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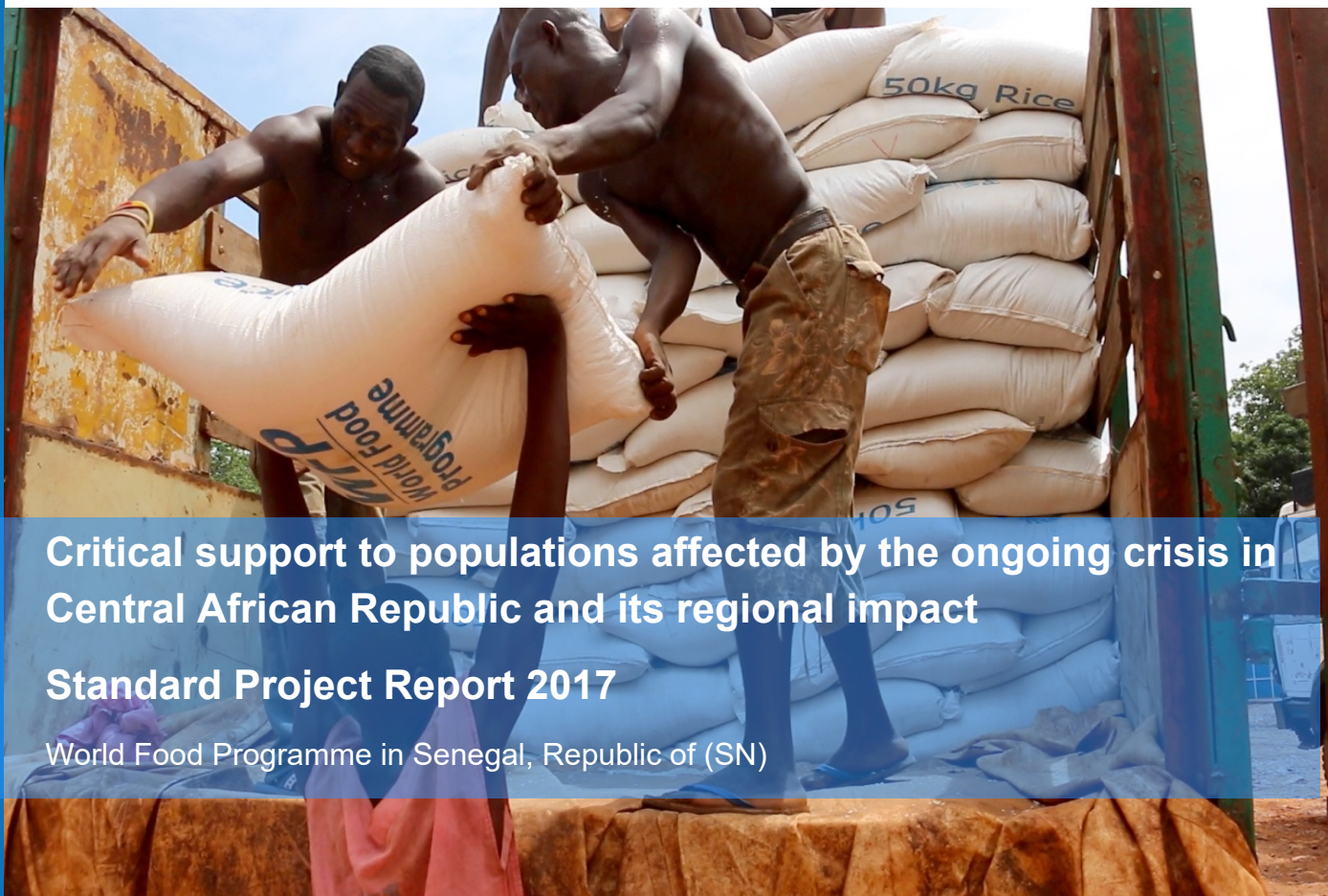
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SPR Reading Guidance



Critical support to populations affected by the ongoing crisis in Central African Republic and its regional impact

Standard Project Report 2017

World Food Programme in Senegal, Republic of (SN)



World Food Programme

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Regional Context

In December 2013, intense violence, insecurity and widespread human rights abuses forced hundreds of thousands of people in the Central African Republic (C.A.R.) to flee their homes in search of safety. Despite subsequent sporadic escalations in violence since 2013, C.A.R. had slowly begun to recover from the crisis and transition into relative stability. However, in 2017, the country has experienced a severe uptick in conflict across the country, including in areas previously unaffected by violence, leaving C.A.R. on the brink of a humanitarian crisis with an estimated 2 million people (45 percent of the population) food insecure of which 500,000 are severely food insecure at the national level (Emergency Food Security Assessment, November 2017). The increased violence has forced further displacement internally and in neighbouring countries. According to the United Nations High Commissioner for Refugees (UNHCR), at present 542,380 refugees from C.A.R. are in Cameroon, Chad, the Democratic Republic of the Congo (DRC) and the Republic of the Congo (RoC), while a further 688,700 people remain displaced inside C.A.R.

Before the crisis, stark gender inequalities existed across almost all sectors of social, political and economic life in C.A.R. The continuing conflict has seen the further aggravation and deepening of these pre-existing gender inequalities. Trapped within a conflict context, whether living in urban or rural parts of the country, girls and women in C.A.R. are at heightened vulnerability to gender-based violence, unplanned pregnancies, early or forced marriage, dropping out of school, rape by armed individuals or groups, sexual slavery, forced recruitment into armed groups, property and livelihoods dispossession and, in some cases, murder. Heightened insecurity and increasing economic pressure on households and communities further impact gender-related tensions.

The Regional EMOP 200799, which commenced in January 2015, aimed to improve food consumption, reduce undernutrition and restore access to basic services throughout the five affected countries (C.A.R., Cameroon, Chad, DRC and RoC). The operation addressed the urgent needs of internally displaced persons (IDPs), refugees, returnees and host communities as well as severely affected local populations in these five countries. In 2017, upon the approval of the operation's sixth budget revision, WFP expanded its geographical reach within C.A.R. in order to address the needs of an additional 131,000 new IDPs affected by the escalation of armed conflict. Furthermore, the operation extended its food assistance-for-assets (FFA) projects and readjusted the cash-based transfer modality component of the operation within certain localities in response to the deteriorating security situation in such regions. WFP continued to target 426,600 refugees in the neighbouring countries with food and nutritional assistance, mainly through general distributions, and supported the UNHCR-organized return process of people to C.A.R. through the provision of three-month food packages.

In 2017, the Regional EMOP faced many challenges, largely caused by the increased humanitarian needs within C.A.R. itself and access constraints, both due to armed groups and inadequate transport links throughout the country. The insecurity saw the destruction of basic amenities, including water facilities, schools, houses and livestock, across several localities, with the situation further compounded by a lack of access to health care facilities and nutrition services. Although nutritional data is limited, sub-national assessments conducted in 2017 indicated worrying levels of acute malnutrition in pockets across C.A.R. The limited access by humanitarian actors within C.A.R. saw WFP continue to utilise airlifts and open new transport routes from Uganda through the DRC in order to reach conflict-affected populations.

The Regional EMOP's prime strategic objective remained to save lives and address the food insecurity and malnutrition in C.A.R. and in the surrounding affected countries. Large-scale nutrition and food security assessments ensured the operation prioritised the provision of timely and efficient food assistance through to the project closure in December 2017.

Project Results

Activities and Operational Partnerships

Central African Republic (C.A.R.)

Through general distributions, WFP provided monthly food assistance to conflict-affected people in the Central African Republic (C.A.R.) in 13 of the 16 prefectures as well as in the autonomous commune of Bangui. In-kind remained the preferred transfer modality for general distributions due to the lack of functioning, accessible and well-supplied markets. In areas where markets were functioning, like Bangui, Bouar, Berbérati, Bozoum, Baoro, Carnot and Kaga-Bandoro, WFP continued to use paper vouchers for cash-based transfer (CBT) in partnership with World Vision, Plan International and Oxfam.

Food assistance targeted the most vulnerable groups, including displaced people, households headed by women, the elderly and persons with disabilities who have limited or no source of income. These broad vulnerability criteria were complemented by a selection tool which takes into account socio-economic vulnerability indicators based on evidence from the food security assessment, such as higher food insecurity levels among women-headed and recently displaced households, and enables a further ranking along a vulnerability scale to identify those most in need. Sex and age ranges were integrated into surveys and assessments, and separate focus group discussions were conducted as well as key informant interviews with women, girls, men and boys in different groups to collect and assess data and information on gender-specific food access issues. Targeting continued focusing on the inclusion of women, making them the food entitlement holders and facilitating their participation in food distribution committees.

The increased incidence of localised outbreaks of violence across C.A.R. in 2017 led to new waves of displacement and a sharp increase in already large humanitarian needs. Due to resourcing constraints during the first quarter of the year, rations distributed to internally displaced persons (IDPs) and severely food-insecure households were reduced to 25 percent until April. From April up to June, newly displaced people were prioritised with food diverted from other programmes to provide them with full emergency food rations, while the remaining displaced persons received 75 percent of the food basket.

Livelihood activities were implemented through the seed protection programme, in partnership with Plan International, World Vision, International Emergency and Development Aid (IEDA) Relief, *Fondation Connect International*, *Vitalité Plus*, Community Humanitarian Emergency Board (COHEB), Person in Need Relief Mission (PNRM) and *Espérance*, and the Purchase for Progress initiative, targeting households in rural areas. Participants of the seed protection programme were selected through community level consultations held by partners and had to fall in the "moderate" vulnerability category, as identified in the general food assistance beneficiary selection tool. The programme supported vulnerable households in gradually resuming their agricultural activities in localities where the security situation relatively improved. WFP provided either in-kind food or vouchers to households who received seeds and tools from the Food and Agriculture Organization of the United Nations (FAO) for the planting season. Under the overall coordination of the Ministry of Agriculture and Rural Development, this intervention was carried out in Mamberé-Kadéi, Ouham-Pendé, Ouham and Nana-Mambéré prefectures.

Under the school meals programme, WFP provided daily hot meals to pre-primary and primary schoolchildren in 401 schools aiming at boosting enrolment rates and incentivising regular attendance, while improving the nutrient intake of the children. The programme was implemented in six prefectures in the west (Mambéré-Kadéi and Nana-Mambéré prefectures), northwest (Ouham-Pendé and Ouham prefectures), centre (Nana-Gribizi) and centre east (Ouaka) parts of the country and Bangui, prioritising schools in relatively safe areas with a high concentration of IDPs and low food security indicators. Rations provided included cereals (120 g), pulses (40 g), oil (15 g) and iodised salt (3 g). Community members were responsible for providing the required condiments and for ensuring that two women were selected as cooks. The cooks were briefed on hygiene and the total quantity of food to be used on a daily basis (according to the effective number of children present). WFP signed partnership agreements with World Vision, Plan International, *Vitalité Plus*, IEDA Relief, *Association des Femmes Evangéliques de Bossangoa* (AFEB) and *Espérance* for the implementation of the school meals programme.

WFP implemented a range of nutrition-sensitive and nutrition-specific activities to provide assistance to beneficiary groups with specific nutrition requirements. These included a programme to prevent acute malnutrition and micronutrient deficiencies among children aged 6-23 months through blanket supplementary feeding. Specialised nutritious foods, such as Super Cereal Plus, were distributed to general food assistance beneficiary families reaching 52,810 children. General distributions were accompanied by communication programmes to increase men and women's understanding of malnutrition and address discriminatory gender roles. The treatment of malnutrition programme was implemented for children aged 6-59 months through targeted supplementary

feeding. Malnutrition was identified through screening, referrals and follow-up visits conducted by outreach teams and treatments being administered in community-based acute malnutrition centres. The programme was implemented in partnership with the United Nations Children's Fund (UNICEF) and the Ministry of Health, reaching 11,005 beneficiaries. WFP continued to support moderately malnourished people living with HIV (PLHIV) and undergoing anti-retroviral therapy (ART) as well as their households to improve the nutritional status of PLHIV and reinforce adherence to treatment. Training was provided to ART counsellors and support group representatives with the aim of raising awareness on the importance of nutrition assessment as part of the nutrition support programme, and developing capacity to assess the nutritional status of ART clients. WFP supported the revision of the nutritional guidelines for PLHIV and the production of image boxes on nutrition for HIV.

WFP activities were implemented through 24 cooperating partners in 13 of the 16 prefectures and the autonomous commune of Bangui. Cooperating partners, including national and international non-governmental organizations (NGOs), facilitated and enhanced WFP's emergency response particularly in hard-to-reach areas. COHEB was, for example, central to WFP's response in Bangassou in May 2017 when violence broke out across the region. However, the limited capacity or lack of cooperating partners in some of the new crisis areas posed major challenges in 2017. The direct targeting of humanitarian workers, including the looting and destruction of their properties and offices, saw many hotspots areas bereft of humanitarian actors, hence impeding WFP's operational flexibility. NGOs, including WFP's cooperating partners, evacuated staff from some places (such as Bangassou, Zemio, Bria, Batangafo, Bocaranga) over security concerns which negatively affected the provision of humanitarian assistance. As a mitigation measure, WFP is working to increase its field footprint through augmenting its presence and capacity across the country, particularly in the southeastern part, and where partner capacity is limited.

WFP continued to conduct due diligence assessments of all partners, including international NGOs. Criteria that were taken into consideration included corruption, neutrality, operational independence, operational capacity and geographical presence and coverage. Regular meetings were held with cooperating partners to discuss their performance and follow-up action points were listed. In cases where the performance did not improve upon follow-up, WFP did not maintain the partnership. To strengthen the capacity of cooperating partners and improve the overall implementation and effectiveness of the activities, WFP facilitated 10 training workshops and briefing sessions on various subjects, including warehouse and commodity management, reporting, payment process, gender and protection, nutrition, the management of the school meals programme, procurement best practices, the field-level agreement process and the prevention of fraud and corruption. Besides this knowledge transfer, capacity strengthening has been conducted throughout the programme cycle through continued engagement (coaching, support, mentoring) with both local and international cooperating partners. Strengthening the capacity of the cooperating partners ensures a more sustainable impact of WFP interventions by empowering communities to address their own food challenges. For instance, in the area of nutrition, the cooperating partners' staff are equipped with knowledge and skills related to different aspects of the management of malnutrition, nutrition awareness and community outreach. The cooperating partners pass this knowledge to the beneficiaries regularly for a sustained impact.

Albeit limited, WFP's cooperation with partners was a central aspect of its efficiency. The cooperating partners provided a good access to remote or unsafe areas with their local anchorage, their acceptance strategies, and their capacity to communicate with the communities and deliver WFP messages. WFP's food assistance was implemented upon complementary partnership with the cooperating partners whose capacity to mobilize additional resources to complete WFP interventions was key to addressing the acute needs in the targeted areas. Partnership commitment to support WFP efforts in delivering food and nutrition assistance to conflict-induced people was also an asset to the response.

WFP continued to cooperate with other United Nations (UN) agencies and line ministries to strengthen the implementation of its activities. This included partnering with UNICEF and the Ministry of Health for the design and implementation of the preventive and treatment of malnutrition programmes; collaboration with FAO to implement the seed protection programme; partnership with the Office of the United Nations High Commissioner for Refugees (UNHCR); and partnership with UNICEF and the Ministry of Education to implement the education support activities within the framework of the "Back to School" campaign. Jointly UNICEF and WFP ensured the provision of a comprehensive education support package including teaching and learning material, school supplies, potable water and school meals as well as trainings for teachers and parents associations on hygiene and cooking demonstrations. Periodic consultation meetings were held with UNHCR to share information on the intervention strategy, food pipeline and beneficiary registration. In addition, WFP and UNHCR jointly supervised food distributions in the refugee camps. Through the seed protection programme, WFP partnered with FAO to provide targeted communities with seeds, tools and food rations to protect their assets and support early recovery. The ongoing Scaling Up Nutrition (SUN) initiative being implemented by the Government in partnership with UNICEF, FAO and WFP provided an effective framework for strengthening government capacities to implement a range of nutrition-sensitive interventions to address the root causes of malnutrition.

Within the framework of the Food Security Cluster, WFP closely coordinated with sector partners through regular meetings and enhanced information management systems, developing joint plans to minimise instances of overlapping and gaps, and coordinating a timely and comprehensive response to emerging humanitarian needs. Information sharing on what is happening on the ground was a critical role played by NGOs in the cluster. NGOs were responsible for collecting and sharing information both at decentralised and central levels in order to maintain accuracy and reliability of information to inform decision-making. Their participation in the Food Security Cluster – in particular that of national NGOs – enhanced the functioning of the cluster, drawing on their close understanding of the local context. NGOs leveraged and lent their experience to the cluster to improve the efficiency of the humanitarian response. Given the ongoing emergency, the humanitarian country team has agreed to maintain the cluster system for the coordination of humanitarian response actions in 2018, or until government sector coordination structures that were proposed under the National Recovery and Peacebuilding Plan (RCPA) 2017–2021 are fully up and running. In this regard, WFP will continue to coordinate the food security analysis and response as co-lead of the Food Security Cluster with FAO.

WFP ensured strong participation in the Nutrition Cluster led by UNICEF to ensure coherent, strategic and effective emergency nutrition responses, working with national and international partners on agreed priorities. The development and review of the Humanitarian Needs Overview and Humanitarian Response Plan were supported through close collaboration with the Nutrition Cluster. In support of restoring education and reversing the dramatic impact of the conflict on the sector, WFP actively collaborated with key partners of the Education Cluster to provide a well-coordinated and enhanced response to education needs, and strengthen integration with other sectors.

WFP played an integral and active role in the United Nations Humanitarian Country Team and encouraged reinforced linkages between various agencies and clusters towards achieving long-term food security and nutrition.

Cameroon

In 2017, through the Regional EMOP 200799, WFP Cameroon continued assisting vulnerable C.A.R. refugees located in refugee sites and host communities, as well as the vulnerable host population. The main project activities included monthly general food assistance to refugees in the seven established UNHCR refugee sites and 78 off-camp sites situated along the border entry points and in local villages. In the Adamaoua region, local households that were severely food insecure also received monthly general food assistance. Food assistance was provided through the CBT with WFP opening three new sites in the Kadey division of the East region (Timangolo, Lolo and Ngarissingo) on top of the one CBT site operating since 2016. CBT enabled 40,000 refugees to have access to nutritious yet diversified foods with 30 different products available in 80 CBT sales outlets. WFP's cooperating partners, Plan International and Catholic Relief Services (CRS), simultaneously provided sensitisation on the importance of food diversification and maintaining a balanced diet.

WFP enacted a robust prevention programme aimed at fighting all forms of malnutrition amongst the most vulnerable groups of children aged 6-23 months. Within this response, WFP simultaneously provided treatment for a small number of cases of moderately malnourished children aged 6-59 months through the blanket supplementary feeding platform. In 2018, WFP intends to scale up these treatment activities. To sustainably reduce wasting, stunting, associated morbidity and mortality, special efforts were made to strengthen the implementation of specific and effective nutrition-sensitive interventions focusing on the first 1,000 days of a child's life. Various preventive platforms, such as general distribution sites being in health centres and community settings, favoured the integration of multi-sectorial activities and ensured interventions addressed both the immediate and underlying causes of malnutrition. Emphasis was placed upon complementary activities such as minimum health care services, food distributions, water, sanitation and hygiene (WASH), and immunisation communication for behavioural change. Focus was given to the creation and animation of support groups for mothers on infant and young child feeding practices.

In collaboration with the Joint United Nations Programme on HIV/AIDS (UNAIDS), WFP implemented a Nutritional Assessment, Counselling and Support component which targeted malnourished people undergoing ART from refugee and host populations across six government HIV treatment and care units. UNAIDS funds, received through the Unified Budget, Results and Accountability Framework, allowed a vulnerability assessment to be carried out amongst PLHIV which informed the livelihood strengthening programme.

WFP implemented food assistance-for-assets (FFA) activities through local NGOs to promote early crisis recovery and build social cohesion between refugees and host communities. FFA activities carried out in the Mbere, Kadey and Lom/Djerem divisions included the construction of a series of fishponds, the creation of water retention for the agriculture practice during dry season, training on home gardening and technical knowledge on the creation of income-generating activities.

FFA activities provided a viable spaces for a series of beneficiary capacity strengthening training sessions, carried out by cooperating partners with technical support from WFP and government partners. These trainings sought to facilitate ownership and sustainability of the activity even after WFP operation finishes. The topics covered

include techniques of constructing different types of fishponds, environmental protection, leadership and management skills to support the creation of fishpond management committee, and the importance of women participation and involvement in community activities. The training reached 1,900 beneficiaries (40 percent women and 60 percent men).

