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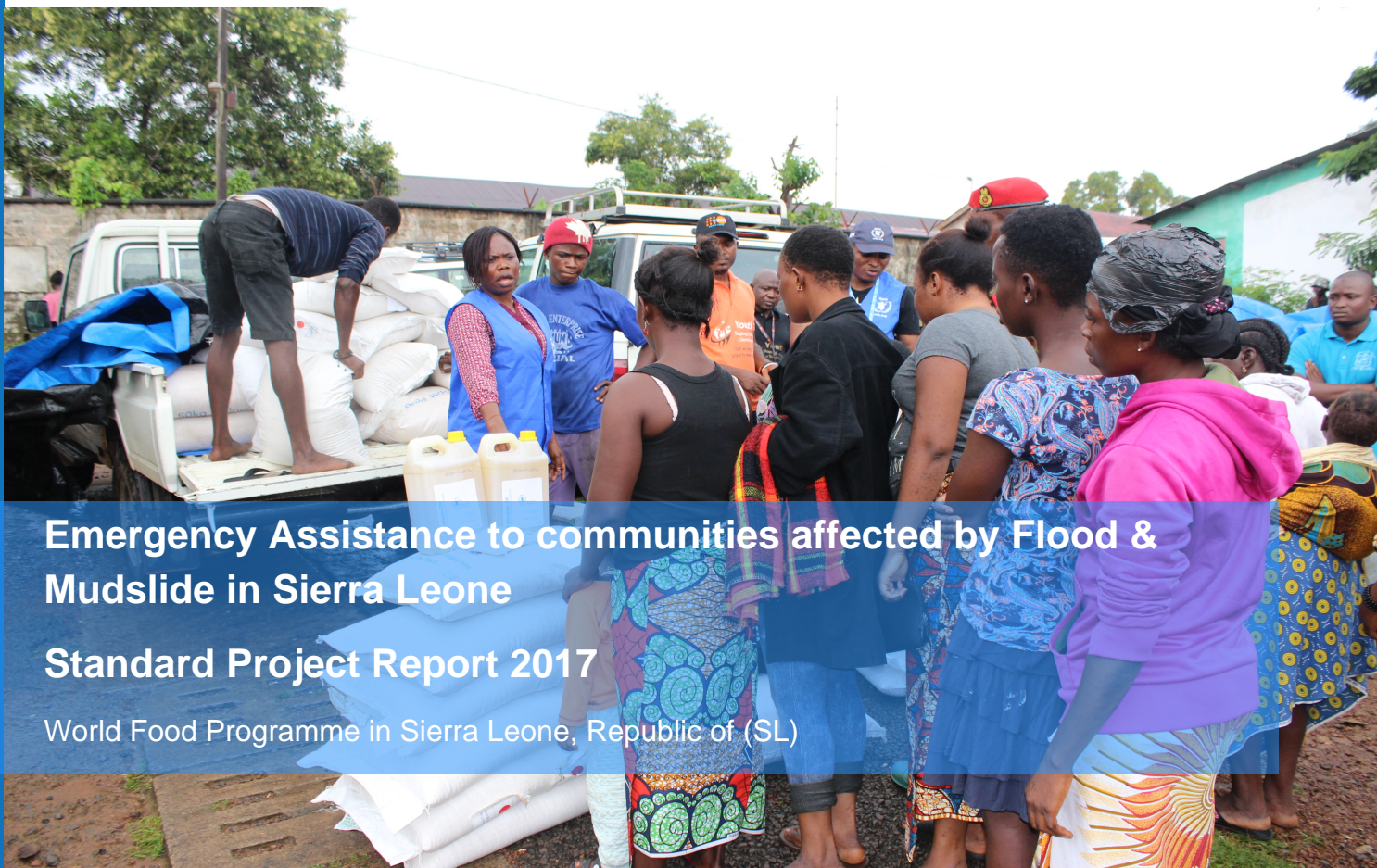
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Further Information

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SPR Reading Guidance



Emergency Assistance to communities affected by Flood & Mudslide in Sierra Leone

Standard Project Report 2017

World Food Programme in Sierra Leone, Republic of (SL)



World Food Programme

Table Of Contents

Country Context and WFP Objectives

- Achievements at Country Level
- Country Context and Response of the Government
- WFP Objectives and Strategic Coordination

Country Resources and Results

- Resources for Results
- Supply Chain
- Implementation of Evaluation Recommendations and Lessons Learned

