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Country Programme - Guinea (2013-2017)

Standard Project Report 2016

World Food Programme in Guinea, Republic of (GN)



World Food Programme

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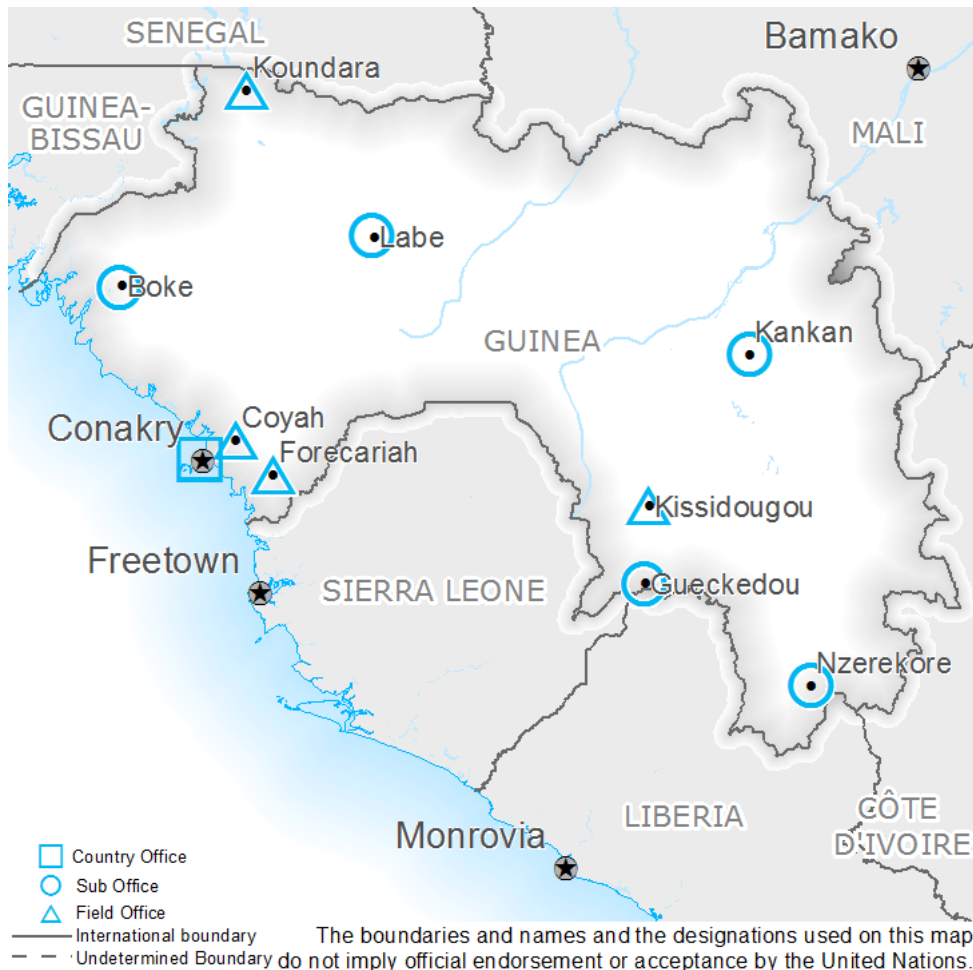
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Country Context and WFP Objectives



Country Context

Located in West Africa, the Republic of Guinea is a low-income and food-deficit country with a population of about 12 million. The 2015 United Nations Development Programme (UNDP) report ranked Guinea 182 out of 188 countries on Human Development Index. Despite an abundance of natural resources, Guinea is classified as one of the poorest countries in the world and is facing major socio-economic and political challenges.

Guinea held presidential elections in October 2015 and the incumbent was elected for a second five-year term. Despite a peaceful electoral process, there is always a risk of political instability and social conflicts.

In March 2014, Guinea was hit by the worst epidemic of the Ebola virus disease in history, which killed more than 2,500 people. Guinea has one of the world's weakest health systems, and the epidemic damaged the existing health infrastructure. In an already fragile context, the country, which was declared Ebola free on 29 December 2015, suffered widespread social, economic and political consequences after years of conflict, political instability and high levels of poverty. Curfews and trade restrictions created in response to the Ebola epidemic have had an impact on the daily lives and livelihood economic activities. In 2015, 30.5 percent of the households suffered from food insecurity, and this affected about 1.9 million people [1].

Nearly 6.1 percent children under 5 suffer from moderate acute malnutrition and 2 percent are severely malnourished contributing to a Global Acute Malnutrition (GAM) rate of 8.1 percent. The highest GAM rate is 14.5 percent in Siguiri prefecture in Kankan region. Chronic malnutrition stands at 25.9 percent for children under 5. At the national level, 77 percent of children aged 6-59 months and 49 percent of women are anaemic [2].

According to the Demographic Health Survey of Guinea (EDSG IV), the rate of national HIV prevalence is 1.7 percent in 2012, increased from the rate of 1.5 percent in 2005. The prevalence rate is higher among women (2.1 percent) than men (1.2 percent). Regarding regions, Conakry (2 percent), Mamou (1.7 percent) and Nzérékoré (1.7 percent) have higher prevalence rates than the national prevalence rate.

Moreover, 24.3 percent of people living with HIV under anti-retroviral treatment (ART) and women assisted under the prevention of mother-to-child transmission (PMTCT) intervention, are malnourished and 13.3 percent of them remained malnourished even after the six-month treatment, according to the national survey on the nutritional status and vulnerability to food insecurity, conducted in 2014 by the National Committee for the Fight Against AIDS (CNLS) and WFP.

Since 2013, with the Scaling Up Nutrition (SUN) and Renewed Efforts Against Child Hunger and Undernutrition (REACH) initiatives in Guinea, simple nutritional interventions, low cost and high impact on reduction of malnutrition were gradually introduced in some parts of the country. These nutritional interventions interacted with the health, water, hygiene, sanitation, agriculture and communications sectors. Related sectors such as agriculture, education and community development have an important role to play.

Improvement of health conditions and resilience capacity building through nutrition is key to Guinea. The population is mostly young and people are affected by severe health problems such as epidemics, HIV and malaria. Food insecurity and malnutrition accelerate the spread of the disease by weakening the immune system and increasing vulnerability to contracting viruses and reducing labour force.

The Ebola virus disease epidemic had a negative impact on food security. The closure of borders and markets, and the stigmatisation of products from the affected areas led to limited supply, higher prices and reduced exports. According to an emergency food security assessment carried out in June 2015 by WFP, Food and Agriculture Organization of the United Nations (FAO) and the Government, the areas where the Ebola disease virus cases were recorded are the most severely affected by food insecurity. The assessment also showed that food insecurity will persist for some time.

The World Bank epidemic report on the Ebola outbreak 2014–2015 indicated that the Ebola virus disease had a significant socio-economic impact. At the height of the epidemic, the Guinean economy suffered from border closures, withdrawal of foreign investors and people in vulnerable areas losing their jobs. In addition, agricultural fields were abandoned in the most affected rural areas. The rate of post-harvest losses was high (20-30 percent) and smallholder farmers had limited access to markets.

Like many countries in sub-Saharan Africa, girls lag far behind boys in terms of school attendance and completion rates. As per the national statistics of 2015/16 [3], the completion rate of primary education across the country is 50.9 percent and, when desegregated by sex, is 69.7 percent for boys and 49.5 percent for girls. It is noted that 30 percent of girls and 13 percent of boys in Guinea have never been to schools. Providing a daily nutritious hot meal, as well as take-home rations for girls, contributes as a major incentive to enrolment.

Raising levels of education, nutrition and food security in Guinea will therefore better prepare the country to reduce vulnerability and help strengthen economic growth.

[1] Emergency Food Security Assessment (EFSA), 2015.

[2] Standardized Monitoring and Assessment of Relief and Transitions (SMART), 2015.

[3] *Annuaire statistique de l'enseignement primaire 2015/2016*.

Response of the Government and Strategic Coordination

WFP signed a Letter of Understanding with the ministries in charge of education, health, agriculture and international cooperation. The work plans are aligned with national and the United Nations Development Assistance Framework (UNDAF) priorities.

The WFP school meals programme is implemented in collaboration with the Ministry of Education that appointed a School Meals focal point in each of the prefectures where the programme is implemented. These focal points, trained by WFP to supervise and monitor the activities in each school within their area, report to both WFP and the Ministry of Education on a monthly basis. WFP is planning to partner with Plan International to increase effectiveness and synergy in the implementation of the school meals programme.

WFP continues to strengthen the operational capacities of the school canteens through the *Direction Nationale des Cantines Scolaires* (DNCaS) appointed by the Government in 2015. Through the training and technical support provided by WFP, the DNCaS successfully promoted the training sessions for the implementation of 50 pilot school canteens fully funded by the Government during the 2015/16 school year. Since the country office is going through

financial constraints, WFP and the Ministry of Education have agreed to hand-over 300 WFP school canteens to the DNCaS, which is yet to take place, given limited government capacity. The country office continues the follow up with the Ministry of Education so that the DNCaS will receive all the support needed from the central government to achieve its objectives.

WFP follows up with the Ministry of Education to ensure that a working group is formalised and operational for the implementation of the national school meals and the drafting of a school meals strategy within a multi-sectorial approach. No significant progress was made in 2016 and consultations will continue in 2017.

