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**SPR Reading Guidance**



**Restoring Food & Nutrition Security and Building Resilient Livelihoods in Earthquake Affected Areas**

**Standard Project Report 2016**

World Food Programme in Nepal, State of (NP)



**World Food Programme**

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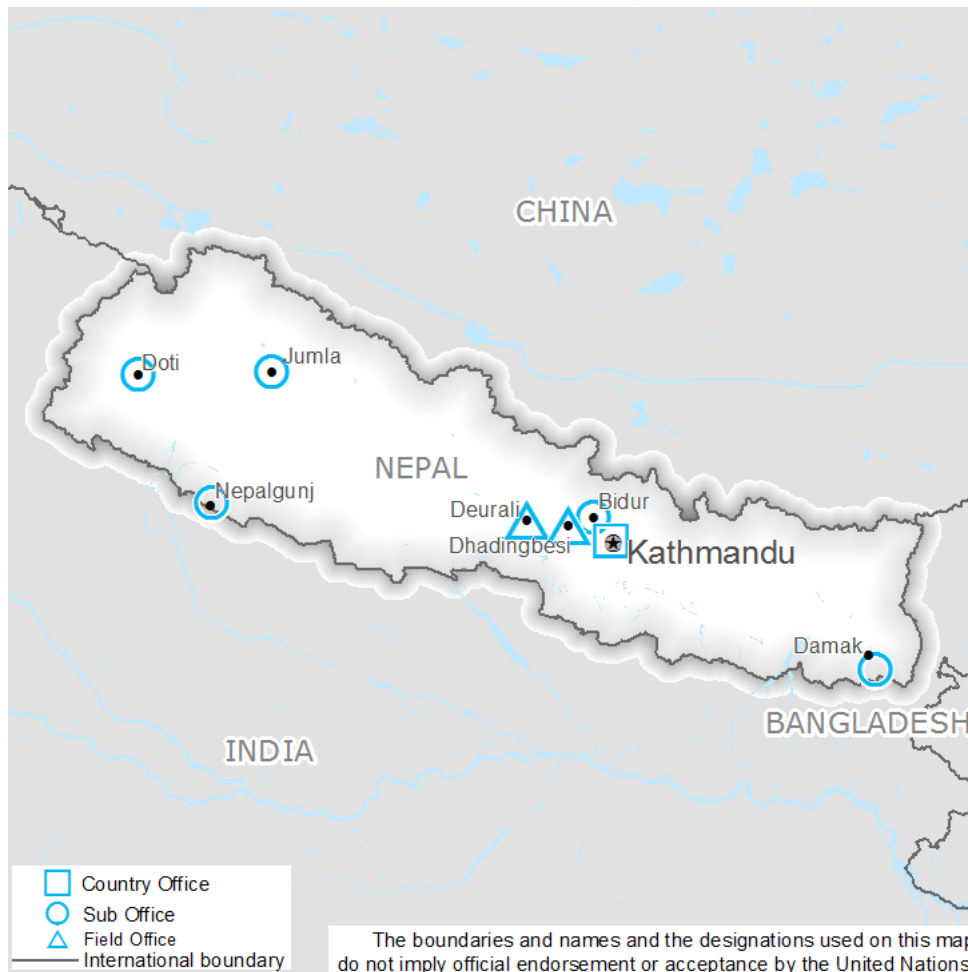
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# Country Context and WFP Objectives



## Country Context

The Federal Democratic Republic of Nepal is a landlocked country located between China and India. With a population of 26.5 million [1], and classified as a least-developed country [World Bank, 2016], Nepal is characterised by slow economic growth, an unstable political climate, and low levels of human development. Nepal ranks 145 out of 187 countries on the 2015 Human Development Index [2]. Over the past two decades, there have been significant gains in the reduction of poverty—absolute poverty has declined from 42 percent in 1995 to 23.8 percent in 2015 [3]. Geography plays a critical role in determining the degree of food insecurity in Nepal. High elevations of hills and mountains, remoteness, difficult terrain, poor road infrastructure and market access, and the availability of quality agricultural land contribute to defining the livelihood options for the population. Poor dietary diversity and inadequate knowledge of hygiene and sanitation has contributed to the prevalence of malnourished communities in many parts of the country.

Nepal was ranked as 'serious' on the 2015 Global Hunger Index [4]. A fifth of the population has inadequate food consumption, and 38 percent of the population does not consume sufficient calories. Inevitably, this has led to over 30 percent of children aged 0-59 months being underweight, while stunting (low height for age) and wasting (low weight for height) for children aged 0-59 months are both very high at 37.4 percent and 11.3 percent respectively [5]. Anaemia remains a major health problem for almost half [6] of Nepal's children, with considerable differences in their nutritional status based on gender, caste and ethnicity according to Nepal's Demographic Health Survey (DHS) of 2011. The 2011 DHS also showed that 35 percent of women aged 15-49 years were anaemic. The prevalence of anaemia varied across ecological zones mainly caused by the differences in dietary intake between the different communities living there.

Development in Nepal is highly vulnerable to disasters, climate change, economic failures, political instability, financial crises, and global shocks. With its geophysical location on top of the Indo-European tectonic plate, Nepal is highly prone to strong seismic activity, as was tragically witnessed in April and May 2015 when large earthquakes and aftershocks killed nearly 9,000 people, injured 22,000 and affected almost a third of the country's population. An additional three percent of the population was estimated to have been pushed into poverty as a direct result of the earthquakes. The Post-Disaster Needs Assessment led by the Government of Nepal estimated the overall damage at USD 5.15 billion across housing and infrastructure, social and production sectors. Losses in personal income alone were estimated at USD 1.9 billion [7]. With such extensive needs in vital sectors, the country requires continued support to strengthen and maintain its social safety nets, particularly in nutrition and education.

Remittances from migrant workers (mainly from the Middle East and India) constitute around 30 percent of Nepal's gross domestic product (GDP), and they have been the mainstay of the country's economy for the past few decades. The role of remittances as a vital coping strategy became evident as remittance inflows rose dramatically after the earthquakes of 2015 and the subsequent five-month long trade blockade that severely affected the country [8]. Cross-border trade with India was disrupted from September 2015 to February 2016 during a five-month period of civil unrest that prevailed in opposition to the new Constitution. As Nepal relies predominantly on imports from India, the border crisis significantly reduced the availability of fuel, consumer and industrial items in the country and drastically increased market prices of essential goods during the period.

Since 1992, Nepal has been hosting over 100,000 refugees (of Nepali origin) that arrived from Bhutan. They have been accommodated in camps situated in eastern Nepal and are considered foreigners. Hence, they cannot own land or gain legal employment outside the camps. The Government has since been supporting this population with food, health care and other humanitarian assistance with the support of WFP, the Office of the United Nations High Commissioner for Refugees (UNHCR), and other agencies. While the refugee population initially numbered 107,810, a successful third country resettlement programme, which started in 2008, has reduced the number of refugees still living in the two camps to 11,213 as of 2016. It is projected that by the end of 2017, 8,500 refugee will remain in Nepal who are either unwilling to resettle in a third country or as persons who are ineligible for resettlement.

The agriculture sector contributes 34 percent to Nepal's GDP [9]. About 68 percent of the population is engaged in this sector for livelihoods and subsistence; however, only 28 percent of Nepal's total land area is arable and the country suffers from frequent natural disasters and low agricultural productivity. Nepal slid back into a food deficit at the national level in 2016 after recording surpluses for the last five years, when the edible grain output in 2015 became 71,387 mt short of meeting the requirement of 5.34 million mt [10]. One of the multiple reasons for this was identified as the significant damage caused to crops and arable land during the magnitude 7.8 earthquake in 2015. The border crisis also limited the importation of fertilizers for agriculture, which—coupled with below average rainfall during the monsoon season and colder than average winters—has contributed to the country's food deficit of 2016. Other reasons include the further reduction of the already low production from predominantly small-holding farmlands, mainly due to the increasing shortage of labour for cultivation as more rural people leave Nepal for jobs abroad. The difficulties associated with cultivating on rugged topography, complex geographical structures and variability in terms of climate conditions also affect the annual food production. Cultivation is also mostly dependent on the annual monsoon rains as only 37 percent of the farmlands in the mountains, 41 percent in the hills and 69 percent in the lowlands have access to year-round irrigation facilities according to the Ministry of Agricultural Development. WFP's vulnerability analysis and mapping (VAM) unit and the national food security monitoring system (NeKSAP—*Nepal Khadhyia Surakshya Anugaman Pranali*) recorded that the severe winter drought in the mid- and far-western region in 2015-2016, which occurred as a result of a failed monsoon season, led to a significant decrease in winter crop production.

Nepal has made good progress in the education sector during the past two decades, with the national education policy framework being further strengthened by the School Sector Development Plan 2016-2023 approved in October 2016, which focuses on integrating quality education with access and equity. Primary education (grades 1 to 10) has been universal and free of charge since 2000. The national literacy rate has increased to 65.9 percent (75.1 percent for males and 57.4 percent for females) [11] and net enrollment rates in primary education has reached 96.2 percent [12]. However, the existing high malnutrition rates would seem to indicate that the increase in education and literacy levels has not successfully contributed to generating wider knowledge about food choices and consumption patterns and has not affected significant behaviour changes that would contribute to reducing malnutrition.

#### References:

- [1] 2011 National Census, Central Bureau of Statistics, 2012, Government of Nepal.
- [2] 2015 Human Development Report (HDR) Work for Human Development.
- [3] Measured as the percentage of the population that lives on less than USD 1.25 per day.



- [4] 2015 Global Hunger Index (International Food Policy Research Institute, Concern et al).
- [5] Nepal Multiple Indicator Cluster Survey (NMICS), Central Bureau of Statistics 2014.
- [6] The Nepal Ministry of Health (2011). Nepal Demographic and Health Survey 2011. Kathmandu: Ministry of Health and Population, New Era and Macro International Inc.
- [7] 2015 Post-Disaster Needs Assessment (PDNA) (Government National Planning Commission).
- [8] Growth of 27.6 percent in three months to June 2015 compared to the same period the year before—"Nepal Development Update", World Bank, May 2016.
- [9] World Bank data on agriculture (percent of GDP), 2014.
- [10] The Nepal Ministry of Agricultural Development, 2016.
- [11] Goals established through several programmes, including the Education for All - National Plan of Action (2004-2007) and most recently the School Sector Reform Plan (2009-2016).
- [12] Nepal Education in Figures 2015. Ministry of Education, Government of Nepal.

## Response of the Government and Strategic Coordination

Nepal's national social protection framework identifies the country's social protection needs and encompasses the broad areas of (i) food security, livelihood recovery and emergency assistance, (ii) child protection, (iii) essential health services, (iv) free education up to grade 10, and (iv) employment promotion schemes. The Government of Nepal continues to work towards expanding existing social protection schemes by increasing expenditure to scholarships, expanding short-term employment programmes, and reintegrating conflict-affected populations into socio-economic life to promote peace and security. However, weak institutional capacity at the central and local levels, lack of access to more inclusive public goods and services, and low budgets have hindered the reach and expansion of these services.

Nepal has a longstanding National School Meals Programme (NSMP) spanning over 40 years, which uses two delivery modalities: food items or cash resources for schools to cook or outsource food items. WFP has been an integral part of this school meals programme for 40 years, providing mid-day meals made from corn-soya blend, vegetable oil and sugar to 200,000 school-aged children across the country. Collectively, the food and cash-based NSMP reaches more than half a million school children enrolled in basic education (grades 1 to 8) in 29 out of 75 districts, representing 16 percent of the net enrolment in primary schools [13]. The NSMP represents one of the largest social safety nets for school-aged children in Nepal.

