDM, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=0.24	1.20	0.80	0.30
Diet Diversity Score				
CAMEROUN, <b>Project End Target</b> : 2018.12, PDM, <b>Base value</b> : 2014.09, WFP programme monitoring, PDM, <b>Previous Follow-up</b> : 2016.09, WFP survey, PDM, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	>7.00	5.80	6.48	6.29
Diet Diversity Score (female-headed households)				
CAMEROUN, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2014.09, WFP programme monitoring, PDM, <b>Previous Follow-up</b> : 2016.09, WFP survey, PDM, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	>7.00	5.83	6.17	6.35
Diet Diversity Score (male-headed households)				
CAMEROUN, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2014.09, WFP programme monitoring, PDM, <b>Previous Follow-up</b> : 2016.09, WFP survey, PDM, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	>7.00	5.94	6.64	6.43
Restored or stabilized access to basic services and/or community assets				
ART Default Rate (%)				
CAMEROUN, <b>Project End Target</b> : 2016.12, PDM, CPR, <b>Base value</b> : 2015.12, WFP programme monitoring, CPR, <b>Previous Follow-up</b> : 2016.11, WFP programme monitoring,				



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Food Transfer-Chad				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or improved food consumption over assistance period for targeted households	s and/or individ	uals		
FCS: percentage of households with poor Food Consumption Score				
CHAD, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2015.06, WFP survey, PDM, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=80.00	8.80	8.80	4.00
FCS: percentage of households with poor Food Consumption Score (female-headed)				
CHAD, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2015.06, WFP survey, Baseline survey, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=80.00	12.30	12.30	1.10
FCS: percentage of households with poor Food Consumption Score (male-headed)				
CHAD, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2015.06, WFP survey, Baseline survey, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=80.00	5.70	5.70	2.50
Diet Diversity Score				
CHAD, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2015.06, WFP survey, Baseline survey, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=4.50	4.20	4.30	5.00
Diet Diversity Score (female-headed households)				
CHAD, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2015.06, WFP survey, Baseline survey, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=4.50	4.10	4.10	5.30
Diet Diversity Score (male-headed households)				
CHAD, <b>Project End Target</b> : 2016.12, PDM, <b>Base value</b> : 2015.06, WFP survey, Baseline survey, <b>Previous Follow-up</b> : 2015.12, Secondary data, SPR 2015, <b>Latest Follow-up</b> : 2016.10, WFP survey, PDM	=4.50	4.30	4.30	4.70

# **Output Indicators**

Output	Unit	Planned	Actual	% Actual vs. Planned
Food Transfer-DR of Congo				
SO1: HIV/TB: Care&Treatment				
Number of health centres/sites assisted	centre/site	11	11	100.0%
SO1: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of health centres/sites assisted	centre/site	65	61	93.8%
Food Transfer-Central African Republic				
SO1: General Distribution (GD)				
Number of refugee/IDP sites assisted	site	-	11	-



Output	Unit	Planned	Actual	% Actual vs. Planned
SO1: HIV/TB: Care&Treatment and Nutrition: Therapeutic Feeding (Treatment of Severe	Acute Malnutrit	ion)		
Number of health centres/sites assisted	centre/site	-	2	-
SO1: School Feeding (on-site)				
Number of primary schools assisted by WFP	school	-	354	-
Food Transfer-Congo (Brazzaville)	,			
SO1: General Distribution (GD)				
Number of institutional sites assisted	site	5	22	440.0%
SO1: Nutrition: Treatment of Moderate Acute Malnutrition	1			
Number of institutional sites assisted	site	-	4	-
Food Transfer-Cameroon				
SO1: General Distribution (GD)				
Number of institutional sites assisted	site	87	85	97.7%
SO1: HIV/TB: Care&Treatment				
Number of health centres/sites assisted	centre/site	8	6	75.0%
SO1: Nutrition: Prevention of Acute Malnutrition	,			
Number of health centres/sites assisted	centre/site	17	-	-
SO1: Nutrition: Prevention of Acute Malnutrition and Nutrition: Treatment of Moderate Ac	ute Malnutrition	1		
Number of health centres/sites assisted	centre/site	-	174	-
SO1: Nutrition: Treatment of Moderate Acute Malnutrition	1			
Number of institutional sites assisted	site	107	-	-
Food Transfer-Chad				
SO1: General Distribution (GD)				
Number of staff members/community health workers trained on modalities of food distribution	individual	20	31	155.0%
Number of timely food distributions as per schedule	instance	100	4	4.0%