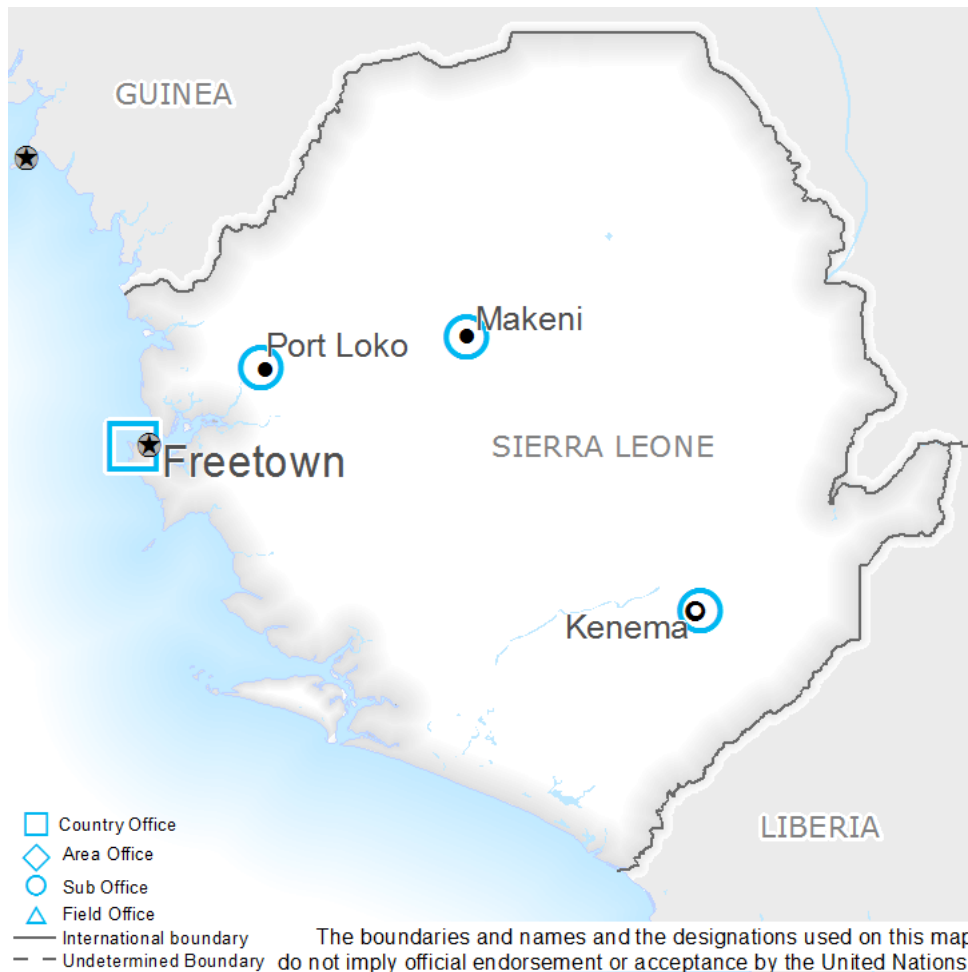
Project Results

- Activities and Operational Partnerships
- Results
- Story Worth Telling

Figures and Indicators

- Data Notes
- Overview of Project Beneficiary Information
- Participants and Beneficiaries by Activity and Modality
- Participants and Beneficiaries by Activity (excluding nutrition)
- Nutrition Beneficiaries
- Project Indicators
- Resource Inputs from Donors

Country Context and WFP Objectives



Achievements at Country Level

In line with the Government of Sierra Leone's Recovery Priorities to 'build back better' following on from the Ebola Virus Disease outbreak, WFP provided crucial support in addressing the food and nutrition needs of vulnerable communities. WFP addressed moderate acute malnutrition among children aged 6-59 months and pregnant and lactating women, irrespective of their nutrition status, and implemented a pilot programme for the prevention of stunting in collaboration with the Directorate of Food and Nutrition and Abdul Latif Jameel Poverty Action Lab for Africa research unit of the University of Cape Town. WFP linked smallholder farmers to markets, furthering the economy, while supporting 42 farmer-based organizations and Agricultural Business Centres, reaching 11,000 participating farmers, of whom 55 percent were women.

As part of the Ebola recovery operation, WFP provided support to the Government of Sierra Leone to develop their disaster risk management capabilities. Under this mandate, WFP supported the Office of National Security (ONS) to improve capabilities to prepare for emergencies and mobilize a rapid response. This was done through training in commodity tracking, warehouse management and monitoring and evaluation. WFP conducted a simulation exercise which covered technical expertise areas (installation of prefabs and Mobile Storage Units, and information and communication technology) to improve the humanitarian community's rapid response capabilities. WFP's efforts to strengthen the institutional and operational disaster preparedness and response capacities of ONS were evident within WFP's response to the mudslide and floods which affected 12,000 households. The United Nations (UN) Resident Coordinator tasked WFP with leading the humanitarian response.

In May 2017, WFP presented the technical findings of the Integrated Context Analysis (ICA) to government stakeholders, representatives from other UN agencies, non-governmental organization (NGO) partners and academia. Findings from the ICA informed programmatic interventions for WFP and its partners. Under its livelihoods programmes, WFP engaged with partners at different levels by utilising the three-pronged approach (3PA) to strengthen asset creation activities.

Country Context and Response of the Government

In January 2016, the World Health Organization (WHO) declared Sierra Leone's Ebola Virus Disease (EVD) outbreak to be over. This resulted in a national shift in focus towards systemic preparedness and ensuring early response capabilities. Sierra Leone set itself the challenge of regaining the ground lost during the Ebola outbreak within an 18-month period to 'build back better' by mid-2017. This was encapsulated in the President's Recovery Priorities which sought to transition the economy back to the Agenda to Prosperity (2013–2035) [1]. The economic costs of EVD outbreak were enhanced by the slump in commodity prices on the international markets. This negatively affected the country's economy, increased food insecurity for vulnerable households and triggered austerity measures aimed at reducing government spending.

Of Sierra Leone's seven million population, 70 percent of people live below the national poverty line of USD 2 per day. The country, ranked 179 out of 185 on the 2016 United Nations Development Programme (UNDP) Human Development Index, faces significant food security and nutrition challenges with the 2017 Global Hunger Index indicating "alarming" levels of hunger (the country scored 117 out of 119). The 2015 Comprehensive Food Security and Vulnerability Analysis indicated that half the population was food insecure, with levels of food insecurity exceeding 60 percent in some chiefdoms of every district. Key drivers of food insecurity include EVD-related shocks, low agricultural productivity, poverty, lack of resilience, poor infrastructure, lack of access to safe water, gender inequality, lack of educational opportunities and lack of income generation and diversification. Despite efforts by the government and partners, access to food remains a concern for sections of the population.