Given the high levels of poverty and household food insecurity, another social safety net of similar importance is the Rural Community Infrastructure Works (RCIW). Since its inception in 1995, RCIW has played a critical role in reducing hunger and poverty by providing employment geared towards creating protective and productive community assets, for which food insecure, participating households receive food assistance during the agricultural lean seasons. The programme operates mainly in the districts of the mid- and far-western region which has particularly high food insecurity levels and underdevelopment. WFP has been a contributor to the RCIW programme by supporting improvements in the food security of rural communities through food-assistance-for-assets projects that use both food rations and cash transfers as assistance modalities.

WFP works in partnership with United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the Food and Agriculture Organization of the United Nations (FAO) and the International Fund for Agricultural Development (IFAD) on a joint programme for rural women's economic empowerment (RWEE). WFP has also worked together with the United Nations Children's Fund (UNICEF) to implement school-based water and sanitation activities and to develop a guideline for the integrated management of acute malnutrition. In 2016, through the United Nations Framework Convention on Climate Change (UNFCCC) Adaptation Fund, WFP assisted vulnerable households in the mountains to adapt to climate change through improved management of community assets for livelihoods.

WFP also implements the Community Development Programme (CDP) which works to improve the existing governance system by ensuring effective participation along with enhancing coherence between stakeholders at all levels for effective delivery of quality assets and services that benefit the poor while gradually bringing them into the local development process.

WFP continues to collaborate with the Ministry of Agricultural Development and the National Planning Commission to strengthen and institutionalise the nationwide Nepal Food Security Monitoring System (NeKSAP), enabling evidence-based decision-making for food security policies and programmes. WFP continues to support the Ministry

of Home Affairs in capacity augmentation to respond to seismic events through developing the humanitarian staging area launched in early 2015. It proved to be a vital example of preparedness when the earthquake struck in April 2015. To further support with resilience and disaster mitigation, WFP has designed the second phase of emergency preparedness and capacity development initiative that builds upon the 2013-2015 emergency preparedness project, to sustainably enhance national-level emergency logistics capacities to respond to future emergencies.

In 2016, the Government prioritised the need to explore the possibilities of rice fortification as one of the best nutrition interventions for Nepal in the long term, and requested WFP's support to carry out a landscape analysis for a potential rice fortification initiative. This landscape analysis assessed the current capacity of the Government and the private sector to implement the necessary activities in the recommended roadmap towards rice fortification in the country. In the longer term, fortified rice is expected to be used as a part of food assistance packages in various social safety net programmes across the nation. The Government's high-level advisory committee is expected to provide their feedback to the recommendations.

The Government established the National Reconstruction Authority (NRA) to lead and coordinate the reconstruction and recovery plans of the humanitarian response to the magnitude 7.8 earthquake that struck the country in April 2015. However, lengthy bureaucratic procedures and government changes in mid-2016 affected the pace of progress. Starkly visible was the slow progress in the disbursements of grants to the affected people for rebuilding earthquake-damaged homes, which took nearly a year to begin. Despite the slow progress, the major earthquake disaster has paved the way for the Government to explore the possibility of linking existing social safety nets as responsive instruments for disasters, as evidenced by the linkage of various line Ministries to the NRA and the Ministry of Home Affairs for the recovery.

Several plans and strategies of the Government of Nepal have laid the framework for assistance and implementation of the development agenda for the United Nations and other development partners, in particular, the Multi-Sector Nutrition Plan, Nepal Education Act and the School Sector Development Plan (2016-2022) as well as the Agricultural Development Strategy. The United Nations Development Assistance Framework (2013-2017) for Nepal, developed in close consultation with national agencies, supports the Government in the development process. Coordination with the Government is primarily through the National Planning Commission and other government agencies, while steering committees meet regularly to coordinate the development agenda among all stakeholders.

#### References:

[13] Department of Education—Government Flash Report-1, 2014.

## Summary of WFP Operational Objectives

WFP has two ongoing projects that serve Bhutanese refugees in Nepal: the country programme (CP) 200319 and the protracted relief and recovery operation (PRRO) 200787. These projects aim to prevent undernutrition and enable year-round access to food for vulnerable groups, including pregnant and lactating women and young children. They directly contribute to four of the five pillars of the Zero Hunger Challenge. The CP, lasting from 2013-2017, is implemented in the mid- and far-western region (MFWR) districts and is aligned with the United Nations Development Assistance Framework and the Country Programme Action Plan signed with the Ministry of Finance.

Through PRRO 200787, WFP supports Bhutanese refugees in Nepal with food assistance. The project is implemented in partnership with the Government and mainly the United Nations High Commission for Refugees (UNHCR). Together with the Government and UNHCR, WFP started a targeted, needs-based food distribution system in January 2016 in light of gradually declining numbers of people in refugee camps.

Having launched humanitarian operations to support the populations affected by the major earthquakes that hit Nepal in 2015, WFP continued its emergency operation (EMOP) 200668 until January 2016 and the logistics cluster and telecommunication services special operation (SO) 200848 until April 2016 to address remaining needs in promoting household food security and delivery of food and supplies to high mountainous locations. The earthquake in April 2015 caused almost 9,000 deaths and widespread damage to infrastructure, and the scale of the response required regional augmentation of capacity and resources. As a follow-up to the EMOP, WFP launched PRRO 200875 to support the rehabilitation of the three earthquake-affected districts—Gorkha, Dhading and Nuwakot. As the planned rural community infrastructure works of the project were postponed due to delays in government approvals, the planned nutrition services were the first activities that were started within the framework of the PRRO in these the earthquake-affected districts.

From 2014 to 2015, the failure of the monsoon season gradually led to consecutive poor summer harvests in October and November of 2015 in the MFWR districts, and rains continued to fail during winter cropping in the first

quarter of 2016. In addition, the economic blockade from September 2015 to February 2016 at the Nepal-India border resulted in high transport costs and greatly inflated commodity prices. It also adversely affected household food security and income in the region. In response, WFP supported over 19,000 drought-affected people with food and nutrition support through an immediate response emergency operation (IR-EMOP) 200983 in Mugu and Jumla districts of the MFWR in mid-2016.

The CP, PRROs and the emergency operations directly contribute to Sustainable Development Goal (SDG) 1: No poverty, SDG 2: End hunger and SDG 4: Quality education, while the special operations contribute to SDG 17: Partnerships for the Goals.

# Country Resources and Results

## Resources for Results

Throughout 2016, the country programme (CP) 200319 continued to suffer from a lack of resources, and WFP was unable to fully implement planned activities. Out of the total funding received, 67 percent was to be used in implementing the education support programme, which left the assets and livelihoods (Component 1) and nutrition support (Component 3) components seriously under-funded. As a result, the Livelihoods and Asset Creation component reached fewer beneficiaries with a substantially reduced number of work days and the Nutrition component could only work in three out of the planned six districts. During 2016 however, a significant contribution was received from Korea International Cooperation Agency (KOICA) and the central emergency response fund (CERF). The CERF funding was received to support drought-affected families in the Karnali region alongside the in-kind contribution of the Government of Nepal, while the KOICA funds were for the Saemaul Zero Hunger Community project implemented in Doti district.

The education support component was fully funded from the multi-year grant of the United States Department of Agriculture (USDA) McGovern-Dole Food for Education Programme, which covers activities from 2015 to 2017. The grant included in-kind donations of food for school meals (corn-soya blend and vegetable oil) and a cash contribution to carry out school infrastructure, water, sanitation and hygiene activities and early grade literacy. Additionally, the Ministry of Education contributed USD 150 per metric ton (mt) of food commodities, towards bearing the cost of inland transport, storage and handling (ITSH) to deliver food to the schools. In order to align WFP activities to the amended Education Act that stipulated basic education to include grades 1 to 8 plus one year of pre-school, WFP increased the coverage of school children in 2016, bringing the total beneficiaries to 270,000 children.

The Government continued to provide support for implementation of the nutrition programme in six districts (five Karnali zone districts in the mid- and far-western region (MFWR) and Solukhumbu in the eastern development region) by making available 549 mt of Super Cereal. To support the Government's efforts, WFP mobilised resources for the associated costs of this in-kind contribution, from CERF and internal funding mechanisms.

As the third-country resettlement process of the Bhutanese refugee population living in camps in eastern Nepal continued at a faster pace in 2016, the reduction in the refugee population encouraged WFP and partners to adopt measures to maximize the remaining resources of the PRRO 200787. Therefore, after more than twenty years of support to the refugee population providing a full food basket (rice, pulses, sugar, vegetable oil as well as Super Cereal as supplementary food), WFP introduced a needs-based food assistance scheme in January 2016 where only the most vulnerable refugee families received a full food ration and the remaining refugee population received 70 percent of the full ration. In July 2017, WFP also replaced the Super Cereal with rice for the vulnerable refugees, and phased out the supplementary feeding programme (SFP) which earlier served pregnant and lactating women (PLW), people living with HIV (PLHIV) and tuberculosis (TB) patients. This allowed WFP to cover the full resource requirements in 2016, with the contributions from the United States of America and funds received from the strategic resources allocation committee (SRAC).

The PRRO 200875 addresses post-earthquake food and nutrition needs while supporting the Government and local communities to "build back better" infrastructure and resilient livelihoods. However, the food-assistance-for-assets component in the PRRO went through a long start-up process and could not be implemented in 2016. The reasons for this included lengthy delays in obtaining government approval for the community asset creation projects due to unclear bureaucratic procedures and changes in government in 2016. The significant resources given for immediate relief assistance and increasing needs in other humanitarian crises elsewhere in the world, are likely reasons that funding levels of major donors for recovery activities were lower than expected. Given the resource limitations in 2016, WFP in coordination with the Government, limited the planned activities to implement in three out of the planned seven districts. The planned number of beneficiaries was also decreased from 381,000 to 65,700 people. Despite not being able to reach the original planned beneficiaries, WFP continues to monitor their food security levels through the NeKSAP (the Nepal food security monitoring system) district network in the earthquake-affected districts so that any concerns can be highlighted to the Government for appropriate interventions.

Engaging with projects at the community level has helped WFP to increase coordination and collaboration wherever possible, and to ensure that there is no overlap of programme resources.

In the CP 200319, WFP worked to leverage resources and other development partners in the three operational activities of assets and livelihoods (resilience), education and nutrition support. Notably, under the McGovern-Dole funded school meals and education support programme, WFP coordinated with Save the Children, who also implemented early grade reading (EGR) activities in schools in the MFWR districts where WFP provides early grade



literacy support along with school meals. This helped to map out overlaps among the schools selected by Save the Children and WFP, and put funds into schools without an ongoing EGR programme. Similarly, WFP ensured that schools where other partners implemented their activities also received WFP mid-day meals, water, sanitation and hygiene (WASH) awareness and school infrastructure development activities. Close coordination with fora such as the “WASH in Schools” thematic group, the National Early Grade Reading Programme and UNICEF’s education and WASH teams, has helped WFP to avoid duplication and engage in joint planning where applicable. Through working together with other stakeholders in the same schools, WFP was able to extend the impact of funds used for school meals to include a comprehensive package of services for the children.

In a new venture, WFP initiated preliminary support to the Ministry of Education to conduct a cost-benefit analysis of the Nepal school meals programme in 2017, building on WFP’s global partnership with MasterCard. This exercise will serve two important purposes: i) build the evidence base for decision-making in Nepal’s national school meals programme; and ii) contribute to advocacy for greater investment in school meals, leading to developing a fully homegrown and sustainable national school meals programme.