Through inter-agency initiatives in the country, such as the Humanitarian Response Plan and the Regional Refugee Response Plan, the humanitarian response was closely coordinated through regular sector meetings. WFP played a lead role in the food security sector working group and an active role in the nutrition working group. Food assistance to refugees was carried out through a tripartite agreement with UNHCR and the International Federation of Red Cross and Red Crescent Societies (IFRC), covering 85 refugee sites across the East and Adamaoua regions. WFP signed agreements with Adventist Development Relief Agency (ADRA) to carry out general distributions to host population in the Djerem division of the Adamaoua region, with CRS for the implementation of the CBT in Gado, and with Plan International for CBT in Timangolo, Lolo and Ngarissingo. In addition to monitoring transactions between beneficiaries and retailers, CBT cooperating partners provided nutrition education and facilitated an on-site feedback mechanism.

Malnutrition interventions were carried out in line with the Joint Action Plan for the Fight Against Malnutrition in Cameroon, working in close collaboration with the Ministry of Public Health, UNICEF and a wide network of local and international NGOs, including African Humanitarian Action, International Medical Corps and *Association d'Assistance au Développement* (ASAD). WFP established effective working relationships with administrative, political and technical government partners at the central and local levels, which enabled effective programme implementation and integration in existing regional health systems and structures. WFP endeavoured to strengthen capacity of local and international partners, local government structures, communities and health centre staff through numerous trainings. A network of 500 community health workers and 30 government HIV treatment and care personnel were supported and trained by WFP and partners.

Agreements were signed between WFP and several local NGOs for the implementation of FFA activities: *Association for Promotion and Creation* (APCRE), *Women Agricultural Rural Development* (WARDA), *Association de Secours aux Orphelins et des Personnes Vulnérables* (ASOPV), and *Association pour le Développement Economique, Social et Environnemental* (ADESE). Local partnerships proved to be advantageous for FFA due to their enhanced knowledge of the local context as well as their ability to involve communities in the planning, designing and implementation of projects. Furthermore, local organizations contribute to WFP's phase out strategy through strengthening capacities of local structures and community-based organizations on fighting food insecurity, promoting early recovery from crisis and building resilient populations.

WFP actively participated in regional coordination meetings held by the regional delegation of agriculture. In addition, WFP strived to develop the capacity of local partners, communities and cooperatives in the region. About 55 cooperatives received heavy duty grinding mills from WFP in the course of the year, to facilitate transformation of agricultural products thereby increasing their market values.

Chad

The Regional EMOP was planned to provide emergency food assistance through vouchers to 25,000 Chadian returnees from C.A.R. as well as host communities located in the region of Salamat. However, limited funding required WFP Chad to prioritise its assistance, supporting only 13,300 returnees. WFP Chad provided monthly assistance to other Chadian returnees and protracted refugees living in neighbouring regions under the Chad PRRO 200713. To rationalise assistance and facilitate operational synergies, beneficiaries in Salamat were transferred into PRRO 200713 from July 2017. Between January and April, returnees in Salamat received a full entitlement of USD 0.375 per person per day. As of May 2017, beneficiaries started receiving half rations due to lack of funding.

WFP planned to register the returnee beneficiaries using SCOPE, WFP's corporate digital beneficiary and transfer-management platform, in the region of Salamat to better identify people affected by the crisis. Considering multiple operational priorities, including the lean season assistance to vulnerable Chadians and the emergency assistance to IDPs and refugees, this activity was postponed in the region of Salamat.

In early May 2017, an inter-cluster mission conducted a multi-sectorial assessment on two returnee sites in the neighbouring region of Moyen Chari. Overall findings highlighted the drop by more than half in the overall number of partners in the area from 57 in 2015 to 24 partners in mid-2017. This heavily affected the humanitarian response to the C.A.R. crisis in Chad as basic needs such as health, food security or WASH could no longer be met.

Islamic Relief Worldwide (IRW) is an NGO with a significant operational presence in the zone and a good understanding of the C.A.R. crisis. It proved to have a good working relationship with local authorities and other humanitarian actors. WFP organized trainings for the partner staff to increase their technical skills in project management, monitoring and evaluation, and reporting. As a result, IRW could oversee the distribution process including the level of the rations received by beneficiaries. Its strong programmatic capacity supported WFP during

the internal restructuring process. Since the closure of the sub-office in Haraze, IRW has organized distributions with a limited support from WFP and has demonstrated great flexibility. Between March and June, additional security requirements were effective in the southeast of Chad. WFP staff were required to travel in a convoy of a minimum two vehicles when monitoring distribution sites. To facilitate this process, IRW allocated its own vehicle to accompany WFP in the field.

Democratic Republic of the Congo (DRC)

In 2017, WFP's assistance to refugees from C.A.R in the Democratic Republic of the Congo (DRC) was provided through:

- In-kind and CBT to 60,000 refugees settled in the four camps of Mole and Boyabu (South Ubangi) and Inke and Bili (North Ubangi);
- Treatment of moderate acute malnutrition (MAM) for children aged 6-59 months and pregnant and lactating women (PLW) in refugee populations and host communities;
- Food by Prescription support for HIV/tuberculosis (TB) care and treatment; and
- Emergency assistance through cash transfers to new arrivals and host families following a deterioration of the security situation in C.A.R.

While assistance in Mole and Boyabu camps has been provided through cash transfers over the last years, Inke and Bili camps have utilised commodity vouchers and in-kind distribution respectively. The results of post-distribution monitoring and a Joint Assessment Mission in early 2017 revealed acceptable food consumption scores in Mole and Boyabu where direct cash is distributed while further analysis showed markets in Inke were equipped to absorb additional cash. Direct cash transfers were introduced in Inke from May 2017 and value vouchers introduced in Bili where markets are not yet equipped to absorb additional cash. Value vouchers were planned to be introduced earlier in Bili, however WFP experienced delays in implementation. As such, the remaining in-kind stocks were used in Bili for the first three months of 2017, accounting for the over-distribution of rice, salt, oil and pulses.

Due to funding constraints, WFP provided a reduced CBT ration in 2017. An increase in market prices throughout the year led to the decision to harmonise the ration value across all camps, therefore increasing the overall ration value. From July onwards, WFP provided CDF 16,500 (approximately USD 11), or the equivalent in value vouchers, to refugees in all four camps.

WFP's partnership strategy has continued through a two-part approach: a tripartite collaboration with UNHCR and local cooperating partners in the refugee camps, and bilateral agreements with WFP partners for nutrition support. WFP continued to work closely with the National Commission for Refugees (CNR). Throughout the year, in partnership with UNHCR and other stakeholders, WFP continued to review the intervention strategy to ensure use of the most appropriate modality and the best use of resources, and to develop a potential targeted approach to assistance. While the overall performance of the partners was good, WFP regularly reviewed distribution planning and implementation to enhance capacities of partners.

Through the tripartite agreement with UNHCR, local partners *Association pour le Développement Social et la Sauvegarde de l'Environnement (ADSSE)* and *Agence de Développement Economique et Social (ADES)* implemented food assistance and nutrition programmes respectively in the four camps. Financial service provider, Trust Merchant Bank (TMB), distributed cash. Nutrition activities outside the camps were implemented in collaboration with *Action pour la protection et l'encadrement de l'enfant (APEE)*. The nutritional response continued to be coordinated between WFP, UNCHR and UNICEF at the national and provincial levels to ensure that specific needs of refugees are properly addressed. UNHCR has engaged a dedicated NGO that assists vulnerable groups such as pregnant women, children, elderly and other people with specific needs.

In 2017, WFP provided daily rations of large quantity lipid-based nutrient supplement (LNS-LQ) to malnourished children aged 6-59 months for the treatment of MAM, Super Cereal and oil (250 g and 25 g respectively) to PLW in refugee populations and vulnerable host communities, and Super Cereal and oil (250 g and 25 g respectively) through Food by Prescription to malnourished ART patients. More PLW were reached than planned when all remaining Super Cereal was distributed in August before its expiration date, due to long delivery lead times to North and South Ubangi. Fewer children were reached than planned due to a delay in implementation and a pipeline break in the supply of LNS-LQ.

Planned activities included FFA for both refugees and host communities. However, this was not implemented in 2017 due to limited funding.

A deterioration of the security situation in C.A.R. in the second half of 2017 forced tens of thousands of refugees to cross the border into the provinces of South and North Ubangi and Bas-Uele. These refugees settled with host families. WFP provided assistance to 20,000 newly-arrived refugees and 6,000 members of host communities with a cash transfer of CDF 16,500 (USD 11), equivalent to the transfer value distributed at other WFP-assisted sites in

the region. Assistance was provided in December to refugees for one month. Verification of host families to receive assistance is ongoing, and they will be provided with a one-month ration in early 2018 once validation is complete. Discussions are underway between UNHCR and the Government of DRC to define a strategy to continue refugee support following initial emergency assistance.

WFP's main partners in the provision of emergency assistance to the new arrivals were UNHCR and CNR for the coordination of assistance, and ADSSE and TMB for the distribution of cash to refugees. Pre-distribution sensitisation was carried out by UNHCR and CNR in coordination with WFP field staff, while local authorities provided lists of the host families in which new arrivals were settling.

Republic of the Congo (RoC)

Since February 2013, WFP has been assisting C.A.R. refugees living in the Likouala department with emergency food assistance and nutritional support. Regional conflicts have caused a series of mass displacements, with many refugees fleeing to the Republic of the Congo (RoC). According to UNHCR figures released in October 2017, the country currently hosts 59,285 refugees from DRC as well as 32,074 from C.A.R. and Rwanda. Refugees are almost entirely dependent on aid from humanitarian organizations and the solidarity of the local population. Prospects for improving their level of self-sufficiency are limited within RoC.

In 2017, WFP provided targeted food assistance to C.A.R. refugees based on a list provided by UNHCR. Since May 2017, WFP provided a hybrid distribution of CBT and in-kind.

While WFP continued to distribute in-kind in remote areas, in both Impfondo and Bétou regions where the market and the telephone connectivity were widely available and strong, WFP prioritised CBT modality. In such CBT areas, WFP continued to provide fortified oil and iodised salt which are generally expensive and difficult to find in the areas. For the other commodities, refugees were free to purchase commodities of choice from private stores contracted by WFP. The in-kind rations were composed of 350 g of rice, 120 g of peas, 35 g of oil and 5 g of salt. CBT rations amounted to USD 13.54 (FCFA 7,300) was provided to each refugee per month complemented by 35 g of fortified oil and 5 g of iodised salt. Supplementary food rations were provided to malnourished children aged 6-59 months consisting of daily rations of LNS-LQ while PLW received 200 g of Super Cereal and 35 g of oil.

Substantial contributions received from donors ensured the continuation of food assistance under the Regional EMOP throughout 2017. The Government facilitated the import of food, while cooperating partners, such as the *Agence d'Assistance aux Réfugiés et Rapatriés du Congo* (AARREC) provided technical support and complementary inputs in the implementation of activities. During the reporting period, a food distribution tripartite agreement was signed between UNHCR, WFP, a local NGO called AARREC and an international NGO, *Terre Sans Frontières*.

Results

Central African Republic (C.A.R.)

Active fighting, access restrictions and the presence of armed groups continued to affect WFP's ability to reach several parts of the country in a regular and predictable manner, hampering its capacity to deliver assistance at planned levels in some parts of the country. Despite these challenges, WFP conducted most of planned monthly distributions, reaching an average of 400,000 beneficiaries every month, and providing 60 percent of the planned food over the course of the year. Assistance through cash-based transfer (CBT) did not expand as intended due to the deterioration of the security situation in some of the targeted localities (Bambari for instance), access constraints, lack of functioning markets and lower food availability in markets. Limited resources alongside increased insecurity and humanitarian needs forced WFP to reduce rations to 25 percent at the beginning of the year (January to March), and later to introduce a prioritisation plan for displaced people, targeting newly displaced with full rations while the remaining beneficiaries received 75 percent of the ration.

The post-distribution monitoring (PDM) conducted in May 2017 indicated that 75.9 percent of the households surveyed have acceptable food consumption scores (FCS), against a baseline of 77 percent in August 2016. It also indicated a relatively high proportion of households with a borderline FCS (19.6 percent against 15 percent in August 2016) and that 7.8 percent of the households surveyed have a very poor diet (compared with 8 percent in August 2016), with a substitution of more nutritious cereal and vegetable staples with cassava, and a sharp reduction in animal protein intake. Households reported assistance as their main food source. When asked about the use of their last food ration, surveyed households indicated that most quantities were already consumed (51.7 percent of the cereals, 52.6 percent of the pulses, 61 percent of the fortified oil, 55 percent of the Super Cereal, 65.3 percent of the salt and 73.8 percent of the large quantity lipid-based nutrient supplement (LNS-LQ)) while some quantities were still in stock (cereals: 25.8 percent, pulses: 26.1 percent, oil: 27.8 percent, Super Cereal: 17.5 percent, salt: 26.9 percent and LNS-LQ: 13.4 percent). Furthermore, the May 2017 PDM highlighted higher levels of

poor FCS for households headed by women (10.2 percent) than those headed by men (6 percent), confirming women's higher vulnerability to food insecurity highlighted by the assessments and WFP targeting criteria.

The May 2017 PDM indicated that the dietary diversity scores (DDS) were above the desired targets. The consumption by food group shows that 69.5 percent of the households surveyed consumed an average varied diet (medium DDS, meaning the households consumed between 4 to 6 food groups within 7 days prior to the survey) while 21.5 percent had a varied diet (high DDS, e.g. the households consumed at least 6 food groups within 7 days prior to the survey). Comparatively, in August 2016, 83 percent of the households surveyed had medium and high DDS. No variations were observed between households headed by men or women during the May 2017 PDM.

Results from the National Food Security Assessment – *Enquête Nationale sur la Sécurité Alimentaire* (ENSA) – show that the food-based coping strategies (indicating the coping mechanisms applied to deal with lack of food or money to buy food) decreased from 14.3 in 2016 to an average of 11.9 in 2017 (preliminary results from the 2017 ENSA). Lower coping strategy index (CSI) means that households have to adapt less coping mechanisms and suggests an overall improvement of the food security situation. However, in Haut-Mbomou (19.4), Nana-Gribizi (17.5), Ouham (16), Haute-Kotto (15.4) and Ouham-Pende (14.4), results from the May 2017 PDM indicate an increase of the food-based coping strategies. This increase in food-based coping strategies used by surveyed households may reflect the overall deterioration in food security linked with the displacements, as households sought to mitigate the impact of decreased food availability. Although WFP conducted airlifts in the Bangassou, Zemio and Obo localities and secured a new humanitarian corridor through the Democratic Republic of the Congo (DRC) to supply the southeastern part of the country, distributions to beneficiary communities did not occur on a monthly basis in some areas. The limited capacity of air deliveries and partners combined with the huge logistical and security challenges constrained WFP's ability to provide timely assistance.

WFP continued to provide specialised nutritious foods for the treatment of moderate acute malnutrition (MAM) to children aged 6-59 months in 112 health facilities and incentivised caregivers of severely malnourished children to complete treatments through general distributions. Prevention of MAM amongst children aged 6-23 months was implemented alongside general distribution with active screening strengthening the referral of malnourished children to health facilities. The MAM treatment activities were successful in meeting the SPHERE standard targets for recovery, non-response, default and mortality rates, which all remained stable. Similarly, the coverage of treatment programmes was above the SPHERE target. These results show the effectiveness of the continued efforts of WFP, in partnership with the United Nations Children's Fund (UNICEF), in reaching malnourished populations in the very challenging operational context of the Central African Republic (C.A.R.).

The Food by Prescription programme registered improved performance indicators throughout the year, thus meeting the SPHERE standards with annual nutritional recovery rate of 95.64 percent and a default rate of 2.35 percent. However, insecurity and access constraints hampered the delivery of food stocks and distributions.

Over the year, 238,393 children in six prefectures benefited from daily school meals, achieving 128 percent of the planned target. The sharp increase in the number of children assisted is linked with the deterioration of the security situation, which prompted many people to seek refuge in more peaceful settings where the school meals programme provided an opportunity for parents to address the immediate food and protection needs of their children. The number of schools assisted increased from 326 in 2016 to 401 in 2017. The WFP school meals programme contributed to incentivising enrolment, retention and attendance, while improving the micronutrient intake of schoolchildren, positively affecting their cognitive abilities. Although overall enrolment in WFP-assisted schools improved, a breakdown of the indicator shows boys' enrolment to have grown at a very encouraging rate whereas girls' enrolment declined. Under the coordination of the Ministry of Education, the Food and Agriculture Organization of the United Nations (FAO), UNICEF and World Health Organization (WHO) have initiated a joint pilot project in 14 rural public primary schools that will provide complementary interventions. WFP was able to assist the majority of the intended schoolchildren with hot meals served on site, however with insecurity hindering access, the school meals activity could not be regularly implemented in all planned schools.

WFP continued to implement recovery interventions through the seed protection and the Purchase for Progress (P4P) programmes. Under the seed protection programme, WFP worked in sync with FAO to help 4,200 families to strengthen livelihoods and build resilience to recover from the crises in C.A.R. The initiative aims to restore livelihoods and improve food security and nutrition, combining food assistance with support to smallholder agriculture production. WFP distributed in-kind and CBT while FAO provided seeds and tools. The activity was carried out in partnership with the Ministry of Rural Development and five national and international non-governmental organizations (NGOs). Through P4P, WFP used its purchasing power to connect smallholder farmers to markets, giving them an opportunity to grow their businesses and improve their lives and those of their entire communities.

In 2017, WFP locally purchased 847 mt of food (an increase of 249 percent from 2016) from 1,367 farmers groups – totalling 24,474 smallholder farmers, out of which 55 percent are women – for the school meals

programme and general distributions. Additionally, 447 small-scale farmers received training and capacity strengthening in P4P procedures, improved production, post-harvest handling and other key agribusiness skills. The P4P mainly targeted women farmers in order to address the particular difficulties they face. Targeting criteria included the level of vulnerability, the willingness to be part of a farmer group and access to land. Efforts were made to ensure the inclusion of both men and women during gender sensitisation, in order to acquire the buy-in of the most influential members of communities, such as religious and customary leaders who are generally men. Within P4P, this has often been achieved by stressing the economic gains for households and communities which embrace gender equality.

In terms of capacity augmentation, WFP and partners provided support to the Government to conduct the Zero Hunger Strategic Review which will provide a comprehensive overview and detailed analysis of the main drivers of food insecurity, and identified gaps, challenges, opportunities and priorities in meeting national food security objectives. In collaboration with UNICEF, technical assistance was provided in the preparation of the National Food Security and Nutrition Policy document.

Cameroon

The results from WFP's September 2017 PDM showed that 25 percent of C.A.R. refugees receiving food assistance have poor or borderline FCS. In contrast, 16 percent of C.A.R. refugees had poor or borderline scores in the same period in 2016. A decrease of resources in 2017 required WFP to reduce monthly food rations and the cash amount distributed to the beneficiaries by 50 percent. This reduction may explain the deterioration in the FCS during the first half of the year, particularly given that most C.A.R. refugees are entirely dependent on food assistance. From September 2017, the ration sizes and amount of cash distributed progressively increased to 75 percent, which has also been reflected in an increase in FCS scores in recent analysis. In 2017, 155,500 refugees and 15,000 vulnerable people within host populations received food assistance through in-kind and CBT modalities in 85 sites across the East and Adamaoua regions.

Under the prevention of malnutrition programme, 40,000 children aged 6-23 months were assisted on a monthly basis. A package of complementary activities was put in place with 70,000 children and caregivers benefiting from various services such as immunisation, micronutrient supplementation, nutritional education on infant and young child feeding practices, deworming, receiving treated mosquito nets for malaria prevention, sensitisation on water and good sanitation practices, culinary demonstrations on diversified and balanced diets, and family planning sessions.

Community-based management of malnutrition was strengthened through the capacity development of 500 community health workers across 60 sites and villages in the East and Adamaoua regions. The technical and logistics capacities of health structures and personnel were strengthened through workshops and trainings. The capacity of the regional health services, in particular health services in the East and Adamaoua regions, were strengthened with the provision of motorbikes, bicycles and tricycles to facilitate supervision and community mobilization activities, thereby improving the quality of services provided. Nutritional screening results at the end of the year showed global acute malnutrition (GAM) levels amongst children aged 6-59 months at 1.94 percent compared with 4.2 percent the same period in 2016. This represents a significant improvement in the nutritional status of children in the targeted zones. Furthermore, the 2017 Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey amongst host population of the same regions shows GAM levels at 4.8 percent. Both of these rates fall within acceptable threshold as per the WHO's classification of malnutrition.