According to the 2015 population census, net primary school enrolment is 99 percent although drop-out rates remain high at 27.8 percent, especially among girls in their early teens [2]. The literacy rate is 32 percent [3]. In 2014, prior to the EVD outbreak, stunting levels in children aged 6-59 months exceeded 30 percent in seven districts and 4.7 percent of children nationally were wasted. According to the 2017 Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey, 31 percent of children in Sierra Leone currently suffer from chronic malnutrition with rates varying greatly between districts.

The HIV prevalence in Sierra Leone has remained at 1.5 percent since 2003 [4]. This stabilization means the country is rated as one of the least affected compared to others in the Sub-Saharan Africa. In a nationwide assessment of the nutritional status of all people living with HIV undergoing anti-retroviral therapy, the prevalence of undernutrition based on body mass index and mid-upper arm circumference was found to be 51 percent. According to the World Health Organization's 2017 Global Tuberculosis (TB) Report, there were 14,114 reported TB cases in 2016 which represents only six in ten TB cases. This means that an estimated 8,000 people living with TB are unaware of their status and currently not receiving the care they need, despite the fact that treatment is available free of charge in 170 centres across the country.

In 2017, efforts were underway to enhance the fragile health care system, weakened by EVD outbreak, through inter-agency support and the restoration of public confidence in government institutions. Health remains a key factor in development for Sierra Leone, particularly as prevalence of teenage pregnancies – already ranked among the highest in the region – spiked during and after the outbreak. To keep pregnant women and children safe and secure from future disease outbreaks, the Government rolled out an enhanced Community Health Worker programme that supported pregnant women to access services and delivered essential drugs including malaria treatment for children. This new programme had the goal of ensuring that no Sierra Leonean would find themselves more than 5 km from a health worker. ■ Under the recovery plan, the Government sought to strengthen health facilities' 'water, sanitation and hygiene' and 'infection prevention and control' procedures while improving data collection and surveillance systems to ensure that new disease outbreaks are quickly picked up and responded to.

Agriculture, the backbone of the country's economy, was another sector identified in the Presidential Recovery Priorities. The government's recovery strategy focused on improving the agriculture and livestock sectors' productivity, creating jobs to lift vulnerable households out of poverty and adding to the value of locally-grown products with an ultimate goal of achieving food self-sufficiency. Efforts were made by the Government to add value to Sierra Leone's agricultural produce and establish new markets by increasing the quantity of locally-sourced crops for security forces and other public institutions. The increase in business opportunities provided a boost to the economy. To further enhance the agricultural sector, over 1,000 km of feeder roads were earmarked for construction to help farmers to get their produce to markets while inland valley swamps were rehabilitated to

increase the production of staple and cash crops (rice, palm oil, cocoa, coffee and cashew) and to promote reforestation. The Government responded to an outbreak of the Fall Armyworm crop disease in 2017, which caused serious damage to crops including maize, by mobilizing farmers to use local innovations to tackle the outbreak. The scale of the damage is yet to be assessed, however the degree of presence was high in all districts across the country.

In recent years, Sierra Leone has witnessed a sharp increase, in both the frequency and severity of disasters resulting in loss of lives, disruption to social structures and a severe economic and psychological burden on vulnerable populations. The increase has been attributed to climate change, unplanned urbanisation, poor agricultural practices and conflict. The country lacks a comprehensive Disaster Management Strategy while the national and local governments lack the capacity to respond to disasters and civil society is not integrated into effective disaster management activities. After the August 2017 mudslide and floods, under the overall coordination of the Ministry of Finance and Economic Development, the United Nations (UN) system supported the Government in the development of a Risk Management and Recovery Action Plan drawing on sector-specific assessments, multi-hazards mapping and other relevant reports. The plan addresses immediate to long-term needs of those affected and at-risk, and provides a roadmap for settlement and national urban planning, to protect lives and livelihoods from future disasters.

[1] The President's Recovery Priorities magazine, July 2017.

[2] Ministry of Education, Science and Technology, Education Country Status report, September 2013.

[3] United Nations Children's Fund (UNICEF), The State of the World's Children report, 2017.

[4] Sierra Leone Demographic Health Survey, 2013.

WFP Objectives and Strategic Coordination

Since the declaration of the end of the Ebola Virus Disease (EVD) outbreak, WFP assistance in Sierra Leone has shifted from caring for the infected and supporting efforts to contain the spread of the virus to addressing malnutrition in vulnerable groups, supporting the government's National Ebola Recovery Strategy. WFP placed emphasis on supporting the government's preparedness for future emergencies through strengthening the infrastructures and logistics capacities established during the EVD outbreak. Furthermore, WFP resumed take-home rations to primary schools, assisting vulnerable households and individuals with the highest rates of food insecurity and illiteracy in meeting their food and nutrition security sustainably.

WFP interventions were aligned with the Government of Sierra Leone's Agenda for Prosperity and the President's Recovery Priorities. WFP, as the lead agency for Pillar 6 of the United Nations Development Assistance Framework (UNDAF) and the incident coordinator in the mudslide and floods response, supported the Government in strengthening social protection systems through increasing poor households' access to social safety nets, expanding access to livelihoods and improving nutritional status for vulnerable populations, including adolescent girls.

In partnership with the Ministry of Agriculture, Forestry and Food Security, the Food and Agriculture Organization of the United Nations (FAO) and non-governmental organization (NGO) partners, WFP initiated the Zero Hunger Strategic Review process. This country-led exercise provides a comprehensive analysis of the challenges Sierra Leone faces in achieving Sustainable Development Goal (SDG) 2 by 2030. It involves a wide range of government stakeholders as well as civil society, private sector, donors and international organizations.