#### **Gender Indicators**

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Food Transfer-Cameroon				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	>20.00	9.00	9.00	8.00



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
LOM-ET-DJEREM / GADO-BADZERE, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.08, Latest Follow-up: 2016.10	>20.00	21.00	19.00	22.00
Proportion of households where females make decisions over the use of cash, voucher or food				
CAMEROON, General Distribution (GD), <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.05, <b>Previous Follow-up</b> : 2016.07, <b>Latest Follow-up</b> : 2016.09	>40.00	38.10	39.00	30.40
Proportion of households where females make decisions over the use of cash, voucher or food				
LOM-ET-DJEREM / GADO-BADZERE, General Distribution (GD), <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.06, <b>Previous Follow-up</b> : 2016.08, <b>Latest Follow-up</b> : 2016.10	>40.00	32.00	19.80	12.70
Proportion of households where males make decisions over the use of cash, voucher or food				
CAMEROON, General Distribution (GD), <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.05, <b>Previous Follow-up</b> : 2016.07, <b>Latest Follow-up</b> : 2016.09	=40.00	51.50	53.10	61.20
Proportion of households where males make decisions over the use of cash, voucher or food				
LOM-ET-DJEREM / GADO-BADZERE, General Distribution (GD), <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.06, <b>Previous Follow-up</b> : 2016.08, <b>Latest Follow-up</b> : 2016.10	=40.00	47.00	60.70	63.70
Proportion of women beneficiaries in leadership positions of project management committees				
CAMEROON, General Distribution (GD), <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.05, <b>Previous Follow-up</b> : 2016.07, <b>Latest Follow-up</b> : 2016.09	>50.00	50.00	50.00	50.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	>60.00	50.00	50.00	50.00
Food Transfer-Central African Republic				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12,  Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=25.00	35.00	23.30	21.30
Proportion of households where females make decisions over the use of cash, voucher or food				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12,  Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=50.00	39.00	54.20	59.20
Proportion of households where males make decisions over the use of cash, voucher or food				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12,  Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=25.00	26.00	22.20	19.50



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of women beneficiaries in leadership positions of project management committees				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12,  Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=50.00	70.80	87.50	93.20
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12,  Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=60.00	97.00	34.50	38.90
Food Transfer-Chad				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
CHAD, General Distribution (GD), <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2015.11, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.10	=15.00	1.50	4.00	24.00
Proportion of households where females make decisions over the use of cash, voucher or food				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	>50.00	97.00	95.00	57.00
Proportion of households where males make decisions over the use of cash, voucher or food				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	=35.00	1.50	1.00	19.00
Proportion of women beneficiaries in leadership positions of project management committees				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	>50.00	33.00	33.00	40.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.09	>60.00	33.00	33.00	80.00
Food Transfer-Congo (Brazzaville)				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	=50.00	4.00	5.00	3.44
Proportion of households where females make decisions over the use of cash, voucher or food				
LIKOUALA, General Distribution (GD), <b>Project End Target</b> : 2015.12, <b>Base value</b> : 2015.08, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.06	=20.00	42.00	40.00	45.75
Proportion of households where males make decisions over the use of cash, voucher or food				
LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	=30.00	54.00	55.00	50.81



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of women beneficiaries in leadership positions of project management committees				
LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	>50.00	54.00	54.00	40.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	>60.00	65.00	100.00	100.00
Food Transfer-DR of Congo	1			
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	=50.00	35.00	40.47	35.80
Proportion of households where females make decisions over the use of cash, voucher or food				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	=25.00	37.20	37.21	37.30
Proportion of households where males make decisions over the use of cash, voucher or food				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	=25.00	27.80	22.33	26.90
Proportion of women beneficiaries in leadership positions of project management committees				
EQUATEUR, General Distribution (GD), <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2014.12, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.12	>50.00	32.00	56.20	35.48
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
EQUATEUR, General Distribution (GD), <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2014.12, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.12	>60.00	43.00	56.20	35.48