WFP continued to partner with the Food and Agriculture Organization of the United Nations (FAO), the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and the International Fund for Agricultural Development (IFAD) on a joint programme for rural women’s economic empowerment. Each agency provided its expertise to support women beneficiaries with opportunities in agricultural livelihoods. This joint activity helped WFP to leverage funds to extend WFP’s impact in the project.

As more beneficiaries gradually left the Bhutanese refugee camps in eastern Nepal on third-country resettlement, WFP and UNHCR with government partners started the needs-based assistance scheme in 2016, in an effort to work toward a more sustainable food response, ensuring that the use of limited project resources were maximized. To this end, a strategy based on a ration reduction for all non-vulnerable households was developed. This was complemented with a communication campaign to ensure refugees were able to adequately prepare for the changes. A strong surveillance system helped to identify emerging problems related to reduced rations. Non-vulnerable households who wanted their status reviewed, used an appeal mechanism to reach the Government, WFP and UNHCR with their concerns.

## Achievements at Country Level

Through an ongoing partnership with the Government for more than 50 years, WFP helped vulnerable communities to increase their food security through diverse interventions. Through WFP’s country programme (CP), short-term employment provided over the years in food-assistance-for-assets (FFA) projects, has helped vulnerable households to meet their immediate food needs and gain additional income through food rations and cash transfers. As a result, the percentage of separate households headed by men and women having an acceptable food consumption score (FCS) has surpassed the target of 80 percent in 2016. The extra cash received for participating in asset creation projects has likely increased household purchasing power, ensuring better access to food. However, as a result of numerous natural disasters such as droughts and floods regularly affecting the country, most communities continue to need support to build their resilience.

Through a long standing partnership with the United State Department of Agriculture (USDA) McGovern-Dole Food for Education Programme and the Ministry of Education, WFP has been providing mid-day meals in over 2,500 public schools across the country. Mid-day meals serve as a strong incentive for children to attend school as shown by the high attendance rates (nearly 75 percent) for boys and girls in 2016, although the attendance rates have yet to reach WFP’s target of 90 percent. WFP added complementary activities, such as early-grade literacy support, distribution of laptops and digital materials, constructing school infrastructure such as kitchens and school water and sanitation facilities to the school meal programme from 2013, creating an overall package of education support activities enhanced by community and government capacity development through trainings in logistics, food handling, and hygienic food preparation, promotion of good practices in hygiene and sanitation in schools.

Despite these contributions, a negative rate of change in the school enrolment numbers for both boys and girls in public schools has persisted for the past two years. A government study (FLASH I Report, 2071/2072) explaining the reasons for this trend, stated that it was likely caused by more children being enrolled in private schools which are perceived by parents as offering better quality education and services than public schools.

Through the nutrition programme, WFP has been providing Super Cereal, a specialised nutritious food, in support of the Government’s efforts in the prevention of stunting in the districts of Jumla, Mugu of mid-western region and Solukhumbu in the east. Following the severe drought in the Karnali region of mid-western region in 2016, WFP was able to successfully scale up this intervention in three more districts in the mid-west with one additional district in the far west upon receiving additional resources for the drought response. These efforts contributed to a gradual increase in the proportion of children aged 6-23 months consuming a minimum acceptable diet, at over 65 percent

in 2016, drawing closer to WFP's minimum corporate target of 70 percent. Another key achievement was that from 2015, the Ministry of Health sustained continuous procurements of Super Cereal for the nutrition programme through the allocation of national resources. Following WFP's training of government health staff both at the central, district and or village level in the areas of logistics, storage and handling of specialised nutritious food, distribution management and record keeping, the logistics of delivering the food to the district warehouses have also been managed by the Ministry for the past year.

WFP provides support to the Government of Nepal through the REACH (Renewed Efforts Against Child Hunger and Undernutrition) partnership with the United Nations Children's Fund (UNICEF), the Food and Agriculture Organization of the United Nations (FAO) and the World Health Organization (WHO). It also co-facilitates the United Nations network for the Scaling Up Nutrition (SUN) movement, and works towards improved stakeholder and multi-sectoral coordination at national level for a harmonised nutrition information system, developing the capacity of relevant government institutions on nutrition-specific and sensitive interventions at national and local levels, and supporting the government food and nutrition secretariat.

WFP continued to assist the most vulnerable refugee families in Bhutanese refugee camps with full food rations in 2016, even though a needs-based food distribution scheme was launched to increase project efficiency and maximise dwindling resources. This has contributed to both improved food security, as evidenced by the zero and near zero (0.90) percentages of households headed by women and men respectively that reported a poor Food Consumption Score (FCS) in 2016. Refugee families were helped to grow vegetables in vacant land through the reclamation gardening programme, adding to their dietary diversity.

In terms of creating sustainable programmes, a significant achievement in 2016 was handing over the Nepal food security monitoring system (NeKSAP) to the Ministry of Agricultural Development in June. Established by WFP as a field surveillance mechanism in 2002, the NeKSAP evolved as a nationwide food security monitoring system based on strong collaboration between the Government, WFP and other national institutions. The Government has now started implementing NeKSAP regular activities through its own resources with technical support from WFP.

The humanitarian staging area (HSA) constructed by WFP in 2015, proved to be invaluable for the post-earthquake emergency response in 2015. Functioning as the main logistics hub, the HSA enabled over 60 humanitarian partners to store and transport relief items to affected districts through the Logistics Cluster, led by the Ministry of Home Affairs and WFP. Training of government and humanitarian partners in emergency logistics, food management logistics and emergency telecommunications ensured that partners had the required knowledge to expedite an unbroken supply chain of relief materials. WFP's remote access operations (RAO) team combined with the engineering unit started repairing rural transport infrastructure in order to enable access. The RAO provided jobs to local people from earthquake-affected families when they hired them as porters to carry humanitarian goods to remote high-altitude villages, helping them to earn an income and avoid hunger and food insecurity after the disaster.

To enhance the protection of beneficiaries, WFP introduced a complaints and feedback mechanism (CFM) in 2015 consisting of a toll-free telephone line "*Namaste WFP*" with the objective of giving beneficiaries access to a simple and safe means of seeking information, providing feedback or voicing complaints, allowing WFP to resolve them. Following the success and lessons learned after the EMOP, the CFM will be extended initially to the school meal programme in 2017 and later to other WFP projects in Nepal.

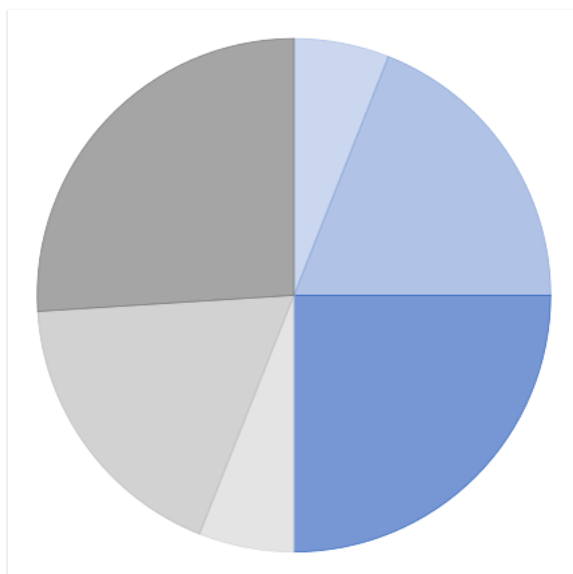


## Annual Country Beneficiaries

Beneficiaries	Male	Female	Total
Children (under 5 years)	47,433	47,433	94,866
Children (5-18 years)	150,205	142,299	292,504
Adults (18 years plus)	197,638	205,543	403,181
<b>Total number of beneficiaries in 2016</b>	<b>395,276</b>	<b>395,275</b>	<b>790,551</b>

Country Beneficiaries by Gender and Age

- Children (under 5 years)
- Children (5-18 years)
- Adults (18 years plus)
- Children (under 5 years)
- Children (5-18 years)
- Adults (18 years plus)



## Annual Food Distribution in Country (mt)

Project Type	Cereals	Oil	Pulses	Mix	Other	Total
Country Programme	1,727	422	-	4,058	391	6,598
Single Country EMOP	2,922	-	582	-	-	3,504
Single Country IR-EMOP	-	-	-	128	-	128
Single Country PRRO	1,794	113	344	47	8	2,305

Project Type	Cereals	Oil	Pulses	Mix	Other	Total
<b>Total Food Distributed in 2016</b>	<b>6,442</b>	<b>535</b>	<b>926</b>	<b>4,232</b>	<b>399</b>	<b>12,534</b>

## Cash Based Transfer and Commodity Voucher Distribution (USD)

Project Type	Cash	Value Voucher	Commodity Voucher
Country Programme	475,637	-	-
Single Country EMOP	4,000,113	-	-
<b>Total Distributed in 2016</b>	<b>4,475,750</b>	-	-

## Supply Chain

WFP has over 40 years of experience importing, locally procuring and distributing food assistance in Nepal. The country's terrain, landlocked and along the world's highest mountain range, requires multiple methods of in-land transportation (trucks, tractors, pack animals and porters) to reach programme beneficiaries. WFP has developed the necessary storage facilities and transportation infrastructure that is sufficient to reach beneficiaries in all programme locations. Furthermore, WFP has a logistics plan that will prevent spoilage and waste, while maximising the project's benefits. Specifically for this purpose, WFP's partners—international and local non-governmental organizations (NGOs) and government agencies—maintain a schedule of regular warehouse inspection and cleaning. WFP also provides regular training to own and partner staff on food quality control and warehouse management, while privately contracted truck and transport companies are trained on safe and secure transport of commodities. Tied to WFP's in-country rice fortification strategy are future plans to transition to local production and procurement of food commodities, to be developed from 2017.

### Food procurement

WFP imports all commodities for all projects into Nepal completely free of customs duties. No taxes or duties are applicable for food items provided through WFP, as per the umbrella agreement signed between WFP and the Government. WFP requests exemption certificates from the Government for each imported consignment and also for local purchases where taxes are applicable.

For all food procurements, local purchases are prioritised to motivate and strengthen local markets and gain value for money in cheaper prices and shorter delivery times. However, this also depends on the availability of food items within the country, their cost-effectiveness and also on the preference of donors.

In 2016, 90 percent of food was sourced from the local markets supported under the country programme (CP), and the remaining requirement was received as international contributions. Given the large volume of in-kind rice contributions from the Government for Component 1 and Super Cereal for Component 3 and the immediate response emergency operation, the amounts procured by WFP from local manufacturers was limited. The PRRO 200787 and the PRRO 200875 both purchased the majority of food (over 95 percent) from the local market. Only vegetable oil for the PRRO 200787 was primarily procured internationally, mainly because of higher cost-effectiveness. International purchases consisted only of the ready-to-use supplementary food (RUSF), Plumpy'Sup, which was not available in Nepal. The EMOP which was launched to support earthquake-affected populations, concluded in early 2016, hence the required quantity of rice was purchased from the local market.

### Logistics management

WFP uses two modalities to deliver food: 1) direct delivery of food up to the final distribution point (FDP) where the partners distribute food to the beneficiaries, and 2) delivery of food up to the extended delivery point (EDP), where the field-based government structure takes over the further transport of food to the FDPs; thereafter the community becomes responsible to deliver the food to the distribution sites, such as schools. In order to more effectively manage the delivery of food, WFP rolled out the logistics management tool—Logistics Execution Support System (LESS)—in 2016.