WFP partnered with the Scaling Up Nutrition (SUN) secretariat to enhance the availability of and access to quality health care services that address the diverse causes of malnutrition. Through the SUN movement, WFP continued to promote a multi-sectoral approach to preventing chronic malnutrition among children aged 6-59 months and pregnant and lactating women. WFP provided technical, logistical and procurement support for 'The Four Foods' study to assess the efficiency and cost-effectiveness of specific nutritious foods for the treatment of moderate acute malnutrition (MAM). The study was undertaken by Tufts University, the United States Agency for International Development (USAID) and the NGO Project Peanut Butter. Simultaneously, within the SUN partnership, WFP integrated nutrition-sensitive programming to support smallholder farmers in increasing agricultural productivity to rebuild their livelihoods and build resilience.

Under the inter-agency framework and in support of global partnerships under SDG 17, WFP coordinated humanitarian assistance, including a joint distribution in which WFP provided food and the United Nations Population Fund (UNFPA) and United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) provided dignity kits to affected households. Also in collaboration with UNFPA, WFP supported the Ministry of Social Welfare, Gender and Children's Affairs to complete the registration of all affected households on WFP's

corporate digital beneficiary and transfer-management platform, SCOPE. The United Nations Children's Fund (UNICEF) and WFP partnered to support the Ministry of Health and Sanitation to screen and refer cases of MAM to local health centres.

To support the Disaster Management Department of the Office of National Security, WFP provided technical assistance to develop and utilise basic mapping tools to facilitate rapid humanitarian and disaster response planning. Moreover, WFP worked with the Ministry of Agriculture, Forestry and Food Security to boost geospatial capabilities in support food price monitoring to augment early warning capabilities. In an effort to mitigate the impacts of seasonal flooding which typically begin in May, WFP worked with the water, sanitation and hygiene (WASH) Consortium and municipal authorities in Freetown to implement drainage cleaning activities in flood-prone areas.

WFP and the Joint United Nations Programme on HIV/AIDS (UNAIDS) undertook a joint programme to provide social protection services to Ebola survivors, people living with HIV and their dependent from the risk of resurgence of Ebola and spread of HIV and Sexually Transmitted Infections in Western Area and Bombali districts. Services include cash-based transfers to vulnerable children in targeted households to support their schooling, and households headed by women to enable them to access livelihood skills and vocational training.

Country Resources and Results

Resources for Results

In 2017, the PRRO was 60 percent funded having received mainly directed multilateral funding to implement planned activities. Funding for the PRRO decreased in comparison to 2016 when the operation received 80 percent of overall project requirements. The decrease in funding did not result in any major shortfalls with the transfer of food from the Country Programme which ensured the implementation of the capacity strengthening activities. Shortfalls experienced were mainly due to the late arrival of some food items, however WFP mitigated the negative effects of such shortfalls through internal financing and loan mechanisms. The country office sought to address funding challenges through the development and implementation of a resource mobilization strategy.

The Immediate Response EMOP (IR-EMOP) was fully resourced. Resources for the response were initially borrowed from the in-country stocks under the PRRO in order to implement the immediate response. Funds were later repaid to the PRRO after the completion of the procurement process for food under the IR-EMOP. The IR-EMOP received cash contributions and Immediate Response Account funding to implement planned activities. The closure date of the project was extended to December to allow completion of distributions to affected households. The PRRO absorbed additional funds received for mudslide and flood response that could not be utilised under the IR-EMOP.

A fifth budget revision was initiated at the end of 2016 which extended the Country Programme through 31 December 2017. The budget revision increased capacity development and augmentation component to allow WFP to provide technical assistance to the Ministry of Education, Science and Technology to support implementation of the national school meals programme.



Annual Country Beneficiaries

Beneficiaries	Male	Female	Total
Children (under 5 years)	31,931	36,409	68,340
Children (5-18 years)	33,116	40,560	73,676
Adults (18 years plus)	91,037	77,046	168,083
Total number of beneficiaries in 2017	156,084	154,015	310,099





Annual Food Distribution in Country (mt)

Project Type	Cereals	Oil	Pulses	Mix	Other	Total
Single Country IR-EMOP	142	9	21	23	2	197
Single Country PRRO	3,388	331	892	2,430	64	7,105
Total Food Distributed in 2017	3,529	340	913	2,453	66	7,302

Supply Chain

Sierra Leone's air and sea ports are the main entry points for food into the country. The Queen Elizabeth II Quay port is the most important entry gate for goods into the country. Located within the busy and congested east end of the capital city, it serves as the main logistics hub for Sierra Leone's imports and exports. WFP occupies two storage sheds, provided as a contribution from the Government of Sierra Leone, at the port's container terminal with a total capacity of 8,000 mt.

Approximately 95 percent of WFP's cargo was delivered by road from Freetown to the provinces. Sierra Leone has a public road network of 11,700 km, of which 8,700 km are functionally classified in the National Road System. The other 3,000 km consists of local roads and unclassified roads and tracks. With support from external donors, the Government is rehabilitating major roads leading from Freetown to the provinces to enhance connectivity. Although these works have caused delays, in the medium and long term it is anticipated they will ease the overall flow of traffic. WFP often faces logistical challenges in accessing the most vulnerable and highly food-insecure communities especially during the rainy season (May to November).

Food items were transported using both contracted commercial transporters as well as WFP's own fleet. Using commercial transporters, WFP was able to move 11,406 mt of food. The WFP-manned fleet transported 8,427 mt. In 2017, the Logistics Unit updated and shortlisted the list of providers for services including transport, fumigation, handling, clearing and forwarding. The exercise increased the number of eligible companies available to partner with WFP and removed non-performing companies, thus improving the service quality and efficiency of logistics processes.

Under the PRRO, WFP recorded losses amounting to 67.222 mt of food, which represents below 2 percent of the total food procured. These losses were attributed mainly to prolonged storage in the warehouse and in transit leaving the food unfit for human consumption, and lack of due care by transporters. WFP recovered the value of the lost food from commercial transporters.