WFP's main partner in the implementation of nutrition activities is the Ministry of Health through the Food and Nutrition Division (DAN), *Directions Regionales de la Santé* (DRS), and *Directions Prefectorales de la Santé* (DPS). WFP supports the Government in the revitalisation of the economy post Ebola and in the process of economic and social development through active participation in the drafting of the National Program for Economic and Social Development (PNDES) to contribute to the fight against hunger in accordance with the Sustainable Development Goal (SDG) 2.

Throughout 2016, WFP encouraged the above institutions to adopt a results-based approach. Partnerships continue with national non-governmental organizations (NGOs) for the execution of activities in the following regions: Labé, Kankan, Nzerekore and Conakry. However, these NGOs suffer from limited human and financial resources which challenges coordination of nutrition interventions in Guinea.

WFP participates in the Renewed Efforts Against Child Hunger and Undernutrition (REACH) initiative and in the Scaling Up Nutrition (SUN) platform. Main actors of the initiatives include the Government, United Nations (UN) agencies, national and international NGOs: the Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Children's Fund (UNICEF), World Health Organization (WHO), Food and Agriculture Organization of the United Nations (FAO), French Development Agency (AFD), Helen Keller International and *Terre des Hommes*. During the Ebola virus epidemic, nutrition activities were coordinated through the nutrition-food security cluster. At the end of the Ebola virus epidemic, nutrition activities were coordinated by the Food and Nutrition Division of the Ministry of Health.

In health facilities, UNICEF and WFP use a complementary approach in nutrition. WFP focuses on the prevention of malnutrition (chronic and acute) and the treatment of moderate acute malnutrition, whereas UNICEF focuses on treatment of severe acute malnutrition and prevention of chronic malnutrition. Statistical data on the management of acute malnutrition is compiled by the nutrition section of UNICEF. One of the priorities for the coordination of nutrition activities in 2017 will be to equip the Food and Nutrition Division of the Ministry of Health with the capacity to appropriate and manage the Nutrition Statistical Database.

Nutrition surveys at national level are coordinated during nutrition coordination meetings at national and regional levels. WFP supported the National AIDS Committee in implementing the 2016 Action Plan and is currently in a partnership process with Sant'Egidio (DREAM Centre) through the HIV national committee, *Comité National de Lutte contre le Sida* (CNLS) and the Global Fund for the implementation of nutrition activities to support HIV client and their households. Implementation of the activities will take place in 2017 under the leadership of the CNLS. WFP collaborates with UNAIDS through the Joint United Nations Team on AIDS (JUNTA) focusing on annual activity planning, progress monitoring, and annual review and report.

Implementation of activities under the food security component is based on partnership with the Government, mainly the Ministry of Agriculture, and with selected national NGOs. The intervention of several actors – Union groups, NGOs, technical services of the Ministry of Agriculture, technical and financial partners such as the International Fund for Agricultural Development (IFAD), FAO, World Bank, French Development Agency – require strategic coordination and synergy.

Summary of WFP Operational Objectives

Under the five-year Country Programme 200326 (2013–2017), with an approved budget of USD 53 million, WFP promotes access to education, particularly for girls; supports rural development; and implements supplementary feeding for nutrition programmes for malnourished women and children, and people living with HIV.

Through the school meals programme, WFP aims to increase enrolment and attendance rates of primary schoolchildren, reduce disparities between boys and girls in school, reduce short-term hunger and enhance overall learning ability. In line with national priorities to achieve Sustainable Development Goals (SDGs), the Government of Guinea has made it mandatory to enrol school age children in primary school.

The nutrition component aims to improve the nutritional situation of targeted vulnerable people, including children aged 6-59 months, pregnant and lactating women, and malnourished people living with HIV (PLHIV) and

tuberculosis (TB) patients. WFP approach to nutrition has taken into consideration the results of the Standardized Monitoring and Assessment of Relief and Transitions (SMART) and Emergency Food Security Assessment (EFSA) that took place in 2015, which demonstrated that the nutritional status of already vulnerable groups, especially among children, is further exacerbated by factors such as infectious diseases, parasitic disorders and food insecurity. WFP provides food assistance to malnourished PLHIV under anti-retroviral treatment (ART) and TB patients to improve their adherence to treatment, and nutrition assistance to address micronutrient deficiencies and chronic malnutrition. WFP facilitates the coordination of nutrition interventions through the Renewed Efforts Against Child Hunger and Undernutrition (REACH) and Scaling Up Nutrition (SUN) initiative.

The third component aims to enhance access to markets for the smallholder farmers, in order to: i) improve food security, ii) increase capacity strengthening, and iii) increase resilience to improved livelihoods in fragile communities. This component also aims to: increase food diversity and encourage communities to provide vegetables to school canteens; increase local purchase of food for program beneficiaries; and strengthen the capacities of smallholder farmers.

WFP provides support to groups of producers, enabling them to improve their marketing and gardening techniques, in order to enhance their ability to provide fresh food to school meals programmes. Groups of producers are encouraged to allocate a portion of their production to supply the schools as their contribution to take in charge one day ration per week. In return they benefit through food assistance for assets activities for a given period. Advice and support services are provided to groups of producers by the Ministry of Agriculture, with technical support from the Food and Agriculture Organization of the United Nations (FAO).

WFP aims to strengthen capacities of government departments such as *Service National d'Action Humanitaire* (SENAH), *Bureau de Stratégie et du Développement* (BSD) and the National Agency for Agriculture and Food Statistics, to respond to humanitarian crises through training workshops.

WFP plans to implement cash-based transfers for vulnerable women in the communities, and to conduct food security analysis and market price monitoring.

WFP special operation aims at providing uninterrupted logistical services in storage, transportation, information technology services and infrastructure to the Government and other humanitarian actors. Through the United Nations Air Humanitarian Service (UNHAS) special operation, WFP enables the humanitarian community's safe access to project implementation sites, and transport of critical medical supplies as well as staff evacuation.

Country Resources and Results

Resources for Results

The country programme was implemented with the support of several donors. In 2016, the mobilization of financial resources covered 78 percent of needs and more than half were earmarked for specific projects. It should be noted that these contributions were available in the beginning and the middle of 2016.

In addition to the donors' financial contribution, local communities provided fresh food for school meals. This had a positive impact on the implementation of the school meals programme.

WFP involved sectoral ministries in the customs clearance process that allowed to respect the chronogram of the different activity, but also, to reinforce the visibility of the partnership with the Guinean government.

The unexpected increase in the number of school canteens in the last quarter of 2016 (higher than 6 percent) led to a resource shortfall and consequently to a reduction of days school meals were provided. Efforts in communication and advocacy encouraged communities to contribute in caring for a meal day in order to complete the five meals per week.

In 2016, the Food Assistance for Assets programme had limited resources, but communities contributed through workforce and provided lands and seeds.

The nutrition activities were mostly covered in 2016, with donor support and the carry-over stock from the EMOP. The Government and cooperating partners provided storage facilities and covered part of the costs of staff in charge of the distribution.

The special operation was funded at 73 percent. A budget revision was approved for an extension-in-time through December 2016.

WFP and the United Nations Office for Project Services (UNOPS) jointly signed an agreement for the lease of the country office premises that enabled WFP to reduce recurrent costs.

Achievements at Country Level

Based on vulnerability to food insecurity, global acute malnutrition, stunting and enrolment, the country programme targeted prefectures in all four regions of Guinea in 2016.

The public primary schools in rural and food insecure areas are the target for the school meals component. WFP assistance improved access to basic education through the provision of a meal during school days and helped to reduce absenteeism and drop-out rates, especially among girls. In order to reduce the gender gap and encourage girls' schooling, take-home rations of vegetable oil were additionally offered to girls who attended school regularly.

A daily hot meal per child consisted of 150 g of rice, 30 g of legumes, 10 g of vegetable oil and 3 g of salt. Take-home rations of 5 litres of vegetable oil were distributed quarterly to girls. These rations encouraged parents to send their children to school and contributed to the reduction of the cycle of hunger and malnutrition in Guinea.

The empowerment of rice-steaming women enabled WFP to increase the purchase of 702 mt in 2016 from nine steamer unions, an average of 78 mt per union compared to 8 mt before the start of the project. Consequently, the unions achieved ten-fold increase in income, from USD 4,753 to USD 46,412. All rice stocks were certified to meet WFP quality requirements by Veritas' Superintendent. The project enabled the unions to enhance their financial capacity and the women obtained profit margins of five percent on the contractual amount with WFP.

WFP carried out nutrition programmes in three areas: (i) treatment of moderate acute malnutrition (MAM); (ii) prevention of acute malnutrition; and (iii) prevention of stunting. The programmes supported pregnant and lactating women, children aged 6-59 months and, and people living with HIV (PLHIV) and tuberculosis (TB) patients and their families.

The treatment of MAM took place in a context of selective supplementation where only the most vulnerable children and pregnant and lactating women were targeted. Nutritional supplements were prescribed and distributed to targeted beneficiaries on a monthly basis. SuperCereal and Vitamin A and D fortified oil were provided for pregnant and lactating women. Children aged 6-59 months suffering from acute malnutrition received SuperCereal Plus, while Plumpy'Doz was distributed to children in the first 1,000-day initiative. In addition, malnourished PLHIV received nutritional education. Following the results of the 2015 Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey, the reduction in MAM treatment activities in other regions helped to address the

global acute malnutrition in the Kankan region.

The good performance achieved on MAM activities is explained through the collaboration between WFP and the non-governmental organization (NGO) Helen Keller International, which encouraged patients to follow instructions of food consumption and medication, reinforced capacity of nutrition agents, and maintained sufficient stocks during the implementation of the activities. However, the low nutritional recovery rates of anti-retroviral treatment (ART) and TB clients are due to the decrease in assistance period caused by the delay in transferring foods from EMOP to the country programme.