The HIV programme provided nutritional support to 2,293 people living with HIV (PLHIV) – 2,044 clients under anti-retroviral therapy (ART), 75 prevention of mother-to-child transmission (PMTCT) clients, 174 tuberculosis (TB) clients – in 6 HIV treatment and care units, with a focus on women and children living with HIV. The programme registered an annual nutritional recovery rate of 95.3 percent, a death rate of 2.7 percent and a defaulter rate of 1.08 percent, and they are within SPHERE standards. There has been a remarkable improvement in performance indicators from 2016 where 76 percent recovery and 14 percent defaulter rates were recorded. These improvements are due to four factors:

- Various capacity strengthening workshops organized in favour of government HIV personnel to improve quality of care;
- Community approach to early screening, detection and referral of HIV patients put in place by *Groupe Technique Régional (GTR)*;
- Continuous provision of food supplements in 2017 without pipeline breaks and the positive effect of Super Cereal in reducing ART side effects as testified by clients; and
- Intensified community follow-up via home visits organized by psycho-social agents to ensure patients respect their prescribed doses both for ART and Super Cereal.

More beneficiaries than planned received assistance because the number of malnourished ART clients was slightly underestimated. Beneficiaries also received nutrition education and communication sessions as well as culinary demonstrations using local products. Capacity strengthening workshops were organized for 30 HIV treatment and care personnel at both health centre and community levels. A vulnerability survey of PLHIV who were recipients under the Nutrition Assessment, Counselling and Support programme established a vulnerability criteria for further livelihood support. A total of 100 PLHIV head of households were trained on income-generating activities, using the Village Savings and Loan Associations model which ensured participants to raise enough capital to start up and expand existing businesses, thereby increasing household revenue and access to nutritious and diversified foods. The income-generating activities component addresses the main challenge faced by the beneficiaries namely the absence of safety nets for discharged clients and the high numbers of discharged patients falling back into malnutrition.

Despite the ration cuts in 2017, the subsequent increase to 75 percent of the ration sizes and transfer values resulted in the positive evolution of food security in the coverage area as revealed by the follow-up surveys (food basket monitoring and PDM) conducted by WFP. The food basket for CBT was expanded to a wide range of products, thereby giving beneficiaries the flexibility to choose according to the needs of the family members (children, pregnant women, elderly).

In 2017, WFP strived to increase self-reliance and resilience building initiatives through livelihoods activities, gradually decreasing refugee dependency on humanitarian assistance. Several food assistance-for-assets (FFA) creation initiatives were undertaken in the Mbere, Kadey, Lom/Djerem divisions of the East and Adamaoua regions. Fish ponds were created bringing a new diversity in the local diet, and cash crops were cultivated strengthening the capacity of vulnerable households in agriculture and generating income for continuous access to food all year round. FFA participants also benefited from training on income-generating activities.

Continued food support remains critical for the most vulnerable and at-risk groups to stabilize food security and reduce the use of negative coping strategies. In 2018, WFP will continue to consolidate efforts to build the autonomy of refugees and host populations with the generous support of donors.

Chad

The PDM exercise carried out at all returnee sites in May 2017 collected data, disaggregated by gender, on the food security indicators allowing WFP to conduct meaningful comparisons and trend analysis. Findings from the 2017 PDM indicated a considerable increase (by 19.4 points) in levels of poor FCS among surveyed households in comparison to the previous year. This deterioration could largely be attributed to the fact that 2016 data was collected during the harvest season when households could complement food assistance with their own stocks, while 2017 data was collected during the lean season when households only relied on external food assistance. It is worth noting that harvests in 2016 and 2017 have been below average in the assisted regions further limiting food access and availability, thus contributing to the negative trend in FCS.

The DDS measured the number of different food groups consumed in the seven days prior to the monitoring period. It is a good complement to the FCS since it provides a complete picture of the household diet. Monitoring in 2017 did not show any notable changes in DDS as compared with 2016. Results showed very similar levels between households headed by women or men. However, the DDS remained below the corporate target, demonstrating low diet diversity to be a lingering issue amongst targeted populations.

In 2017, the operation experienced some delays, mainly due to lengthy agreement processes with cooperating partners. Consequently, January distributions did not take place as planned.

Democratic Republic of the Congo (DRC)

In line with the funding received, WFP continued to prioritise general food assistance and nutrition activities. 2017 saw the continuation of direct cash assistance in Buyabu and Mole camps and a switch to direct cash and value vouchers in Inke and Bili respectively following a January 2017 feasibility assessment. In general, the FCS in all camps have improved compared to the baseline.

Food security indicators show improvement in Bili camp in 2017 compared with the previous year. The proportion of households with poor food consumption has decreased to 4 percent compared with 17.5 percent in 2016. Bili is also showing an improvement in the household dietary diversity, with an average 14 percent increase in food groups consumed compared with 2016. The good food groups that are now more frequently consumed are cereals, pulses, vegetables, oil, fruit and sometimes meat.

Overall, 81 percent, or 4 out of 5 beneficiary households, showed acceptable food consumption in 2017, a continuous improvement in the number of food-secure households since the start of the project in 2015. Similarly, 2017 saw a marked improvement in dietary diversity across all refugee households compared with 2016, with an average increase of 30 percent in food groups consumed. The CBT has enabled households to obtain a variety of food according to preference, with some households investing part of their cash ration in longer-term food security

through income-generating activities. Additionally, a 50 percent increase in the ration value from July onwards ensured beneficiaries' food security amidst rising market prices.

Improvements were relatively well distributed between households headed by women or men, with the exception of Buyabu. End of 2017 PDM results in Buyabu for households showed a decline in food security compared to the baseline, indicating that the needs of households headed by women may go beyond direct cash assistance for purchasing food. WFP assistance tends to be the only assistance provided at a given time and the main source of income for many households, thereby limiting the impact of assistance on food security indicators and the capacity of beneficiaries to satisfy all basic needs. Assistance is currently given equally to all households without taking specific vulnerabilities into account. Results such as this will inform WFP and UNCHR discussions around the potential introduction of vulnerability-based targeting in future implementation.

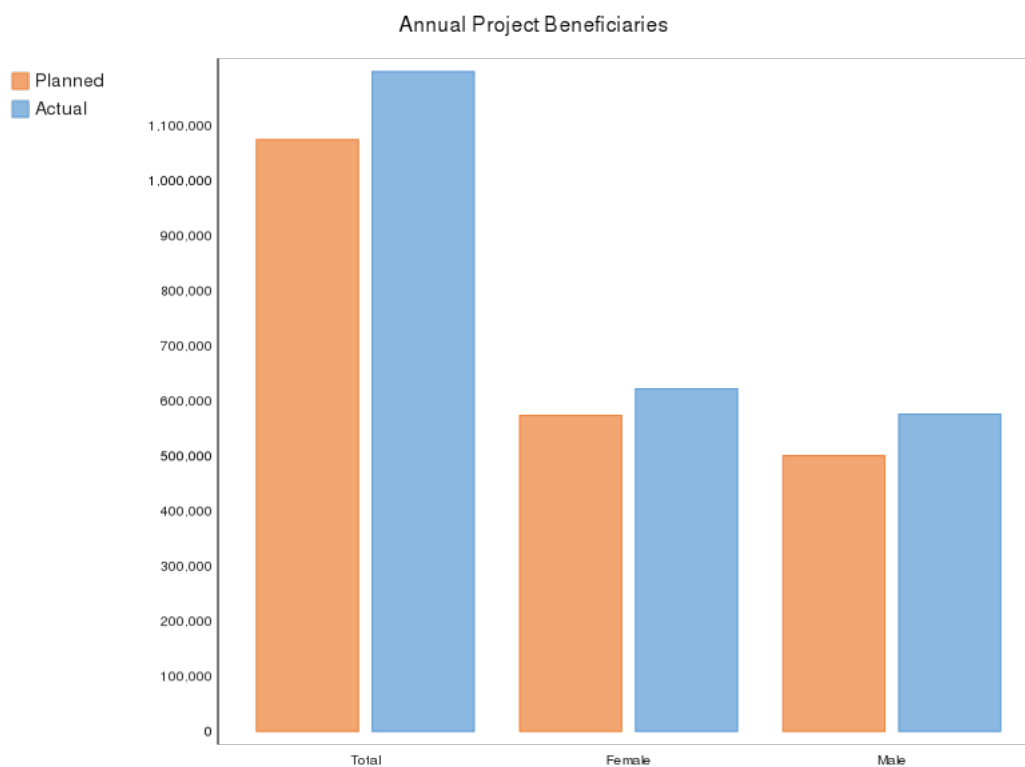
The MAM treatment activities were carried out among refugee populations and surrounding host communities in line with the national acute malnutrition protocol, *Protocole national de prise en charge intégrée de la malnutrition aiguë* (PCIMA). The nutritional status of both children aged 6-59 months and pregnant and lactating women (PLW) shows improvement against the base value, despite a pipeline break in the supply of LNS-LQ and no provision of Super Cereal beyond August 2017. Default and mortality rates remained consistently low, with the PLW mortality rate remaining at zero. WFP's cooperation with local NGO *Association pour le Développement Economique et Social* (ADES) has continued, with frequent screening, training and sensitisation. As a result, beneficiaries are well informed of the programme and attend health centres every two weeks to receive the nutrition ration.

Republic of the Congo (RoC)

In 2017, 18,780 refugees, including 1,457 malnourished children and PLW, received food assistance through general distributions and CBT.

PDM assessments were organized in August and December to evaluate the food security situation of refugees, although the results of the December assessment are not yet available. The mid-year results showed a decrease of food security status of the beneficiaries as the percentage of households with poor FCS increased from 3.6 percent in June 2017 to 9.8 percent in August 2017. Furthermore, the number of households with a reduced CSI decreased from 84.9 percent in June 2016 to 77.7 percent in August 2017 while the nutritional status of children aged 6-59 months and PLW stabilized.

Delays in transporting food to final delivery points resulted in the underachievement of the outputs planned for the year with regards to the quantity of food distributed to beneficiaries, although not for the number of sites covered. Pipeline and transport related issues further caused irregularities for the MAM and PLW programmes, including a break in LNS-LQ food assistance from July to December.



Annual Project Food Distribution

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Cameroon			
Beans	4,270	57	1.3%
Corn Soya Blend	3,620	2,340	64.6%
Iodised Salt	213	126	58.9%
Peas	-	1,581	-
Rice	14,944	1,184	7.9%
Rice Soya Blend	-	4	-
Sorghum Flour	-	99	-
Sorghum/Millet	-	9,660	-
Split Peas	-	944	-
Vegetable Oil	1,503	957	63.6%
Subtotal	24,550	16,953	69.1%
Central African Republic			
Beans	1,017	501	49.3%
Biscuits	50	-	-
Corn Soya Blend	4,554	2,075	45.6%

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
High Energy Biscuits	-	1	-
Iodised Salt	422	245	58.0%
Maize	650	143	22.0%
Maize Meal	6,460	4,790	74.1%
Olive Oil	-	2	-
Peas	-	3	-
Ready To Use Supplementary Food	68	311	459.6%
Ready To Use Therapeutic Food	-	8	-
Rice	18,411	11,066	60.1%
Sorghum Flour	-	5	-
Sorghum/Millet	203	412	202.6%
Split Lentils	-	17	-
Split Peas	5,933	3,685	62.1%
Sugar	-	11	-
Vegetable Oil	2,668	1,749	65.5%
Wheat Soya Blend	-	19	-
Subtotal	40,435	25,043	61.9%
Congo (Brazzaville)			
Beans	-	49	-
Corn Soya Blend	18	32	175.7%
Iodised Salt	34	14	40.8%
Ready To Use Supplementary Food	22	16	74.7%
Rice	829	645	77.7%
Split Peas	249	183	73.5%
Vegetable Oil	242	143	59.0%
Subtotal	1,394	1,081	77.6%
DR of Congo			
Beans	28	77	278.2%
Corn Soya Blend	171	170	99.0%
High Energy Biscuits	1	-	-
Iodised Salt	1	3	294.4%
Ready To Use Supplementary Food	50	42	85.0%
Rice	92	259	280.4%
Split Peas	-	2	-
Vegetable Oil	24	37	155.4%

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Subtotal	368	591	160.6%
Total	66,747	43,668	65.4%

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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned
Cameroon			
Cash	7,680,600	4,264,702	55.5%
Central African Republic			
Cash	3,312,450	-	-
Value Voucher	11,778,975	6,114,989	51.9%
Food Transfer-Chad			
Value Voucher	1,687,500	578,390	34.3%
Congo (Brazzaville)			
Cash	1,911,600	467,771	24.5%
DR of Congo			
Cash	6,940,735	5,523,593	79.6%
Commodity Voucher	2,991,696	720,467	24.1%
Value Voucher	2,034,353	675,481	33.2%
Total	38,337,909	18,345,393	47.9%

Performance Monitoring

Central African Republic (C.A.R.)

WFP activities are monitored within the framework of an established monitoring and evaluation (M&E) system in the Central African Republic (C.A.R.). The monitoring system included output, process and outcome monitoring:

- Output monitoring was based on quantitative information provided by partners on a monthly basis and then recorded in the Country Office Tool for Managing Effectively (COMET).
- Process monitoring was carried out through on-site visits at distribution points, shops and schools, to collect observations from partners and beneficiaries on the implementation mechanisms.
- Outcome monitoring was based on data collected through post-distribution monitoring (PDM) visits at the household level, using questionnaires that captured information on food consumption patterns, dietary diversity and consumption-based coping strategies.

The country office distribution plan is reviewed on a monthly basis by the Supply Chain committee in Bangui in order to prioritise the activities according to resources available. The number of selected distributions sites is then used by each sub-office to establish its monitoring plan which is consolidated at the country office level in Bangui. The approved monitoring plan determines the number and types of visits to be undertaken. The monitoring reports are consolidated through COMET and used to adjust activity implementation as needed.

In order to improve the quality of data collection and speed up the reporting process, the country office provided the sub-offices with smartphones (5 for each sub-office) to digitalize the process by early 2018. This will eliminate the use of paper for data collection.

Two PDM conducted in May and November 2017 enabled an analysis of the outcomes of the food assistance provided through general distributions, food assistance for assets (FFA) and nutrition interventions. The qualitative information from PDM reports complemented the quantitative information of quarterly reports submitted by the cooperating partners.

WFP conducted direct monitoring of its activities through dedicated monitoring teams consisting of 25 staff members based in all five sub-offices plus Bangui. Ten additional monitoring assistants were recruited in 2017 to strengthen monitoring activities. To ensure gender-specific issues were adequately captured, WFP maintained an active presence of both men and women field monitors across WFP and cooperating partners. An internal emergency task force was established and met on a weekly basis to analyse, monitor and coordinate the response in the hotspots. This allowed to assess the effectiveness of the assistance in the hotspots and take necessary measures to improve the timeliness of WFP assistance in areas affected by the uptick of violence in 2017.

WFP continued to strengthen its monitoring system to assess the effectiveness of the assistance and ensure evidence-based decision-making. In this regard, several trainings were organized to enhance WFP staff and partners capacity in monitoring and reporting on results.

The mobile Vulnerability Analysis and Mapping (mVAM) provided up-to-date and almost real-time data about people living in remote and hard-to-reach areas. Key informants in 40 localities were contacted monthly via live calls and asked to respond to questions about food prices, market functionality, food availability, security and population movements. The mVAM surveys allowed for a faster and more accountable humanitarian response, and generated evidence about the most vulnerable zones and the most vulnerable population groups, such as displaced people. This ensured WFP was in a better and more informed position to amend programmatic decisions and improve the appropriateness and timeliness of the response with accurate, timely and, due to the security situation, otherwise unobtainable data.

Cameroon

WFP continued its efforts to strengthen the M & E system, including continuous online and workshop training sessions for all programme and partner staff, collecting quality data on corporate indicators, and analysis and dissemination of results to orientate decision-making. The services of a third party were used to ensure quarterly PDM data collection. Three PDM were carried out in 2017 to allow WFP to measure the effectiveness and outcome of food assistance, and to follow up on performance indicators. The quality of monitoring procedures is continuously improved through the strengthening of cooperating partners' monitoring capacity as well as training in food security and nutrition monitoring and vulnerability analysis of government counterparts. WFP Cameroon ensured the presence of women monitoring assistants in the field to promote gender parity and to create a conducive environment for women beneficiaries to express themselves and to better address their needs. Efforts were made to ensure a more equal gender participation among the field staff, including partner staff.

An annual monitoring plan was established at the field office level at the beginning of the year to coordinate monitoring missions and ensure all project sites are visited. Monthly mission plans were based on the annual monitoring plan, supported by well-developed terms of reference and mission reports detailing mission findings and recommendations for improvements. WFP permanently ensures quality data is collected by field staff and partners, disaggregated by activity type, transfer modality, sex and age, and disability status. Monthly food distribution monitoring and food basket monitoring were carried out for timely detection and resolution of operational concerns. In 2017, a capacity needs assessment was carried out by the nutrition team together with the nutrition branch of the Ministry of Public Health, to assess the health system's capacity to strengthen programmes under nutrition through a multi-sectoral approach. Two major surveys were conducted by the National Food Security Programme (PNSA) and WFP, the Comprehensive Food Security and Vulnerability Analysis (CFSVA) and the Food Security Monitoring System (FSMS). The FSMS ensures a more regular follow-up of the food security situation in the targeted regions.

Chad

Since mid-2016, WFP Chad has utilised COMET for recording and tracking all output and outcome related data. For output monitoring, partners' reports on distributions and the implementation of other activities were submitted monthly before being verified, validated and uploaded onto the system by sub-office M & E focal points, followed by consolidation at the project and country level by the country office M&E team.

Monitoring of processes was conducted through distribution monitoring and food basket monitoring. Given the high number of distributions and project sites, randomly selected sites are monitored monthly in line with sub-offices monitoring plan to ensure that at least 30 percent of programme sites are visited within each quarter. Distribution monitoring to verify that entitlements are provided timely and orderly, was conducted by WFP monitors through direct observation and beneficiary contact monitoring during distributions. Food basket monitoring was undertaken at distribution sites with the main purpose of verifying that the quantity of food received by beneficiaries correspond

to the defined entitlement.

As the project closed in mid-2017 in Chad, one round of PDM was conducted in May to collect data on corporate food security outcomes, cross-cutting issues (gender, protection and accountability to beneficiaries) as well as information on processes related to beneficiaries' access to and utilisation of assistance and their perceptions and satisfaction on the assistance received. WFP Chad used externally recruited enumerators for this exercise. Prior to data collection, training sessions were held at sub-office level for the enumerators. The training covered the content of monitoring tools, survey ethics and use of Android tablet. The enumerators then collected data with Android tablets specifically programmed with a household questionnaire designed to capture vital programmatic information. Household surveys were complemented by focus group discussions within the community and key informants to gain further qualitative information. During the PDM, enumerators spent on average two days in each site collecting data, which was submitted electronically from the tablets to an online data visualisation platform, ONA, enabling timely availability of key data and findings. After data collection, debriefing sessions were held at the sub-offices to verify data and to share lessons learned.

In 2017, WFP Chad expanded the use of remote monitoring to enhance the efficiency, reliability and timeliness of primary data collection by undertaking short surveys via voice calls on their mobile phones. Remote monitoring complements standard face-to-face surveys for collecting data on food security outcome indicators. During the year, WFP and cooperating partners worked closely to enhance market and price monitoring in concerned areas, providing vital and timely information enabling the scale up of cash-based transfer interventions.

All monitoring exercises were conducted in a gender sensitive manner including ensuring equal gender proportion among enumerators and camp guides, as well as collection of sex-disaggregated data on output, process and outcome related information.

Democratic Republic of the Congo (DRC)

Information on the project activities was captured by WFP and non-governmental organization (NGO) field staff through the mobile upload of checklists using smartphones and tablets. Results were captured in real time in an online platform which allowed the team to monitor progress and respond in a timely manner in case of alerts or concerns. Outcome information was captured through annual PDM and output information captured in COMET monthly. Beneficiary feedback and complaints were captured through a hotline in real time. Assessments conducted throughout the year led to a review of the transfer modality in the two camps of Bili and Inke. In December, WFP and the Office of the United Nations High Commissioner for Refugees (UNHCR) conducted a joint assessment to determine the feasibility and define the criteria for a vulnerability-targeted approach.