## **Protection and Accountability to Affected Populations Indicators**

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Food Transfer-Cameroon				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, General Distribution (GD), <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.06, <b>Previous Follow-up</b> : 2016.07, <b>Latest Follow-up</b> : 2016.09	=70.00	70.33	48.93	73.66
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, HIV/TB, Project End Target: 2017.12	=70.00	-	-	-



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12	=70.00	-	-	-
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2017.12	=70.00	-	-	-
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, Food-Assistance-for-Assets, <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.07	=80.00	100.00	-	-
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, HIV/TB, Project End Target: 2017.12, Base value: 2016.03, Previous Follow-up: 2016.06, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.03, <b>Previous Follow-up</b> : 2016.06, <b>Latest Follow-up</b> : 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, HIV/TB, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.05, <b>Previous Follow-up</b> : 2016.07, <b>Latest Follow-up</b> : 2016.09	=70.00	100.00	100.00	100.00



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
CAMEROON, Food-Assistance-for-Assets, <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.07	=80.00	100.00	-	-
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
CAMEROON, HIV/TB, Project End Target: 2017.12, Base value: 2016.03, Previous Follow-up: 2016.06, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.03, <b>Previous Follow-up</b> : 2016.06, <b>Latest Follow-up</b> : 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, HIV/TB, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=70.00	100.00	100.00	100.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, HIV/TB, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.07, Latest Follow-up: 2016.09	=80.00	100.00	100.00	100.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2017.12, <b>Base value</b> : 2016.05, <b>Previous Follow-up</b> : 2016.07, <b>Latest Follow-up</b> : 2016.09	=80.00	100.00	100.00	100.00
Food Transfer-Central African Republic				
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12,  Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=70.00	72.70	26.00	68.90
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.04, Latest Follow-up: 2016.08	=80.00	79.30	81.90	86.40
Food Transfer-Chad	I			
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	=80.00	50.00	50.00	57.00
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	=80.00	100.00	100.00	96.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	=70.00	53.00	53.00	63.00
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	=80.00	100.00	53.00	88.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11,	=70.00	52.00	52.00	62.00



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
CHAD, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.11, Previous Follow-up: 2015.12, Latest Follow-up: 2016.10	=80.00	100.00	100.00	92.00
Food Transfer-Congo (Brazzaville)				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	=70.00	37.00	51.00	88.21
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01	=70.00	-	-	-
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	=80.00	91.00	97.00	91.79
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01	=80.00	-	-	-
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
LIKOUALA, General Distribution (GD), <b>Project End Target</b> : 2015.01, <b>Base value</b> : 2015.08, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.06	=70.00	33.00	49.00	79.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01	=70.00	-	-	-
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	=80.00	93.00	99.00	84.93
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01	=80.00	-	-	-
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
LIKOUALA, General Distribution (GD), <b>Project End Target</b> : 2015.01, <b>Base value</b> : 2015.08, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.06	=70.00	35.00	50.00	84.17
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01	=70.00	-	-	-



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2015.08, Previous Follow-up: 2015.12, Latest Follow-up: 2016.06	=80.00	92.00	98.00	88.78
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01	=80.00	-	-	-
Food Transfer-DR of Congo				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
EQUATEUR, General Distribution (GD), <b>Project End Target</b> : 2016.12, <b>Base value</b> : 2014.12, <b>Previous Follow-up</b> : 2015.12, <b>Latest Follow-up</b> : 2016.12	>70.00	89.70	6.00	18.90
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	>80.00	97.99	95.00	97.60
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
EQUATEUR, General Distribution (GD), Project End Target: 2015.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	>70.00	84.50	4.00	23.30
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	>80.00	97.45	94.00	94.49
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	>70.00	87.50	5.00	20.70
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2015.12, Latest Follow-up: 2016.12	>80.00	97.30	95.00	96.31

# **Partnership Indicators**

Cross-cutting Indicators	Project End Target	Latest Follow-up
Food Transfer-Cameroon		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
ADAMAWA, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12	=11,314.00	64,438.00