The low number of beneficiaries reached in food assistance for assets (FFA) component is a result of the reduction of the rations due to the resource constraints. Concerning general food distributions to Ebola-affected populations previously assisted through the Regional EMOP 200761, implementation started one month after the planned start date resulting in the low number of beneficiaries reached; this was due to delayed transfer of resources from EMOP to the country programme. The number of targeted beneficiaries for the prevention of acute malnutrition programme was reviewed and increased to respond to the recommendations raised from the SMART survey.

Through the special operation, United Nations Humanitarian Air Service (UNHAS), WFP served the humanitarian community and facilitated the management of existing logistical structures that were gradually handed over to the Government during post-Ebola transition.

Since the new flare-up in March 2016, eight Ebola cases were confirmed in Forest Guinea. WFP supported the Government and its partners by providing logistics services and delivering life-saving food assistance to meet the basic food and nutrition needs of Ebola-affected families and communities. UNHAS reduced the journey time allowing health partners to deploy their teams on time, transport blood samples for testing, and supply vaccines, medicines and equipment.

During the Ebola recovery phase, technical support to the Government was provided for logistics capacity development, including personal protective equipment and a universal protection calculation methodology.

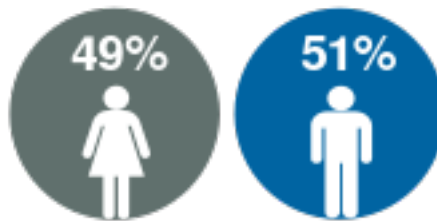
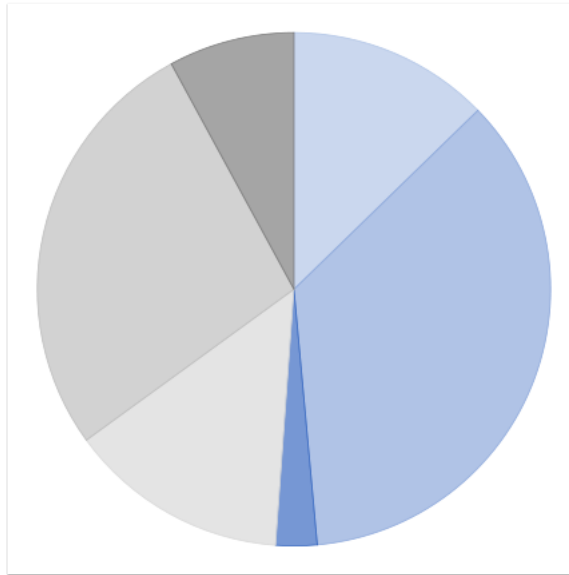


Annual Country Beneficiaries

Beneficiaries	Male	Female	Total
Children (under 5 years)	62,125	67,672	129,797
Children (5-18 years)	174,993	132,227	307,220
Adults (18 years plus)	12,655	38,734	51,389
Total number of beneficiaries in 2016	249,773	238,633	488,406

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	9,312	2,759	1,779	1,324	176	15,349
Total Food Distributed in 2016	9,312	2,759	1,779	1,324	176	15,349

Supply Chain

In 2016, Guinea country office purchased food in international, regional and local markets. With the declaration of the end of Ebola in December 2015, a total of 2,700 mt of the food stock from the preceding EMOP were transferred to the Country Programme 200326 to fill the funding shortage for Ebola victims. Though the home grown school

meals pilot, a local purchase of 702 mt of parboiled rice from smallholder farmers in Forest Guinea was carried out. An additional 1,258 mt of local rice was purchased from the local unions, managed mostly by women. Seventy percent of the international and the regional purchases, came from the Global Commodity Management Facility (GCMF) while 30 percent were shipped from abroad.

The renewal of transport, handling and Forwarding Agency contracts was timely, the shortlist of the transporters was updated, and four new transporters were added for 2017. However, poor road conditions are still the major challenge for the supply chain in Guinea. A total amount of 14,039 mt were delivered to cooperating partners by both the private transporters and the WFP fleet.

The country office encountered many storage challenges concerning the carry-over stock from the EMOP, however mitigation measures were put in place to minimise losses in the different warehouses in the country. A 400 mt warehouse has been installed in Macenta, in forest Guinea, to facilitate the timely delivery to final delivery points for school meals activities. The country office carried out a Logistics capacity assessment.

In 2016, WFP faced many challenges such as storage losses and losses at reception points. The majority of the losses were incurred on the EMOP stocks that were transferred to the country programme. Fifty metric tons of rice were declared unfit for human consumption and sold in N'zerekore for animal consumption, 76 mt were declared short landed in the containers. Given the findings, control mechanism from the Port up to the store were put in place to avoid future losses.



Annual Food Purchases for the Country (mt)

Commodity	Local	Regional/International	Total
Corn Soya Blend	-	360	360
Ready To Use Supplementary Food	-	118	118
Rice	1,594	2,200	3,794
Split Peas	-	72	72
Total	1,594	2,750	4,344
Percentage	36.7%	63.3%	

Annual Global Commodity Management Facility Purchases Received in Country (mt)

Commodity	Total
Corn Soya Blend	214
Rice	675
Split Peas	168
Vegetable Oil	18
Total	1,075

Implementation of Evaluation Recommendations and Lessons Learned

The evaluation of the Systems Approach for Better Education Results (SABER) action plan demonstrated that the Ministry of Education needed to put considerable efforts through the National Board of School Canteens for the

national school meals policy endorsement. Similarly, a programme must be formulated to accelerate the achievement of policy objectives.

Following the establishment of the national canteens steering committee, *Direction Nationale des Cantine Scolaire* (DNCaS), and the strengthening of capacities of school managers in charge of the management of school meals, of which eight percent are women, the Government implemented a pilot school meals project at 50 schools with their own funds. This first experience showed the need to increase the capacity of the Government and to support the launch of SABER session in order to adopt the national school meals policy.

WFP continues to support the National School Feeding Department to advocate for government resources for the implementation and ownership of the school feeding program in Guinea.

The mid-term review of the first 1,000-day pilot project recommended the joint programming of input distributions (Plumpy'Doz, Hygienic Kits) with other health activities in all health facilities in order to improve the participation rate of beneficiaries.

Project Objectives and Results

Project Objectives

WFP implements food assistance interventions through a Country Programme, in line with WFP Strategic Objectives 2 and 4.

Component 1: The school meals programme aims to (i) increase attendance rates in primary schoolchildren; (ii) reduce drop-out rates amongst primary schoolchildren, particularly girls; and (iii) enhance government capacity to monitor and manage school meals activities. The school meals programme is part of broader school health and nutrition programmes that have proven to provide a vital safety net for children in terms of nutrition, education and health.

Component 2: The Health and nutrition programmes aim to improve the nutritional situation of targeted categories of vulnerable people, including children aged 6-59 months, and pregnant and lactating women. The programmes for malnourished people addresses acute and chronic undernutrition – through the treatment of moderate acute malnutrition (MAM) and the prevention of acute malnutrition, micronutrient deficiencies and chronic malnutrition. Assistance for people on anti-retroviral treatment (ART) or tuberculosis (TB) clients aims to improve treatment adherence.

Component 3: Programmes supporting agriculture production target rural communities to boost agricultural production and reduce their vulnerability. This activity supports mainly women farmers groups that specialise in vegetable garden techniques to increase their production and supply to WFP-supported school meals programme with fresh vegetables (spinach, green pepper, okra, onions). WFP also supports local rice producers by purchasing locally produced parboiled rice for the school meals component.

Component 4: It supports the transition of Ebola-affected beneficiaries previously assisted through the Regional EMOP, through adequate transfer meeting their food consumption needs, and allowing them to benefit from development opportunities.



Approved Budget for Project Duration (USD)

Cost Category	
Capacity Dev.t and Augmentation	1,367,164
Direct Support Costs	7,703,308
Food and Related Costs	40,885,790
Indirect Support Costs	3,496,938
Total	53,453,200

Project Activities

Under the school meals programme, children in schools across the country are provided with a daily nutritious hot meal at lunch time. The programme provides an important safety net for poor families as well as improving education outcomes. School meals promoted the physical, mental and emotional well-being of students, and addressed short-term hunger helping children to concentrate better at school. In addition, girls received a take-home ration of cooking oil. Each girl received oil as an incentive to stay in school. The ration is an important value transfer for poor families and helped motivate young girls to complete their primary education.