At the country level, a Supply Chain Task Force, consisting of staff from the logistics, programme, procurement, resources management and donor relations units, was set up at country office and sub-office levels to closely monitor WFP stocks on a weekly basis, and minimise post-delivery losses resulting from spoiled food. The Logistics Unit also ensured storekeepers inspect stocks on a daily basis and utilise a warehouse checklist.

In November 2016, a Government fuel subsidy was removed resulting in a 60 percent increase in fuel prices and, therefore, high transportation costs for WFP. As such, WFP sought ways to offset the increase without disrupting logistics processes. WFP was exempted from the national Goods and Service Tax and was granted a waiver that reduced the import tax by 40 percent for the Advance Cargo Declaration scheme. In September 2017, the Ministry of Finance and Development suspended all duty waiver privileges in the country. WFP's appeal to the Foreign Affairs Ministry for a 100 percent waiver was unsuccessful. This has affected the timely delivery of WFP food to beneficiaries.



Annual Food Purchases for the Country (mt)

Commodity	Local	Regional/International	Total
Iodised Salt	1	-	1
Peas	30	-	30
Ready To Use Supplementary Food	-	45	45
Rice	270	393	663
Total	301	438	740
Percentage	40.8%	59.2%	

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

Commodity	Total
Corn Soya Blend	1,651
Rice	270
Split Peas	193
Vegetable Oil	225
Total	2,340

Implementation of Evaluation Recommendations and Lessons Learned

The country office did not undertake a decentralised evaluation in 2017. The PRRO will be evaluated in 2018. However, following the closure of the regional Ebola emergency operation and the special operation in December 2015, the National Ebola Response Centre (NERC) assessed lessons learned. NERC findings underscored the importance of multi-sectoral planning and preparedness for public health emergencies and the need for special considerations for operations in urban contexts. This guided implementation of the disaster response component of the PRRO.

WFP worked with partners, including the Rome-based agencies (RBA), to ensure complementarity and linkages in programming, particularly for livelihoods and community asset creation activities that achieve lasting impact. This is in response to the European Union Results Oriented Monitoring mission and WFP's internal exercise which found that asset creation activities planned before the Ebola Virus Disease (EVD) outbreak were ambitious in scale, and anticipated complementary inputs from other agencies with inadequate involvement of stakeholders and communities in planning.

WFP's local food procurement activities under the Purchase for Progress (P4P) have stimulated agricultural and market development for smallholder farmers. WFP will use this tool to restore livelihoods and boost local markets by reinforcing the work of farmers' organizations and cooperatives working with the Ministry of Agriculture, Forestry and Food Security, the Food and Agriculture Organization of the United Nations (FAO) and the private sector entities, in line with lessons learned from the pilot project.

Project Results

Activities and Operational Partnerships

In the immediate aftermath of the devastating floods and mudslide that occurred across Freetown in August 2017, WFP implemented an Immediate Response EMOP (IR-EMOP) to respond to the basic food and nutrition needs of the affected communities. In coordination with cooperating partners, WFP provided direct general food distributions in the areas impacted by the mudslide (Regent) and flooding (Kamayama, Kaningo, Mountain Cut, Culvert, Dwarzack, Wellington, Kissi Brook and George Brook).

As part of the general food distributions, specialised nutritious foods, namely Super Cereal, were provided to children aged 6 - 23 months in order to prevent acute malnutrition. Children aged 6 - 59 months and pregnant and lactating women suffering with moderate acute malnutrition were reached through targeted supplementary feeding activities. In addition to distributing food, WFP used cash-based transfers allowing the beneficiaries greater flexibility in buying the food of their choice. WFP also provided food assistance to local relief workers (morgue, rescue and care workers) as an incentive for their labour in the rescue effort and homeless children living in orphanages.

WFP was tasked by the United Nations Resident Coordinator to coordinate the humanitarian response of United Nations (UN) agencies. The agency worked with the Government and other partners in search-and-rescue efforts, including logistics and geo-spatial mapping of disaster areas, registration of beneficiaries and in providing an internet connection for survivors and the humanitarian community.

Project activities under the Immediate Response Emergency Operation (IR-EMOP) were carried out in collaboration of complementary partners. Strong partnerships with UN agencies, the Department of Disaster in the Office of National Security (ONS) and international non-governmental organizations (NGOs) were fundamental to the emergency response, including WFP partnership with Street Child Sierra Leone, an international NGO with strong community network in the areas of general distribution, monitoring and evaluation.

The principal partners were the Ministry of Social Welfare, Gender and Children's Affairs and the Ministry of Health and Sanitation. WFP provided technical support to the ministries in registering mudslide and flood affected households using SCOPE, WFP's corporate digital beneficiary and transfer-management platform. The official list shared by the ministries was used for WFP food and cash distributions. Furthermore, WFP implemented the targeted supplementary programme in collaboration with the Ministry of Health and Sanitation and the United Nations Children's Fund (UNICEF) under the community-based management of acute malnutrition approach.

WFP worked closely with the lead government agency – Department of Disaster in the ONS – for the mudslide and flood response. ONS was responsible for the coordination of the response through the pillar system as well as camp management. This helped to coordinate WFP response on the ground with the activities of the entire humanitarian community involved in the emergency response.

Cooperation with sister UN agencies increased efficiency and enhanced programme effectiveness. For instance, close collaboration with the United Nations Population Fund (UNFPA) enabled WFP to quickly deploy staff for registration of beneficiaries in affected communities. WFP also worked closely with the International Organization for Migration (IOM) who distributed non-food items, as well as UNFPA and United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) who provided dignity kits for women and girls in mudslide and flood affected communities. WFP utilised UNICEF's cash transfer platform to make cash payments to beneficiaries through mobile phones.