Cross-cutting Indicators	Project End Target	Latest Follow-up
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
EAST, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12	=19,578.00	49,658.00
Number of partner organizations that provide complementary inputs and services		
ADAMAWA, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12	=1.00	1.00
Number of partner organizations that provide complementary inputs and services		
EAST, General Distribution (GD), Project End Target: 2017.12, Latest Follow-up: 2016.12	=1.00	1.00
Number of partner organizations that provide complementary inputs and services		
EAST, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12	=2.00	2.00
Proportion of project activities implemented with the engagement of complementary partners		
CAMEROON, General Distribution (GD), Project End Target: 2017.12, Latest Follow-up: 2016.10	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
CAMEROON, HIV/TB, Project End Target: 2017.12, Latest Follow-up: 2016.10	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
CAMEROON, Nutrition: Prevention of Acute Malnutrition, <b>Project End Target</b> : 2017.12, <b>Latest Follow-up</b> : 2016.10	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2017.12, <b>Latest Follow-up</b> : 2016.10	=100.00	100.00
Food Transfer-Central African Republic		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
CENTRAL AFRICAN REPUBLIC, Food-Assistance-for-Assets, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=40,000.00	919.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=6,034,706.00	6,308,910.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
CENTRAL AFRICAN REPUBLIC, HIV/TB, Project End Target: 2016.12, Latest Follow-up: 2016.12	=4,000.00	0.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
CENTRAL AFRICAN REPUBLIC, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=5,000.00	919.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
CENTRAL AFRICAN REPUBLIC, School Feeding, Project End Target: 2016.12, Latest Follow-up: 2016.12	=55,000.00	68,213.00



Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
CENTRAL AFRICAN REPUBLIC, Food-Assistance-for-Assets, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=11.00	12.00
Number of partner organizations that provide complementary inputs and services		
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2016.12	=16.00	16.00
Number of partner organizations that provide complementary inputs and services		
CENTRAL AFRICAN REPUBLIC, HIV/TB, Project End Target: 2016.12, Latest Follow-up: 2016.12	=2.00	1.00
Number of partner organizations that provide complementary inputs and services		
CENTRAL AFRICAN REPUBLIC, Nutrition: Prevention of Acute Malnutrition, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=16.00	16.00
Number of partner organizations that provide complementary inputs and services		
CENTRAL AFRICAN REPUBLIC, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=6.00	11.00
Number of partner organizations that provide complementary inputs and services		
CENTRAL AFRICAN REPUBLIC, School Feeding, Project End Target: 2016.12, Latest Follow-up: 2016.12	=11.00	9.00
Proportion of project activities implemented with the engagement of complementary partners		
CENTRAL AFRICAN REPUBLIC, Food-Assistance-for-Assets, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=14.00	12.00
Proportion of project activities implemented with the engagement of complementary partners		
CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2016.12	=28.00	31.00
Proportion of project activities implemented with the engagement of complementary partners		
CENTRAL AFRICAN REPUBLIC, HIV/TB, Project End Target: 2016.12, Latest Follow-up: 2016.12	=2.00	1.00
Proportion of project activities implemented with the engagement of complementary partners		
CENTRAL AFRICAN REPUBLIC, Nutrition: Prevention of Acute Malnutrition, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=28.00	31.00
Proportion of project activities implemented with the engagement of complementary partners		
CENTRAL AFRICAN REPUBLIC, Nutrition: Treatment of Moderate Acute Malnutrition, <b>Project End Target</b> : 2016.12, <b>Latest Follow-up</b> : 2016.12	=9.00	10.00
Proportion of project activities implemented with the engagement of complementary partners		
CENTRAL AFRICAN REPUBLIC, School Feeding, Project End Target: 2016.12, Latest Follow-up: 2016.12	=19.00	15.00
Food Transfer-Chad		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
CHAD, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2016.12	=10,000.00	9,341.69
Number of partner organizations that provide complementary inputs and services		
CHAD, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2016.12	=1.00	1.00