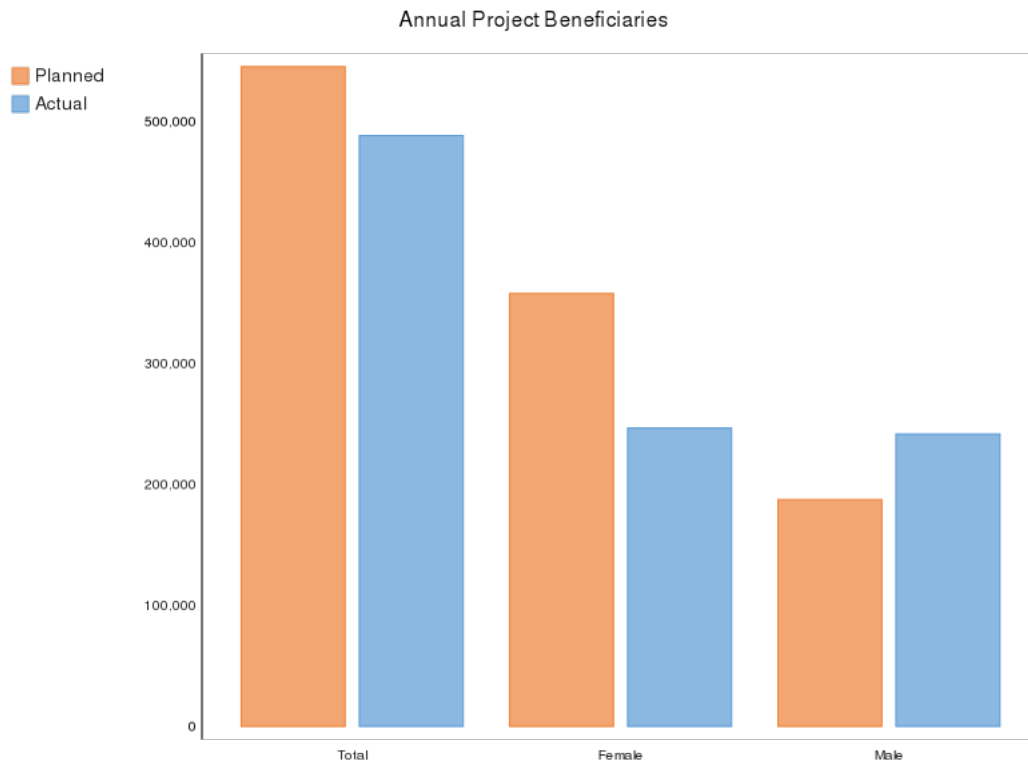
Linking smallholder farmers to school canteens in line with the Home Grown School Meals concept created a win-win situation, promoted agricultural development, strengthened women farmers' condition and reduced vulnerability of rural communities, and built social safety nets for schoolchildren and smallholder farmers. WFP supported women farmers groups and enabled them to increase and diversify food production, and encouraged

communities to supply food to school canteens. The project enabled the unions to increase their financial capacity by 10 times and the women obtained margins of five percent on the contractual amount with WFP. As a result, the income of the unions have increased by more than 25 percent. In addition, WFP supported food assistance for assets by providing tools to small market garden groups in order to ensure a supply of fresh vegetables to school canteens.

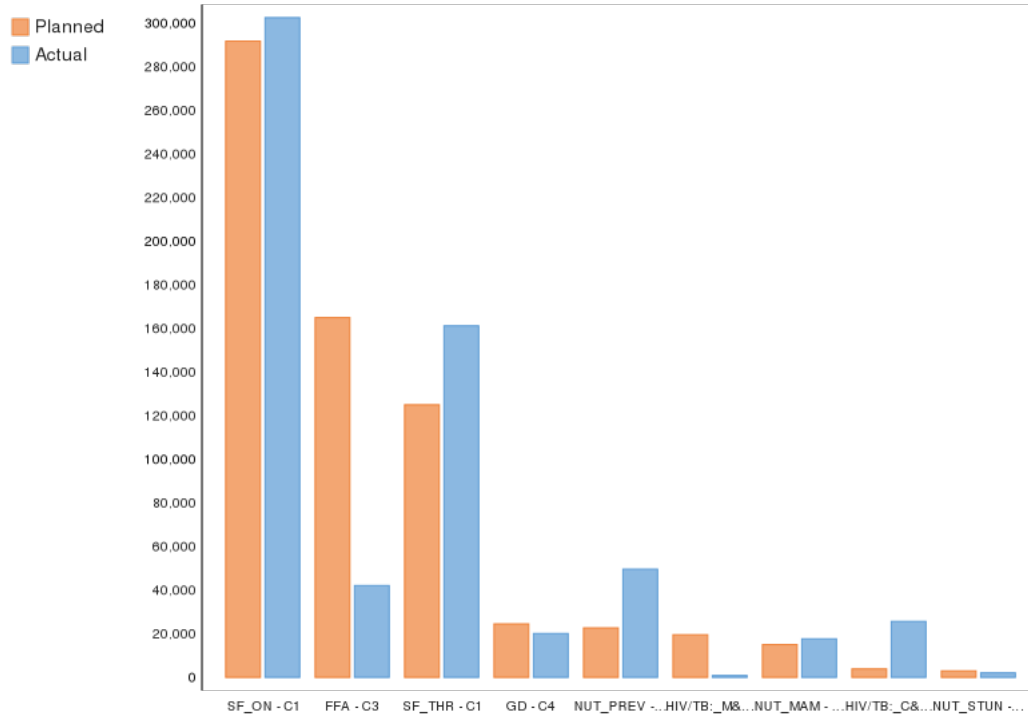
The nutrition programme targeted children aged 6-59 months and pregnant and lactating women through the treatment of acute malnutrition, and enhanced the nutritional recovery of malnourished people living with HIV (PLHIV) under anti-retroviral treatment (ART) and tuberculosis (TB) patients under directly observed treatment, short-course (DOTS). A pilot initiative to prevent chronic malnutrition during the first 1,000-days was also implemented.

In 2016, WFP Guinea continued food assistance covering the city of Conakry and the regions of Nzérékoré, Labé, Boké and Faranah. WFP provided nutritional support to 4,908 ART patients including 538 women assisted through the prevention of mother-to-child transmission (PMTCT) and 20,367 household members of these patients to mitigate the effects of HIV on food security. In the 180-day assistance period, patients received specific nutritious foods such as SuperCereal and Vitamin A fortified oil to stimulate weight recovery. Patient households received conditional support for six months, rations consisting of vitamin A fortified rice and legumes.

In order to foster the capacity of national actors, 15 sites for medical care of patients have integrated nutritional activities and five non-governmental organization (NGOs). Two training sessions were conducted: 30 health workers in health facilities in Conakry and Nzérékoré received training on the management of nutritional activities for ART patients (identification or screening of acute malnutrition, registration of eligible patients, monthly rations, patient follow-up, reporting of beneficiaries and stocks). Fifteen people from national NGOs and two from the international NGOs were trained on food assistance activities at the household level of PLHIV. A cross-cutting theme on nutritional education and messages, and nutrition counselling was presented during these sessions and the supporting documents were shared with the beneficiaries. All partners were strengthened in terms of anthropometric measurement tools and management tools (tape measure, BMI table, registers) at the beginning of the activities and received training on the use of materials.

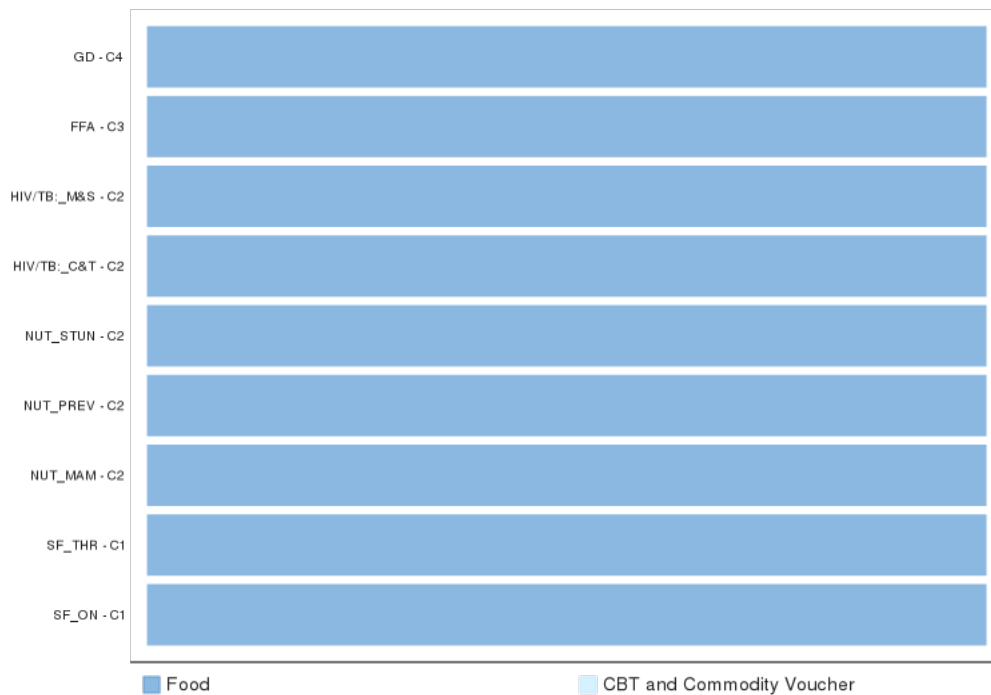


Annual Project Beneficiaries by Activity



SF_ON: School Feeding (on-site)
 FFA: Food-Assistance-for-Assets
 SF_THR: School Feeding (take-home rations)
 GD: General Distribution (GD)
 NUT_PREV: Nutrition: Prevention of Acute Malnutrition
 HIV/TB: _M&S: HIV/TB: Mitigation&Safety Nets
 NUT_MAM: Nutrition: Treatment of Moderate Acute Malnutrition
 HIV/TB: _C&T: HIV/TB: Care&Treatment
 NUT_STUN: Nutrition: Prevention of Stunting