Bearing in mind that the last leg of transport through high mountainous terrain is done by the community, including most often women, WFP ensures that rice, lentils and Super Cereal are packaged in mostly 25 kg bags and vegetable oil in 4 litre canisters. For the nutrition programme in particular, Super Cereal is packaged in 3 kg bags so that it is easier to be carried by the beneficiaries (pregnant and lactating women).

### Post-delivery losses

The monitoring of the “best before use” date or the “expiry” date of food items through LESS helped to improve commodity management. The control exercised by WFP's third party surveyors minimised losses and damages during handling at the warehouses. Scheduled warehouse cleanings, stack rotations, inspection and control fumigations also helped in this aspect. Furthermore, training provided on food quality management to WFP and partner staff helped to improve quality control. As such, no significant losses were reported in the CP 200319, and the PRRO 200787. Similarly, losses of Plumpy'Sup were at a minimum in the PRRO 200875, but there was a small loss of other commodities which were earlier returned by the partners under the EMOP 200668, and carried forward to the PRRO 200875. This food was disposed of, because of the damage caused by prolonged storage at the partners' warehouses. WFP recovered the cost of the loss from the relevant partners.

As the EMOP 200668 ended in January 2016, only a small quantity of food was handled during the month and losses were kept to a minimum. Similarly, minimal losses were reported for the IR-EMOP 200983. This was achieved through the prompt delivery and distribution of the food and RUSF, the regular monitoring of expiry dates of the food and the partners' improved capacity in food handling.



## Annual Food Purchases for the Country (mt)

Commodity	Local	Regional/International	Total
Chickpeas	67	-	67
Iodised Salt	17	-	17
Ready To Use Supplementary Food	-	22	22
Rice	4,219	-	4,219
Split Peas	288	-	288
Sugar	200	132	332
Vegetable Oil	32	68	100
Wheat Soya Blend	137	-	137
<b>Total</b>	<b>4,960</b>	<b>222</b>	<b>5,181</b>
<b>Percentage</b>	<b>95.7%</b>	<b>4.3%</b>	

## Implementation of Evaluation Recommendations and Lessons Learned

### Monitoring activities in Nepal

WFP's country office in Nepal has operated a comprehensive internal monitoring and evaluation (M&E) and reporting system that plays a critical role in ensuring accountability and achieving operational effectiveness. This is done by measuring results against desired programme outputs and outcomes. WFP's internal monitoring strategy outlines M&E activities and best approaches for all newly designed programmes focusing on the beneficiaries' own



experiences and observations—individual, household and community level feedback—using a third-party monitoring approach to obtain independent, unbiased information using semi-structured questionnaires and electronic devices for real-time data collection.

At the end of 2016, WFP completed outcome monitoring of the country programme (CP) and the PRRO 200787 through an independent third party to track the outcome results of project activities. In addition, regular monitoring of project activities during their implementation was done throughout the year. WFP used different innovative monitoring tools such as photo monitoring (a pictorial depiction of the project's status before the start, during implementation and after completion) along with remote monitoring (beneficiary interviews through telephone to gather feedback of WFP's project activities) as well as through regular face-to-face interviews using paper based questionnaires to gather data.

WFP also rolled out the global online tool COMET (Country Office Tool for Managing (programme operations) Effectively) in 2016. It is a corporate tool and a single platform for combining operational data, providing quality evidence on programme performance in a standardised format. Corporate and other donor reporting was done using automated and consolidated data collected and validated in the COMET system.

In 2016, WFP in Nepal also used the country office's eSPR database (electronic system for project reporting) for collecting data on output indicators at the origin (at separate district level) which is uploaded into the system by each individual implementing partner for their respective district. The eSPR is also used by the Ministry of Education to report district level education indicators. WFP in collaboration with the Ministry of Education is exploring the option of integrating the eSPR database with the Ministry's central database—the education management information system (EMIS).

As the COMET system is currently geared to capture data from the area office level (a larger geographical area comprised of several districts), to bridge the gap in the flow of data from the district to the area offices (where consolidated district data is entered into COMET), the eSPR system was used. However, once the COMET system is expanded to capture data at the district level, and the eSPR is fully integrated with the EMIS, WFP in Nepal will then discontinue the eSPR after which, the COMET system will be the only platform for combining and managing operational data.

### **Evaluation activities in Nepal**

WFP Nepal was among the few country offices to take part in the piloting of WFP's decentralised evaluation policy launched in 2016. Accordingly, the Nepal country office conducted a mid-term evaluation of the country programme's education support component in 2016 as a part of the decentralized evaluation for the Asia region. School meals and other education support components such as early grade literacy, school infrastructure and school water, sanitation and hygiene support projects and their activities were evaluated during a two-month period with visits to project sites and discussions with stakeholders. The final report is expected in February 2017. In addition, the country programme went through its mid-term evaluation in the middle of 2016. The components of assets and livelihoods and nutrition support were evaluated through visits to project sites and discussions with all stakeholders, including government and non-governmental organization (NGO) partners.

Moreover, WFP conducted the baseline survey of its Saemaul Zero Hunger Community Project funded by the Korea International Cooperation Agency (KOICA). The survey was carried out in the district of Doti in mid-western Nepal where the project activities are implemented. The final survey report is expected in February 2017. Similarly, the preliminary activities of the baseline survey for the PRRO 200875, such as contracting a research team, developing the tools and training the enumerators, was done in 2016. Although the PRRO 200875 was launched in 2016, the implementation of a majority of activities was delayed till 2017; hence the baseline survey was not carried out at the time.

In 2016, WFP also continued to implement the recommendations that were provided after the evaluation of the impact of food for assets on livelihood resilience undertaken by WFP's office of evaluation in 2013.

In 1996, WFP's Nepal country office, in working with the Ministry of Federal Affairs and Local Development and other stakeholders, initiated FFA in the Government's social safety net, the rural community infrastructure works (RCIW) programme, aiming to help poor households living in remote areas to cope with food insecurity, unemployment and environmental degradation. Initially, FFA was a modality within the RCIW and intended to improve the short-term food security for poor households. This approach has since formed a major element of the country programmes implemented in subsequent years, with a focus on rural road rehabilitation alongside other projects which include a focus on natural resource management and asset construction including water resources management, plantations and agriculture.

In the two years of 2012 and 2013, WFP designed a series of impact evaluations to be managed by the office of evaluation which examined the impact of FFA in five countries (Guatemala, Nepal, Bangladesh, Senegal and Uganda). This impact evaluation series enabled a methodological approach to be used for each country to support

comparative analysis but also enabled them to adapt to the 'in-country' FFA context. Some of the key recommendations of the Nepal evaluation and the continuing responsive actions of the Nepal country office are described below.

1. Adopt a more flexible programming approach for cash- and food-assistance-for-assets (CFA/FFA) that is better adapted to Nepal's diversity and geography in site-specific operational contexts by employing the twin tracks of: i) wide coverage and short-term interventions focused on meeting the immediate food needs of the greatest number of the poorest and most vulnerable groups; and ii) more focused, longer-term programming aiming at building the livelihood resilience of vulnerable groups.

*In response, WFP Nepal country office has taken into consideration the seasonal variation of food security, while conducting community-based participatory consultations and longer-term capacity strengthening of local government development planning at the village development committee (VDC) level when designing the CFA and FFA projects in mid-west, far-west, Karnali and western regions.*

2. Undertake a partnership review and develop and implement a strategy for partnerships that deliver the short- and long-term objectives of FFA and CFA.

*A five-year joint programme with the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the Food and Agriculture Organization of the United Nations (FAO) and the International Fund for Agricultural Development (IFAD) for the economic empowerment of rural women in Nepal (RWEE), was one of the new partnerships that WFP Nepal started in 2015 to support gender-responsive implementation of the Government's Agricultural Development Strategy.*

3. Reach an agreement with the Government on the development of a functioning and sustainable government system for responding to food insecurity, to enable the eventual managed hand-over of FFA and CFA implementation.

*WFP started the community development programme (CDP, 2016-2018), which covers 18 districts in the mid-west and far-west regions, aiming to empower the local government's capacity in sectoral and integrated development planning at the village and district level. This three-year programme will ensure local governments are more capable, through intensified support for 18 districts that have particular problems delivering services in an inclusive, accountable and transparent manner. WFP will seek the opportunity to organize joint monitoring visits with the Government and plan an exposure visit to similar projects for government and partners stakeholders.*

# Trust Funds and Visibility

## Trust Funds

WFP's project activities throughout 2016 were supported by a number of Trust Funds established by development partners. The Nepal food security monitoring (NekSAP) project benefitted from four Trust Funds provided by the Government of Germany, the European Union (EU), the Department for International Development (DfID) and the International Water Management Institute respectively, supporting food security monitoring, crop yield forecasting and nutrition management. Similarly, WFP is supported through the Adaptation Fund for Resilience Building against Climate Change to implement food-assistance-for-assets (FFA) activities with rural households adversely affected in the Karnali region; the project activities will start from 2017. Capacity development of rural communities to improve the voice of citizens and ensure effective participation was supported by the community development programme trust fund in order to improve existing governance and enhance service delivery to rural communities. In addition, WFP received support from the emergency preparedness trust fund to maintain the humanitarian staging area (HSA) and to develop capacity of government and humanitarian partners to respond to any future large-scale emergencies.

## Visibility

In 2016, WFP welcomed high-level visits from development partners including representatives from the Government of the United Kingdom, the United States of America, Sweden, Germany and the Republic of Korea to observe progress in project activities, especially in the country programme, the emergency preparedness project and the PRRO 200787 for assisting the Bhutanese refugees.

The emergency preparedness project provided an opportunity for Nepal's donors and partners in the Logistic Cluster to learn how food, medical, health and shelter items were stored and transported to reach earthquake-affected populations effectively. WFP hosted international visitors from different organizations, such as the High Commissioner of Great Britain, the Ambassador of the United States of America and the operational team of the Austrian Development Cooperation at the HSA during 2016. Similarly, many students from around the world visited the HSA to study the operations of an emergency response. These included a group of 20 students from the International Honors Programme from many countries, in addition to students from the United States of America, Japan and the United Kingdom. Details of these visits were published on social media, which helped to leverage further visibility for the project.

Having completed the earthquake emergency response successfully in 2016, WFP held an official ceremony to commemorate the humanitarian response on the first anniversary of the earthquakes. A publication and a photo exhibition entitled "Moving Mountains—A one-year Retrospective of WFP's Earthquake Response in Nepal" detailed WFP's support to the Government and the affected communities. Additionally, several videos on WFP's trail rehabilitation work under the remote access operation, was released publicly. All of these activities contributed to increased public awareness at both the national and international level.

# Project Objectives and Results

## Project Objectives

The magnitude 7 earthquakes that struck Nepal in April and May 2015 caused widespread damage in many districts of the Central Region and caused the deaths of over 9,000 people. Over 900,000 houses were fully or partially damaged. The government-led Post Disaster Needs Assessment (PDNA), estimated the total damage and losses at nearly USD 7 billion, a third of Nepal's gross domestic product (GDP). WFP's response through a Corporate Response Emergency Operation (CR-EMOP) supported over two million people with urgent food assistance and cash-based transfers over the period from May 2015 to January 2016. The PDNA emphasised the importance of building resilience and integrating disaster risk reduction into recovery activities as relief gradually gave way to recovery. The Government of Nepal's livelihood recovery strategy in earthquake-affected areas also highlighted the importance of linking immediate assistance with long-term livelihood recovery. The significant detrimental effects of food insecurity on the nutritional status of children living in earthquake affected districts were also highlighted in assessments done by the nutrition cluster during the emergency, which revealed that stunting and wasting in earthquake-affected districts ranged from six to 14 percent respectively. Based on these and other findings, WFP was requested by the Government to further support the earthquake affected people in food and nutrition during the recovery process.