Cross-cutting Indicators	Project End Target	Latest Follow-up
Proportion of project activities implemented with the engagement of complementary partners		
CHAD, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2016.12	=100.00	100.00
Food Transfer-Congo (Brazzaville)		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Latest Follow-up: 2016.12	=150,000.00	24,276.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.12	=100,000.00	-
Number of partner organizations that provide complementary inputs and services		
LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Latest Follow-up: 2016.12	=3.00	3.00
Number of partner organizations that provide complementary inputs and services		
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.12	=2.00	-
Proportion of project activities implemented with the engagement of complementary partners		
LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Latest Follow-up: 2016.12	=100.00	50.00
Proportion of project activities implemented with the engagement of complementary partners		
LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.12	=100.00	-
Food Transfer-DR of Congo		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
EQUATEUR, Food-Assistance-for-Assets, Project End Target: 2016.12	=5,853,154.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
EQUATEUR, General Distribution (GD), Project End Target: 2016.12	=13,856,936.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
EQUATEUR, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12	=10,035,953.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
EQUATEUR, School Feeding, Project End Target: 2016.12	=903,312.00	-
Number of partner organizations that provide complementary inputs and services		
EQUATEUR, Food-Assistance-for-Assets, Project End Target: 2016.12	=1.00	-
Number of partner organizations that provide complementary inputs and services		
EQUATEUR, General Distribution (GD), Project End Target: 2016.12	=7.00	-
Number of partner organizations that provide complementary inputs and services		
EQUATEUR, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12	=2.00	-



Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
EQUATEUR, School Feeding, Project End Target: 2016.12	=2.00	-
Proportion of project activities implemented with the engagement of complementary partners		
EQUATEUR, Food-Assistance-for-Assets, Project End Target: 2016.12	=100.00	-
Proportion of project activities implemented with the engagement of complementary partners		
EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2016.12	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
EQUATEUR, Nutrition, Latest Follow-up: 2016.12		100.00
Proportion of project activities implemented with the engagement of complementary partners		
EQUATEUR, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12	=100.00	-
Proportion of project activities implemented with the engagement of complementary partners		
EQUATEUR, School Feeding, Project End Target: 2016.12	=100.00	-

# **Resource Inputs from Donors**

## **Resource Inputs from Donors**

			Purchased in	n 2016 (mt)
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash
Belgium	BEL-C-00127-01	Beans	-	78
Belgium	BEL-C-00127-01	Corn Soya Blend	-	160
Belgium	BEL-C-00127-01	Ready To Use Supplementary Food	-	35
Belgium	BEL-C-00127-01	Rice	-	272
Canada	CAN-C-00530-04	Corn Soya Blend	-	37
Canada	CAN-C-00530-04	lodised Salt	-	16
Canada	CAN-C-00530-05	Beans	-	40
Canada	CAN-C-00530-05	Rice	-	2,102
Canada	CAN-C-00530-05	Sorghum/Millet	-	50
Canada	CAN-C-00530-05	Split Peas	-	500
Canada	CAN-C-00530-05	Vegetable Oil	-	200
European Commission	EEC-C-00588-01	Rice	-	1,109
European Commission	EEC-C-00618-01	Corn Soya Blend	-	354
European Commission	EEC-C-00618-01	lodised Salt	-	15
European Commission	EEC-C-00618-01	Rice	-	1,479
European Commission	EEC-C-00618-01	Split Peas	-	378



			Purchased in	2016 (mt)
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash
European Commission	EEC-C-00618-01	Vegetable Oil	-	157
Finland	FIN-C-00113-08	Beans	-	80
Finland	FIN-C-00113-08	lodised Salt	-	1
France	FRA-C-00255-01	Beans	-	20
France	FRA-C-00255-01	Rice	-	20
France	FRA-C-00255-01	Sorghum/Millet	-	20
Germany	GER-C-00537-01	Corn Soya Blend	-	602
Germany	GER-C-00537-01	lodised Salt	-	44
Germany	GER-C-00537-01	Ready To Use Supplementary Food	-	36
Germany	GER-C-00537-01	Rice	-	878
Germany	GER-C-00537-01	Sorghum/Millet	-	10
Germany	GER-C-00537-01	Split Peas	-	141
Germany	GER-C-00537-01	Vegetable Oil	-	313
Japan	JPN-C-00437-01	Beans	-	40
Japan	JPN-C-00483-01	Corn Soya Blend	-	273
Japan	JPN-C-00483-01	lodised Salt	-	17
Japan	JPN-C-00483-01	Ready To Use Supplementary Food	-	16
Japan	JPN-C-00483-01	Rice	-	1,500
Japan	JPN-C-00483-01	Split Peas	-	213
Japan	JPN-C-00483-01	Vegetable Oil	-	122
Japan	JPN-C-00492-01	Corn Soya Blend	-	141
Japan	JPN-C-00492-01	lodised Salt	-	28
Japan	JPN-C-00492-01	Ready To Use Supplementary Food	-	20
Japan	JPN-C-00492-01	Rice	-	627
Japan	JPN-C-00492-01	Split Peas	-	350
Japan	JPN-C-00520-01	Corn Soya Blend	-	172
Japan	JPN-C-00520-01	Split Peas	-	100
Japan	JPN-C-00520-01	Vegetable Oil	-	80
MULTILATERAL	MULTILATERAL	Beans	-	730
MULTILATERAL	MULTILATERAL	Corn Soya Blend	-	1,801
MULTILATERAL	MULTILATERAL	lodised Salt	-	361
MULTILATERAL	MULTILATERAL	Ready To Use Supplementary Food	-	60
MULTILATERAL	MULTILATERAL	Rice	-	8,563
MULTILATERAL	MULTILATERAL	Sorghum/Millet	-	202