Modality of Transfer by Activity



SF_ON: School Feeding (on-site)
 SF_THR: School Feeding (take-home rations)
 NUT_MAM: Nutrition: Treatment of Moderate Acute Malnutrition
 NUT_PREV: Nutrition: Prevention of Acute Malnutrition
 NUT_STUN: Nutrition: Prevention of Stunting
 HIV/TB: _C&T: HIV/TB: Care&Treatment
 HIV/TB: _M&S: HIV/TB: Mitigation&Safety Nets
 FFA: Food-Assistance-for-Assets
 GD: General Distribution (GD)



Annual Project Food Distribution

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Comp.1-Education			
Beans	-	568	-
Canned Pulses	-	133	-
Iodised Salt	149	124	83.4%
Peas	-	384	-
Rice	7,432	6,427	86.5%
Split Lentils	-	130	-
Split Peas	1,486	97	6.5%
Vegetable Oil	2,237	2,403	107.5%
Subtotal	11,304	10,266	90.8%
Comp.2-Nutrition			
Beans	-	118	-
Canned Pulses	-	20	-
Corn Soya Blend	2,387	1,073	45.0%
Iodised Salt	35	16	46.8%
Olive Oil	-	1	-
Peas	-	11	-
Ready To Use Supplementary Food	51	95	186.3%
Rice	1,408	414	29.4%
Rice Soya Blend	-	10	-
Split Lentils	-	11	-
Split Peas	422	7	1.7%
Vegetable Oil	258	258	99.9%
Subtotal	4,562	2,034	44.6%
Comp.3-Food Security			
Beans	-	82	-
Canned Pulses	-	29	-

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Iodised Salt	74	-	-
Rice	5,940	1,486	25.0%
Split Lentils	-	44	-
Split Peas	594	43	7.3%
Vegetable Oil	297	38	12.9%
Subtotal	6,905	1,724	25.0%
Comp.4-Ebola			
Beans	-	42	-
Canned Pulses	-	8	-
Corn Soya Blend	173	145	83.9%
Iodised Salt	14	12	87.2%
Peas	-	30	-
Ready To Use Supplementary Food	1	-	-
Rice	2,273	984	43.3%
Rice Soya Blend	-	2	-
Split Peas	439	22	4.9%
Sugar	-	23	-
Vegetable Oil	119	59	49.3%
Subtotal	3,019	1,325	43.9%
Total	25,790	15,349	59.5%

Operational Partnerships

Implementation of activities involved the creation and consolidation of partnerships that supported the achievement of WFP objectives. Partnering with national institutions fighting HIV – such as the *Comité National de Lutte contre le Sida (CNLS)*, *Programme National de Lutte contre la Tuberculose* – enabled the development of participatory approach towards the communities and strengthened the operational capacities of stakeholders. The Food by Prescription interventions were carried out in collaboration with the Ministry of Health, the regional and prefecture hospitals of Faranah, Gueckedou, Macenta, Beyla, Macenta, Kissidougou, Nzerekore, Boké, Kankan and Labé, and international and local non-governmental organizations (NGOs).

WFP and the Government jointly mobilized resources for the school meals activities through an agreement with the Ministry of Cooperation. A pilot project for the local purchases of rice with local producers, within the framework of Home Grown School Meal, was implemented. It involved the ministries of education, agriculture and trade in regions heavily affected by the Ebola virus epidemic. In addition, WFP supported the Government in the implementation of a pilot project for the creation and management of 50 canteens across the country.

WFP supplied schools with steamed locally produced parboiled rice. Suppliers of this rice were mostly women (80 percent) organized in unions. WFP provided materials and equipment which led to added value of the steaming trade and facilitated the market access of unions. The success of this partnership resulted in the grant of the Women Stop Hunger Award to two women's union representatives by the Stop Hunger Foundation.

In Guinea, WFP and United Nations agencies [1] implemented a joint program called the United Joint Program in the Region of Kankan Upper Guinea in order to improve cropping practices to increase food productivity in management of natural resources:

- Promote a sustainable management of natural resources and increase the resilience of populations to natural and man-made disasters; and
- Support entrepreneurship and income-generating activities for women and youth organizations.

[1] Food and Agriculture Organization of the United Nations (FAO), Office of the United Nations High Commissioner for Human Rights (UNHCHR), United Nations High Commissioner for Refugees (UNHCR), International Organization for Migration (IOM), World Health Organization (WHO), United Nations Industrial Development Organization (UNIDO), United Nations Children's Fund (UNICEF), United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA), International Labour Organization (ILO), United Nations Capital Development Fund (UNCDF), United Nations Office for Project Services (UNOPS), Joint United Nations Programme on HIV/AIDS (UNAIDS).

Performance Monitoring

Post-distribution monitoring (PDM) surveys showed that at least 81.7 percent, a significant proportion of the beneficiaries, actually participated in various programme activities. Targeting strategies and food rations were systematically monitored during PDM surveys.

The availability of monitoring and evaluation staff led to increased monitoring of distribution sites and to propose solutions in areas where malfunctions are observed. Follow-up activities led to a strong involvement of school meals management committees, school principals and communities, which allowed a gradual hand-over to the community.

Results/Outcomes

With the new donor funding received for the areas affected by the Ebola disease, the number of schools increased from 873 to 1,605, for the duration of 163 feeding days. The unconditional take-home rations also contributed to the increase in the number of girls in schools and their attendance rate. In spite of the support mechanism set up to encourage girls' schooling, efforts still need to be made to improve the ratio of girls to boys at the school level. Although the national school feeding policy was developed, challenges remain in the: (i) adoption of the policy by the National Assembly, (ii) design of a programme to support the policy, and (iii) structuring and equipment of the National Direction of School Canteens. In order to support and rebuild fragile livelihoods following emergencies, further efforts are needed to improve the food and nutritional situation. Due to insufficient resources, beneficiaries shifted from a full family ration to an individual reduced ration.

In 2016, an improvement was observed in the retention rate of girls. Beneficiaries planned were reached since the enrolment of students was increased after the declaration of the Ebola-free environment. Parents sent their children to schools relying on the security at schools. Moreover, the Government issued the memorandum note that declared education compulsory for all school-age children and encouraged the enrolment of students.

Targeted children aged 6-59 months, pregnant and lactating women, people living with HIV under anti-retroviral treatment (ART) and tuberculosis (TB) clients received nutrition assistance. The recovery rates of moderate acute malnutrition was higher than the set target of 75 percent with very low default, mortality and non-response rates. In addition, although ART and TB recovery rates were low, the adherence rate showed positive results with more than 90 percent with very low default rates.

The over-performance on the number of HIV beneficiaries reached is linked to the process of transferring commodities from EMOP to the country programme. The delay caused the reduction of the assistance period and the increase of the number of beneficiaries, to meet the project completion date. As a result, the recovery rate of HIV after treatments appeared low.

Food assistance for assets (FFA) activities contributed to the amelioration of food consumption score in households of smallholder farmers. However, targets for food consumption score, dietary diversity score and coping strategy index were not achieved since participants were considered without their household members due to the limited funding resources. The information collected through group discussion during the monitoring visit indicated that the increase of food purchased locally to be used for WFP programme allowed farmers to improve their livelihoods and increase income through selling surpluses on local markets.

Progress Towards Gender Equality

Gender mainstreaming in WFP's activities in Guinea remains a challenge.

To increase the level of girls' attendance and address disparity in schools, WFP made widespread distribution of take-home rations to all girls unconditionally, with the aim of encouraging parents to enrol and maintain girls in school. In 2016, there was an improvement in the retention rate for girls compared to 2015. Moreover, the Government memorandum about mandatory education for all school-age children encouraged the enrolment of girls. These measures not only contributed to household food security but also improved attendance and admission rates for girls.

During the school year, teachers from all WFP-assisted schools were trained not only on the operation and management of canteens, but also to take gender concerns into account during the implementation of the activities carried out by WFP for the benefit of communities.

WFP observed a strong involvement of women (43 percent) in the functioning of canteens particularly in the food management committees.

In order to diversify the food basket, WFP implemented a local purchase pilot project for school canteens, 85 percent of participants are women members of rice steamer unions. In partnership with the local non-governmental organization (NGO), *Maison Guinéenne de l'Entrepreneur* (MGE), WFP strengthened women's capacities on stoving, shelling, storage, marketing and credit management.

Protection and Accountability to Affected Populations

In 2016, through the monitoring and evaluation system implemented in the field, the results showed that 68 percent of beneficiaries were well informed about the activities of the school meals project and 98.5 percent did not report any safety problems during the implementation of the prevention of acute malnutrition programme. These results ensured that the concerns of protection and involvement of the beneficiaries were effectively taken into account in the implementation of the various activities.

Following the increase in the number of schools, the country office recruited staff by establishing a partnership with the Peace Corps Office and the Government in order to provide timely and credible information to those participating in the food assistance for assets activities and collect, document and respond to complaints and feedback. In addition, five post-distribution monitoring visits were organized to ensure that beneficiaries have not been victims of harassment or discrimination while receiving assistance before, during and after the implementation of activities.

Regarding the agricultural groups, the distribution sites were established in consultation with communities by integrating the concerns of the beneficiaries in order to reduce the distance to receive assistance, risks of aggression and racket.

Figures and Indicators

Data Notes

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School Meals in the Forest region.