Accordingly, WFP started the PRRO 200875 in January 2016 with a plan to support a total of 350,000 earthquake-affected beneficiaries through the dual objectives of:

1. Implementing food-assistance-for-assets (FFA) activities to reconstruct damaged community assets, where beneficiaries are assisted with cash-based transfers and food rations consisting of rice, pulses and vegetable oil; and
2. Treating children diagnosed with moderate acute malnutrition (MAM) by providing the ready-to-use supplementary food (RUSF) Plumpy'Sup through a targeted supplementary feeding programme.

The PRRO aimed to support the priorities identified in the PDNA and the Government's livelihood recovery strategy in the sectors of community infrastructure, agriculture, nutrition, and disaster risk reduction. The project aimed to restore food and nutrition security and rebuild community infrastructure (WFP Strategic Objective 2) and support the restoration of livelihoods while enhancing the resilience of communities to future shocks (WFP Strategic Objective 3). The PRRO also aimed to enhance government capacity to prepare for, monitor and respond to food insecurity and natural disasters (WFP Strategic Objective 3) to develop the capability for emergency preparedness. The PRRO was formulated based on WFP's comparative advantages in Nepal, including: experience in remote areas; deep field presence; good relationships with local governments and communities; and the ability to scale up cash- and food-based transfers, information systems and food security analysis.



## Approved Budget for Project Duration (USD)

Cost Category	
Capacity Dev.t and Augmentation	524,921
Direct Support Costs	11,289,264
Food and Related Costs	18,772,034
Indirect Support Costs	4,167,652
Cash & Voucher and Related Costs	28,951,669
<b>Total</b>	<b>63,705,540</b>

## Project Activities

- **Strategic Objective**  
: Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies (SO2)
- **Outcome**  
: Stabilized or reduced undernutrition, including micronutrient deficiencies among children aged 6–59 months, pregnant and lactating women, and school-aged children
- **Activity**  
: Treatment of moderate acute malnutrition (MAM) through targeted supplementary feeding modality (TSFP) in Gorkha, Sindhupalchowk and Dolakha districts

During the planning phase of the MAM treatment programme, WFP worked closely with the Ministry of Health through the Child Health Division to design the programme's activities within the framework of the Government's integrated management of acute malnutrition (IMAM) programme, which was supported by the United Nations Children's Fund (UNICEF) and was implemented in many districts across Nepal. The basis for the deliberations was the growing need to assist children aged 6-59 months through a TSFP, given the increasing number of acutely malnourished children who were identified through government-led community-based screening in the earthquake-affected districts.

Although the treatment of MAM programme plan initially included 41,000 children in 14 districts, the limited resources available for the PRRO compelled WFP to reduce the beneficiary plan to 3,344 children aged 6-59 months in only three districts—Gorkha, Sindhupalchowk and Dolakha—which worst affected by the earthquakes in April and May 2015. The MAM treatment programme commenced in May 2016 after the initial training of partner staff on the identification process, food distribution management and reporting, community mobilisation and coordination with government health authorities in the districts. An individual take-home ration of Plumpy'Sup, consisting of 92 grams per child per day for a total of three months, was planned to be distributed to the targeted children.

WFP also worked with Ministry of Health and UNICEF to develop the national IMAM implementation guidelines and organised a four-day master training of trainers on IMAM as a part of the process. Key officials from the Ministry of Health at the central level participated, and a total of 575 people were trained, including district health officials, nutrition focal persons and statisticians from the Child Health Division, and key staff from WFP's partner Save the Children and other national non-governmental organizations (NGOs).

Through the IMAM programme, the Government—in partnership with UNICEF and other stakeholders—provides antenatal care (ANC) and postnatal care (PNC) services such as general health check-ups for pregnant and lactating women at the health posts, immunisation, distribution of iron and vitamin A supplements, de-worming treatment and nutrition counselling under the maternal, infant and young child nutrition (MIYCN) programme, and counselling on breast-feeding and complementary feeding under the infant and young child feeding (IYCF) programme.

During the period from March to December 2016, children aged 6-59 months were screened to identify signs of MAM in the three districts of Dolakha, Sindhupalchowk and Gorkha and a total of a 2,962 children were identified as suffering from acute malnutrition. This was lower than the planned number expected to be supported. Although the provision of Plumpy'Sup was initially planned for a much higher number of beneficiaries in 14 districts of the nutrition cluster, WFP could only reach the 2,962 beneficiaries identified with MAM in three districts in 2016 due to resource constraints under the PRRO. This resulted in a much lower achievement of the distribution than planned.

- **Strategic Objective**  
: Reduce risk and enable people, communities and countries to meet their own food and nutrition needs (SO3)
- **Outcome**  
: Risk reduction capacity of countries, communities and institutions strengthened
- **Activity:**  
Food assistance for assets (FFA) in Gorkha, Dhading and Nuwakot districts

WFP continued to collaborate with the Ministry of Federal Affairs and Local Development as well as with the NRA to develop the recovery component. Following a series of consultations between WFP, the NRA and the Ministry, WFP's PRRO project proposal was forwarded for approval in May 2016. In September 2016, the Ministry assigned their Monitoring and Evaluation Unit as the focal point for WFP and thereafter, WFP received the Government's approval for the PRRO in October 2016.

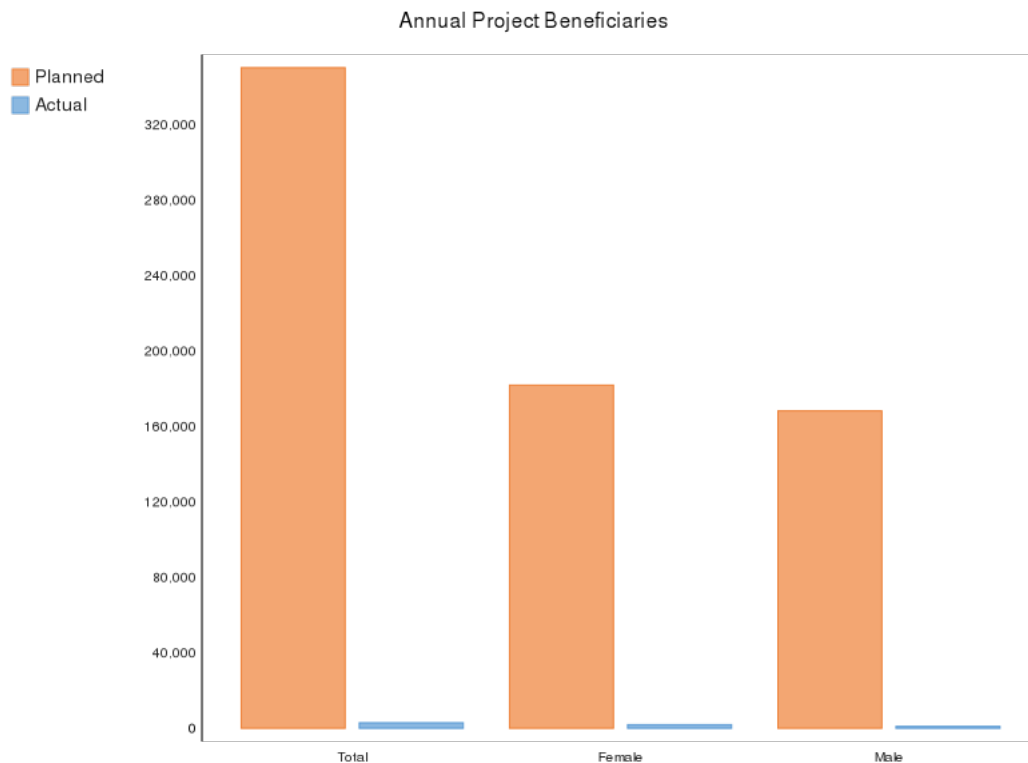
Discussions between WFP and the Ministry of Federal Affairs and Local Development during June and July 2016, helped to refocus the project activities and agree on the geographic areas of implementation; these discussions also took into consideration the initially limited resources available under the PRRO, and the trickling in of small contributions over several months. Joint planning also included mapping of complementary interventions, of both government and other agencies, being implemented in the earthquake-affected districts. Although the PRRO



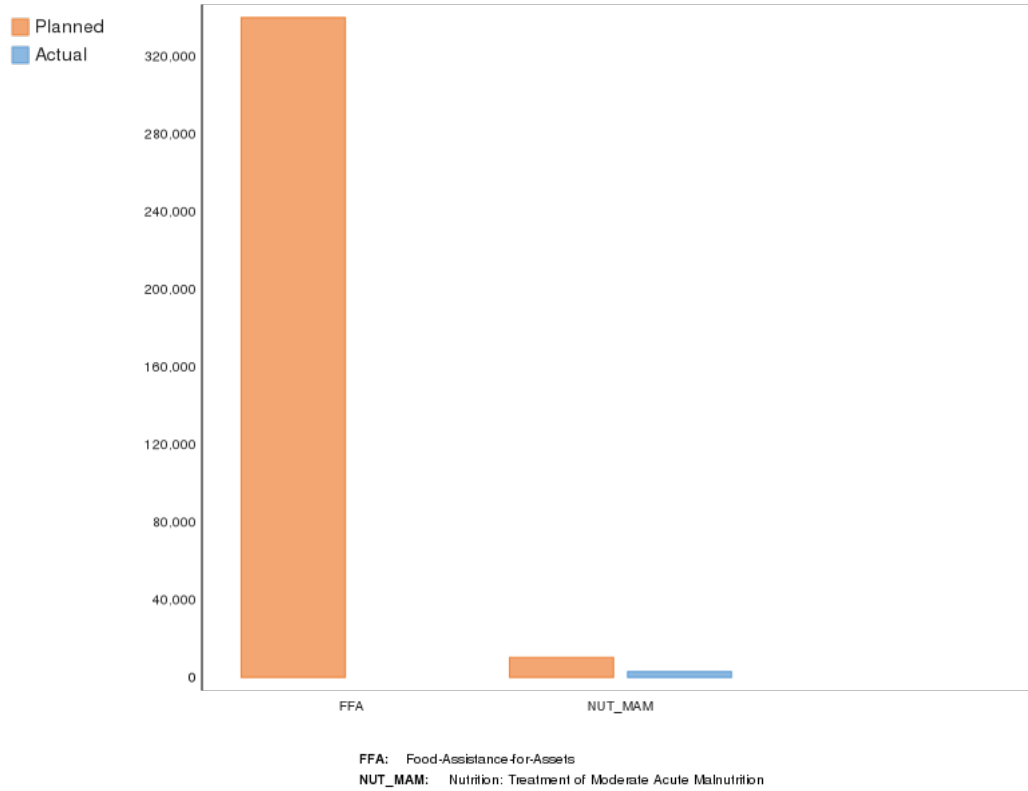
envisaged supporting seven earthquake-affected districts in recovery activities, the insufficient resources that the PRRO had received during the year limited WFP’s ability to offer broad programme coverage, and hence WFP had to limit the operational plan of FFA activities to a maximum of two or three most vulnerable districts with focused, more sustainable project activities. Although this was in contrast to the Ministry’s requirement of a broader, blanket coverage of districts, the Ministry also recognised the need for sustainable interventions that contributed to community resilience in future disasters.