Results

The four rounds of two-week food rations distributed by WFP helped to cushion the impact of the mudslide and floods disaster on affected families at risk of a deteriorating nutrition situation and who had lost livelihoods due to the loss of the head of household and/or income-generating activities. These families were displaced and lived in temporary shelters or stayed with host families whose resources were under considerable pressure.

The local relief workers who took care of corpses in the morgue as well as those involved in the rescue efforts played a significant role in the response. Most of these workers were youth volunteers, some of whom were victims of the disaster responding to the call of duty.

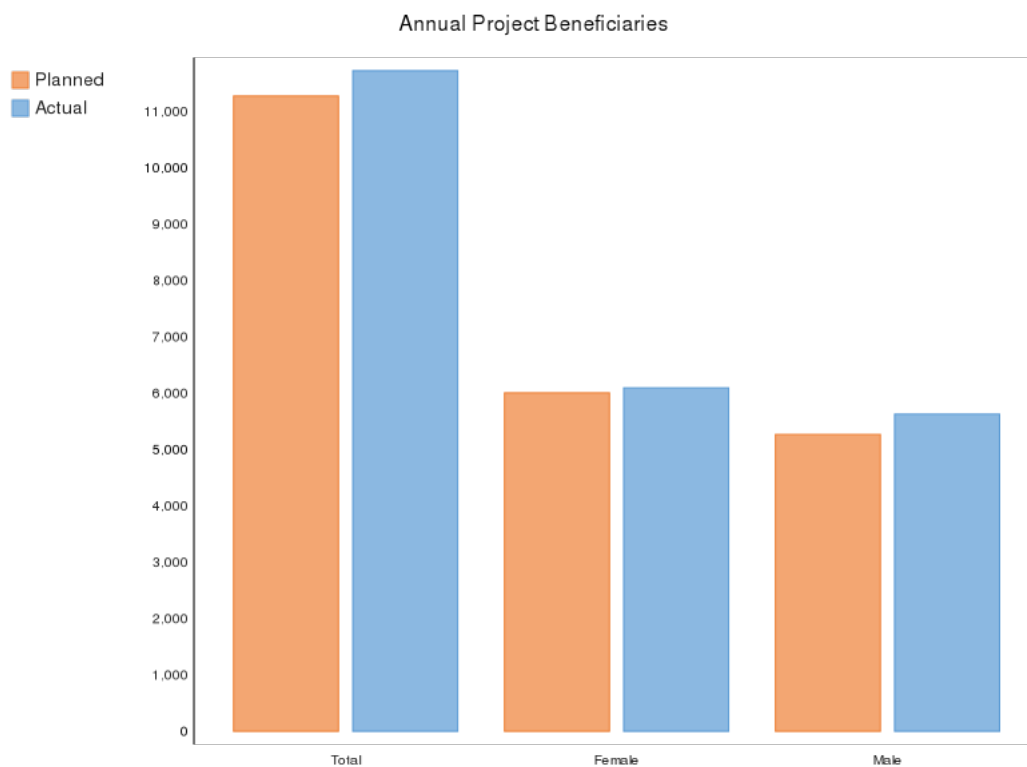
As an aftermath of the disaster, children either lost their parents or guardians, or became separated and ended up in orphanage homes that were already struggling to support their caseload. The food support from WFP to those

orphanages made it easier to accept and absorb these children into the homes.

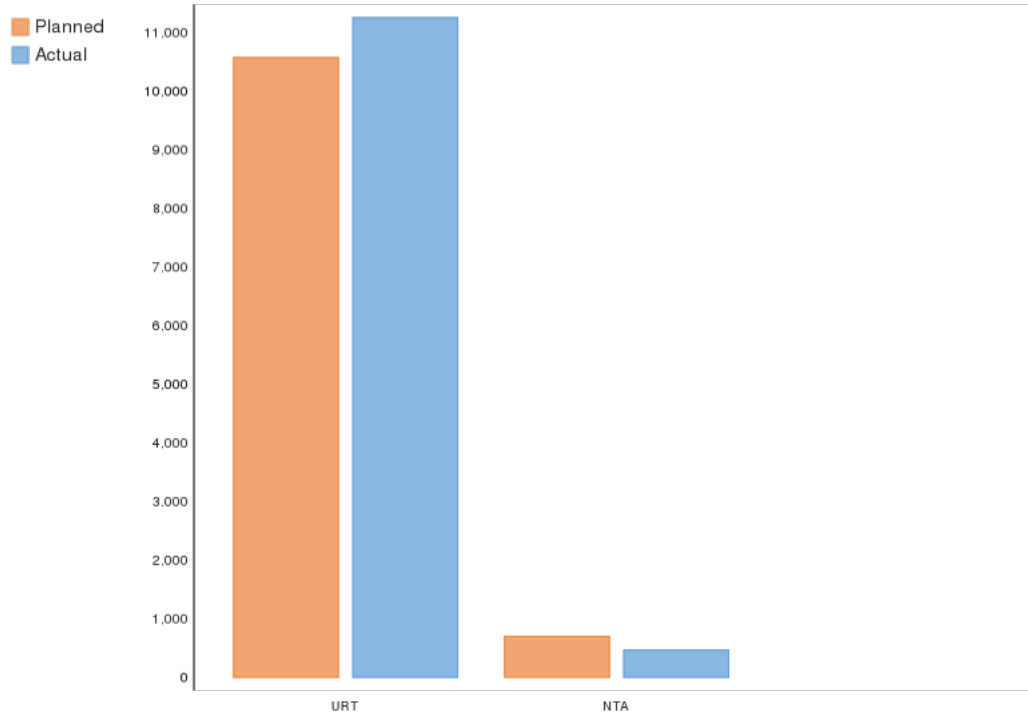
Screening carried out by outreach teams in WFP catchment areas found lower levels of malnourished children aged 6-59 months compared to what was expected. Cases of malnutrition that were identified or presented at health centres were treated through newly established targeted supplementary feeding sites under the emergency.