In line with global recommendations for the distribution of unrestricted cash, and given positive food and nutrition security outcomes following cash interventions and the ability of Inke camp markets to absorb additional cash, direct cash transfers were introduced in Inke from May 2017 onwards.

In Bili, where markets were not yet equipped to absorb additional cash, value vouchers were introduced. As was done previously at Inke Camp, and to stimulate the local economy, WFP and partners organized distribution fairs where selected traders were invited to sell food to refugees in exchange for the value vouchers.

Republic of the Congo (RoC)

WFP has dedicated personnel at the country office and sub-office levels to ensure effective implementation of M & E activities. A monitoring assistant regularly attended the distributions, performed partner monitoring and maintained a toolkit comprised of distribution, market price and nutritional monitoring sheets (validated by the country office and the regional bureau) to monitor activities in sub-office of Betou. A team in Brazzaville actively followed up on all monitoring activities through assessing PDM and developing a plan for quarterly distribution monitoring.

WFP conducted two PDM surveys to update indicators in the project logical framework and the nutritional status of children aged 23-59 months and pregnant and lactating women. Based on the quarterly distribution plan, WFP visited all distribution sites at least once, especially those which are distant from the sub-office. Data collection was completed using tablets equipped with an Open Data Kit – a mobile collection tool which feeds data into an ONA to quickly display the data trends. The flexibility of the system also allowed offline data entering, a particularly valuable feature for data collection since it can accommodate automatic data entering and registration even without internet coverage. Open Data Kit technology refresh trainings were provided to the field monitor assistant. For outcome data collection, each survey included a specific training. Enumerators were specifically trained on the nutrition data collection process.

Progress Towards Gender Equality

Central African Republic (C.A.R.)

Despite a challenging year, WFP in the Central African Republic (C.A.R.) continued to take forward its commitment to promote and embed gender equality and women's empowerment across its operations. WFP recognises that the foundation for doing so lies in utilising the frameworks and processes in place to plan and implement its work, the knowledge and capabilities of its staff and ensuring active advocacy at all levels.

WFP used a set of three main indicators to measure the effect of its assistance on gender equality in C.A.R. Household decision-making regarding the use of WFP assistance was intended to measure equality in decision-making and control over vouchers or food between men and women, determining who the household decision-maker is. At the community level, women's engagement was measured by tracking their proportional representation in project management committee leadership and their empowerment through training. When women can equally express their opinions and influence decision-making in these committees, it is believed that WFP assistance can better respond to the different needs of women and men, boys and girls.

WFP encouraged cooperating partners to continuously carry out sensitisation initiatives in the targeted communities to address discriminatory gender roles. Women were encouraged to play a greater role in decision-making at the household level regarding the use of WFP food assistance. The post-distribution monitoring (PDM) conducted in May 2017 indicated that of the beneficiary households surveyed, women constituted 80 percent of the decision-makers about the use of relief assistance.

Acknowledging their higher vulnerability to food insecurity, households headed by women were afforded priority for registration and assistance through the general distributions. The food basket is designed to be sufficient for all family members, reducing the marginalisation of women, who often eat less and last, in the intra-household food allocation. As much as possible, WFP tried to put the food in women's hands. The vouchers were issued on the name of the intended beneficiary, to ensure that targeted women were able to redeem the vouchers themselves from the retailers, whenever possible, and retain ownership and decision-making over the use of the assistance.

At the community level, although WFP continued to support women's active participation in food management committees, the PDM conducted in May 2017 indicated that only 36 percent of women were represented in those committees. The Purchase for Progress (P4P) initiative – where women represent 60 percent of the beneficiaries – helped to promote gender equality and the economic empowerment of women who received trainings in improved production and other key agribusiness skills. Linking the school meals programme and local purchases from smallholder farmers with priority given to women producers also contributed towards women's empowerment.

Monitoring reports highlight that many women are now able to make family decisions in collaboration with their husbands, making it easier to manage their income. Under P4P activities, this is leading to the increased inclusion of women in decision-making and planning in their farmers' organizations and communities.

Results of the PDM surveys conducted in May and November 2017 showed that the gender sensitivity of WFP programmes, which gives priority to women as recipients of the assistance, contributed to partly reducing women vulnerability.

The country office is taking active strides to improve gender balance in the recruitment of staff (the ratio men versus women was 79:21 at the end of 2017). Women candidates are strongly encouraged in the recruitment process and nine women were recruited in 2017, of which two drivers and one local security assistant were recruited for the first time for WFP in C.A.R.

Cameroon

In the Eastern and Adamaoua regions of Cameroon, and amongst the C.A.R. refugees, cultural and traditional gender norms have often marginalised women's roles within the family and wider community decision-making. In this context, in cooperation with partners and traditional leaders, WFP endeavoured to sensitise communities in the importance of women's participation in food security and nutrition activities. To mitigate uneven distribution of food in polygamous households, each wife was provided with a ration card for herself and her children, while the husbands were given cards for a single family.

Cash-based transfer (CBT) provided an opportunity to support women's engagement in market activities through agreements with wholesalers and retailers, considering that cultural barriers often hinder their full participation. Training programmes for selected women's groups and women retailers were carried out to increase the number of women participating in the CBT supply chain. Five women groups consisting of 35 women opened shops to sell food items. Women headed non-governmental organizations (NGOs), such as *Société Coopérative de Producteurs de Manioc de l'Arrondissement de Ngoulemakong* (SOCROPOMAN) and Women's Agricultural and Rural Development Association (WARDA), have been included in partnership ventures with WFP to continue empowering

women and assuring their autonomy. Such women headed groups are equally apt at identifying and addressing gender inequality issues during the implementation of project activities. In the Kadey division of the East region, 50 women have been encouraged by WFP to become retailers and are now able to take care of their daily needs thereby improving the food security situation of the household.

A total of 70,000 participants attended 1,000 nutrition education sessions, including culinary demonstrations on the preparation of locally available nutritious foods. There was a notable increase in the number of men participating in these educational sessions (they represented 20 percent of participants), partly responding to WFP and partner awareness raising efforts.

Chad

The internal conflict in C.A.R. has forced an increased number of Chadian refugees to return to Chad. Most of the returnee households are run by women and are typically composed of other women and children. Men either stayed in C.A.R. or left their families in search of work.

WFP sub-offices advocated for the inclusion of women in distribution committees to monitor the implementation of cash-based assistance and to ensure that specific vulnerabilities and cultural sensitivities of beneficiaries were considered. To increase gender equality, WFP requested that women be included in focus group discussions. To support all these efforts, and considering studies demonstrating the positive effect on household food security and women's empowerment, the country office prioritised women when issuing beneficiary ration cards.

Despite ongoing sensitisation, the latest performance evaluation of the partner showed that Islamic Relief Worldwide was not able to break gender stereotypes. Women are still not adequately involved in monitoring committees and the percentage of women in leadership positions of committees remained low at 40 percent. A negative trend in women decision-making over the use of assistance was noted. This trend can be attributed to returnee households adopting cultural norms and habits in the surrounding local community where men traditionally manage resources. In 2018, WFP will continue efforts to improve partners' capacity to break these trends through trainings and sensitisation, stressing the importance of informed decision-making related to food and nutrition issues.

Gender risks have been integrated into cash feasibility studies to ensure there is adequate monitoring and analysis following each distribution.

Democratic Republic of the Congo (DRC)

At the end of 2016, Gbadolite sub-office in Nord Ubangi was selected to participate in the Inter-Agency Standing Committee (IASC) Gender Age Marker pilot project, to test the improved tool rolled out in June 2017. Following Gender Age Marker training, WFP staff members adopted the new gender measurement tool. WFP trained government partners and humanitarian actors, and encouraged all stakeholders to implement Gender Age Marker-related activities under the coordination of the provincial government.

In 2017, gender sensitisation efforts continued to be carried out by the provincial government and humanitarian actors working in the refugee camps. These efforts have been carried out by WFP and partners to encourage women to participate equally in decision-making on the use of the cash transfers received at the household level, and to increase their participation in management committees at the community level.

The December 2017 PDM showed that the endline households food consumption scores (FCS) have improved. The results of the PDM also showed that households have equal food consumption whether headed by men or women, and that food security indicators have improved in both groups. In Bili camp, the situation is better in households headed by women. This is partially due to the Gender Age Marker and sensitisation efforts, resulting in the improvement of the overall households' FCS and of those headed by women in particular.

CBT was the primary modality used in the camps and therefore the decision-making process on the use of this assistance was a key factor in ensuring gender equity. Overall, decision-making in the use of cash received from WFP was shared equally between men and women within households. The 2017 PDM findings show that 29 percent of decisions were made by men, 36 percent by women, and 35 percent by men and women jointly. Within the Mole and Boyabu camps, the proportion of households where the decision on the use of cash is made by women significantly increased between 2015 and 2017 from 37 percent to 54 percent in Mole and 38 percent to 61 percent in Boyabu. This increase is due to ration cards being issued in women's names. The proportion of households where the decision is taken by men remained almost the same between 2015 and 2017 (from 22 percent to 23 percent in Mole; from 22 percent to 27 percent in Boyabu) while the proportion of men and women who make the decision jointly dropped significantly (from 41 percent to 23 percent in Mole; from 40 percent to 12 percent in Boyabu).

Among the refugee population, 40 percent of women are literate compared to 60 percent of men, which limits women's participation in the management committees and has proven difficult to improve. However, 40 percent of

women played an active role in CBT as committee members in the camps.

Republic of the Congo (RoC)

The underlying causes of gender inequality stem from the lack of provision of appropriate information, the lower level of girls' education and the culture.

WFP responds to these causes through sensitisation campaigns, education and capacity development, including:

- formation of food distribution committees composed of women and men refugees;
- gender sensitization to refugees (women and men); and
- awareness raising of community leaders on gender.

Under the nutrition programme, women and men received nutrition education and cooking demonstrations for the preparation of Super Cereal Plus. The country office has a new gender action plan to ensure that women's participation continues to be promoted in all WFP activities and forms of assistance in the country as well as looking to address the specific needs of adolescent girls in the Republic of the Congo (RoC) within all WFP responses.

Protection and Accountability to Affected Populations

Central African Republic (C.A.R.)

WFP is committed to ensuring that protection and accountability to affected populations (AAP) issues are integrated and mainstreamed across all aspects of programme design and implementation. WFP and its partners continued to put measures in place to ensure that assistance is provided in a way that protects the safety and dignity of the affected people and minimises their exposure to risk.

WFP collects information on beneficiaries' exposure to safety risks through dedicated protection assessments as well as regular process and post-distribution monitoring (PDM). Through the PDM, beneficiaries are interviewed about any safety incidents they or their family members may have encountered on the way to, at or returning from WFP project sites. According to the May 2017 PDM, 95.7 percent of the households surveyed did not experience any protection issues on their way to or coming from the distribution sites. For those households who reported complaints or concerns, WFP conducted additional monitoring of sites (follow-up visits) to determine whether or not complaints are founded and take preventive and corrective measures as necessary.

Safety arrangements to prevent gender-based violence, sexual exploitation or the abuse of children were also maintained at distribution centres. Distribution points were established as close and accessible to beneficiaries as possible, in safe areas. Activities have been organized in a way to minimise waiting times and have taken into account the distances beneficiaries needed to travel. In addition, distributions have been conducted early in the day to allow beneficiaries to reach home during daylight. Information about distributions (time, place, schedule, entitlements, no service required in exchange for receiving the ration, target groups – many internally displaced person (IDP) sites are divided into sectors that are under the responsibility of a community leader who must share information about the distributions early in advance) has been communicated 2-3 days in advance to ensure that beneficiaries are equally and fully informed about the intervention. Security and instances of abuse were monitored by the complaints and feedback committees and food distributions were conducted by a gender-balanced team. The cooperating partners and WFP staff are made fully aware of and acknowledge their direct protection responsibilities.

Accountability to the people served is closely linked with the effectiveness of food assistance, as knowledge of targeting and entitlement helps people to protect their access to assistance, and feedback mechanisms enable WFP and partners to investigate problems and better adapt activities to beneficiary needs. The selection of beneficiaries is performed by the cooperating partners and communities, while WFP oversees the selection process. Through its PDM, WFP collected information regarding the knowledge beneficiaries have on why they are included in WFP assistance, what their entitlement is and where they can provide feedback on the activity. For an assisted person to be considered informed about WFP operations, she or he must know all three basic elements about the assistance provided – it is the responsibility of WFP and partners to ensure that this information is provided in a clear and timely manner. To enhance beneficiaries' understanding of their entitlements, sensitisation was carried out in the local language to explain the rations and quantities to be distributed. Beneficiaries' food entitlements were also displayed at distribution points. Before distributions, WFP ensured that cooperating partners were aware of the programme objectives and expected results in order to disseminate accurate information to beneficiaries. Food basket monitoring was carried out by WFP staff during distributions to ensure transparency. The proportion of interviewed beneficiaries who were fully informed about WFP operation remained relatively high in 2017, with 60 percent of beneficiaries responding positively to all three components of the indicator.

Regular communication with the beneficiaries and cooperating partners was key to the effective implementation of the response and to ensure that WFP's messages were well understood by local communities and beneficiaries.

WFP regularly shared information to ensure cooperating partners and beneficiaries were kept abreast of operational strategies (eligibility, type of assistance, length of assistance) and changes, which facilitated food distributions and prevented tensions with affected communities, particularly in instances where rations have had to be adjusted.

WFP strengthened AAP by adopting participatory approaches to identify protection concerns without creating additional risks. WFP and partners consulted women's committees, representative of vulnerable groups and others, to identify their concerns and discuss mitigation measures to be put in place. Participants in the consultations did not mention safety as a major concern with regards to the provision of in-kind food and vouchers. No safety issues were reported during the distribution and receipt of food and vouchers. WFP will continue to liaise with neutral forces (members of the international stabilization mission) through the Civil-Military Coordination framework as well as unilaterally, when urgent and necessary, to assure the protection of distribution sites in such a manner that does not undermine the organization's principles. WFP is also closely working with other humanitarian actors, including the Office of the United Nations High Commissioner for Refugees (UNHCR) to seek guarantees on humanitarian space and access, and the protection of civilians. Both vouchers and in-kind food transfers were found to place some burdens on women. Most concerns for women centred on two issues: the time to collect the food or vouchers interfered with their domestic chores; and child-care issues arose with vouchers or food collection. Since communities actively participated in targeting, and criteria for beneficiary selection were clear and well understood, the results of the targeting exercise were more accepted by communities. However, there were very few cases of mild social jealousy which did not cause harm to, or threaten, beneficiaries. Participants in the consultations noted prices being increased in the stores in which the vouchers could be redeemed. Rigorous monitoring is expected to address the issue.

In recognising that respondents may feel uncomfortable reporting sensitive matters or matter related to wrongdoing, WFP and partners continue to work on strengthening mechanisms for feedback and complaints. WFP is working with the Government to establish toll-free numbers that anyone can call to report a problem or wrongdoing. The use of these numbers, which has already been authorised by the Government, will enable beneficiaries to raise any concern or offer feedback on the operation, with an element of anonymity. The hotline will be operated by both women and men speaking the local language. Similarly, WFP will ensure that the cooperating partners ensure a help desk is available at distribution points, ensuring a continuous open dialogue with the beneficiaries. WFP will establish a hotline as a feedback and complaints mechanism in all prefectures of the Central African Republic (C.A.R.). Beneficiaries, partners, or anybody else will be able to confidentially call the direct line to provide feedback, comments or complaints about any of WFP-supported operations. WFP field monitors likewise will offer an opportunity to raise any concerns during monitoring. The feedback from the hotline will be compiled by WFP programme unit and information will be shared with the cooperating partners and the Office for the Coordination of Humanitarian Affairs (OCHA) together with the progress and final narrative reports.

With technical support from the regional bureau, three trainings for WFP staff in Bangui, Kaga-Bandoro and Bouar as well as for the cooperating partners were conducted to enhance AAP. A total of 60 persons participated in the trainings.

WFP continued to coordinate with the Protection Cluster which played an instrumental and strategic role in informing humanitarian decision-making and response in the hotspots. Several monitoring, advocacy and sensitisation missions by the Protection Cluster were conducted in the hotspots (e.g. Bria and Bangassou) as well as trainings for non-governmental organizations (NGOs) and community leaders.

Cameroon

All the programmes were designed and implemented with due consideration for the protection of the population. This included assessing safety issues to, from and at the site, implications of cash distributions on intra-household dynamics and removing potential barriers for persons with specific needs to ensure safe and dignified access to food assistance. As a member of the protection sector, WFP ensured that food assistance contributes to the protection of beneficiaries. Questions on protection were included in the PDM surveys to ensure systematic follow up on concerns.

Complaint management is an essential part of WFP Cameroon's commitment to beneficiary accountability and demonstrates its responsibility to learning and improving the quality of actions and the relationships built through them. WFP established gender-balanced complaints management committees in most distribution sites, and a fully operational toll-free hotline through which beneficiaries could express complaints and feedback in a safe and dignified manner. The feedback and response mechanism ensured that beneficiaries could easily, and without fear of repercussion, communicate issues such as sexual exploitation, abuse of power or non-compliance by any key actor, or any aspects of programme and transfer modality that caused unintended adverse effects. Moreover, the toll-free hotline was designed to collect any concerns related to food quality, safety and entitlement. The complaints and feedback mechanisms (CFMs) were structured around the complaints management committees in which beneficiaries and other stakeholders actively participated. WFP and partners responded to complaints

submitted to ensure follow up. Systematic feedback to beneficiaries was guaranteed through communication and sensitisation. The complaints management system enabled WFP to detect programme and service delivery issues in a timely manner, and take corrective actions to improve programming and meet the needs of the affected communities.

WFP is planning to conduct a protection risk analysis and assessment in 2018.

Chad

WFP regularly assessed protection cases in Salamat and other southern regions of Chad. Coping mechanisms such as survival sex, early marriage and child labour have been reported in areas with returnee populations. Moreover, Chadian returnees often lack civil status documents to confirm their identity. This can sometimes complicate beneficiary registrations and the distribution of life-saving assistance. Chadian returnees from the C.A.R. are the most vulnerable in terms of access to basic social services.

The 2017 PDM results showed significant progress in both women and men's knowledge about the programme, entitlements and complaints procedures. WFP ensured that beneficiaries had access to information about their entitlements, distribution schedules and complaints mechanisms in place through increased sensitisation efforts. Complaints and feedback committees were established at distribution sites. In total, 65 percent of women and 54 percent of men listed this mechanism as their preferred way to communicate complaints or provide feedback.

The occurrence of security related incidents was at a minimal level following the trend from previous years. Field staff suggested that food fairs be launched before midday so beneficiaries did not have to transport their rations at night time. During the May PDM, beneficiaries did not report having experienced any security problems going to, returning from or at distribution sites. Certain beneficiaries reported high travel costs and distances to get to WFP distributions sites and long waiting times during distributions.

WFP recommended that the cooperating partner focus its efforts on improving the protection of beneficiaries and thus ensuring adequate condition of distribution sites or access to potable water. As per the protection standards, the distribution sites must be within 15 km of beneficiaries' home and have shaded areas to rest. WFP expressed a concern that this is not yet the case in the region of Salamat.

Democratic Republic of the Congo (DRC)

WFP, UNHCR and partners ensured that the different components of AAP, namely information provision, consultation and effective CFMs, were respected in the delivery of assistance to refugees. Regular information and community sensitisation sessions were carried out before each monthly distribution, and interventions were jointly implemented in consultation with UNCHR's dedicated protection staff.

CFMs were set up in camps through complaints and feedback committees (comprised of UNHCR, WFP, the National Commission for Refugees, cooperating partners and refugee representatives) to address concerns related to the distributions. WFP established the beneficiary feedback mechanism with a hotline managed by a call centre. In the last six months of 2017, WFP was dedicated to ensuring sensitisation on the use of the hotline and the impact it can have on operations and support to the beneficiaries.

All protection and AAP indicators showed a positive trend in 2017 compared with 2016. However, the proportion of assisted persons informed about the programme is still below target. In 2018, WFP will work at improving awareness through a sensitisation plan, where information will be integrated as part of the roll out of the hotline.

Republic of the Congo (RoC)

Refugees did not experience safety problems travelling to and/or from distribution or project sites, which were adequately set up and secured through the collaboration of a NGO partner. Distributions took place on a monthly or bi-monthly basis at sites close to where the refugees are living. The distribution sites are situated at a distance of less than 5 km from refugee sites as per UNHCR standards, in order to meet protection criteria necessary for a safe journey to the distribution point.