While these extensive discussions were continuing, changes in Nepal’s political climate resulted in the handover of governance to the political opposition party in the Constituent Assembly in early August 2016. Several changes to key portfolios and personnel in government agencies took place, including in the Ministry of Federal Affairs and Local Development and the NRA. After the approval of the PRRO by the Government in October 2016, WFP planned to implement FFA activities and assist 70,834 beneficiaries (based on the reduced implementation plan) in the most food insecure Village Development Committees (VDC) of three earthquake-affected districts - Gorkha, Dhading and Nuwakot - instead of the seven districts originally envisaged, due to the insufficient funding situation of the PRRO. The registration of beneficiaries continued through December 2016.

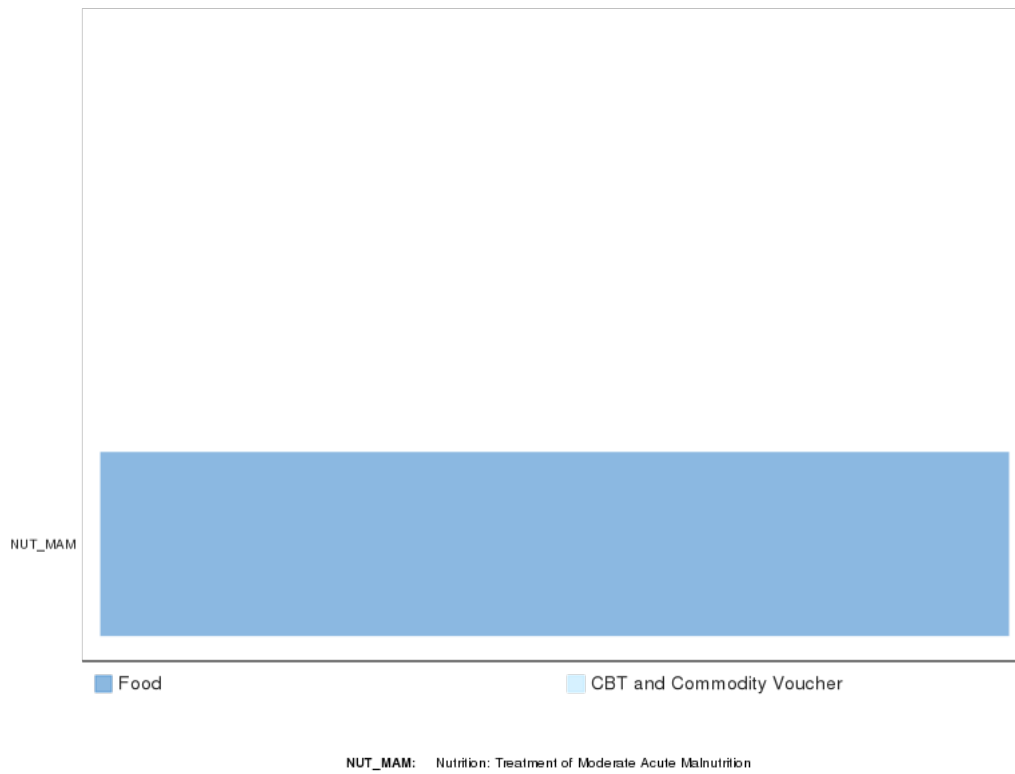
To implement the PRRO’s activities, WFP selected partner NGOs based on their previous experience in humanitarian assistance in the earthquake-affected districts and their past collaborations with WFP. Out of the four partners selected, Support to Poor Producers in Nepal (SAPPROS) had extensive experience in WFP’s FFA activities in the far western region of Nepal and in the earthquake areas during the emergency response operation (EMOP 200668). Similarly, Save the Children had worked with WFP in the CR-EMOP in 2015. The two new partners—*Deutsche Welthungerhilfe E.V* (WHH) and Lutheran World Federation (LWF)—although not directly involved with WFP’s FFA projects in the past, brought experience in delivering emergency services during the earthquake along with several years in livelihood interventions in Nepal. WFP provided training on FFA implementation, including technical monitoring, food distribution management and reporting to the partners, focusing specially on the two new partners WHH and LWF to maximise the outputs expected from them. The training was provided at both the central and district levels. All preparatory activities such as partnership agreements, training, community mobilisation, deployment of WFP and partner staff in the implementing districts and coordinating mechanisms with district and local government authorities were completed in 2016.



Annual Project Beneficiaries by Activity



Modality of Transfer by Activity





## Annual Project Food Distribution

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Ready To Use Supplementary Food	345	17	4.8%
Rice	6,120	-	-
Split Lentils	918	-	-
Vegetable Oil	383	-	-
<b>Total</b>	<b>7,766</b>	<b>17</b>	<b>0.2%</b>



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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned
Cash	7,083,400	-	-
<b>Total</b>	<b>7,083,400</b>	<b>-</b>	<b>-</b>

## Operational Partnerships

WFP closely coordinated with the National Reconstruction Authority and the Ministry of Federal Affairs and Local Development and the National Reconstruction Authority through an extensive process of discussions and joint planning during the designing of the food-assistance-for-assets (FFA) component in the PRRO. Local government and district authorities were also consulted to support the mapping of existing projects in the earthquake affected districts, which helped to focus the geographic areas targeted through FFA on the most food-insecure Village Development Committees (VDCs) in Gorkha, Dhading and Nuwakot, which were some of the worst affected by the earthquakes. The Government of Nepal's approval of WFP's PRRO proposal was received in October 2016.

The partnerships that had been established throughout WFP's many years of implementing FFA projects in the country were important for the selection of appropriate partners for the PRRO's FFA component. Partners were selected based on their previous experience in similar project implementation and their geographic presence in the programme districts. Support to Poor Producers in Nepal (SAPPROS) possessed extensive local knowledge, complemented by a track record of implementing WFP's FFA activities in the far western region of the country. In addition, the two non-governmental organizations (NGOs)—*Deutsche Welthungerhilfe E.V* and Lutheran World Federation—were selected because of their experience in both humanitarian assistance and livelihood interventions in various districts including the earthquake-affected areas. Similarly, Save the Children, one of the international NGOs supporting many child-centred interventions in education, nutrition and protection in Nepal, was selected to carry out the moderate acute malnutrition (MAM) treatment programme as a result of their geographic reach and technical expertise in managing acute malnutrition.

After the project was approved and the geographic areas of intervention were defined in October 2016, WFP finalised the selection of partners, formulated partnership agreements, and trained partner staff both at the central and district level in community mobilisation, beneficiary registration, food and cash distribution management and technical supervision of the rehabilitation work of community assets. WFP's Engineering Unit in the Nepal country office closely coordinated with the partners to provide technical guidance and supervision during implementation.

For the MAM treatment programme, WFP supported the handling and delivery of Plumpy'Sup to the storage points along with the overall coordination with district health authorities, the United Nations Children's Fund (UNICEF) and other stakeholders, and monitored the project's implementation at the district level. At the field level, Save the Children was responsible for community sensitisation, identification and beneficiary registration, final distribution of

the Plumpy'Sup rations and providing key messages on health and nutrition to the beneficiaries. Additionally, Save the Children was responsible for compiling monthly reports that indicated the number of beneficiaries reached and the quantity of supplementary food distributed.

At the national level, coordination of nutrition activities was done through the nutrition cluster, in which WFP was an active member. WFP helped coordinate MAM treatment working group meetings each month to share project information and resolve issues pertaining to both operations and policy guidance. At the field level, WFP's MAM treatment programme was integrated with other on-going activities, such as UNICEF's severe acute malnutrition (SAM) treatment programme and infant and young child feeding (IYCF) programme, to promote synergies between the interventions. Children were screened in the community and at the health posts by mobilising both the female community health volunteers and nutrition assistants, and coordinated services were provided to children suffering from severe or moderate acute malnutrition, following appropriate counselling and treatment protocols.

While Save the Children was WFP's sole cooperating partner in the MAM treatment programme, they generously contributed USD 123,500 to the project during 2016 to cover the associated costs of implementing activities.

## Performance Monitoring

As the start-up of food-assistance-for-assets (FFA) was delayed, no performance monitoring was done for this component in 2016. With regard to the nutrition component, due to limited available resources to conduct technical monitoring, WFP did not undertake a separate outcome monitoring in 2016 for the moderate acute malnutrition (MAM) treatment programme. Instead, WFP followed the results of its partner Save the Children's technical monitoring and reporting of outcomes.

WFP and Save the Children initiated regular monitoring and supervision of project activities following an action plan. WFP's monitoring staff made weekly site visits to monitor the food distributions and provide guidance to Save the Children's nutrition assistants, female community health volunteers and other health workers on WFP's standards and norms for storage, handling and distribution of Plumpy'Sup and record keeping. Registration of children aged 6-59 months was done at health posts, and each beneficiary was given a beneficiary card which they were required to show at each distribution. Save the Children helped to regularly update the beneficiary cards and the MAM registers during each visit, accurately recording the services provided to beneficiaries such as Plumpy'Sup distributions, referrals for medical services, mid-upper arm circumference (MUAC) measurements, observations on medical conditions, and check-ups required at the next visit.

WFP's monitoring staff worked closely with Save the Children's nutrition assistants and health-post staff during the screening process, checking records against the results of the MUAC measurements taken so that inadvertent misdiagnosis and incorrect treatment were avoided. This helped to ensure that technical services such as anthropometric assessment, MUAC measurements, and assessments of weight, height and oedema were accurately provided with minimum errors and omissions, contributing to the provision of quality health care services.

Save the Children deployed nutrition assistants with sound technical training to ensure that malnourished children aged 6-59 months could be correctly identified and referred for treatment. The nutrition assistants followed set protocols for the identification and referrals. Severely malnourished children (with MUAC below 11.5 cm or weight for height (WFH) z score above or equal to 3 (<-3SD) or bilateral pitting oedema) were referred for treatment to the nearest health post. Children with MAM (with MUAC equal to or more than 11.5 cm (>-11.5) and less than 12.5 cm (<12.5) without oedema), were admitted to the MAM treatment programme.

WFP, through its partner Save the Children, supported the compilation of monthly reports covering the quantity of Plumpy'Sup distributed, the number of children screened for MAM in the community or at health posts, the number of children newly admitted to the MAM treatment programme during the day, and the number referred to the severe acute malnutrition (SAM) treatment programme in the same districts, operated by the Government and supported by the United Nations Children's Fund (UNICEF). Also recorded were the number of children discharged from the programme following recovery, those who did not respond to the treatment (non-responders), children who had irregular attendance in the programme (defaulters), and the mortality rate.

The MAM treatment programme aimed at meeting the minimum SPHERE performance standards—to achieve a rate of recovery over 75 percent (>75), to keep both defaulters and non-respondent children under 15 percent (<15) and to keep mortality under 3 percent (<3) among children aged 6-59 months. The nutrition assistants checked each treatment site's performance on a monthly basis. Under-performance of each indicator was explained and documented allowing project managers and nutrition assistants to take remedial measures to improve the quality and timely delivery of services.

## Results/Outcomes

- **Strategic Objective**  
: Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies (SO2)
- **Outcome**  
: Stabilized or reduced undernutrition, including micronutrient deficiencies among children aged 6–59 months, pregnant and lactating women, and school-aged children
- **Activity**  
: Treatment of moderate acute malnutrition (MAM) through targeted supplementary feeding modality (TSFP) in Gorkha, Sindhupalchowk and Dolakha districts

In preparation for the distribution of supplementary food, WFP with the support of partner Save the Children established 51 distribution sites in the government health posts in the three districts. Save the Children deployed their trained nutrition assistants in the selected communities and in the treatment programme sites to support the government-recruited female community health volunteers (FCHV) during the monthly screening of children using the mid-upper arm circumference (MUAC) measurement. Forty-seven government health staff were also trained in screening, monitoring and reporting. This helped to speed up the identification of acutely malnourished children and refer them to the TSFP centres according to their nutritional status. The malnourished children were treated with the Plumpy'Sup (a take-home ration of 92 grams per child per day for three months) under careful monitoring of their progress.