WFP's role in the registration of beneficiaries was pivotal in providing the Ministry of Social Welfare, Gender and Children's Affairs with a credible list of flood and mudslide affected households, using Open Data Kit and later SCOPE, WFP's corporate digital beneficiary and transfer-management platform. The beneficiary list was later used by other humanitarian agencies to provide services to the beneficiaries.

The generators and wireless internet system set up by WFP Information and Communication Technology (ICT) unit in the camps, enabled humanitarian workers to coordinate and communicate their responses, particularly in assisting displaced persons and made it possible for mudslide survivors and flood victims to communicate with relatives and friends.



Annual Project Beneficiaries by Activity



URT: Unconditional resource transfers to support access to food
NTA: Nutrition treatment activities

Modality of Transfer by Activity



URT: Unconditional resource transfers to support access to food
NTA: Nutrition treatment activities



Annual Project Food Distribution

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Corn Soya Blend	41	23	56.1%
Iodised Salt	2	2	110.4%
Rice	129	142	110.3%
Split Peas	19	21	109.9%
Vegetable Oil	10	9	85.4%
Total	201	197	97.8%



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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned
Cash	217,080	-	-
Total	217,080	-	-

Story Worth Telling

Margaret Thoronka still recalls her family's narrow escape on 14 August when the sugar loaf mountain collapsed sending a deluge of flood waters downhill claiming over 500 lives and leaving a further 800 missing, presumed dead.

"I grabbed my four children and together with my husband we quickly went higher grounds," says Margaret. "We survived the floods, but our house didn't. It was swept away by the torrent."

The family had their house close to the waterbed along the narrow alleys of Pentagon in the Kamayama section in Freetown.

Margaret's family, like hundreds of others, had their home and all their belongings destroyed that morning. In addition to losing her livelihood, Margaret also lost her sister, her husband's elder brother and thirty of her neighbours to the floods. She now lives in an unfinished house with another sister together with her children, however the lack of space means the husband is living elsewhere. Even before the disaster, the family's income from selling vegetables and coconut jelly was inadequate to properly feed themselves and ensure adequate nutrition. Now, with everything gone, Margaret's family has been surviving off of assistance provided by friends and organisations like WFP.

To help families like Margaret's to start over, a cash-based transfer programme was organised by the Government, with the support of UKAid, United Nations Children's Fund (UNICEF), WFP and other partners, wherein all affected families are given a set amount of funds using mobile technology.

As part of this programme, WFP provided money for families to buy food, in addition to providing in-kind food for all affected people. Cash-based transfer allowed families the control over the foods they chose to buy from the local markets.

Despite the challenges that still lie ahead and the terrible memories they carry, the family's resilience is evident. With the support they have received from WFP and cooperating partners, they have an opportunity to rebuild what was lost.

Figures and Indicators

Data Notes

Cover page photo © WFP/ Francis Boima

General food distribution to mudslide and flood victims in Freetown.

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	5,268	6,007	11,275	5,628	6,096	11,724	106.8%	101.5%	104.0%
By Age-group:									
Children (6-23 months)	496	504	1,000	469	469	938	94.6%	93.1%	93.8%
Children (24-59 months)	496	604	1,100	469	586	1,055	94.6%	97.0%	95.9%
Children (5-18 years)	1,744	1,886	3,630	1,876	1,993	3,869	107.6%	105.7%	106.6%
Adults (18 years plus)	2,532	3,013	5,545	2,814	3,048	5,862	111.1%	101.2%	105.7%
By Residence status:									
Residents	5,268	6,007	11,275	5,628	6,096	11,724	106.8%	101.5%	104.0%

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)
Unconditional resource transfers to support access to food	10,575	5,025	10,575	11,257	-	11,257	106.4%	-	106.4%

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)
Nutrition treatment activities	700	-	700	467	-	467	66.7%	-	66.7%

Annex: Participants by Activity and Modality

Activity	Planned (food)	Planned (CBT)	Planned (total)	Actual (food)	Actual (CBT)	Actual (total)	% Actual v. Planned (food)	% Actual v. Planned (CBT)	% Actual v. Planned (total)
Unconditional resource transfers to support access to food	2,575	1,005	2,575	2,441	-	2,441	94.8%	-	94.8%
Nutrition treatment activities	700	-	700	467	-	467	66.7%	-	66.7%

Participants and Beneficiaries by Activity (excluding nutrition)

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

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
Unconditional resource transfers to support access to food									
People receiving resource transfers	960	1,040	2,000	969	1,050	2,019	100.9%	101.0%	101.0%
Activity supporters	132	143	275	89	96	185	67.4%	67.1%	67.3%
Children receiving resource transfers	144	156	300	114	123	237	79.2%	78.8%	79.0%
Total participants	1,236	1,339	2,575	1,172	1,269	2,441	94.8%	94.8%	94.8%
Total beneficiaries	5,076	5,499	10,575	5,404	5,853	11,257	106.5%	106.4%	106.4%

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)
Nutrition treatment activities									
Children (6-23 months)	96	104	200	53	58	111	55.2%	55.8%	55.5%
Children (24-59 months)	96	104	200	53	58	111	55.2%	55.8%	55.5%
Pregnant and lactating girls (less than 18 years old)	-	90	90	-	74	74	-	82.2%	82.2%
Pregnant and lactating women (18 plus)	-	210	210	-	171	171	-	81.4%	81.4%
Total beneficiaries	192	508	700	106	361	467	55.2%	71.1%	66.7%