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

During the distribution, the Government provided security to prevent thefts, fraud, crowd movements, and resale of food which often take place to the detriment of the most vulnerable refugees (women, elderly, disabled). They worked with WFP, UNHCR and the national committee *Agence d'Assistance pour le Rapatriement des Réfugiés au Congo* (AARREC). They were not armed during distributions and have previously been sensitised by UNHCR regarding protection measures.

On a bi-monthly basis, the head of sub-office met the refugees to receive their feedback, exchange on the WFP assistance, and sensitise them on protection issues. WFP, with UNHCR, regularly sensitised on refugees rights and

duties (towards local communities, authorities, other refugees) to develop and maintain a peaceful environment. The Protection from Sexual Exploitation and Abuse policy is also part of WFP's mandate. On a regular basis, United Nations (UN) agencies in Bétou organized a reminder of the Code of Conduct and the ethics of the UN staff and their partners.

WFP has set up a CFM for beneficiaries with focus group and complaints office. The discussions allowed to identify several problems with regard to the partner during the distribution and also the smallness of the ration per person. Regarding these kinds of issues, WFP shared more information during general distribution, and a monitoring assistant sensitises refugees on WFP's dynamic and methodology in the field. Through the adoption of a transparent approach, WFP improved accountability and refugees' understanding of WFP mandate, objectives, resources and tools. Most of the technical issues were addressed (hours of distribution not suitable, scoring mistakes) and some will be resolved through the launch of the cash modality (commodity diversification). Complaints about specific protection issues (demand of repatriation, person who asks to be register) were transferred to UNHCR.

Before each distribution, the sub-office gathered the refugee committees, UNCHR and local partner AARREC, in order to apply lessons learned, to exchange information on the ongoing distribution and to improve the upcoming distributions.

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

Supply Chain

Central African Republic (C.A.R.)

The Central African Republic (C.A.R.) is a land-locked country entirely reliant on the supply corridor from Douala to Bangui for all imported cargoes, including relief items. The transport lead time, including customs clearance between the port of entry Douala in Cameroon and Bangui and Bouar in C.A.R., was 21 days on average. For international purchases and in-kind donations, the shipping time ranged from two to four months. During the rainy season between June/July and October/November, additional time needs to be factored in as road conditions worsen. The use of the Global Commodity Management Facility (GCMF) allowed WFP to procure food available in the region and reduce lead time for food in-country deliveries.

As insecurity continued to be a key factor constraining supply routes into C.A.R., WFP identified the use of alternate supply corridors for humanitarian cargo, complementing the direct trucking from Douala to Bangui. In October, WFP started using a newly opened humanitarian corridor through the Democratic Republic of the Congo (DRC) from Uganda, to improve food delivery to hard-to-reach areas in the far southeastern part of the country. Until the land corridor through DRC opened up in October, airlifts were the only option to reach areas hard-to-access by ground transport or constrained by security challenges like Bangassou, Zemio and Obo. WFP continued to use the airlift option in Bangassou towards the end of the year, combining it with ground transport to deliver life-saving assistance to conflict-affected populations in the area.

Limited capacity of local transporters and poor road networks continued to cause delays in the delivery of food assistance. C.A.R. suffers from very poor and limited logistics infrastructures and assets. In total, only 650 km of primary road out of 25,500 km are asphalted. Most secondary and tertiary roads are almost impassable and require 6x6 or 8x8 trucks during the rainy season and bridges are not regularly maintained. A large component of the commercial trucks fleet are very old, compelling WFP to use its own fleet to deliver foods in most of the sites. The use of WFP's own fleet of off-road trucks was key to ensuring the timely arrival of food in hard-to-reach locations not covered by commercial transporters. The security situation, however, considerably slowed down rotations and increased transport costs making it less attractive for commercial transporters to engage in inland transport. WFP is still working on a strategy geared towards building commercial transport resources by strengthening the commercial transport sector and gradually reducing the presence of the WFP fleet which has proven to be highly costly. A Memorandum of Understanding (MOU) was signed between the Office of the United Nations High Commissioner for Refugees (UNHCR), African Initiatives for Relief and Development (AIRD) and WFP for regular fuel supply for sub-offices. This MOU has been effective since the installation and calibration of fuel tankers in each sub-office to ensure fuel depots are always available for WFP trucks deployed on the ground.

Post-delivery commodity losses resulted mostly from looting by armed elements that control various regions and stretches of road and took advantage of frequent truck breakdowns due to dilapidated road infrastructure. On many travel axes where escorts have been required for humanitarian movements, tight coordination with partners and the

Government proved critical in reducing the risk of looting. Contractors were required to comply with the convoy system run by the United Nations Multidimensional Integrated Stabilization Mission in C.A.R. (MINUSCA), and any unjustifiable losses during transport were deducted from transporters' accounts. WFP worked closely with the Civil-Military Coordination structure chaired by the Office for the Coordination of Humanitarian Affairs (OCHA) for the latest information on access on routes in areas where security was an issue.

In collaboration with the Vulnerability Analysis and Mapping (VAM) unit, the Supply Chain unit analysed market conditions for the implementation of cash-based transfer (CBT) in Bangui, Kaga-Bandoro and Bouar areas before contracting retailers. A total of 104 contracts have been signed with retailers for the transfer of vouchers to beneficiaries. CBT offered a distinct comparative advantage over in-kind transfers for WFP in C.A.R. due to their reduced supply chain overheads (like transportation, storage). In addition, challenges with delivery lead times and risks of misappropriation of the resources (like looting, pilferage) were minimal compared to food transfers.

Despite the challenging operational environment in C.A.R., the procurement unit successfully carried out local purchases of 847 mt of mixed commodities (rice, sorghum and beans) from smallholder farmers. Local purchases have less overheads with competitive lead times and there was no incident of losses. Overall, local purchases ensured WFP the best value for money with most of the purchases being used to support school meal within the provinces.

Cameroon

Most of the food distributed under the Regional EMOP 200799 in eastern Cameroon was received through the port of Douala before being transported to the various distribution points by trucks. WFP's logistics hub in Bertoua, set up in 2017, allowed for a more efficient regulation of the flow of cargo and helped to avoid storage congestion at the port and destination warehouses.

Transporting commodities from WFP warehouses to distribution sites (secondary transport) remained a major challenge, especially during the rainy season. Due to collapsed bridges, trucks were forced to take longer routes to deliver the food to distributions sites. In the Kadey division of the East region, secondary transport was ensured by UNHCR trucks to various remote sites, such as Bela, Mbombete, Libongo and Yola. This helped to overcome the difficulties experienced by the main transporter.

The scale-up of CBT transfers to 40,000 beneficiaries in 2017 reduced the total quantity of food items transported. This provided opportunities for a more efficient response and mitigated supply chain challenges, which had previously been a major hindrance for the operation.

Agreements with wholesalers and retailers provided an opportunity to support women's involvement in market activities, as cultural barriers and the lack of financial resources can hinder their economic inclusion. WFP provided training programmes for selected women's groups and women retailers to increase the number of women participating in the CBT supply chain. The enrolment of two qualified wholesalers to supply retailers helped to avoid the exhaustion of stocks during distributions.

Chad

General distributions to Chadian returnees from C.A.R. living in the Salamat were conducted through CBT. WFP partnered with experienced traders who have a history of doing business in the region. Traders were informed about the programme and the start date of the next distributions allowing them to prepare food stocks and avoid operational delays. WFP required contracted traders to pre-position all food stocks in shops at least 48 hours before the start of the distributions giving sufficient time to WFP Supply Chain personnel to inspect available foods and to ensure the quality of commodities supplied in the market complies with corporate standards.

Democratic Republic of the Congo (DRC)

In 2017, WFP procurement strategy focused on reducing delivery lead time whilst contributing to the creation of economic value chains through the injection of capital into the local economy. Compared with previous years, there was a decrease in the in-kind distribution due to the scale-up of CBT. Due to resourcing constraints, no food was purchased in 2017. All stock used was carry-over tonnage from 2016.

In Bili camp, North Ubangi, a multi-sectoral assessment was conducted through which market conditions were analysed before contracting retailers. Value vouchers were launched in the first half of the year meaning Bili camp was the only site where in-kind transfers were carried out in 2017. All nutrition activities continued to use in-kind modality.

The lack of infrastructure in the country posed one of the biggest challenges in accessing refugee areas. The division of the country into 26 provinces has not yet contributed to any infrastructure improvements. Furthermore, the poor state of the roads prevented timely market replenishment and significantly affected on the cost of fuel and goods in local markets. WFP continually focused efforts on reaching the refugees in a timely, cost-effective manner, despite their land-locked locations.

In DRC, 0.53 percent of the total tonnage handled incurred losses, compared with the 0.09 percent registered in 2016. These losses resulted primarily from handling by multiple actors at the cooperating partner level and transportation challenges.

Republic of the Congo (RoC)

The Republic of the Congo (RoC) is a food deficit country with an underdeveloped agricultural production sector with the country being a net importer of cereals and oil. In 2017, WFP made no local purchases in RoC.

Food transportation from the port of Pointe Noire to the WFP warehouses in Brazzaville was done via the railway using the national railway company, before utilising private barges to transport the food from Brazzaville to the Likouala province. The dysfunctional railway caused a lot of inconvenience in food delivery throughout 2017. Moreover, river transport between Brazzaville and Likouala is limited to the rainy season (July–December) when the Oubangui river is navigable. In 2017, 14 mt of Super Cereal was transported between Douala and Bétou through the Douala corridor. Shipping costs at the port of Pointe Noire were, however, far more competitive than by the corridor.

Minor post-delivery losses of food occurred mainly as a result of poor packaging and the use of damaged small barges for food transport from the extended delivery points to the final distribution points. WFP has negotiated with contracted owners of these small barges to repair them in order to reduce losses during transport and has been reimbursed for losses.



Annual Food Purchases for the Project (mt)

Commodity	Local	Regional/International	Total
Beans	692	-	692
Iodised Salt	117	228	345
Maize Meal	-	703	703
Rice	196	1,689	1,885
Sorghum/Millet	3,137	-	3,137
Total	4,142	2,620	6,761
Percentage	61.3%	38.7%	

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

Commodity	Total
Beans	1,731
Corn Soya Blend	3,346
High Energy Biscuits	7
Maize	479
Ready To Use Supplementary Food	40
Rice	10,761
Sorghum/Millet	2,009
Split Peas	2,705

Commodity	Total
Vegetable Oil	2,552
Total	23,629

Implementation of Evaluation Recommendations and Lessons Learned

Central African Republic (C.A.R.)

Current WFP learning indicates that the provision of emergency in-kind and cash-based food assistance has reduced household reliance on negative coping strategies. However, more needs to be done to integrate these provisions alongside wider social assistance schemes to boost smallholder recovery, in line with the National Recovery and Peacebuilding Plan and the United Nations Development Assistance Framework Plus priorities. When supported by predictable safety nets, women develop a greater role in decision-making, and vulnerable households develop strategies for gaining access to food in the longer term and engage in community recovery activities.

To address the issue, WFP is exploring ways to develop Purchase for Progress (P4P) activities to address food insecurity while establishing the basis for medium-term resilience and sustainable development. Investing in smallholder agriculture has the potential to strengthen rural economies, while building more effective markets and improving food security and nutrition for those who need it most. Partnering with local authorities, the Food and Agriculture Organization of the United Nations (FAO) and non-governmental organizations (NGOs), WFP plans to synchronise in-kind food and cash-based transfer (CBT) and the expansion of P4P interventions with seasonal seeds, tools and technical support, to improve smallholder productivity and incomes, and to help rural women and young people to engage in value chains.

Throughout the Interim Country Strategic Plan (ICSP), to be implemented from 2018, WFP will further expand the joint planning and implementation of preparedness and response packages with the Government, including emergency food provision, blanket supplementary feeding, school meals and other social protection programmes. This strategy will rely on strong inter-agency, inter-governmental and cross-border collaboration. It will involve the use of timely sex- and age-disaggregated data, accountability and monitoring systems and gender analyses, and will be sustained by capacity strengthening to help the Government establish the policies, institutions and programmes needed to coordinate and deliver services.

WFP's experience in nutrition activities from the sub-region shows that targeted supplementary feeding is an inadequate response to high rates of moderate acute malnutrition (MAM). Strategies should address direct and indirect causes of infant malnutrition through nutrition-focused and nutrition-sensitive interventions. WFP is partnering with other actors involved in nutrition activities to help the Government to introduce a comprehensive, community-led approach to the prevention of malnutrition in line with the Government's Scaling Up Nutrition (SUN) priorities. A blanket supplementary feeding should be used as a platform for the introduction of nutrition-sensitive activities. Integrating gender into community social and behavioural change communication, including cooking demonstrations with locally available nutritious foods, will further address the relationship between malnutrition and health, water, sanitation, hygiene and dietary diversity practices. Nutritious school meals are being provided in areas facing food and nutrition insecurity, using local purchases to support small-scale farmers. A comprehensive package for the prevention and treatment of malnutrition will also be promoted, targeting children aged 6-59 months and pregnant and lactating women during the crucial first 1,000 days of child development.

Some of the preliminary findings from the Country Portfolio Evaluation, conducted in 2017 through interviews with donors, technical partners, the Government and other relevant stakeholders, indicated that:

- WFP is responsive and playing a central role in international assistance in Central African Republic (C.A.R.). Core advantages of WFP are found in key activities, which are crucial for C.A.R. and include general distributions, the provision of CBT, school meals and P4P.
- Decisions are supported by data collection and analysis, and WFP is a crucial actor for providing food security information in C.A.R. Food security information products are in high demand by all other humanitarian and development partners, and most food security assessments are carried out through partnerships. WFP also participates actively in other agencies' assessments. The mobile Vulnerability Analysis and Mapping (mVAM) offers a good opportunity to strengthen food security information, including household food security monitoring and market assessments.

- There is an overall acknowledgement that restoring productive capacities and stabilizing livelihoods through P4P, food assistance for assets (FFA) and seed protection is critical for humanitarian responses in complex protracted crisis. The P4P pilot has been a successful element in promoting livelihood stabilization. However, many partners have highlighted the need for expansion of the P4P scheme. Seed protection was also found to be an efficient and effective activity that should be further developed, e.g. integrated with P4P activities.
- WFP has taken a leading role in establishing effective complaints mechanisms for beneficiaries. Similarly, other systems for management and monitoring of food assistance have shown to be efficient, including SCOPE, WFP's corporate digital beneficiary and transfer-management platform.
- According to respondents, some of WFP's activities have the potential to promote women's empowerment. However, WFP is yet to conduct an assessment on gender equality and women's empowerment to support this finding. A gender evaluation is planned under the ICSP (2018–2020).

Key preliminary recommendations include the need to:

- expand P4P and use it in a more integrated manner, including to promote a nutritious diet;
- support local health centres to strengthen MAM prevention; and
- review MAM and Severe Acute Malnutrition (SAM) cooperation with the United Nations Children's Fund (UNICEF) and the Ministry of Public Health to better ensure institutional sustainability.

Within C.A.R.'s ICSP, WFP is committed to partner with UNICEF and NGOs to help the Ministry of Public Health to strengthen the capacities of health districts, centre staff and community health workers, and to establish health centres as platforms for the provision of nutrition-specific and nutrition-sensitive services to communities. This integrated approach will strengthen government capacities for a gradual transfer of management responsibilities and the integration of malnutrition prevention services within existing health structures.

In localities where the security situation remains relatively stable, schoolchildren will receive nutritious school meals based on local P4P procurement from smallholder associations. This approach will support 46,000 farmers, 60 percent of them women, to develop and benefit from local value chains. Procurement will be associated with social and behaviour change communication outreach, promoting locally preferred nutritious foods and helping women to play a leading role in improving nutrition in the community, schools and at home.

Cameroon

Drawing from the positive experience of introducing the CBT modality into operations in the previous year, in 2017 WFP scaled up CBT to three additional sites in the Kadey division of the East region (Lolo, Timangolo, Ngarissingo). A nutrition education component was introduced to strengthen the promotion of nutrition practices among CBT beneficiaries and encouraged them to prioritise nutritious foods in their choice of food to be purchased.

A joint capacity needs assessment was organized during 2017 between WFP, the nutrition department of the Ministry of Health and NGO partners, with the objective of assessing the health system's capacity and strengthening programmes that combat undernutrition through a multi-sectorial approach. Major recommendation addressed to WFP included: to widely disseminate the blanket supplementary feeding platform to other sectors (Ministry of Women Empowerment, Ministry of Social affairs, Ministry of Energy, Ministry of Youth and Civic Education); to continue to strengthen and integrate the capacities of other actors in the use of the blanket supplementary feeding platform (WFP, Ministry of Health); and to develop the capacity of government actors and community-based organizations on the blanket supplementary feeding (WFP, Ministry of Health). Concrete actions addressing these recommendations have already been incorporated into the 2018 nutrition action plan.

A Country Portfolio Evaluation was conducted in 2017. The evaluation made five major recommendations to WFP:

- continue WFP's efforts towards the implementation of a preventative nutrition approach, the use of cash, and strengthening the collaboration with the Rome-based Agencies;
- focus on the emergency response in the northern and eastern regions while gradually moving towards early recovery activities;
- develop an evidence-based operational strategy to integrate gender into programming in line with WFP Policy on Gender and action plan;
- design an effective communication strategy; and
- develop a strategy for supporting national and local capacity development for food security monitoring, early warning and response.

WFP Cameroon has already taken actions on all five recommendations by, for example, having implemented a nutrition response with a stronger focus towards the prevention of malnutrition. The shift from emergency to early recovery and development is the core theme of the approved Cameroon Country Strategic Plan (CSP) 2018–2020. Through the CSP, the country office is committed to carry out robust gender and economic analyses supported by effective data collection, monitoring and accountability systems. A Gender and Protection Officer was recruited in October 2017 and will be fully dedicated to facilitating WFP Cameroon's work in the domain of gender integration in

programming, while strengthening partnerships with the Ministry of Women Empowerment and other relevant actors. In addition, the communications team is in the process of expanding, having hired a new officer in October 2017, in order to design and implement a full communications and advocacy strategy.

Chad

Persistent lack of funding in 2016, with only one targeted contribution received for the Chad component of the Regional EMOP, led to the progressive withdrawal of partners, and only 50 percent of the planned beneficiaries reached for 180 days.

In 2017, WFP remained one of the few humanitarian actors present in the area providing emergency support to the vulnerable Chadian returnees. Despite active engagement with partners, donors and the Government, the country office continued to face critical funding shortfalls.

To ensure coherence in the response to the C.A.R. crisis, particularly for the same category of beneficiaries, WFP decided to integrate returnees from the Salamat regions into the Chad PRRO 200713, aligning their level of entitlements. As such, from 1 July 2017, all returnees from C.A.R. were assisted under one PRRO. This decision also provided some geographical consistency as refugees from C.A.R. living in the region of Salamat were supported under the PRRO.

As in the previous years, road access to most areas in the Salamat region became very difficult with the rainy season starting in May, including to some distributions sites. WFP decided to organize general distributions every two months and provided returnees in the Salamat with double half entitlements corresponding to USD 11.25 per person per bi-monthly distribution. This decision reduced costs associated with project implementation.

WFP Chad continued its advocacy for resilience-building activities to strengthen livelihoods of targeted communities and greater integration of returnees into local livelihood and economy.

Democratic Republic of the Congo (DRC)

In 2017, in collaboration with partners, WFP conducted several assessments in the four refugee camps of North and South Ubangi to evaluate the food security situation of refugees after project implementation. A feasibility study for implementing CBT in Bili and Inke camps was finalised in January while a joint WFP, Office of the United Nations High Commissioner for Refugees (UNHCR) and Food for Peace mission was conducted in October, and a preliminary WFP-UNHCR vulnerability classification exercise and post-distribution monitoring (PDM) were conducted in December.

The January feasibility study for the implementation of CBT in Bili and Inke camps showed that the food security situation of refugees has gradually improved, as shown by positive trends emerging from the monitoring of food security indicators. Refugees' nutritional situation has also been maintained. Nutritional performance indicators recorded between 2015 and 2017 showed recovery rates of 95 percent in nutrition centres, far above the target of 75 percent.

The studies highlighted the importance of a physical, economic, social and political environment that empowers refugees and promotes the development of income-generating activities, as well as the need to promote the participation of refugees in agricultural activities or FFA implemented through CBT in order to strengthen social cohesion in communities.