All the children who underwent the screening process received the regular nutrition services provided by the Government at the health posts. These services included counselling and behaviour change communication on the promotion of breastfeeding and complementary feeding to mothers and caregivers through infant and young child feeding (IYCF) activities, iron and vitamin A supplementation, and de-worming treatment. The nutrition assistants helped maintain the MAM registers at the health posts supported the FCHVs and health staff in giving nutrition counselling to 4,000 parents, caregivers and other community members who received nutrition counselling. At these sessions, participants learned at least three key messages related to maintaining balanced nutrition and preventing malnutrition. Since WFP did not undertake outcome monitoring as a result of insufficient funds received in 2016, it was not possible to report the number of people who could recall three key messages that they had learned. Reporting on monthly achievements, Save the Children produced three SMART Nutrition Survey reports during the programme's implementation with WFP's guidance and support.

Community outreach was a key element of the Government's nutrition services and was improved through the FCHVs and the nutrition assistants. The improved outreach helped remote communities to better access the nutrition services made available from the health posts. This was the primary method of community level screening for acute malnutrition and referral to treatment for MAM or severe acute malnutrition (SAM), for tracing defaulters and to convince caregivers to resume treatment. These outreach activities provided parents and caregivers of children aged 6-59 months as well as their communities with information on the importance of balanced nutrition that could help them recognise the early signs of malnutrition and seek timely assistance.

Although no outcome monitoring was done, WFP relied on Save the Children's regular monitoring and reporting of the key MAM performance indicators to understand the progress of the project, any challenges and remedial measures required to overcome them. The performance records maintained by Save the Children indicated that the overall default rate was 11 percent, which was lower than the benchmark of 15 percent, while the recovery rate for all districts was 82 percent, well over the 75 percent target. According to Save the Children's records, all the treated children responded to the treatment (0 percent non-respondent rate). Furthermore, there were no deaths (0 percent mortality rate) during the period of assistance. In terms of the coverage of the MAM treatment programme, WFP and Save the Children achieved excellent results (94 percent), which was well over the set target of the programme (50 percent).

However, it was noted that in Gorkha district, a high number of children (74.5 percent) had defaulted on their clinic attendance. This was likely because of the significant time taken to cover the long distances between the treatment sites and villages situated high in the mountains, which made it difficult for families to comply with the requirement of follow-up visits. Given their agriculture-based livelihoods, most families considered their household and farming work to be of a higher priority than attending the monthly clinics, due to the need to cultivate and gather harvests in time to avoid food shortages during the lean seasons—a reflection of the difficult conditions that families living in the high-altitude regions have to endure.

To further develop government and partner capacities, WFP conducted a four-day master training of trainers on the government implementation guidelines of the integrated management of acute malnutrition (IMAM) programme, for central and district health officials, nutrition focal persons and statisticians from the Child Health Division, and key staff from Save the Children and other national non-governmental organizations (NGOs). This produced a



resource pool of trainers on IMAM for each of the 11 earthquake-affected districts originally proposed for the TSFP, including Gorkha, Sindhupalchowk and Dolakha districts. The centrally trained resource persons conducted the district-level training of trainers to extend the resource pool, who in turn facilitated the IMAM training for health workers, FCHVs and community members.

Through these activities, WFP reached 2,962 children under 5 years of age in three districts in 2016. Although the initial plan included 41,000 children in 14 districts, the limited resources available for the PRRO compelled WFP to reduce the beneficiary plan to 3,344 children in only three districts. This resulted in an under-achievement when compared with the originally planned number of beneficiaries, although WFP actually reached 88 percent of the reduced plan of 3,344 children by the end of 2016. The capacity development activities undertaken by WFP and partners showed visible results since the MAM treatment programme was well-implemented with minimum technical errors. Recognising the positive results achieved in 2016, the Government has agreed that WFP may further support the MAM treatment programme until mid-2017, in line with available project resources.

- **Strategic Objective**  
: Reduce risk and enable people, communities and countries to meet their own food and nutrition needs (SO3)
- **Outcome**  
: Risk reduction capacity of countries, communities and institutions strengthened
- **Activity:**  
Food assistance for assets (FFA) in Gorkha, Dhading and Nuwakot districts

FFA activities in the PRRO were not implemented in 2016 due to the delayed government approval that resulted in a late start of the project. The FFA activities were carried over to 2017; however, preliminary activities such as selection of assets for repair, selection and training of partners, and mobilisation of the community and local authorities was done in 2016. WFP did not undertake separate outcome monitoring of the FFA activities, but annual outcome monitoring will be done from 2017 and will be reported accordingly.

The National Capacity Index is normally measured every two years, as per WFP's corporate guidelines. The National Capacity Index (NCI) measures change in capacity level according to milestones agreed to against a country's overarching capacity strengthening objectives. In 2016, WFP did not hold the stakeholders' workshop to assess the NCI on resilience in 2016 as the FFA component was not implemented. In 2017, along with the annual outcome monitoring, WFP will make arrangements with the government authorities to assess the resilience NCI.

## Progress Towards Gender Equality

The main focus of WFP's MAM treatment programme was on children aged 6-59 months and their caregivers, particularly mothers as the primary beneficiaries of the overall distribution of supplementary food and other nutrition services, hence beneficiary cards and maternal and child health cards were distributed in the names of children and women. In Nepal's cultural context where men are invariably the heads of households, the decision-makers, and the primary receivers of services, beneficiary cards in the name women and children helped to prioritise the nutrition needs of women and children that may have otherwise taken a back seat. It helped create community awareness of the importance of prioritizing food and nutrition for women and children and of the need to correctly utilize the WFP supplied the ready to use supplementary food (RUSF) to prevent acute malnutrition in their children. As a result, both men and women came to collect the RUSF and participated in follow-up visits with the children.

Partner Save the Children hired more women as nutrition assistants in each district to support the female community health volunteers. In male-dominated rural households, women often do not have many opportunities for expanding their knowledge, and mostly resort to traditional practices in child care. In this background, there was the need to actively involve more women as nutrition assistants and female community health volunteers, so that mothers and female caregivers could easily relate to them and express their questions and concerns and gain exposure to new knowledge and practices. This helped to successfully implement WFP's MAM treatment interventions at the community level. The large numbers of female volunteers in the programme helped to expand the outreach of interventions to families in many remote village development committee areas (VDC) who would otherwise not have come to the health posts due to the long distance they have to travel. The female staff were able to build a rapport with mothers and female caregivers and provide them the space for voicing their questions and concerns and also make them understand the importance of the screening and treatment programme.

During the designing of the implementation strategy, WFP included gender considerations in partner's agreements, requiring that partners needed to ensure that assistance was placed directly in the hands of women, and that women received prominent consideration in beneficiary selection and targeting. They had also to ensure that such actions did not expose women to risks of abuse or violence in any form. Partners were also required to carry out community sensitization to promote gender justice and equality, particularly in decision making and sharing of

project benefits and to ensure participation of women and marginalized groups in project activities.

In terms of promoting women's participation in lead roles in the management of assistance, WFP will advocate for having an increased number of women in leadership positions in the community led project management committees known as User Committees, when the FFA component starts its implementation in 2017. This is aimed at empowering women to take on leadership roles through which they can increase their decision making power so that balanced voices and opinions are included in any community decisions. In addition, during food and cash distribution activities, WFP will have separate waiting areas for women and men, and will also give priority to pregnant women as well as the elderly and the disabled. Help and complaints mechanisms will be made available to beneficiaries both at distribution sites and via the toll-free line "Namaste WFP" (Hello WFP), to seek information about WFP activities in their villages. Trained women will be available to respond to gender-sensitive calls, including those that may be protection-related.

As the FFA component of the PRRO was not implemented in 2016 due to the late start resulting from long delays in government approval of the projects, outcome monitoring was not done by WFP in 2016, hence the data for gender indicators could not be collected. A full outcome monitoring cycle will be implemented in 2017 when the FFA component is also implemented and WFP will then report on the gender indicators.

## Protection and Accountability to Affected Populations

WFP's partner Save the Children organized monthly meetings to discuss the progress of programme activities and provided bi-weekly and fortnightly updates on the ongoing status at Village-Development-Committee (VDC) and health-post level. Members of the government-led Health Facility Operations Management Committee at the VDC level, female community health volunteers, local leaders and social activists were regularly invited for these meetings to exchange information in an effort to increase accountability to all stakeholders.

Nutrition assistants and health workers explained to the parents and caregivers the reasons why their child needed treatment. After registration, a reference number was assigned for each child. The daily ration of 92 grams of Plumpy'Sup per child per day (equivalent to 14 sachets) was then distributed, as per the treatment protocol. Furthermore, it was ensured that upon admission, the children received vitamin A supplements as appropriate, following World Health Organization (WHO) guidelines to detect clinical signs of vitamin A deficiency.

Nutrition assistants and health workers provided clear messages to the mothers and caregivers during infant and young child feeding counseling, especially on how much Plumpy'Sup the children will receive, and the need to feed the correct amount of the ready-to-use supplementary food (RUSF). The repercussions of non-consumption of the RUSF and other nutritious food was also highlighted. Demonstrations on the use of the Plumpy'Sup were also conducted at the health posts or at the community level. The female community health volunteers and nutrition assistants closely monitored the moderate acute malnutrition (MAM) children on a regular basis by visiting as many households as possible to see whether the children—particularly children who defaulted or appeared not to respond to treatment—were taking the RUSF as per the given instructions.

To better inform parents and caregivers, posters, flipcharts and brochures were widely used at the health posts and during community outreach to clearly impart knowledge about malnutrition in children, sources of vitamins and minerals, major nutritional elements found in food, importance of breastfeeding, complementary feeding, amount and frequency of food, and hygiene and sanitation. Posters that highlighted benefits of the MAM treatment programme under the national integrated management of acute malnutrition guidelines, with details of the Plumpy'Sup and the rations that children will receive, were displayed prominently during outreach programs. Flyers and brochures introduced the Plumpy'Sup, its effects on creating healthy and active children, the amount that each child is entitled to receive and how to use it in the correct manner. Signboards showing the contributions from the Government, WFP and partners Save the Children and the United Nations Children's Fund (UNICEF) were put up at each health post and displayed the total estimated numbers of both MAM and severe-acute-malnutrition-afflicted children.

As no outcome monitoring was conducted by WFP in 2016, the protection indicators relating to beneficiaries being informed about the programme and their safety while travelling to and from assistance sites were not separately measured. However, from the information and education campaign conducted at health post and village level, it could be ascertained that people were generally informed about the MAM treatment programme. Similarly, no safety and security incidents were reported from beneficiaries as indicated by the partner Save the Children. However, the parents and caregivers could always report any such incidents and seek support from government health staff, WFP monitoring staff, and nutrition assistants during community level screening programs and at the health posts.

## Lessons Learned and Story Worth Telling

### LESSONS LEARNED

The earthquake emergency response led the way for the Government to undertake relevant changes to the state bodies that managed the activities. The formation of the National Reconstruction Authority was one of the results of these changes. In the approval process of the PRRO and the joint planning with the Government, WFP was not fully aware of the changed mandates of each government agency in the post-earthquake scenario, which in turn led to more time spent on obtaining the clearances from the applicable state agencies in the approval process.