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	187,539	357,938	545,477	241,745	246,661	488,406	128.9%	68.9%	89.5%
Total Beneficiaries (Comp.1-Education)	116,622	175,152	291,774	172,777	129,809	302,586	148.2%	74.1%	103.7%
Total Beneficiaries (Comp.2-Nutrition)	26,631	37,538	64,169	51,274	72,276	123,550	192.5%	192.5%	192.5%
Total Beneficiaries (Comp.3-Food Security)	33,000	132,000	165,000	8,424	33,696	42,120	25.5%	25.5%	25.5%
Total Beneficiaries (Comp.4-Ebola)	11,286	13,248	24,534	9,270	10,880	20,150	82.1%	82.1%	82.1%
Comp.1-Education									
By Age-group:									
Children (5-18 years)	116,622	175,152	291,774	172,777	129,809	302,586	148.2%	74.1%	103.7%
By Residence status:									
Residents	116,622	175,152	291,774	84,211	218,375	302,586	72.2%	124.7%	103.7%
Comp.2-Nutrition									
By Age-group:									
Children (6-23 months)	6,417	11,037	17,454	12,355	21,251	33,606	192.5%	192.5%	192.5%
Children (24-59 months)	9,754	7,315	17,069	18,780	14,085	32,865	192.5%	192.5%	192.5%
Children (5-18 years)	2,567	4,492	7,059	4,942	8,649	13,591	192.5%	192.5%	192.5%
Adults (18 years plus)	7,893	14,694	22,587	15,197	28,291	43,488	192.5%	192.5%	192.5%
By Residence status:									
Residents	26,630	37,539	64,169	43,102	80,448	123,550	161.9%	214.3%	192.5%
Comp.3-Food Security									

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)
By Age-group:									
Adults (18 years plus)	33,000	132,000	165,000	8,424	33,696	42,120	25.5%	25.5%	25.5%
By Residence status:									
Residents	33,000	132,000	165,000	8,424	33,696	42,120	25.5%	25.5%	25.5%
Comp.4-Ebola									
By Age-group:									
Children (under 5 years)	3,435	4,171	7,606	2,821	3,426	6,247	82.1%	82.1%	82.1%
Children (5-18 years)	2,699	2,944	5,643	2,217	2,418	4,635	82.1%	82.1%	82.1%
Adults (18 years plus)	5,152	6,133	11,285	4,232	5,036	9,268	82.1%	82.1%	82.1%
By Residence status:									
Residents	11,286	13,248	24,534	9,269	10,881	20,150	82.1%	82.1%	82.1%

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)
Comp.1-Education									
School Feeding (on-site)	291,774	-	291,774	302,586	-	302,586	103.7%	-	103.7%
School Feeding (take-home rations)	125,048	-	125,048	161,237	-	161,237	128.9%	-	128.9%
Comp.2-Nutrition									
Nutrition: Treatment of Moderate Acute Malnutrition	15,019	-	15,019	17,693	-	17,693	117.8%	-	117.8%
Nutrition: Prevention of Acute Malnutrition	22,700	-	22,700	49,623	-	49,623	218.6%	-	218.6%
Nutrition: Prevention of Stunting	3,000	-	3,000	2,084	-	2,084	69.5%	-	69.5%
HIV/TB: Care&Treatment;	3,894	-	3,894	25,686	-	25,686	659.6%	-	659.6%
HIV/TB: Mitigation&Safety; Nets	19,556	-	19,556	848	-	848	4.3%	-	4.3%
Comp.3-Food Security									
Food-Assistance-for-Assets	165,000	-	165,000	42,120	-	42,120	25.5%	-	25.5%
Comp.4-Ebola									

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)
General Distribution (GD)	24,534	-	24,534	20,150	-	20,150	82.1%	-	82.1%

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)
Comp.1-Education									
School Feeding (on-site)	291,774	-	291,774	302,586	-	302,586	103.7%	-	103.7%
School Feeding (take-home rations)	125,048	-	125,048	161,237	-	161,237	128.9%	-	128.9%
Comp.2-Nutrition									
Nutrition: Treatment of Moderate Acute Malnutrition	15,019	-	15,019	17,693	-	17,693	117.8%	-	117.8%
Nutrition: Prevention of Acute Malnutrition	22,700	-	22,700	49,623	-	49,623	218.6%	-	218.6%
Nutrition: Prevention of Stunting	3,000	-	3,000	2,084	-	2,084	69.5%	-	69.5%
HIV/TB: Care&Treatment;	3,894	-	3,894	25,686	-	25,686	659.6%	-	659.6%
HIV/TB: Mitigation&Safety; Nets	19,556	-	19,556	848	-	848	4.3%	-	4.3%
Comp.3-Food Security									
Food-Assistance-for-Assets	27,500	-	27,500	42,120	-	42,120	153.2%	-	153.2%
Comp.4-Ebola									
General Distribution (GD)	24,534	-	24,534	20,150	-	20,150	82.1%	-	82.1%

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)
Comp.1-Education									
School Feeding (on-site)									
Children receiving school meals in primary schools	166,603	125,171	291,774	172,777	129,809	302,586	103.7%	103.7%	103.7%
Total participants	166,603	125,171	291,774	172,777	129,809	302,586	103.7%	103.7%	103.7%

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Total beneficiaries	166,603	125,171	291,774	172,777	129,809	302,586	103.7%	103.7%	103.7%
School Feeding (take-home rations)									
Children receiving take-home rations in primary schools	-	125,048	125,048	82,231	79,006	161,237	-	63.2%	128.9%
Total participants	-	125,048	125,048	82,231	79,006	161,237	-	63.2%	128.9%
Total beneficiaries	-	125,048	125,048	82,231	79,006	161,237	-	63.2%	128.9%
Comp.2-Nutrition									
HIV/TB: Care&Treatment;									
ART Clients receiving food assistance	1,095	2,223	3,318	1,705	3,462	5,167	155.7%	155.7%	155.7%
TB Clients receiving food assistance	190	386	576	8,024	12,220	20,244	4,223.2%	3,165.8%	3,514.6%
PMTCT Clients receiving food assistance	-	-	-	91	184	275	-	-	-
Total participants	1,285	2,609	3,894	9,820	15,866	25,686	764.2%	608.1%	659.6%
Total beneficiaries	1,285	2,609	3,894	9,820	15,866	25,686	764.2%	608.1%	659.6%
HIV/TB: Mitigation&Safety; Nets									
ART Clients receiving food assistance	9,192	9,568	18,760	279	569	848	3.0%	5.9%	4.5%
TB Clients receiving food assistance	390	406	796	-	-	-	-	-	-
Total participants	9,582	9,974	19,556	279	569	848	2.9%	5.7%	4.3%
Total beneficiaries	9,582	9,974	19,556	279	569	848	2.9%	5.7%	4.3%
Comp.3-Food Security									
Food-Assistance-for-Assets									
Activity supporters (Food-Assistance-for-Assets (Agricultural/crop production promotion))	5,500	22,000	27,500	19,377	22,743	42,120	352.3%	103.4%	153.2%
Total participants	5,500	22,000	27,500	19,377	22,743	42,120	352.3%	103.4%	153.2%
Total beneficiaries	33,000	132,000	165,000	19,377	22,743	42,120	58.7%	17.2%	25.5%
Comp.4-Ebola									
General Distribution (GD)									
People participating in general distributions	-	-	-	8,684	10,194	18,878	-	-	-
Activity supporters	11,286	13,248	24,534	585	687	1,272	5.2%	5.2%	5.2%
Total participants	11,286	13,248	24,534	9,269	10,881	20,150	82.1%	82.1%	82.1%
Total beneficiaries	11,286	13,248	24,534	9,269	10,881	20,150	82.1%	82.1%	82.1%

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)
Comp.2-Nutrition									
Nutrition: Treatment of Moderate Acute Malnutrition									
Children (6-23 months)	3,154	3,943	7,097	3,156	3,945	7,101	100.1%	100.1%	100.1%
Children (24-59 months)	1,803	2,366	4,169	1,803	2,367	4,170	100.0%	100.0%	100.0%
Pregnant and lactating women (18 plus)	-	3,753	3,753	-	6,422	6,422	-	171.1%	171.1%
Total beneficiaries	4,957	10,062	15,019	4,959	12,734	17,693	100.0%	126.6%	117.8%
Nutrition: Prevention of Acute Malnutrition									
Children (6-23 months)	4,608	4,800	9,408	9,064	11,330	20,394	196.7%	236.0%	216.8%
Children (24-59 months)	4,800	4,992	9,792	5,179	6,798	11,977	107.9%	136.2%	122.3%
Pregnant and lactating women (18 plus)	-	3,500	3,500	-	17,252	17,252	-	492.9%	492.9%
Total beneficiaries	9,408	13,292	22,700	14,243	35,380	49,623	151.4%	266.2%	218.6%
Nutrition: Prevention of Stunting									
Children (6-23 months)	1,440	1,560	3,000	1,000	1,084	2,084	69.4%	69.5%	69.5%
Total beneficiaries	1,440	1,560	3,000	1,000	1,084	2,084	69.4%	69.5%	69.5%

Project Indicators

Outcome Indicators

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Comp.1-Education				
SO4 Reduce undernutrition and break the intergenerational cycle of hunger				
Increased equitable access to and utilization of education				