According to the December vulnerability exercise conducted by WFP and UNHCR, the vast majority of refugees (85-90 percent) have already developed coping strategies involving income-generating activities or are involved in UNHCR and partner-initiated activities in the area of agriculture, small business, animal husbandry and handicrafts. Engagement in these activities has enabled refugees to satisfy part of their food and non-food needs by themselves with the analysis particularly noting the increased acquisition of basic domestic and productive goods. The exercise led to the development of three different wealth categories based on the acquisition of goods, food consumption and livelihood activities: the poorest of the poor (PPP), the poor (P) and the least poor (MP). Based on these findings, along with UNHCR and other stakeholders, WFP is in the process of developing a targeted approach based on vulnerability and gender, ensuring the most vulnerable households receive the required assistance.

Republic of the Congo (RoC)

Logistics issues remained a challenge for the project implementation as Oubangui river is navigable only six months per year. As such, the CBT modality was introduced in 2017 to overcome and resolve this barrier. The quality of C.A.R. refugees support was greatly improved by the introduction of CBT which gives flexibility to beneficiaries to diversify their food basket through a selection of foods in the shops. Nonetheless, WFP faced several technical constraints with regard to CBT which included:

- Incorrect passwords – main users were not familiar with information technology (IT) mechanisms meaning passwords were often not retained or remembered.

- Airtel Network accessibility – not satisfactory for CBT and other operational components in the Likoula zone which lacks adequate IT communication infrastructures.
- Withdrawing cash instead purchasing food – some beneficiaries preferred to withdraw money for purposes other than food purchase.
- Blocked accounts due to account misuse by beneficiaries.

To overcome these technical constraints, WFP ensured close follow-up with the partners implementing CBT activities.

Story Worth Telling

Assiako Aminatou is a refugee from the Central African Republic (C.A.R). Since 2014, Aminatou and her six children, whom she has raised alone since the death of her husband during an attack on their village in C.A.R., have been residing in the Gado refugee camp in Cameroon. Aminatou has a disability that prevents her from exercising any income-generating activity and relies entirely on WFP food assistance to feed her family.

According to the new targeting strategy elaborated by WFP and the Office of the United Nations High Commissioner for Refugees (UNHCR), Aminatou falls within the "highly vulnerable" classification category. As such, she is given priority to receive her unconditional food assistance.

"I escaped from my country about 10 years ago," said Eguy, a 39-year-old C.A.R. refugee who fled from Berberati in 2006. He is one of the thousands of C.A.R. refugees who moved to the eastern part of Cameroon following unrest within the country in recent years. Since his arrival in Cameroon, he has survived by undertaking temporary jobs, however he is not always able to meet his food needs. Eguy would be classified in the "low vulnerable" category as per the targeting criteria.

Targeting is the central element of all WFP food assistance operations. It informs every aspect of a WFP operation from the duration and initial problem identification to vulnerability analysis and mapping, early warning and needs assessment as well as programming adjustments, monitoring and evaluation. WFP defines targeting as the process by which areas and populations are selected for a resource transfer in a timely manner. A targeting system comprises mechanisms to define target groups, identify members of the target populations, and ensure that assistance reaches intended beneficiaries and meets their needs.

Since January 2014, more than 160,000 refugees from C.A.R. have arrived in Cameroon's eastern Adamawa and northern regions, escaping the escalating conflict in their country. This recent influx came in addition to an existing refugee population present in the country since 2004. A total of 276,000 C.A.R. refugees reside in Cameroon and are spread over several hundred sites and villages, mainly in the East, Adamawa and the North regions. Of the total number of C.A.R. refugees, only 25 percent (70,000 people) are housed in the seven managed sites in Cameroon; the remaining 75 percent (more than 200,000 people) live with host communities. Access to water, sanitation and other basic services remains limited. The results of a survey on the return intentions of C.A.R. refugees have shown that 70 percent of those interviewed wish to remain in Cameroon until the security situation in C.A.R. allows for a safe and dignified return to their places of origin. As a result of these multiple shocks and stresses, the overall food security situation in Cameroon sharply deteriorated in 2016 and 2017.

Through a series of analysis and targeting exercises vulnerable populations were identified and classified for food assistance. Given the fact that population groups in the target areas have different levels of vulnerability, WFP follows a two-step sequential targeting approach to tailor its assistance to the beneficiary needs. The "high vulnerability" group that includes people such as Aminatou will receive unconditional food assistance while the "low vulnerability" group, with people like Eguy, will participate in food assistance-for-assets activities. The overall objective of this strategy is to ensure no one is left behind in the pursuit of zero hunger.

Figures and Indicators

Data Notes

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Loading up food for distribution at WFP office in Bambari, in southern C.A.R.

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	500,805	573,889	1,074,694	576,085	622,159	1,198,244	115.0%	108.4%	111.5%
Total Beneficiaries (DR of Congo)	26,868	44,042	70,910	44,688	50,392	95,080	166.3%	114.4%	134.1%
Total Beneficiaries (Central African Republic)	359,401	407,650	767,051	425,200	454,463	879,663	118.3%	111.5%	114.7%
Total Beneficiaries (Congo Brazzaville)	10,268	9,365	19,633	8,719	9,833	18,552	84.9%	105.0%	94.5%
Total Beneficiaries (Cameroon)	93,018	99,082	192,100	91,397	100,040	191,437	98.3%	101.0%	99.7%
Total Beneficiaries (Chad)	11,250	13,750	25,000	6,081	7,431	13,512	54.1%	54.0%	54.0%
DR of Congo									
By Age-group:									
Children (under 5 years)	5,531	9,116	14,647	4,754	5,705	10,459	86.0%	62.6%	71.4%
Children (5-18 years)	8,226	13,565	21,791	16,164	18,065	34,229	196.5%	133.2%	157.1%
Adults (18 years plus)	13,111	21,361	34,472	23,770	26,622	50,392	181.3%	124.6%	146.2%
By Residence status:									
Refugees	22,199	36,388	58,587	44,817	48,551	93,368	201.9%	133.4%	159.4%
Residents	4,669	7,654	12,323	856	856	1,712	18.3%	11.2%	13.9%
Central African Republic									
By Age-group:									

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Children (under 5 years)	75,326	82,217	157,543	77,144	87,516	164,660	102.4%	106.4%	104.5%
Children (5-18 years)	175,811	192,516	368,327	200,213	204,361	404,574	113.9%	106.2%	109.8%
Adults (18 years plus)	108,264	132,917	241,181	147,843	162,586	310,429	136.6%	122.3%	128.7%
By Residence status:									
Refugees	4,285	4,860	9,145	4,021	4,496	8,517	93.8%	92.5%	93.1%
Internally displaced persons (IDPs)	112,529	127,637	240,166	158,315	168,233	326,548	140.7%	131.8%	136.0%
Returnees	17,243	19,557	36,800	782	1,032	1,814	4.5%	5.3%	4.9%
Residents	225,344	255,596	480,940	262,084	280,700	542,784	116.3%	109.8%	112.9%
Congo (Brazzaville)									
By Age-group:									
Children (under 5 years)	2,611	1,924	4,535	2,041	1,670	3,711	78.2%	86.8%	81.8%
Children (5-18 years)	2,219	1,963	4,182	2,226	1,855	4,081	100.3%	94.5%	97.6%
Adults (18 years plus)	5,438	5,478	10,916	4,452	6,308	10,760	81.9%	115.2%	98.6%
By Residence status:									
Refugees	9,954	9,079	19,033	8,458	9,537	17,995	85.0%	105.0%	94.5%
Residents	314	286	600	262	295	557	83.4%	103.1%	92.8%
Cameroon									
By Age-group:									
Children (under 5 years)	32,465	33,102	65,567	31,370	31,736	63,106	96.6%	95.9%	96.2%
Children (5-18 years)	32,739	35,488	68,227	31,897	32,724	64,621	97.4%	92.2%	94.7%
Adults (18 years plus)	27,814	30,492	58,306	28,130	35,580	63,710	101.1%	116.7%	109.3%
By Residence status:									
Refugees	71,201	75,841	147,042	62,536	67,762	130,298	87.8%	89.3%	88.6%
Residents	21,818	23,240	45,058	29,525	31,614	61,139	135.3%	136.0%	135.7%
Chad									
By Age-group:									
Children (under 5 years)	2,250	2,750	5,000	1,216	1,486	2,702	54.0%	54.0%	54.0%
Children (5-18 years)	3,750	5,000	8,750	2,027	2,702	4,729	54.1%	54.0%	54.0%
Adults (18 years plus)	5,250	6,000	11,250	2,838	3,243	6,081	54.1%	54.1%	54.1%
By Residence status:									
Returnees	11,250	13,750	25,000	6,080	7,432	13,512	54.0%	54.1%	54.0%

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)
DR of Congo									
General Distribution (GD)	1,500	57,800	59,300	8,979	76,092	85,624	598.6%	131.6%	144.4%
Food-Assistance-for-Assets	3,500	3,500	7,000	-	-	-	-	-	-
Nutrition: Treatment of Moderate Acute Malnutrition	10,600	-	10,600	6,823	-	6,823	64.4%	-	64.4%
HIV/TB: Care&Treatment;	2,210	-	2,210	2,633	-	2,633	119.1%	-	119.1%
Central African Republic									
General Distribution (GD)	280,001	156,000	436,001	588,113	134,863	722,976	210.0%	86.5%	165.8%
School Feeding (on-site)	185,150	-	185,150	238,393	-	238,393	128.8%	-	128.8%
Food-Assistance-for-Assets	120,000	20,000	140,000	90,118	21,000	111,118	75.1%	105.0%	79.4%
Nutrition: Treatment of Moderate Acute Malnutrition	11,000	-	11,000	11,005	-	11,005	100.0%	-	100.0%
Nutrition: Prevention of Acute Malnutrition	46,000	-	46,000	52,810	-	52,810	114.8%	-	114.8%
Nutrition: Therapeutic Feeding (Treatment of Severe Acute Malnutrition)	9,600	-	9,600	4,708	-	4,708	49.0%	-	49.0%
HIV/TB: Care&Treatment;	1,000	5,000	6,000	2,159	970	3,129	215.9%	19.4%	52.2%
Congo (Brazzaville)									
General Distribution (GD)	5,759	13,274	19,033	18,552	10,255	18,552	322.1%	77.3%	97.5%
Nutrition: Treatment of Moderate Acute Malnutrition	3,400	-	3,400	2,160	-	2,160	63.5%	-	63.5%
Cameroon									
General Distribution (GD)	131,100	40,000	171,100	137,595	39,818	177,413	105.0%	99.5%	103.7%
Food-Assistance-for-Assets	10,000	10,000	20,000	11,485	-	11,485	114.9%	-	57.4%
Nutrition: Prevention of Acute Malnutrition	40,000	-	40,000	40,675	-	40,675	101.7%	-	101.7%
HIV/TB: Care&Treatment;	1,000	-	1,000	2,293	-	2,293	229.3%	-	229.3%
Chad									
General Distribution (GD)	-	25,000	25,000	-	13,512	13,512	-	54.0%	54.0%

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)
DR of Congo									
General Distribution (GD)	1,500	11,560	13,060	3,896	26,163	29,297	259.7%	226.3%	224.3%
Food-Assistance-for-Assets	700	700	1,400	-	-	-	-	-	-
Nutrition: Treatment of Moderate Acute Malnutrition	10,600	-	10,600	6,823	-	6,823	64.4%	-	64.4%
HIV/TB: Care&Treatment;	2,210	-	2,210	2,633	-	2,633	119.1%	-	119.1%
Central African Republic									
General Distribution (GD)	280,001	156,000	436,001	588,113	134,863	722,976	210.0%	86.5%	165.8%
School Feeding (on-site)	185,150	-	185,150	238,393	-	238,393	128.8%	-	128.8%
Food-Assistance-for-Assets	120,000	20,000	140,000	90,118	21,000	111,118	75.1%	105.0%	79.4%
Nutrition: Treatment of Moderate Acute Malnutrition	11,000	-	11,000	11,005	-	11,005	100.0%	-	100.0%
Nutrition: Prevention of Acute Malnutrition	46,000	-	46,000	52,810	-	52,810	114.8%	-	114.8%
Nutrition: Therapeutic Feeding (Treatment of Severe Acute Malnutrition)	9,600	-	9,600	4,708	-	4,708	49.0%	-	49.0%
HIV/TB: Care&Treatment;	1,000	5,000	6,000	2,159	970	3,129	215.9%	19.4%	52.2%
Congo (Brazzaville)									
General Distribution (GD)	1,152	2,655	3,807	3,711	2,051	3,711	322.1%	77.3%	97.5%
Nutrition: Treatment of Moderate Acute Malnutrition	3,400	-	3,400	2,160	-	2,160	63.5%	-	63.5%
Cameroon									
General Distribution (GD)	26,220	8,000	34,220	41,771	14,666	56,437	159.3%	183.3%	164.9%
Food-Assistance-for-Assets	2,000	2,000	4,000	2,295	-	2,295	114.8%	-	57.4%
Nutrition: Prevention of Acute Malnutrition	40,000	-	40,000	40,675	-	40,675	101.7%	-	101.7%
HIV/TB: Care&Treatment;	1,000	-	1,000	2,293	-	2,293	229.3%	-	229.3%
Chad									
General Distribution (GD)	-	25,000	25,000	-	13,512	13,512	-	54.0%	54.0%

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)
DR of Congo									
General Distribution (GD)									
People participating in general distributions	6,399	6,661	13,060	14,356	14,941	29,297	224.3%	224.3%	224.3%
Total participants	6,399	6,661	13,060	14,356	14,941	29,297	224.3%	224.3%	224.3%
Total beneficiaries	29,058	30,242	59,300	41,955	43,669	85,624	144.4%	144.4%	144.4%
Food-Assistance-for-Assets									
People participating in asset-creation activities	686	714	1,400	-	-	-	-	-	-
Total participants	686	714	1,400	-	-	-	-	-	-
Total beneficiaries	3,430	3,570	7,000	-	-	-	-	-	-
HIV/TB: Care&Treatment;									
ART Clients receiving food assistance	213	671	884	254	803	1,057	119.2%	119.7%	119.6%
TB Clients receiving food assistance	213	671	884	272	860	1,132	127.7%	128.2%	128.1%
PMTCT Clients receiving food assistance	-	442	442	-	444	444	-	100.5%	100.5%
Total participants	426	1,784	2,210	526	2,107	2,633	123.5%	118.1%	119.1%
Total beneficiaries	426	1,784	2,210	526	2,107	2,633	123.5%	118.1%	119.1%
Central African Republic									
General Distribution (GD)									
People participating in general distributions	208,922	227,079	436,001	338,063	384,913	722,976	161.8%	169.5%	165.8%
Total participants	208,922	227,079	436,001	338,063	384,913	722,976	161.8%	169.5%	165.8%
Total beneficiaries	208,922	227,079	436,001	338,063	384,913	722,976	161.8%	169.5%	165.8%
School Feeding (on-site)									
Children receiving school meals in primary schools	87,021	98,129	185,150	128,194	110,199	238,393	147.3%	112.3%	128.8%
Total participants	87,021	98,129	185,150	128,194	110,199	238,393	147.3%	112.3%	128.8%
Total beneficiaries	87,021	98,129	185,150	128,194	110,199	238,393	147.3%	112.3%	128.8%
Food-Assistance-for-Assets									
People participating in asset-creation activities	65,800	74,200	140,000	54,410	56,708	111,118	82.7%	76.4%	79.4%
Total participants	65,800	74,200	140,000	54,410	56,708	111,118	82.7%	76.4%	79.4%
Total beneficiaries	65,800	74,200	140,000	54,410	56,708	111,118	82.7%	76.4%	79.4%
HIV/TB: Care&Treatment;									

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)
ART Clients receiving food assistance	469	531	1,000	671	1,488	2,159	143.1%	280.2%	215.9%
Activity supporters	2,349	2,651	5,000	294	676	970	12.5%	25.5%	19.4%
Total participants	2,818	3,182	6,000	965	2,164	3,129	34.2%	68.0%	52.2%
Total beneficiaries	2,818	3,182	6,000	965	2,164	3,129	34.2%	68.0%	52.2%
Congo (Brazzaville)									
General Distribution (GD)									
People participating in general distributions	1,985	1,822	3,807	1,670	2,041	3,711	84.1%	112.0%	97.5%
Total participants	1,985	1,822	3,807	1,670	2,041	3,711	84.1%	112.0%	97.5%
Total beneficiaries	9,923	9,110	19,033	8,719	9,833	18,552	87.9%	107.9%	97.5%
Cameroon									
General Distribution (GD)									
People participating in general distributions	16,416	17,784	34,200	27,090	29,347	56,437	165.0%	165.0%	165.0%
Activity supporters	10	10	20	-	-	-	-	-	-
Total participants	16,426	17,794	34,220	27,090	29,347	56,437	164.9%	164.9%	164.9%
Total beneficiaries	82,128	88,972	171,100	85,159	92,254	177,413	103.7%	103.7%	103.7%
Food-Assistance-for-Assets									
People participating in asset-creation activities	1,920	2,080	4,000	1,102	1,193	2,295	57.4%	57.4%	57.4%
Total participants	1,920	2,080	4,000	1,102	1,193	2,295	57.4%	57.4%	57.4%
Total beneficiaries	9,600	10,400	20,000	5,513	5,972	11,485	57.4%	57.4%	57.4%
HIV/TB: Care&Treatment;									
ART Clients receiving food assistance	260	740	1,000	596	1,697	2,293	229.2%	229.3%	229.3%
Total participants	260	740	1,000	596	1,697	2,293	229.2%	229.3%	229.3%
Total beneficiaries	260	740	1,000	596	1,697	2,293	229.2%	229.3%	229.3%
Chad									
General Distribution (GD)									
People participating in general distributions	11,250	13,750	25,000	6,081	7,431	13,512	54.1%	54.0%	54.0%
Total participants	11,250	13,750	25,000	6,081	7,431	13,512	54.1%	54.0%	54.0%
Total beneficiaries	11,250	13,750	25,000	6,081	7,431	13,512	54.1%	54.0%	54.0%

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)
DR of Congo									
Nutrition: Treatment of Moderate Acute Malnutrition									
Children (6-23 months)	1,455	1,515	2,970	696	655	1,351	47.8%	43.2%	45.5%
Children (24-59 months)	2,955	3,075	6,030	1,352	1,393	2,745	45.8%	45.3%	45.5%
Pregnant and lactating girls (less than 18 years old)	-	400	400	-	682	682	-	170.5%	170.5%
Pregnant and lactating women (18 plus)	-	1,200	1,200	-	2,045	2,045	-	170.4%	170.4%
Total beneficiaries	4,410	6,190	10,600	2,048	4,775	6,823	46.4%	77.1%	64.4%
Central African Republic									
Nutrition: Treatment of Moderate Acute Malnutrition									
Children (6-59 months)	5,170	5,830	11,000	4,980	6,025	11,005	96.3%	103.3%	100.0%
Total beneficiaries	5,170	5,830	11,000	4,980	6,025	11,005	96.3%	103.3%	100.0%
Nutrition: Prevention of Acute Malnutrition									
Children (6-23 months)	20,920	25,080	46,000	24,474	28,336	52,810	117.0%	113.0%	114.8%
Total beneficiaries	20,920	25,080	46,000	24,474	28,336	52,810	117.0%	113.0%	114.8%
Nutrition: Therapeutic Feeding (Treatment of Severe Acute Malnutrition)									
Activity supporters (18 plus)	-	9,600	9,600	1,987	2,721	4,708	-	28.3%	49.0%
Total beneficiaries	-	9,600	9,600	1,987	2,721	4,708	-	28.3%	49.0%
Congo (Brazzaville)									
Nutrition: Treatment of Moderate Acute Malnutrition									
Children (6-23 months)	1,372	1,228	2,600	825	858	1,683	60.1%	69.9%	64.7%
Pregnant and lactating girls (less than 18 years old)	-	360	360	-	215	215	-	59.7%	59.7%
Pregnant and lactating women (18 plus)	-	440	440	-	262	262	-	59.5%	59.5%
Total beneficiaries	1,372	2,028	3,400	825	1,335	2,160	60.1%	65.8%	63.5%
Cameroon									

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Nutrition: Prevention of Acute Malnutrition									
Children (6-23 months)	19,200	20,800	40,000	19,524	21,151	40,675	101.7%	101.7%	101.7%
Total beneficiaries	19,200	20,800	40,000	19,524	21,151	40,675	101.7%	101.7%	101.7%