Project Indicators

Outcome Indicators

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
SR1 Everyone has access to food				
Crisis-affected populations in targeted areas have met their basic food and nutrition needs during and in the aftermath of crises				
Consumption-based Coping Strategy Index (Average) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤12.00	11.12	-	-
Consumption-based Coping Strategy Index (Average) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤12.00	11.10	-	-
Consumption-based Coping Strategy Index (Average) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤12.00	11.14	-	-
Dietary Diversity Score / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥4.50	5.00	-	-

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Dietary Diversity Score / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥4.50	4.99	-	-
Dietary Diversity Score / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥4.50	5.00	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Hem Iron rich food daily (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	14.20	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Hem Iron rich food daily (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	24.80	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Hem Iron rich food daily (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	20.70	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Vit A rich food daily (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	50.90	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Vit A rich food daily (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	47.30	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Vit A rich food daily (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	48.70	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Protein rich food daily (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	44.30	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Protein rich food daily (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	50.30	-	-
Food Consumption Score – Nutrition / Percentage of households that consumed Protein rich food daily (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥20.00	48.00	-	-

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Food Consumption Score – Nutrition / Percentage of households that never consumed Hem Iron rich food (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	55.70	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Hem Iron rich food (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	47.90	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Hem Iron rich food (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	49.10	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Protein rich food (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	15.10	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Protein rich food (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	24.60	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Protein rich food (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	11.80	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Vit A rich food (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	9.40	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Vit A rich food (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	16.40	-	-
Food Consumption Score – Nutrition / Percentage of households that never consumed Vit A rich food (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≤50.00	13.70	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Hem Iron rich food (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	30.20	-	-

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Hem Iron rich food (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	30.30	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Hem Iron rich food (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	30.30	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Protein rich food (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	40.60	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Protein rich food (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	43.00	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Protein rich food (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	42.10	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Vit A rich food (in the last 7 days) / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	39.60	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Vit A rich food (in the last 7 days) / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	39.40	-	-
Food Consumption Score – Nutrition / Percentage of households that sometimes consumed Vit A rich food (in the last 7 days) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP survey, PDM</i>	≥30.00	39.50	-	-
SR2 No one suffers from malnutrition				
Children and pregnant and lactating women and girls in mudslide-area with the highest rates of acute malnutrition will have improved nutritional status by November 2017.				
MAM Treatment Default rate / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	≤15.00	0.00	-	-
MAM Treatment Default rate / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	≤15.00	0.00	-	-

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM Treatment Default rate / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	≤15.00	0.00	-	-
MAM Treatment Mortality rate / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	<15.00	0.00	-	-
MAM Treatment Mortality rate / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	<15.00	0.00	-	-
MAM Treatment Mortality rate / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	<15.00	0.00	-	-
MAM Treatment Non-response rate / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	≤15.00	3.12	-	-
MAM Treatment Non-response rate / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	≤15.00	3.12	-	-
MAM Treatment Non-response rate / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	≤15.00	3.12	-	-
MAM Treatment Recovery rate / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	<75.00	96.90	-	-
MAM Treatment Recovery rate / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	<75.00	96.90	-	-
MAM Treatment Recovery rate / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Project End Target: 2017.12, Base value: 2017.12, WFP programme monitoring, WFP Monitoring</i>	<75.00	96.90	-	-

Gender Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality / Decisions jointly made by women and men				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12</i>	≥50.00	15.50	-	-

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality / Decisions made by men MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	=20.00	46.10	-	-
Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality / Decisions made by women MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	=30.00	38.40	-	-
Type of transfer (food, cash, voucher, no compensation) received by participants in WFP activities, disaggregated by sex and type of activity / Female MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	≤50.00	49.00	-	-
Type of transfer (food, cash, voucher, no compensation) received by participants in WFP activities, disaggregated by sex and type of activity / Male MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	≤50.00	51.00	-	-
Type of transfer (food, cash, voucher, no compensation) received by participants in WFP activities, disaggregated by sex and type of activity / Overall MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	≤100.00	100.00	-	-

Protection and Accountability to Affected Populations Indicators

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, length of assistance) / Female MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	≥80.00	59.00	-	-
Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance) / Male MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project End Target: 2017.12, Base value: 2017.12	≥80.00	59.90	-	-

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, length of assistance) / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project</i> End Target: 2017.12, Base value: 2017.12	≥80.00	59.40	-	-
Proportion of targeted people accessing assistance without protection challenges / Female				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project</i> End Target: 2017.12, Base value: 2017.12	=100.00	96.30	-	-
Proportion of targeted people accessing assistance without protection challenges / Male				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project</i> End Target: 2017.12, Base value: 2017.12	=100.00	93.40	-	-
Proportion of targeted people accessing assistance without protection challenges / Overall				
<i>MUDSLIDE AFFECTED POPULATION/WESTERN AREA, Provide food assistance to vulnerable households affected by disasters or sudden onset emergencies , Food, Project</i> End Target: 2017.12, Base value: 2017.12	=100.00	94.80	-	-

Resource Inputs from Donors

Resource Inputs from Donors

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
MULTILATERAL	MULTILATERAL	Corn Soya Blend	-	10
MULTILATERAL	MULTILATERAL	Iodised Salt	-	1
MULTILATERAL	MULTILATERAL	Rice	-	120
MULTILATERAL	MULTILATERAL	Split Peas	-	20
MULTILATERAL	MULTILATERAL	Vegetable Oil	-	14
South Africa	SAF-C-00027-01	Vegetable Oil	-	14
		Total	-	180