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Retention rate in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2017.12, PDM survey, Base value: 2015.07, WFP survey, Retroactive baseline survey on data from 2012/2013 school year, Previous Follow-up: 2015.12, WFP survey, PDM survey, Latest Follow-up: 2016.12, WFP survey, PDM survey</i>	=85.00	65.31	97.22	94.00
Retention rate (girls) in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2017.12, PDM, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, WFP survey, PDM survey, Latest Follow-up: 2016.12, WFP survey, PDM survey</i>	=85.00	65.10	90.62	93.50
Retention rate (boys) in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2017.12, PDM, Base value: 2015.07, WFP programme monitoring, Retroactive baseline survey on data from 2012/2013 school year, Previous Follow-up: 2015.12, WFP survey, PDM survey, Latest Follow-up: 2016.12, WFP survey, PDM survey</i>	=85.00	65.45	95.97	94.99
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2017.12, PDM, Base value: 2015.07, WFP programme monitoring, Follow-up survey, WFP survey, Previous Follow-up: 2015.12, WFP programme monitoring, Follow-up survey, WFP survey, Latest Follow-up: 2016.12, WFP programme monitoring, Follow-up survey, WFP survey</i>	=6.00	1.08	9.06	11.00
Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2017.12, PDM, Base value: 2015.07, WFP programme monitoring, Retroactive baseline survey on data from 2012/2013 school year., Previous Follow-up: 2015.12, WFP programme monitoring, Follow-up survey, WFP survey, Latest Follow-up: 2016.12, WFP programme monitoring, Follow-up survey, WFP survey</i>	=6.00	0.93	12.70	9.00
Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2017.12, PDM, Base value: 2015.07, WFP programme monitoring, Retroactive baseline survey on data from 2012/2013 school year, Previous Follow-up: 2015.12, WFP programme monitoring, Follow-up survey, WFP survey., Latest Follow-up: 2016.12, WFP programme monitoring, Follow-up survey, WFP survey.</i>	=6.00	1.08	8.23	14.00
Gender ratio: ratio of girls to boys enrolled in WFP-assisted primary schools				
<i>GUINEA, Project End Target: 2016.12, WFP monitoring, Base value: 2012.12, WFP programme monitoring, CP monthly report, Previous Follow-up: 2015.12, WFP programme monitoring, WFP monitoring, Latest Follow-up: 2016.12, WFP programme monitoring, WFP monitoring</i>	=1.00	0.87	0.83	0.84
Ownership and capacity strengthened to reduce undernutrition and increase access to education at regional, national and community levels				
NCI: School Feeding National Capacity Index				
<i>SF-GUINEA, Project End Target: 2017.12, Consultation , Base value: 2011.12, WFP programme monitoring, Consultation, Previous Follow-up: 2015.12, WFP programme monitoring, Evaluation of the SABER Action Plan, Latest Follow-up: 2016.12, WFP programme monitoring, Evaluation of the SABER Action Plan</i>	=2.60	1.60	1.00	1.70
Comp.2-Nutrition				
SO4 Reduce undernutrition and break the intergenerational cycle of hunger				

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Reduced undernutrition, including micronutrient deficiencies among children aged 6-59 months, pregnant and lactating women, and school-aged children				
ART Default Rate (%)				
200326.C2 LOCATIONS OF HIV CLIENTS , Project End Target: 2017.12, 200326.C2 Locations of HIV clients , Base value: 2015.12, WFP programme monitoring, 200326.C2 Locations of HIV clients , Previous Follow-up: 2015.12, WFP programme monitoring, Cooperating partner , Latest Follow-up: 2016.12, WFP programme monitoring, Cooperating partner	<10.00	0.00	0.00	0.00
ART Adherence Rate (%)				
200326.C2 LOCATIONS OF HIV CLIENTS , Project End Target: 2017.12, Base value: 2013.12, WFP programme monitoring, UBRAF Report, Previous Follow-up: 2015.12, WFP programme monitoring, WFP and Cooperating partner monitoring, Latest Follow-up: 2016.12, WFP programme monitoring, WFP and Cooperating partner monitoring	>75.00	70.00	87.20	91.63
ART Nutritional Recovery Rate (%)				
200326.C2 LOCATIONS OF HIV CLIENTS , Project End Target: 2014.12, Base value: 2013.12, WFP programme monitoring, UBRAF Report, Previous Follow-up: 2015.12, WFP programme monitoring, Partner monthly report, Latest Follow-up: 2016.12, WFP programme monitoring, Partner monthly report	>75.00	49.00	92.00	32.92
TB Treatment Default Rate (%)				
200326.C2 LOCATIONS OF TB PATIENTS , Project End Target: 2015.12, 200326.C2 Locations of TB patients, Base value: 2015.12, WFP programme monitoring, 200326.C2 Locations of TB patients, Previous Follow-up: 2015.12, WFP programme monitoring, Cooperating partner monthly report , Latest Follow-up: 2016.12, WFP programme monitoring, Cooperating partner monthly report	<10.00	0.00	0.00	0.00
TB Treatment Adherence Rate (%)				
200326.C2 LOCATIONS OF TB PATIENTS , Project End Target: 2017.12, Base value: 2013.12, WFP programme monitoring, UBRAF Report, Previous Follow-up: 2015.12, WFP programme monitoring, Cooperating partner monthly report, Latest Follow-up: 2016.12, WFP programme monitoring, Cooperating partner monthly report	>75.00	50.00	99.00	91.67
MAM treatment recovery rate (%)				
200326.C2 MAM LOCATIONS, Project End Target: 2017.12, Base value: 2012.12, WFP programme monitoring, Previous Follow-up: 2015.12, WFP programme monitoring, WFP and Cooperating partner monitoring, Latest Follow-up: 2016.12, WFP programme monitoring, WFP and Cooperating partner monitoring	>75.00	88.30	96.00	98.96
MAM treatment mortality rate (%)				
200326.C2 MAM LOCATIONS, Project End Target: 2017.12, Base value: 2012.12, WFP programme monitoring, Previous Follow-up: 2015.12, WFP programme monitoring, WFP and Cooperating partner monitoring, Latest Follow-up: 2016.12, WFP programme monitoring, WFP and Cooperating partner monitoring	<3.00	0.20	0.00	0.01
MAM treatment default rate (%)				
200326.C2 MAM LOCATIONS, Project End Target: 2017.12, Base value: 2012.12, WFP programme monitoring, Previous Follow-up: 2015.12, WFP programme monitoring, WFP and Cooperating partner monitoring, Latest Follow-up: 2016.12, WFP programme monitoring, WFP and Cooperating partner monitoring	<15.00	10.40	4.00	1.03

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM treatment non-response rate (%)				
200326.C2 MAM LOCATIONS, Project End Target: 2017.12, Base value: 2012.12, WFP programme monitoring, Previous Follow-up: 2015.12, WFP programme monitoring, WFP and Cooperating partner monitoring, Latest Follow-up: 2016.12, WFP programme monitoring, WFP and Cooperating partner monitoring	<15.00	1.60	0.00	0.00
Proportion of eligible population who participate in programme (coverage)				
LABE REGION , Project End Target: 2015.12, Institutional target, Base value: 2014.04, Secondary data, document review, Previous Follow-up: 2015.12, WFP survey, WFP survey , Latest Follow-up: 2016.06, WFP survey, WFP survey	>70.00	0.00	80.42	21.00
Proportion of children who consume a minimum acceptable diet				
LABE REGION , Project End Target: 2017.12, PDM, Base value: 2015.12, WFP survey, PDM survey, Latest Follow-up: 2016.12, WFP survey, Mid-term review of project	>70.00	18.70	-	40.00
Comp.3-Food Security				
SO3 Reduce risk and enable people, communities and countries to meet their own food and nutrition needs				
Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-insecure communities and households				
FCS: percentage of households with poor Food Consumption Score				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	<1.00	7.00	-	3.00
FCS: percentage of households with borderline Food Consumption Score				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	<3.52	17.60	-	21.70
FCS: percentage of households with poor Food Consumption Score (female-headed)				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	<3.10	15.50	-	6.30
FCS: percentage of households with poor Food Consumption Score (male-headed)				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	<0.20	1.00	-	1.30
FCS: percentage of households with borderline Food Consumption Score (female-headed)				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	<4.28	21.40	-	27.10
FCS: percentage of households with borderline Food Consumption Score (male-headed)				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	<2.92	14.60	-	18.30
Diet Diversity Score				
FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey	>5.19	5.19	-	5.00

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score (female-headed households)				
<i>FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey</i>	>5.12	5.12	-	4.84
Diet Diversity Score (male-headed households)				
<i>FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey</i>	>5.24	5.24	-	5.10
CSI (Food): Percentage of male-headed households with reduced/stabilized Coping Strategy Index				
<i>FOREST GUINEA, Project End Target: 2017.06, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey</i>	<14.02	14.02	-	17.96
CSI (Food): Percentage of households with reduced/stabilized Coping Strategy Index				
<i>FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey</i>	<15.67	15.67	-	14.65
CSI (Food): Percentage of female-headed households with reduced/stabilized Coping Strategy Index				
<i>FOREST GUINEA, Project End Target: 2017.12, Institutional Target, Base value: 2016.06, WFP survey, FSOM survey, Latest Follow-up: 2016.06, WFP survey, PDM survey</i>	<17.51	17.51	-	12.55
Increased marketing opportunities for producers and traders of agricultural products and food at the regional, national and local levels				
Food purchased from regional, national and local suppliers, as % of food distributed by WFP in-country				
<i>GUINEA, Project End Target: 2017.12, WFP monitoring, Base value: 2015.12, WFP programme monitoring, Patners contract document, Latest Follow-up: 2016.12, WFP programme monitoring, WFP monitoring</i>	=10.00	0.36	-	6.91
Food purchased from aggregation systems in which smallholders are participating, as % of regional, national and local purchases				
<i>GUINEA, Project End Target: 2017.12, Document review, Base value: 2015.12, WFP programme monitoring, Patners contract document, Latest Follow-up: 2016.12, Secondary data, Document review</i>	>10.00	0.20	-	3.80
Comp.4-Ebola				
SO2 Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies				
Adequate food consumption reached or maintained over assistance period for targeted households				
CSI (Food): Coping Strategy Index (average)				
<i>ALL HOUSEHOLDS - FOREST GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015, Latest Follow-up: 2016.07, WFP survey, PDM survey</i>	<18.89	18.89	18.89	19.00
FCS: percentage of households with poor Food Consumption Score				
<i>FOREST GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015, Latest Follow-up: 2016.07, WFP survey, PDM Survey</i>	<0.78	3.90	3.90	2.50