In terms of the significance to public health, the nutrition status in Gorkha, Sindhupalchowk and Dolakha districts remained poor and moderately severe even after the initial emergency nutrition response, as revealed by a Nutrition Survey conducted by Save the Children in May 2016. It was also observed that among the wasted children (WH <-2SD), 42.9 percent were also stunted, while 82.1 percent were underweight on top of wasting. As children who suffer from multiple types of undernutrition face an increased risk of mortality compared with children having one type of undernutrition, any child survival and nutrition interventions needed to essentially focus more on children suffering from multiple types of undernutrition. The study further suggested that integration of nutrition counselling with food-security-and-livelihood support packages for earthquake-affected poor families might increase the overall impact with regard to nutritional outcomes. This was based on the review of the results of complementary feeding practices.

The implementation of the treatment of moderate acute malnutrition (MAM) programme should be continued through the health posts for children suffering from both severe and moderate acute malnutrition. Since under-nutrition in Nepal is very much linked to the lean agricultural season the harvest, and post-harvest situation in these districts, it will be important to look at trends of under-nutrition during different times of the year and the evolution throughout the years. WFP's experience indicated that analysis of barriers for MAM treatment coverage needs to be carried out in order to identify and remove key barriers that hinder systematic screening, registration, admissions, treatment and the referral mechanism. At the same time, it was found to be necessary to further reinforce growth-monitoring and promotion activities at the health posts, focusing on identifying growth failure and promoting age appropriate infant-and-young-child-feeding (IYCF) practices. It would also be equally important to conduct an assessment of locally available foods to develop context-specific information, education and communication materials for IYCF practices for children aged 6-23 and 24-59 months.

### STORY WORTH TELLING

Carrying her six month old baby Karan on her back, Bhagwati trudged on through the narrow trails leading to the local health post in the Namdu Village Development Committee area in Dolakha district. She recalled her last visit to the health post in May 2016 to get medicine for Karan for fever and to make him start eating again. But the health staff had told her a different story. It had been a shock to learn that Karan was malnourished after all the trouble she took to ensure that he had at least a little food every day. "I had never imagined that my baby would be malnourished. I did not even know what it meant. I thought I was feeding him right, but he would cry more often, wouldn't eat anything solid, and wanted only to drink my milk."

Thinking back later, Bhagwathi realized that malnourishment was the reason for Karan's strange behavior that she could not understand at the time. She had noticed the change in Karan for several weeks. He was cranky and inactive and would refuse to eat solid food and only drink mother's milk. At the health post, Karan weighed six kilograms, had a mid-upper arm circumference (MUAC) of 12.3 cm, and was immediately identified as being moderately malnourished. The nutrition assistant explained what it meant to Bhagwathi and gave her 14 packets of Plumpy Sup, telling her clearly how much she will receive and how to give the correct amount to her baby.

At first, Karan refused to eat the Plumpy'Sup, spitting it out as soon as the paste entered his mouth. But Bhagwati did not give up and managed to feed him most of the food. Gradually Karan got used to the taste after being fed every day. In the first follow-up visit in June 2016, Karan's weight had increased to seven kilograms, and this encouraged Bhagwati to try harder to feed the full ration to Karan. It was not so difficult now to feed him the full packet each day, and she also made it part of her daily routine to give him lentil soup, rice porridge and fruits as best as she could along with the Plumpy'Sup.

Each day Bhagwati saw small improvements in her son. "These days, he doesn't cry a lot, he plays with his toys and eats well. I feel very glad."

In early July 2016, Karan's MUAC measured at 12.5 cm, and he had gained weight by half a kilo. Bhagwati heaved a sigh of ardent relief when the health staff told her that Karan was slowly emerging out of the "yellow" category and into the healthier "green" zone in the MUAC tape.

After another month of treatment, baby Karan was finally discharged in late July when his MUAC measurement had improved to 13.5 cm and he had a constant weight. Bhagwati was happy to share the knowledge she gained from this experience. "I always tell the mothers in our village who have newborns or little children to get them checked in the health post. Learning about malnutrition and how to avoid it can save our children," she said earnestly.

# Figures and Indicators

## Data Notes

Cover page photo: © Save the Children/ Dr. Adhish Dhungana.

*A child being screened for malnutrition at the Charikot health post in Dolakha district, during WFP's three-month programme to identify and treat acutely malnourished children. WFP used a targeted supplementary feeding modality where each child received a daily ration of "Plumpy Sup", the ready-to-use supplementary food which helped many children to recover completely.*

## 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	168,334	181,946	350,280	1,016	1,946	2,962	0.6%	1.1%	0.8%
<b>By Age-group:</b>									
Children (under 5 years)	22,007	22,007	44,014	1,016	1,946	2,962	4.6%	8.8%	6.7%
Children (5-18 years)	57,850	61,253	119,103	-	-	-	-	-	-
Adults (18 years plus)	88,477	98,686	187,163	-	-	-	-	-	-
<b>By Residence status:</b>									
Residents	168,334	181,946	350,280	1,016	1,946	2,962	0.6%	1.1%	0.8%

## 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-Assistance-for-Assets	170,001	170,001	340,002	-	-	-	-	-	-
Nutrition: Treatment of Moderate Acute Malnutrition	10,278	-	10,278	2,962	-	2,962	28.8%	-	28.8%

## 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-Assistance-for-Assets	35,417	35,417	70,834	-	-	-	-	-	-
Nutrition: Treatment of Moderate Acute Malnutrition	10,278	-	10,278	2,962	-	2,962	28.8%	-	28.8%

## 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)
<b>Food-Assistance-for-Assets</b>									
People participating in asset-creation activities	34,709	36,125	70,834	-	-	-	-	-	-
Total participants	34,709	36,125	70,834	-	-	-	-	-	-
Total beneficiaries	163,201	176,801	340,002	-	-	-	-	-	-

## 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)
<b>Nutrition: Treatment of Moderate Acute Malnutrition</b>									
Children (6-23 months)	2,467	2,672	5,139	68	127	195	2.8%	4.8%	3.8%
Children (24-59 months)	2,672	2,467	5,139	948	1,819	2,767	35.5%	73.7%	53.8%
Total beneficiaries	5,139	5,139	10,278	1,016	1,946	2,962	19.8%	37.9%	28.8%

## Project Indicators

### Outcome Indicators

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>SO2 Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies</b>				
<b>Stabilized or reduced undernutrition, including micronutrient deficiencies among children aged 6–59 months, pregnant and lactating women, and school-aged children</b>				
<b>MAM treatment recovery rate (%)</b>				
<i>TSFP BENEFICIARIES/NEPAL, Project End Target: 2018.12, MAM treatment performance reports, Latest Follow-up: 2016.12, Secondary data, Programme records</i>	>75.00	-	-	90.20
<b>MAM treatment mortality rate (%)</b>				
<i>TSFP BENEFICIARIES/NEPAL, Project End Target: 2018.12, MAM treatment performance reports, Latest Follow-up: 2016.12, Secondary data, Programme records</i>	<3.00	-	-	0.00
<b>MAM treatment default rate (%)</b>				
<i>TSFP BENEFICIARIES/NEPAL, Project End Target: 2018.12, MAM treatment performance reports, Latest Follow-up: 2016.12, Secondary data, Programme records</i>	<15.00	-	-	9.80
<b>MAM treatment non-response rate (%)</b>				
<i>TSFP BENEFICIARIES/NEPAL, Project End Target: 2018.12, MAM treatment performance reports, Latest Follow-up: 2016.12, Secondary data, Programme records</i>	<15.00	-	-	0.00
<b>Proportion of eligible population who participate in programme (coverage)</b>				
<i>TSFP BENEFICIARIES/NEPAL, Project End Target: 2018.12, MAM treatment performance reports, Latest Follow-up: 2016.12, Secondary data, Save the Children records</i>	>50.00	-	-	93.70
<b>SO3 Reduce risk and enable people, communities and countries to meet their own food and nutrition needs</b>				
<b>Risk reduction capacity of countries, communities and institutions strengthened</b>				
<b>Proportion of targeted communities where there is evidence of improved capacity to manage climatic shocks and risks supported by WFP</b>				
<i>C/FFA BENEFICIARIES/NEPAL, Project End Target: 2018.12, Outcome monitoring survey</i>	>60.00	-	-	-

## Output Indicators

Output	Unit	Planned	Actual	% Actual vs. Planned
<b>SO2: Nutrition: Treatment of Moderate Acute Malnutrition</b>				
Number of nutrition monitoring/surveillance reports produced with WFP support	report	3	3	100.0%
Number of beneficiaries/caregivers who received messages/training on health and nutrition	individual	600	575	95.8%
Number of government counterparts trained in data collection and analysis on food and nutrition security	individual	54	47	87.0%
Number of people receiving nutrition counseling supported by WFP	individual	4,276	4,145	96.9%
Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counseling	individual	4,276	-	-

## Gender Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>Proportion of households where females and males together make decisions over the use of cash, voucher or food</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	=50.00	-	-	-
<b>Proportion of households where females make decisions over the use of cash, voucher or food</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	=25.00	-	-	-
<b>Proportion of households where males make decisions over the use of cash, voucher or food</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	=25.00	-	-	-
<b>Proportion of women beneficiaries in leadership positions of project management committees</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	>50.00	-	-	-
<b>Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	>90.00	-	-	-

## Protection and Accountability to Affected Populations Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	>80.00	-	-	-
<b>Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)</b>				
<i>NEPAL, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12</i>	>80.00	-	-	-
<b>Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site</b>				
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	>90.00	-	-	-
<b>Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site</b>				
<i>NEPAL, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12</i>	>90.00	-	-	-

## Partnership Indicators

Cross-cutting Indicators	Project End Target	Latest Follow-up
<b>Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)</b>		
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	>20.00	-

Cross-cutting Indicators	Project End Target	Latest Follow-up
<b>Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)</b>		
<i>NEPAL, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12, Latest Follow-up: 2016.12</i>	>20.00	123,500.00
<b>Number of partner organizations that provide complementary inputs and services</b>		
<i>DOLAKHA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12, Latest Follow-up: 2016.12</i>	=1.00	1.00
<b>Number of partner organizations that provide complementary inputs and services</b>		
<i>GORKHA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12, Latest Follow-up: 2016.12</i>	=1.00	1.00
<b>Number of partner organizations that provide complementary inputs and services</b>		
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	=3.00	-
<b>Number of partner organizations that provide complementary inputs and services</b>		
<i>SINDHUPALCHOK, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12, Latest Follow-up: 2016.12</i>	=1.00	1.00
<b>Proportion of project activities implemented with the engagement of complementary partners</b>		
<i>NEPAL, Food-Assistance-for-Assets, Project End Target: 2018.12</i>	=100.00	-
<b>Proportion of project activities implemented with the engagement of complementary partners</b>		
<i>NEPAL, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2018.12, Latest Follow-up: 2016.12</i>	=100.00	100.00

## Resource Inputs from Donors

### Resource Inputs from Donors

Donor	Cont. Ref. No.	Commodity	Purchased in 2016 (mt)	
			In-Kind	Cash
MULTILATERAL	MULTILATERAL	Ready To Use Supplementary Food	-	22
MULTILATERAL	MULTILATERAL	Rice	-	960
MULTILATERAL	MULTILATERAL	Split Peas	-	173
Private Donors	WPD-C-03231-01	Rice	-	99
Private Donors	WPD-C-03337-01	Rice	-	141
		<b>Total</b>	-	<b>1,394</b>