Project Indicators

Outcome Indicators

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
DR of Congo				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women				
MAM treatment recovery rate (%)				
<i>EQUATEUR ENFANTS 6/59 MOIS, Project End Target: 2017.12, CP reports, Base value: 2015.03, Secondary data, SPR 2015, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	>75.00	90.52	97.65	99.54
MAM treatment mortality rate (%)				
<i>EQUATEUR ENFANTS 6/59 MOIS, Project End Target: 2017.12, CP reports, Base value: 2015.03, WFP programme monitoring, CP reports, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	<3.00	0.00	0.00	0.05
MAM treatment default rate (%)				
<i>EQUATEUR ENFANTS 6/59 MOIS, Project End Target: 2017.12, SPR 2015, Base value: 2015.03, Secondary data, SPR 2015, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	<15.00	6.80	0.00	0.25
MAM treatment non-response rate (%)				
<i>EQUATEUR ENFANTS 6/59 MOIS, Project End Target: 2017.12, CP reports, Base value: 2015.03, WFP programme monitoring, CP reports, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	<15.00	2.66	1.07	0.16
MAM treatment recovery rate (%)				
<i>EQUATEUR PLW, Project End Target: 2017.12, CP reports, Base value: 2015.03, Secondary data, SPR 2015, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	>75.00	95.35	100.00	98.94

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM treatment mortality rate (%)				
<i>EQUATEUR PLW, Project End Target: 2017.12, CP reports, Base value: 2015.03, WFP programme monitoring, CP reports, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	<3.00	0.35	0.00	0.00
MAM treatment default rate (%)				
<i>EQUATEUR PLW, Project End Target: 2017.12, SPR 2015, Base value: 2015.03, Secondary data, SPR 2015, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	<15.00	3.50	1.28	1.06
MAM treatment non-response rate (%)				
<i>EQUATEUR PLW, Project End Target: 2017.12, CP reports, Base value: 2015.03, WFP programme monitoring, CP reports, Previous Follow-up: 2016.12, WFP programme monitoring, CP reports, Latest Follow-up: 2017.12, WFP programme monitoring, CP reports 2017</i>	<15.00	0.86	0.00	0.00
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				
FCS: percentage of households with poor Food Consumption Score				
<i>BILI, Project End Target: 2017.12, Endline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=3.40	17.00	17.50	4.00
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>BILI, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=3.20	16.00	33.30	0.00
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>BILI, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=3.60	18.00	16.00	4.70
Diet Diversity Score				
<i>BILI, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.05	5.05	4.85	5.66
Diet Diversity Score (female-headed households)				
<i>BILI, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.13	5.13	4.00	5.71
Diet Diversity Score (male-headed households)				
<i>BILI, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.01	5.01	4.92	5.65
FCS: percentage of households with poor Food Consumption Score				
<i>BOYABU, Project End Target: 2017.12, Endline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=2.10	10.50	11.50	12.60

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>BOYABU, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=1.60	8.00	12.30	14.00
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>BOYABU, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=2.60	13.00	10.60	10.70
Diet Diversity Score				
<i>BOYABU, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.18	5.18	4.59	5.31
Diet Diversity Score (female-headed households)				
<i>BOYABU, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.22	5.22	4.50	5.23
Diet Diversity Score (male-headed households)				
<i>BOYABU, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.13	5.13	4.68	5.43
FCS: percentage of households with poor Food Consumption Score				
<i>INKE, Project End Target: 2017.12, Endline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=4.80	24.00	2.10	2.10
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>INKE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=4.00	20.00	0.00	0.00
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>INKE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=5.60	28.00	4.10	2.70
Diet Diversity Score				
<i>INKE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>4.58	4.58	5.60	5.98
Diet Diversity Score (female-headed households)				
<i>INKE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>4.90	4.90	5.59	6.26

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score (male-headed households)				
<i>INKE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>4.39	4.39	5.61	5.90
FCS: percentage of households with poor Food Consumption Score				
<i>MOLE, Project End Target: 2017.12, Endline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=3.90	19.50	1.60	6.50
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>MOLE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=3.20	16.00	2.60	6.90
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>MOLE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	=4.60	23.00	0.90	6.00
Diet Diversity Score				
<i>MOLE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>4.98	4.98	6.03	5.75
Diet Diversity Score (female-headed households)				
<i>MOLE, Project End Target: 2017.12, Baseline survey, Base value: 2017.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>5.02	5.02	6.10	5.78
Diet Diversity Score (male-headed households)				
<i>MOLE, Project End Target: 2017.12, Baseline survey, Base value: 2015.12, WFP survey, Baseline survey, Previous Follow-up: 2016.12, WFP programme monitoring, Latest Follow-up: 2017.12, WFP programme monitoring</i>	>4.95	4.95	6.03	5.71
Restored or stabilized access to basic services and/or community assets				
Retention rate in WFP-assisted primary schools				
<i>EQUATEUR, Project End Target: 2016.12, CP reports, Base value: 2014.09, WFP programme monitoring, CP reports, Previous Follow-up: 2015.12, WFP programme monitoring, CP reports</i>	>95.34	95.34	92.08	-
Retention rate (girls) in WFP-assisted primary schools				
<i>EQUATEUR, Project End Target: 2016.12, CP reports, Base value: 2014.09, WFP programme monitoring, CP reports, Previous Follow-up: 2015.12, WFP programme monitoring, CP reports</i>	>95.50	95.50	90.75	-
Retention rate (boys) in WFP-assisted primary schools				
<i>EQUATEUR, Project End Target: 2016.12, CP distribution reports, Base value: 2014.09, WFP programme monitoring, CP reports, Previous Follow-up: 2015.12, WFP programme monitoring, CP reports</i>	>96.40	96.40	94.06	-

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
<i>EQUATEUR, Project End Target: 2016.12, CP reports, Base value: 2014.09, WFP programme monitoring, CP reports</i>	>6.00	4.55	-	-
Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools				
<i>EQUATEUR, Project End Target: 2016.12, CP reports, Base value: 2014.09, WFP programme monitoring, CP reports</i>	>6.00	5.83	-	-
Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools				
<i>EQUATEUR, Project End Target: 2016.12, CP reports, Base value: 2014.09, WFP programme monitoring, CP reports</i>	>6.00	5.09	-	-
Central African Republic				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women				
MAM treatment recovery rate (%)				
<i>200799.CF LOCATIONS, Project End Target: 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, Base value: 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Previous Follow-up: 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP monthly monitoring report 2017</i>	>75.00	92.00	85.90	94.54
MAM treatment mortality rate (%)				
<i>200799.CF LOCATIONS, Project End Target: 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, Base value: 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Previous Follow-up: 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP monthly monitoring report 2017</i>	<3.00	0.10	0.10	0.03
MAM treatment default rate (%)				
<i>200799.CF LOCATIONS, Project End Target: 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, Base value: 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Previous Follow-up: 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP monthly monitoring report 2017</i>	<15.00	7.00	8.80	3.11
MAM treatment non-response rate (%)				
<i>200799.CF LOCATIONS, Project End Target: 2016.12, Monthly CP/Healt center activity report; Programme Monitoring, Base value: 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Previous Follow-up: 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP monthly monitoring report 2017</i>	<15.00	4.10	5.20	2.32
Proportion of target population who participate in an adequate number of distributions				
<i>200799.CF LOCATIONS, Project End Target: 2016.12, Monthly CP /Healt center Activity report, WFP Programme Monitoring, Base value: 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Previous Follow-up: 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP monthly monitoring report 2017</i>	>66.00	88.00	86.00	83.72

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of eligible population who participate in programme (coverage)				
200799.CF LOCATIONS, Project End Target: 2016.12, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Base value: 2015.12, WFP programme monitoring, Monthly CP /Healt center Activity report, WFP Programme Monitoring , Previous Follow-up: 2016.12, WFP programme monitoring, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, CP monthly monitoring report 2017	>70.00	65.00	80.00	63.44
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				
FCS: percentage of households with poor Food Consumption Score				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM Avril 2016, Base value: 2016.04, WFP survey, PDM Avril 2016, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November Post Distribution Monitoring	<2.20	11.00	8.40	6.70
FCS: percentage of households with borderline Food Consumption Score				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM Avril 2016, Base value: 2016.04, WFP survey, PDM Avril 2016, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November 2017 Post Distribution Monitoring	=3.86	19.30	15.00	19.60
FCS: percentage of households with poor Food Consumption Score (female-headed)				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM Avril 2016, Base value: 2016.04, WFP survey, PDM Avril 2016, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November Post Distribution Monitoring	<2.28	11.40	10.00	4.90
FCS: percentage of households with poor Food Consumption Score (male-headed)				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM Avril 2016, Base value: 2016.04, WFP survey, PDM Avril 2016, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November Post Distribution Monitoring	<2.14	10.70	7.70	7.70
FCS: percentage of households with borderline Food Consumption Score (female-headed)				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM Avril 2016, Base value: 2016.04, WFP survey, PDM Avril 2016, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November 2017 Post Distribution Monitoring	=4.28	21.40	15.70	19.70
FCS: percentage of households with borderline Food Consumption Score (male-headed)				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM Avril 2016, Base value: 2016.04, WFP survey, PDM Avril 2016, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November 2017 Post Distribution Monitoring	=3.48	17.40	14.60	19.60
Diet Diversity Score				
200799.CF LOCATIONS, Project End Target: 2016.12, Avril 2016 Post Distribution Monitoring, Base value: 2016.04, WFP survey, Avril 2016 Post Distribution Monitoring, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November 2017 Post Distribution Monitoring	>5.70	5.70	6.30	5.53

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score (female-headed households)				
200799.CF LOCATIONS, Project End Target: 2016.12, Avril 2016 Post Distribution Monitoring, Base value: 2016.04, WFP survey, Avril 2016 Post Distribution Monitoring, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November 2017 Post Distribution Monitoring	>5.70	5.70	6.21	5.66
Diet Diversity Score (male-headed households)				
200799.CF LOCATIONS, Project End Target: 2016.12, PDM; EFSA, Base value: 2016.04, WFP survey, Avril 2016 Post Distribution Monitoring, Previous Follow-up: 2016.08, WFP survey, August 2016 PDM, Latest Follow-up: 2017.11, WFP survey, November 2017 Post Distribution Report	>5.80	5.80	6.34	5.45
Restored or stabilized access to basic services and/or community assets				
Retention rate in WFP-assisted primary schools				
200799.CF LOCATIONS, Project End Target: 2016.12, Ministry of Education; school records; quarterly Education report and Checklist, Base value: 2015.12, WFP programme monitoring, Ministry of Education, schools records, quarterly CP reports, Previous Follow-up: 2016.12, Secondary data, Gouvernement report and Cmonthly CP monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, Gouvernement report and Cmonthly CP monitoring report 2017	=70.00	85.50	90.40	97.06
Retention rate (girls) in WFP-assisted primary schools				
200799.CF LOCATIONS, Project End Target: 2016.12, Ministry of Education; school records; quarterly Education report and Checklist, Base value: 2015.12, WFP programme monitoring, Ministry of Education, schools records, quarterly CP reports, Previous Follow-up: 2016.12, Secondary data, Gouvernement report and Cmonthly CP monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, Gouvernement report and Cmonthly CP monitoring report 2017	=70.00	83.00	79.30	85.04
Retention rate (boys) in WFP-assisted primary schools				
200799.CF LOCATIONS, Project End Target: 2016.12, Ministry of Education; school records; quarterly Education report and Checklist, Base value: 2015.12, WFP programme monitoring, Ministry of Education, schools records, quarterly CP reports, Previous Follow-up: 2016.12, Secondary data, Ministry of Education, schools records, quarterly CP reports, Latest Follow-up: 2017.12, WFP programme monitoring, Ministry of Education, schools records, quarterly CP reports	=70.00	88.00	80.00	90.00
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
200799.CF LOCATIONS, Project End Target: 2016.12, Ministry of Education, schools records, Base value: 2015.12, WFP programme monitoring, Ministry of Education, Schools records, quarterly CP reports, Previous Follow-up: 2016.12, Secondary data, Gouvernement report and Cmonthly CP monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, Monthly CP monitoring report 2017	=6.00	5.40	2.60	5.60
Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools				
200799.CF LOCATIONS, Project End Target: 2016.12, Ministry of Education, School records, Base value: 2015.12, WFP programme monitoring, Ministry of Education, schools records, quarterly CP reports, Previous Follow-up: 2016.12, Secondary data, Gouvernement report and Cmonthly CP monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, Monthly CP monitoring report 2017	=6.00	1.90	0.40	3.40

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools				
200799.CF LOCATIONS, Project End Target: 2016.12, Ministry of Education/School records, Base value: 2015.12, WFP programme monitoring, Ministry of Education, schools records, quarterly CP reports, Previous Follow-up: 2016.12, Secondary data, Gouvernement report and Cmonthly CP monitoring report 2016, Latest Follow-up: 2017.12, WFP programme monitoring, monthly CP monitoring report 2017	=6.00	4.50	2.50	4.22
ART Default Rate (%)				
200799.CF LOCATIONS, Project End Target: 2016.12, CP/Health center report , Base value: 2015.12, WFP programme monitoring, CP Health Center Report, Previous Follow-up: 2016.12, WFP survey, CP monthly monitoring report 2016, Latest Follow-up: 2017.12, WFP survey, CP monthly monitoring report 2017	<15.00	4.40	4.70	2.35
Congo (Brazzaville)				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women				
MAM treatment recovery rate (%)				
LIKOUALA, Project End Target: 2015.12, Cooperating partner report, Base value: 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Previous Follow-up: 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Latest Follow-up: 2017.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	>75.00	95.00	90.12	75.24
MAM treatment mortality rate (%)				
LIKOUALA, Project End Target: 2015.12, WFP Monitoring Check lis, Base value: 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Previous Follow-up: 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Latest Follow-up: 2017.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	<3.00	0.00	0.76	0.49
MAM treatment default rate (%)				
LIKOUALA, Project End Target: 2015.12, Monthly cooperatiing partner report, Base value: 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Previous Follow-up: 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Latest Follow-up: 2017.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	<15.00	5.00	0.67	24.76
MAM treatment non-response rate (%)				
LIKOUALA, Project End Target: 2015.12, WFP Monitoring Check lis, Base value: 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Previous Follow-up: 2016.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Latest Follow-up: 2017.12, WFP programme monitoring, Report of partner Terre Sans Frontiere	<15.00	2.00	0.00	15.22
Proportion of eligible population who participate in programme (coverage)				
LIKOUALA, Project End Target: 2015.12, Nutritional survey, Base value: 2015.12, WFP programme monitoring, Report of partner Terre Sans Frontiere, Previous Follow-up: 2016.12, WFP programme monitoring, Desk calculation, Latest Follow-up: 2017.12, WFP programme monitoring, Desk calculation	>90.00	54.32	81.66	98.21
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score				
<i>LIKOUALA, Project End Target: 2015.12, Base value: 2016.06, Joint survey, JAM, Previous Follow-up: 2017.01, WFP programme monitoring, PDM survey, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	=6.24	3.61	1.80	9.80
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>LIKOUALA, Project End Target: 2015.12, Base value: 2016.06, Joint survey, JAM, Previous Follow-up: 2017.01, WFP programme monitoring, PDM survey, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	=6.20	4.57	1.70	10.60
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>LIKOUALA, Project End Target: 2015.12, Post Distribution Monitoring, Base value: 2016.06, Joint survey, JAM, Previous Follow-up: 2017.01, WFP programme monitoring, PDM survey, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	=6.00	2.86	1.90	9.00
Diet Diversity Score				
<i>LIKOUALA, Project End Target: 2015.01, Base value: 2016.06, Joint survey, JAM, Previous Follow-up: 2017.01, WFP programme monitoring, PDM survey, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	>6.50	4.72	4.78	4.71
Diet Diversity Score (female-headed households)				
<i>LIKOUALA, Project End Target: 2015.01, Base value: 2016.06, Joint survey, JAM, Previous Follow-up: 2017.01, WFP programme monitoring, PDM survey, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	>6.50	4.58	4.71	4.70
Diet Diversity Score (male-headed households)				
<i>LIKOUALA, Project End Target: 2017.01, Base value: 2016.06, Joint survey, JAM, Previous Follow-up: 2017.01, WFP programme monitoring, PDM survey, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	>6.50	4.83	4.78	4.72
CSI (Food): Percentage of households with reduced/stabilized Coping Strategy Index				
<i>LIKOUALA, Project End Target: 2015.01, Base value: 2015.12, WFP programme monitoring, PDM Survey, Previous Follow-up: 2016.06, Joint survey, JAM, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	>80.00	71.24	84.88	77.68
CSI (Food): Percentage of female-headed households with reduced/stabilized Coping Strategy Index				
<i>LIKOUALA, Project End Target: 2015.12, Base value: 2015.12, WFP programme monitoring, PDM Survey, Previous Follow-up: 2016.06, Joint survey, JAM, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	>80.00	66.59	76.97	87.01
CSI (Food): Percentage of male-headed households with reduced/stabilized Coping Strategy Index				
<i>LIKOUALA, Project End Target: 2015.12, Base value: 2015.12, WFP programme monitoring, PDM Survey, Previous Follow-up: 2016.06, Joint survey, JAM, Latest Follow-up: 2017.08, WFP programme monitoring, PDM survey</i>	>80.00	74.34	89.06	68.25
Cameroon				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women				

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of target population who participate in an adequate number of distributions				
<i>CAMEROUN, Project End Target: 2017.12, Base value: 2015.03, WFP programme monitoring, CPR, Previous Follow-up: 2016.09, WFP survey, PDM, Distribution Data, Latest Follow-up: 2017.09, WFP programme monitoring, PDM, Distribution Data</i>	>66.00	90.00	49.60	72.78
Proportion of eligible population who participate in programme (coverage)				
<i>CAMEROUN, Project End Target: 2017.12, PDM & JAM, Base value: 2015.02, Joint survey, SENS, Previous Follow-up: 2016.12, WFP programme monitoring, Health Center Registers, Latest Follow-up: 2017.06, WFP programme monitoring, PDM, Distribution Sites Registers</i>	>70.00	72.08	83.96	65.74
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				
FCS: percentage of households with poor Food Consumption Score				
<i>CAMEROUN, Project End Target: 2017.12, PDM, Base value: 2014.09, WFP programme monitoring, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.11, WFP programme monitoring, PDM</i>	=0.24	1.20	1.70	3.05
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>CAMEROUN, Project End Target: 2017.12, PDM, Base value: 2014.09, WFP programme monitoring, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.11, WFP programme monitoring, PDM</i>	=0.24	1.20	1.30	2.39
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>CAMEROUN, Project End Target: 2017.12, PDM, Base value: 2014.09, WFP programme monitoring, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.11, WFP programme monitoring, PDM</i>	=0.24	1.20	0.30	4.33
Diet Diversity Score				
<i>CAMEROUN, Project End Target: 2017.12, PDM, Base value: 2014.09, WFP programme monitoring, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.11, WFP programme monitoring, PDM</i>	=7.00	5.80	6.29	5.88
Diet Diversity Score (female-headed households)				
<i>CAMEROUN, Project End Target: 2017.12, PDM, Base value: 2014.09, WFP programme monitoring, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.11, WFP programme monitoring, PDM</i>	=7.00	5.83	6.35	5.83
Diet Diversity Score (male-headed households)				
<i>CAMEROUN, Project End Target: 2017.12, PDM, Base value: 2014.09, WFP programme monitoring, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.11, WFP programme monitoring, PDM</i>	=7.00	5.94	6.43	5.96
Restored or stabilized access to basic services and/or community assets				
ART Default Rate (%)				
<i>CAMEROUN, Project End Target: 2017.12, PDM, CPR, Base value: 2015.12, WFP programme monitoring, CPR, Previous Follow-up: 2016.12, WFP programme monitoring, CPR reports, Latest Follow-up: 2017.11, WFP programme monitoring, CPR reports</i>	<15.00	4.75	0.10	0.00
Chad				
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score				
<i>CHAD, Project End Target: 2017.06, PDM, Base value: 2015.06, WFP survey, PDM, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.05, WFP survey, PDM</i>	<8.80	8.80	4.00	23.40
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>CHAD, Project End Target: 2017.06, PDM, Base value: 2015.06, WFP survey, Baseline survey, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.05, WFP survey, PDM</i>	<12.30	12.30	1.10	25.10
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>CHAD, Project End Target: 2017.06, PDM, Base value: 2015.06, WFP survey, Baseline survey, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.05, WFP survey, PDM</i>	<5.70	5.70	2.50	21.50
Diet Diversity Score				
<i>CHAD, Project End Target: 2017.06, PDM, Base value: 2015.06, WFP survey, Baseline survey, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.05, WFP survey, PDM</i>	=4.50	4.20	5.00	4.90
Diet Diversity Score (female-headed households)				
<i>CHAD, Project End Target: 2017.06, PDM, Base value: 2015.06, WFP survey, Baseline survey, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.05, WFP survey, PDM</i>	=4.50	4.10	5.30	5.00
Diet Diversity Score (male-headed households)				
<i>CHAD, Project End Target: 2017.06, PDM, Base value: 2015.06, WFP survey, Baseline survey, Previous Follow-up: 2016.10, WFP survey, PDM, Latest Follow-up: 2017.05, WFP survey, PDM</i>	=4.50	4.30	4.70	4.90