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>FOREST GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015, Latest Follow-up: 2016.07, WFP survey, PDM survey</i>	<0.94	4.70	4.70	2.50
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>FOREST GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015, Latest Follow-up: 2016.07, WFP survey, PDM survey</i>	<0.70	3.50	3.50	2.60
Diet Diversity Score				
<i>FOREST GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015 report, Latest Follow-up: 2016.07, WFP survey, PDM survey</i>	>4.88	4.88	4.88	5.25
Diet Diversity Score (male-headed households)				
<i>FOREST GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015 report, Latest Follow-up: 2016.07, WFP survey, PDM survey</i>	>4.94	4.94	4.94	5.18
Diet Diversity Score (female-headed households)				
<i>GUINEA, Project End Target: 2016.06, PDM survey, Base value: 2015.07, WFP survey, PDM survey, Previous Follow-up: 2015.12, Secondary data, SPR-2015 report, Latest Follow-up: 2016.07, WFP survey, PDM Survey</i>	>4.73	4.73	4.73	5.32
Project-specific				
Percentage of assisted communities that reported reduced unnecessary movements thanks to WFP food assistance in period of widespread and intense transmission				
<i>GUINEA, Project End Target: 2016.06, PDM-Survey, Base value: 2015.07, WFP survey, PDM-Survey, Latest Follow-up: 2016.07, WFP programme monitoring, Activity implementation Monitoring</i>	>80.00	83.00	-	81.00

Output Indicators

Output	Unit	Planned	Actual	% Actual vs. Planned
Comp.1-Education				
SO4: School Feeding (on-site)				
Number of schools assisted by WFP	school	1,605	1,605	100.0%
SO4: School Feeding (on-site) and School Feeding (take-home rations)				
Number of government/national partner staff receiving technical assistance and training	individual	568	234	41.2%
Comp.2-Nutrition				
SO4: HIV/TB: Care&Treatment;				
Number of feeding days	instance	4,717	4,620	97.9%
Number of institutional sites assisted	site	7	7	100.0%

Output	Unit	Planned	Actual	% Actual vs. Planned
SO4: HIV/TB: Mitigation&Safety; Nets				
Number of feeding days	instance	360	240	66.7%
SO4: Nutrition: Prevention of Acute Malnutrition				
Number of feeding days	instance	30	30	100.0%
SO4: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of feeding days	instance	350	360	102.9%
Number of health centres/sites assisted	centre/site	16	16	100.0%
Comp.3-Food Security				
SO3: Food-Assistance-for-Assets				
Hectares (ha) of land cultivated	Ha	449	387	86.1%
Number of feeding days	instance	258	258	100.0%
Quantity of agricultural tools distributed	item	34,498	25,305	73.4%
SO3: Local Purchases				
Number of women trained in leadership roles and responsibilities	individual	51	51	100.0%
Quantity of food purchased locally through local purchases	metric ton	702	702	100.0%
Comp.4-Ebola				
SO2: General Distribution (GD)				
Number of feeding days	instance	63	63	100.0%

Gender Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Comp.1-Education				
Proportion of women beneficiaries in leadership positions of project management committees				
<i>GUINEA, School Feeding (on-site), Project End Target: 2017.12, Base value: 2016.12</i>	>50.00	43.00	-	-
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>GUINEA, School Feeding, Project End Target: 2017.12, Base value: 2016.12</i>	>43.00	26.43	-	-
Comp.2-Nutrition				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>SIGUIRI, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.03</i>	=50.00	18.00	-	-

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>SIGUIRI, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.03</i>	=30.00	7.00	-	-
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>SIGUIRI, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.03</i>	=20.00	75.00	-	-
Proportion of women beneficiaries in leadership positions of project management committees				
<i>LABE, Nutrition: Prevention of Stunting, Project End Target: 2014.12, Base value: 2016.01</i>	>50.00	27.58	-	-
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>LABE, Nutrition: Prevention of Stunting, Project End Target: 2017.12, Base value: 2016.01</i>	=50.00	37.00	-	-
Comp.3-Food Security				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2016.02, Base value: 2016.06</i>	>30.00	21.00	-	-
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2016.02, Base value: 2016.06</i>	=50.00	52.00	-	-
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2016.02, Base value: 2016.06</i>	=20.00	27.00	-	-
Proportion of women beneficiaries in leadership positions of project management committees				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2014.12, Base value: 2016.06</i>	>50.00	60.00	-	-
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2014.12, Base value: 2016.06</i>	>60.00	65.00	-	-
Comp.4-Ebola				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.07, Base value: 2015.12, Latest Follow-up: 2016.07</i>	=30.00	4.00	-	15.05
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Base value: 2015.12, Latest Follow-up: 2016.07</i>	=50.00	19.00	-	61.13

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Base value: 2015.12, Latest Follow-up: 2016.07</i>	=20.00	77.00	-	23.82
Proportion of women beneficiaries in leadership positions of project management committees				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Base value: 2016.07</i>	>50.00	66.67	-	-
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Base value: 2016.07</i>	=60.00	66.67	-	-

Protection and Accountability to Affected Populations Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Comp.1-Education				
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>GUINEA, School Feeding, Project End Target: 2015.12, Base value: 2016.07</i>	>90.00	68.00	-	-
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>GUINEA, School Feeding, Project End Target: 2015.12, Base value: 2016.12</i>	=100.00	99.00	-	-
Comp.2-Nutrition				
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>LABE, Nutrition: Prevention of Stunting, Project End Target: 2017.12, Base value: 2016.01</i>	>90.00	92.20	-	-
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>SIGUIRI, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Base value: 2016.03</i>	>100.00	98.50	-	-
Comp.3-Food Security				
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2014.12, Base value: 2016.06</i>	>90.00	67.00	-	-
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2014.02, Base value: 2016.06</i>	>100.00	99.45	-	-
Comp.4-Ebola				

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Base value: 2015.12, Latest Follow-up: 2016.07</i>	>90.00	79.00	-	67.00
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.07, Base value: 2015.12, Latest Follow-up: 2016.07</i>	=100.00	99.60	-	95.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.07, Base value: 2015.12, Latest Follow-up: 2016.07</i>	>90.00	79.00	-	100.00
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.07, Base value: 2015.12, Latest Follow-up: 2016.07</i>	=100.00	79.00	-	95.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.07, Base value: 2015.12, Latest Follow-up: 2016.07</i>	>90.00	79.00	-	100.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Base value: 2015.12, Latest Follow-up: 2016.07</i>	=100.00	99.60	-	99.45

Partnership Indicators

Cross-cutting Indicators	Project End Target	Latest Follow-up
Comp.1-Education		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>GUINEA, School Feeding (on-site), Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>130,327.00	130,327.00
Number of partner organizations that provide complementary inputs and services		
<i>GUINEA, School Feeding, Project End Target: 2015.12, Latest Follow-up: 2016.12</i>	=3.00	2.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>GUINEA, School Feeding, Project End Target: 2015.12, Latest Follow-up: 2016.12</i>	=100.00	100.00
Comp.2-Nutrition		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>GUINEA, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>175,921.97	175,921.97

Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
<i>GUINEA, HIV/TB: Care&Treatment;; Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>3.00	3.00
Number of partner organizations that provide complementary inputs and services		
<i>GUINEA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>3.00	3.00
Number of partner organizations that provide complementary inputs and services		
<i>LABE, Nutrition: Prevention of Stunting, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>1.00	1.00
Number of partner organizations that provide complementary inputs and services		
<i>SIGUIRI, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>2.00	2.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>GUINEA, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	=100.00	100.00
Comp.3-Food Security		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>8,097.00	8,097.00
Number of partner organizations that provide complementary inputs and services		
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	>11.00	11.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>GUINEA, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2016.12</i>	=100.00	100.00
Comp.4-Ebola		
Number of partner organizations that provide complementary inputs and services		
<i>GUINEA, General Distribution (GD), Project End Target: 2016.07, Latest Follow-up: 2016.07</i>	=3.00	2.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>GUINEA, General Distribution (GD), Project End Target: 2016.06, Latest Follow-up: 2016.07</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
Japan	JPN-C-00423-01	Rice	-	2,200
Japan	JPN-C-00423-01	Split Peas	-	72
Japan	JPN-C-00446-01	Rice	-	702
Japan	JPN-C-00482-01	Corn Soya Blend	-	621
Japan	JPN-C-00482-01	Ready To Use Supplementary Food	-	79

Donor	Cont. Ref. No.	Commodity	Purchased in 2016 (mt)	
			In-Kind	Cash
Japan	JPN-C-00482-01	Rice	-	625
Japan	JPN-C-00482-01	Split Peas	-	168
Japan	JPN-C-00482-01	Vegetable Oil	-	18
MULTILATERAL	MULTILATERAL	Rice	-	1,216
USA	USA-C-01125-01	Beans	-	350
USA	USA-C-01125-01	Rice	-	917
		Total	-	6,967