			Purchased i	n 2016 (mt)
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash
MULTILATERAL	MULTILATERAL	Split Peas	-	852
MULTILATERAL	MULTILATERAL	Vegetable Oil	-	871
Private Donors	WPD-C-03680-01	Rice	-	411
Private Donors	WPD-C-03680-01	Split Peas	-	173
Saudi Arabia	SAU-C-00103-05	Dried Fruits	36	-
UN CERF	001-C-01492-01	Corn Soya Blend	-	121
UN CERF	001-C-01492-01	lodised Salt	-	11
UN CERF	001-C-01492-01	Rice	-	824
UN CERF	001-C-01492-01	Split Peas	-	189
UN CERF	001-C-01492-01	Vegetable Oil	-	78
UN CERF	001-C-01493-01	Ready To Use Supplementary Food	-	81
UN CERF	001-C-01505-01	Rice	-	540
UN Common Funds and Agencies (excl. CERF)	001-C-01532-01	Corn Soya Blend	-	52
UN Common Funds and Agencies (excl. CERF)	001-C-01532-01	Vegetable Oil	-	22
United Kingdom	UK -C-00329-01	Corn Soya Blend	-	167
United Kingdom	UK -C-00329-01	Rice	-	2,102
United Kingdom	UK -C-00329-01	Split Peas	-	498
United Kingdom	UK -C-00329-01	Vegetable Oil	-	107
USA	USA-C-01055-02	Beans	-	100
USA	USA-C-01055-02	lodised Salt	-	28
USA	USA-C-01095-02	Sorghum/Millet	740	-
USA	USA-C-01095-03	Rice	-	7
USA	USA-C-01095-06	Corn Soya Blend	1,750	-
USA	USA-C-01095-06	Maize Meal	2,520	-
USA	USA-C-01095-06	Rice	2,600	-
USA	USA-C-01095-06	Split Peas	1,100	-
USA	USA-C-01095-06	Vegetable Oil	300	-
USA	USA-C-01095-09	Corn Soya Blend	80	-
USA	USA-C-01095-09	Rice	6,150	-
USA	USA-C-01095-09	Split Peas	1,300	-
USA	USA-C-01095-10	Corn Soya Blend	290	-
USA	USA-C-01095-10	Rice	1,410	-
USA	USA-C-01095-10	Split Peas	410	-



			Purchased in 201	
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash
USA	USA-C-01095-10	Vegetable Oil	110	-
USA	USA-C-01095-11	Maize Meal	2,660	-
USA	USA-C-01095-11	Split Peas	1,030	-
USA	USA-C-01095-11	Vegetable Oil	730	-
USA	USA-C-01095-13	Corn Soya Blend	980	-
USA	USA-C-01095-13	Peas	1,400	-
USA	USA-C-01095-13	Sorghum/Millet	5,000	-
USA	USA-C-01095-13	Vegetable Oil	460	-
USA	USA-C-01095-14	Corn Soya Blend	400	-
USA	USA-C-01095-14	Maize Meal	4,800	-
USA	USA-C-01095-14	Split Peas	1,550	-
USA	USA-C-01095-14	Vegetable Oil	270	-
USA	USA-C-01095-15	Corn Soya Blend	70	-
USA	USA-C-01095-15	Rice	300	-
USA	USA-C-01095-15	Split Peas	70	-
USA	USA-C-01095-15	Vegetable Oil	100	-
		Total	38,616	31,799