Output Indicators

Output	Unit	Planned	Actual	% Actual vs. Planned
DR of Congo				
SO1: HIV/TB: Care&Treatment;				
Number of health centres/sites assisted	centre/site	10	10	100.0%
SO1: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of health centres/sites assisted	centre/site	39	39	100.0%
Congo (Brazzaville)				
SO1: General Distribution (GD)				
Number of institutional sites assisted	site	5	2	40.0%
SO1: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of institutional sites assisted	site	4	2	50.0%
Cameroon				

Output	Unit	Planned	Actual	% Actual vs. Planned
SO1: Food-Assistance-for-Assets				
Number of villages assisted	centre/site	7	15	214.3%
SO1: General Distribution (GD)				
Number of health centres/sites assisted	centre/site	12	12	100.0%
Number of refugee/IDP sites assisted	site	82	86	104.9%
SO1: HIV/TB: Care&Treatment;				
Number of health centres/sites assisted	centre/site	8	8	100.0%
SO1: Nutrition: Prevention of Acute Malnutrition				
Number of health centres/sites assisted	centre/site	106	108	101.9%

Gender Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Cameroon				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.10, Latest Follow-up: 2017.09</i>	>20.00	9.00	22.00	6.98
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.10, Latest Follow-up: 2017.09</i>	>40.00	38.10	12.70	23.48
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.10, Latest Follow-up: 2017.09</i>	=40.00	51.50	63.70	69.55
Proportion of women beneficiaries in leadership positions of project management committees				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	>50.00	50.00	50.00	50.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	>60.00	50.00	50.00	50.00
Central African Republic				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=25.00	35.00	21.30	32.30

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>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=50.00	39.00	59.20	58.40
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=25.00	26.00	19.50	9.20
Proportion of women beneficiaries in leadership positions of project management committees				
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=50.00	70.80	93.20	41.60
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=60.00	97.00	38.90	40.50
Chad				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=15.00	1.50	24.00	13.00
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	>50.00	97.00	57.00	43.00
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=35.00	1.50	19.00	44.00
Proportion of women beneficiaries in leadership positions of project management committees				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	>50.00	33.00	40.00	40.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.09, Latest Follow-up: 2017.05</i>	>60.00	33.00	80.00	60.00
Congo (Brazzaville)				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=50.00	3.44	12.50	10.00

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>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=20.00	45.75	11.30	13.90
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=30.00	50.81	76.20	76.10
Proportion of women beneficiaries in leadership positions of project management committees				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2015.12, Previous Follow-up: 2016.06, Latest Follow-up: 2017.12</i>	>50.00	54.00	40.00	25.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Base value: 2015.12, Previous Follow-up: 2016.06, Latest Follow-up: 2017.12</i>	>60.00	100.00	100.00	25.00
DR of Congo				
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>BOSOBOLO / BILI / CAMP BILI, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=50.00	16.67	35.80	29.00
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>LIBENGE / BOYABU / CAMP BOYABU, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=50.00	40.21	28.90	11.90
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>LIBENGE / MOLE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=50.00	41.30	42.60	22.60
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>MOBAY MBONGO / INKE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=50.00	39.45	29.00	38.10
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>BOSOBOLO / BILI / CAMP BILI, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=25.00	46.30	17.30	21.00
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>LIBENGE / BOYABU / CAMP BOYABU, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=25.00	38.14	40.10	61.30

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 LIBENGE / MOLE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	=25.00	36.75	34.70	54.30
Proportion of households where females make decisions over the use of cash, voucher or food MOBAY MBONGO / INKE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	=25.00	30.28	47.30	27.50
Proportion of households where males make decisions over the use of cash, voucher or food BOSOBOLO / BILI / CAMP BILI, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	=25.00	37.04	46.90	50.00
Proportion of households where males make decisions over the use of cash, voucher or food LIBENGE / BOYABU / CAMP BOYABU, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	=25.00	21.65	31.00	26.90
Proportion of households where males make decisions over the use of cash, voucher or food LIBENGE / MOLE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	=25.00	22.22	22.60	23.00
Proportion of households where males make decisions over the use of cash, voucher or food MOBAY MBONGO / INKE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	=25.00	32.28	23.70	34.40
Proportion of women beneficiaries in leadership positions of project management committees EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2016.12	>50.00	32.00	35.48	-
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2016.12	>60.00	43.00	35.48	-

Protection and Accountability to Affected Populations Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Cameroon				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain) CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09	=70.00	70.33	73.66	59.48

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	=80.00	100.00	100.00	100.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	=70.00	100.00	100.00	56.56
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.06, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	=80.00	100.00	100.00	100.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	=70.00	100.00	100.00	58.08
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Base value: 2016.05, Previous Follow-up: 2016.09, Latest Follow-up: 2017.09</i>	=80.00	100.00	100.00	100.00
Central African Republic				
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=70.00	72.70	68.90	70.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Base value: 2015.12, Previous Follow-up: 2016.08, Latest Follow-up: 2017.11</i>	=80.00	79.30	86.40	96.00
Chad				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=80.00	50.00	57.00	98.00
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=80.00	100.00	96.00	99.00
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=80.00	53.00	63.00	97.00

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=80.00	100.00	88.00	99.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=80.00	52.00	62.00	97.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Base value: 2015.11, Previous Follow-up: 2016.10, Latest Follow-up: 2017.05</i>	=80.00	100.00	92.00	99.00
Congo (Brazzaville)				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=70.00	88.21	85.10	75.70
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01</i>	=70.00	-	-	-
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=80.00	91.79	94.80	96.50
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01</i>	=80.00	-	-	-
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=70.00	79.00	75.60	80.10
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01</i>	=70.00	-	-	-
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=80.00	84.93	94.60	98.00
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01</i>	=80.00	-	-	-

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=70.00	84.17	80.00	78.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01</i>	=70.00	-	-	-
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.01, Base value: 2016.06, Previous Follow-up: 2017.01, Latest Follow-up: 2017.08</i>	=80.00	88.78	94.70	97.30
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.01</i>	=80.00	-	-	-
DR of Congo				
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>BOSOBOLO / BILI / CAMP BILI, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=80.00	100.00	1.30	73.80
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIBENGE / BOYABU / CAMP BOYABU, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=80.00	4.20	20.20	49.50
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>LIBENGE / MOLE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=80.00	19.30	12.20	75.00
Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain)				
<i>MOBAY MBONGO / INKE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	=80.00	72.20	59.20	7.30
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2016.12</i>	>80.00	97.99	97.60	-
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>BOSOBOLO / BILI / CAMP BILI, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>80.00	100.00	0.00	52.90

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain) LIBENGE / BOYABU / CAMP BOYABU, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>80.00	102.00	22.60	53.30
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain) LIBENGE / MOLE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Latest Follow-up: 2017.12	>80.00	24.60	-	70.80
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain) MOBAY MBONGO / INKE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>80.00	65.90	45.70	83.70
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2016.12	>80.00	97.45	94.49	-
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain) BOSOBOLO / BILI / CAMP BILI, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>80.00	100.00	1.20	71.00
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain) LIBENGE / BOYABU / CAMP BOYABU, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>80.00	7.20	21.50	51.80
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain) LIBENGE / MOLE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>80.00	22.00	52.60	72.60
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain) MOBAY MBONGO / INKE, General Distribution (GD), Project End Target: 2017.12, Base value: 2015.12, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>80.00	69.90	12.40	75.70
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site EQUATEUR, General Distribution (GD), Project End Target: 2016.12, Base value: 2014.12, Previous Follow-up: 2016.12	>80.00	97.30	96.31	-

Partnership Indicators

Cross-cutting Indicators	Project End Target	Latest Follow-up
Cameroon		

Cross-cutting Indicators	Project End Target	Latest Follow-up
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>ADAMAWA, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=10,912.00	10,912.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>ADAMAWA, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=11,314.00	31,731.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>EAST, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=5,447.00	5,447.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>EAST, Nutrition, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=19,578.00	45,563.00
Number of partner organizations that provide complementary inputs and services		
<i>ADAMAWA, Nutrition, Project End Target: 2017.12</i>	=1.00	-
Number of partner organizations that provide complementary inputs and services		
<i>EAST, General Distribution (GD), Project End Target: 2017.12</i>	=1.00	-
Number of partner organizations that provide complementary inputs and services		
<i>EAST, Nutrition, Project End Target: 2017.12</i>	=2.00	-
Proportion of project activities implemented with the engagement of complementary partners		
<i>CAMEROON, Food-Assistance-for-Assets, Latest Follow-up: 2017.12</i>		100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CAMEROON, General Distribution (GD), Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CAMEROON, HIV/TB, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CAMEROON, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CAMEROON, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12</i>	=100.00	-
Central African Republic		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>CENTRAL AFRICAN REPUBLIC, Food-Assistance-for-Assets, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=40,000.00	472,673.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=6,034,706.00	2,141,898.00

Cross-cutting Indicators	Project End Target	Latest Follow-up
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>CENTRAL AFRICAN REPUBLIC, HIV/TB, Project End Target: 2016.12</i>	=4,000.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>CENTRAL AFRICAN REPUBLIC, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=5,000.00	54,062.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>CENTRAL AFRICAN REPUBLIC, School Feeding, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=55,000.00	43,572.00
Number of partner organizations that provide complementary inputs and services		
<i>CENTRAL AFRICAN REPUBLIC, Food-Assistance-for-Assets, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=11.00	6.00
Number of partner organizations that provide complementary inputs and services		
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=16.00	12.00
Number of partner organizations that provide complementary inputs and services		
<i>CENTRAL AFRICAN REPUBLIC, HIV/TB, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=2.00	2.00
Number of partner organizations that provide complementary inputs and services		
<i>CENTRAL AFRICAN REPUBLIC, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=16.00	12.00
Number of partner organizations that provide complementary inputs and services		
<i>CENTRAL AFRICAN REPUBLIC, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=6.00	7.00
Number of partner organizations that provide complementary inputs and services		
<i>CENTRAL AFRICAN REPUBLIC, School Feeding, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=11.00	6.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CENTRAL AFRICAN REPUBLIC, Food-Assistance-for-Assets, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=14.00	85.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CENTRAL AFRICAN REPUBLIC, General Distribution (GD), Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=28.00	96.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CENTRAL AFRICAN REPUBLIC, HIV/TB, Project End Target: 2016.12</i>	=2.00	-
Proportion of project activities implemented with the engagement of complementary partners		
<i>CENTRAL AFRICAN REPUBLIC, Nutrition: Prevention of Acute Malnutrition, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=28.00	96.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CENTRAL AFRICAN REPUBLIC, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=9.00	67.00

Cross-cutting Indicators	Project End Target	Latest Follow-up
Proportion of project activities implemented with the engagement of complementary partners		
<i>CENTRAL AFRICAN REPUBLIC, School Feeding, Project End Target: 2016.12, Latest Follow-up: 2017.12</i>	=19.00	100.00
Chad		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Latest Follow-up: 2017.06</i>	=10,000.00	9,000.00
Number of partner organizations that provide complementary inputs and services		
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Latest Follow-up: 2017.06</i>	=1.00	1.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>CHAD, General Distribution (GD), Project End Target: 2017.06, Latest Follow-up: 2017.05</i>	=100.00	100.00
Congo (Brazzaville)		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Latest Follow-up: 2017.12</i>	=150,000.00	24,276.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.12</i>	=100,000.00	-
Number of partner organizations that provide complementary inputs and services		
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Latest Follow-up: 2017.12</i>	=3.00	3.00
Number of partner organizations that provide complementary inputs and services		
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.12</i>	=2.00	-
Proportion of project activities implemented with the engagement of complementary partners		
<i>LIKOUALA, General Distribution (GD), Project End Target: 2015.12, Latest Follow-up: 2017.12</i>	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>LIKOUALA, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2015.12</i>	=100.00	-
DR of Congo		
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>EQUATEUR, Food-Assistance-for-Assets, Project End Target: 2017.12</i>	=5,853,154.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>EQUATEUR, General Distribution (GD), Project End Target: 2017.12</i>	=13,856,936.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>EQUATEUR, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2017.12</i>	=10,035,953.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
<i>EQUATEUR, School Feeding, Project End Target: 2017.12</i>	=903,312.00	-

Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
<i>EQUATEUR, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=1.00	0.00
Number of partner organizations that provide complementary inputs and services		
<i>EQUATEUR, General Distribution (GD), Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=7.00	7.00
Number of partner organizations that provide complementary inputs and services		
<i>EQUATEUR, Nutrition, Latest Follow-up: 2017.12</i>		2.00
Number of partner organizations that provide complementary inputs and services		
<i>EQUATEUR, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2017.12</i>	=2.00	-
Number of partner organizations that provide complementary inputs and services		
<i>EQUATEUR, School Feeding, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=2.00	0.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>EQUATEUR, Food-Assistance-for-Assets, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=100.00	0.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>EQUATEUR, General Distribution (GD), Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>EQUATEUR, Nutrition, Latest Follow-up: 2017.12</i>		100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>EQUATEUR, Nutrition: Treatment of Moderate Acute Malnutrition, Project End Target: 2017.12</i>	=100.00	-
Proportion of project activities implemented with the engagement of complementary partners		
<i>EQUATEUR, School Feeding, Project End Target: 2017.12, Latest Follow-up: 2017.12</i>	=100.00	0.00

Resource Inputs from Donors

Resource Inputs from Donors

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
Canada	CAN-C-00530-05	Rice	-	76
Canada	CAN-C-00546-14	Corn Soya Blend	-	300
Canada	CAN-C-00546-14	Iodised Salt	-	40
Canada	CAN-C-00546-14	Ready To Use Supplementary Food	-	25
Canada	CAN-C-00546-14	Rice	-	361
Canada	CAN-C-00546-14	Sorghum/Millet	-	22
Canada	CAN-C-00546-14	Split Peas	-	200
Canada	CAN-C-00546-14	Vegetable Oil	-	73

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
China	CHA-C-00054-01	Corn Soya Blend	-	191
China	CHA-C-00054-01	Iodised Salt	-	40
China	CHA-C-00054-01	Rice	-	581
China	CHA-C-00054-01	Vegetable Oil	-	116
China	CHA-C-00057-01	Corn Soya Blend	-	101
China	CHA-C-00057-01	Rice	-	1,050
China	CHA-C-00057-01	Split Peas	-	200
China	CHA-C-00057-01	Vegetable Oil	-	70
European Commission	EEC-C-00618-01	Iodised Salt	-	21
European Commission	EEC-C-00618-01	Split Peas	-	2
European Commission	EEC-C-00649-01	Beans	-	1
European Commission	EEC-C-00649-01	Corn Soya Blend	-	167
European Commission	EEC-C-00649-01	Iodised Salt	-	57
European Commission	EEC-C-00649-01	Maize	-	25
European Commission	EEC-C-00649-01	Rice	-	366
European Commission	EEC-C-00649-01	Sorghum/Millet	-	492
European Commission	EEC-C-00649-01	Split Peas	-	196
European Commission	EEC-C-00649-01	Vegetable Oil	-	62
European Commission	EEC-C-00653-01	Corn Soya Blend	-	114
European Commission	EEC-C-00653-01	Iodised Salt	-	14
European Commission	EEC-C-00653-01	Sorghum/Millet	-	1,164
European Commission	EEC-C-00653-01	Vegetable Oil	-	87
France	FRA-C-00255-01	Beans	-	22
France	FRA-C-00275-09	Beans	-	182
France	FRA-C-00275-09	Rice	-	55
France	FRA-C-00275-09	Sorghum/Millet	-	88
France	FRA-C-00280-10	Beans	-	281
France	FRA-C-00280-10	Corn Soya Blend	-	19
France	FRA-C-00280-10	Rice	-	65
France	FRA-C-00280-10	Salt - Iodized	-	20
Germany	GER-C-00538-01	Corn Soya Blend	-	120
Germany	GER-C-00538-01	Iodised Salt	-	21
Germany	GER-C-00538-01	Rice	-	928
Germany	GER-C-00538-01	Sorghum/Millet	-	462

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
Germany	GER-C-00538-01	Split Peas	-	672
Germany	GER-C-00538-01	Vegetable Oil	-	39
Japan	JPN-C-00520-01	Iodised Salt	-	45
Japan	JPN-C-00520-01	Maize Meal	-	704
Japan	JPN-C-00549-01	Corn Soya Blend	-	150
Japan	JPN-C-00549-01	Iodised Salt	-	20
Japan	JPN-C-00549-01	Ready To Use Supplementary Food	-	15
Japan	JPN-C-00549-01	Rice	-	400
Japan	JPN-C-00549-01	Split Peas	-	162
Japan	JPN-C-00549-01	Vegetable Oil	-	100
Luxembourg	LUX-C-00152-10	Corn Soya Blend	-	10
Luxembourg	LUX-C-00152-10	High Energy Biscuits	-	7
Luxembourg	LUX-C-00152-10	Maize	-	53
Luxembourg	LUX-C-00152-10	Split Peas	-	30
Luxembourg	LUX-C-00152-10	Vegetable Oil	-	9
MULTILATERAL	MULTILATERAL	Beans	-	198
MULTILATERAL	MULTILATERAL	Corn Soya Blend	-	428
MULTILATERAL	MULTILATERAL	Rice	-	615
MULTILATERAL	MULTILATERAL	Sorghum/Millet	-	1,725
MULTILATERAL	MULTILATERAL	Split Peas	-	285
Sweden	SWE-C-00275-09	Corn Soya Blend	-	100
Sweden	SWE-C-00275-09	Rice	-	103
Sweden	SWE-C-00275-09	Split Peas	-	50
Sweden	SWE-C-00275-09	Vegetable Oil	-	80
Switzerland	SWI-C-00583-07	Maize	-	32
Switzerland	SWI-C-00583-07	Sorghum/Millet	-	58
UN CERF	001-C-01548-01	Corn Soya Blend	-	409
UN CERF	001-C-01548-01	Iodised Salt	-	32
UN CERF	001-C-01548-01	Rice	-	2,170
UN CERF	001-C-01548-01	Split Peas	-	546
UN CERF	001-C-01548-01	Vegetable Oil	-	207
UN CERF	001-C-01664-01	Corn Soya Blend	-	75
UN CERF	001-C-01664-01	Iodised Salt	-	14
UN CERF	001-C-01664-01	Maize	-	369

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
UN CERF	001-C-01664-01	Vegetable Oil	-	44
UN Common Funds and Agencies (excl. CERF)	001-C-01532-01	Beans	-	52
UN Common Funds and Agencies (excl. CERF)	001-C-01532-01	Rice	-	223
UN Common Funds and Agencies (excl. CERF)	001-C-01541-01	Beans	-	105
UN Common Funds and Agencies (excl. CERF)	001-C-01541-01	Corn Soya Blend	-	68
UN Common Funds and Agencies (excl. CERF)	001-C-01541-01	Rice	-	495
UN Common Funds and Agencies (excl. CERF)	001-C-01541-01	Split Peas	-	10
UN Common Funds and Agencies (excl. CERF)	001-C-01541-01	Vegetable Oil	-	41
United Kingdom	UK -C-00329-03	Corn Soya Blend	-	360
United Kingdom	UK -C-00329-03	Iodised Salt	-	21
United Kingdom	UK -C-00329-03	Sorghum/Millet	-	934
United Kingdom	UK -C-00329-03	Split Peas	-	253
United Kingdom	UK -C-00329-03	Vegetable Oil	-	130
USA	USA-C-01095-03	Beans	-	46
USA	USA-C-01314-01	Beans	-	1,530
USA	USA-C-01314-01	Beans - White	-	6
USA	USA-C-01314-01	Rice	-	1,792
USA	USA-C-01314-01	Rice - Brokens 25%	-	768
USA	USA-C-01314-01	Vegetable Oil	-	800
USA	USA-C-01314-02	Rice - Brokens 25%	-	389
USA	USA-C-01314-02	Vegetable Oil	-	390
		Total	-	26,842