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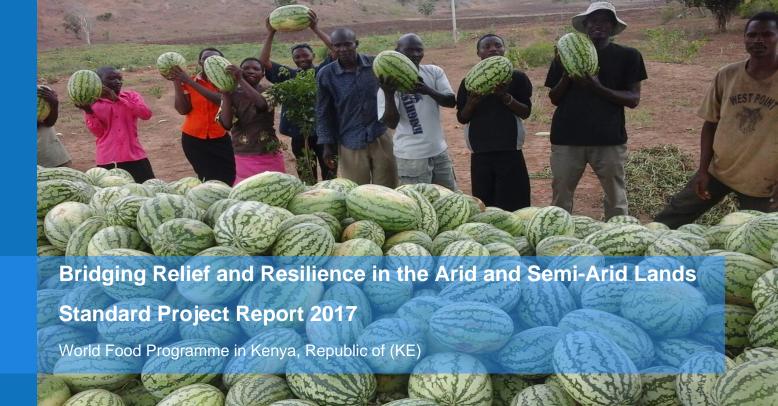




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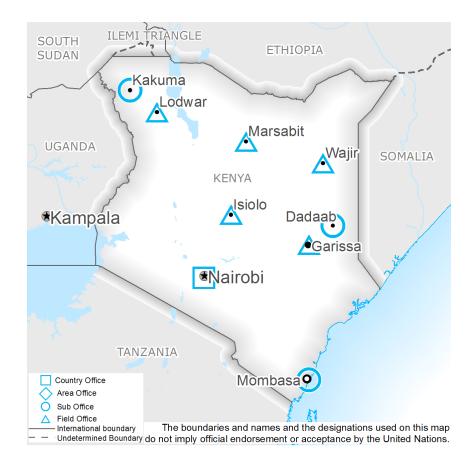
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Country Context and WFP Objectives



Achievements at Country Level

WFP's response to the nutrition crisis of 2017 was well executed. While 100 percent funding was not received, available resources enabled WFP to (i) scale up the treatment of moderate acute malnutrition; (ii) initiate an activity to prevent acute malnutrition in five out of seven target counties; and (iii) start providing protection rations. The nutrition activities were integrated to other health services, or linked with ongoing programmes or safety nets, thus increasing the effectiveness of the response. As a result, the prevalence of global acute malnutrition (GAM) - that had reached "critical" levels in the first half of 2017[1] - began to taper off towards the end of 2017.

WFP's technical assistance enabled the State Department of Special Programmes to provide cash-based assistance to 1.6 million drought-affected people in 13 counties. The National Drought Management Authority (NDMA) had more efficient monthly early warning data collection tools, which helped the counties in faster decision-making during the drought. In the four county governments which had comprehensive capacity strengthening activities, they prepared county-specific disaster risk management (DRM) policies and established relevant DRM departments.

Support by WFP and others to the social protection sector resulted in increased coherence in policy development work, improved coordination within the sector and increased government commitment to expand social protection coverage. The Ministry of Education prepared and approved a road map for the accelerated full handover of the school meals programme by July 2018.

Partnerships with government, private sector, and research institutes enabled upscaling of farm pond technology, which has great potential to increase households' resilience to drought. WFP piloted integrated risk management by enabling access to a micro-insurance scheme supporting selected subsistence farmer households in Kitui. Small-scale millers acquired sufficient capacity to mill, fortify and supply cereals to support provision of meals in nursery schools supported by the Government of Turkana County, thus increasing incomes and sustainability.



In the Kalobeyei integrated settlement, WFP, United Nations partners and the Government of Turkana County introduced activities with potential to increase economic and livelihood opportunities of refugees and their hosts. WFP leveraged on existing programmes, including national school meals, food assistance for assets (FFA), markets support, cash-based transfers (CBT), and engagement with smallholder farmers. The scarcity of water in Kalobeyei remained a major challenge.

[1] Integrated Phase Classification (IPC) for Acute Malnutrition.

Country Context and Response of the Government

Kenya has diverse natural resources and potential owing to its highly varied landscape. The country is transforming rapidly. A decade of stability and consistent economic growth saw it achieve lower middle-income status in 2014. But huge social, economic and gender inequalities persist; women and the youth (18 to 35 years) are more likely to be unemployed than older male [2]. Forty-two percent of its population of 46 million live in poverty. For many, access to adequate and quality food remains a major challenge, resulting in significant levels of undernutrition and food insecurity, particularly in the arid and semi-arid lands (ASAL) which are underdeveloped, drought-prone and often suffer from conflicts between communities over limited natural resources. The level of food insecurity escalates significantly during periods of drought and/or floods. For instance, in 2017, 20-25 percent of the population in the ASAL were acutely food insecure.

Farming remains the main economic driver, although 80 percent of land is either arid or semi-arid. Kenya's vulnerability to climate change and weather-related shocks is increasing. Ninety-five percent of crops in Kenya are rainfed, leaving farmers highly exposed to droughts. Seasons have become far less predictable, with poor distribution of rainfall over space and time, thereby disrupting cropping and exacerbating soil erosion.

Smallholder farmers account for 75 percent of agricultural output and 70 percent of market supplies. Women provide 80 percent of farm labour and manage 40 percent of smallholder farms but own only 1 percent of farming land and receive only 10 percent of farming credit [3]. Inefficient value chains are unresponsive to the needs of smallholder farmers and poorer consumers. Pastoralists face severe water scarcity for fodder and water for their livestock during the long dry spells, which often leads to resource-based conflicts.

Over the last decade, the prevalence of stunting among children under 5 years has significantly decreased to 26 percent, though the absolute number has increased due to population growth. In the arid counties, global acute malnutrition (GAM) among children 6-59 months often exceeds the "critical" threshold of 15 percent. Micronutrient deficiencies remain high, with anaemia prevalence being 28 percent (boys), 25 percent (girls), and 42 percent (pregnant women) denoting a severe public health problem [4]. The immediate causes of malnutrition, particularly for children 6-59 months, are intake of food that is low in quantity and quality, high disease burden, and inadequate access to basic services. Kenya has the joint fourth-largest HIV epidemic in the world in terms of the number of people living with HIV (1.6 million people), with prevalence high at 5.4 percent. The National Food and Nutrition Security Policy (2012) and its Action Plan articulate the interventions required to address malnutrition, and recognises the role of gender dynamics in food security and nutrition.

The National Safety Net Programme involves cash transfer to severely disabled persons, orphans and vulnerable children, elderly persons over 65 years old and extremely poor people in northern Kenya. A 2017 Social Protection Sector Review is forming the basis for a long-term investment plan focussing on: inclusive, lifecycle social protection; improving and expanding the shock-responsiveness of social assistance schemes; and the expansion of complementary interventions.

The education sector is still faced with historical imbalances in access, equity, quality and relevance, despite the free primary education introduced in 2003. Children in the arid lands face many difficulties in accessing education, because of poverty, food insecurity, conflict, pressure to engage children in household chores or paid labour, the nomadic lifestyle of pastoralists, inadequate trained teachers, poor teacher attendance, insufficient access to textbooks, and poor water and sanitation facilities [5].

Devolution is central to the 2010 Constitution. Forty even elected county governments were established in an attempt to address the regional imbalances while bringing the basic public services closer to the citizens. The counties are improving accountability and public service delivery at sub-national levels. National and county governments are increasingly taking over direct implementation of food security and nutrition activities. But many of the accountable institutions still have inadequate capacity and resources to plan, budget and implement, including for nutrition and food security. The Government has adopted gender-responsive budgeting as a strategy for promoting gender equality and inclusion at both the national and county levels.



Kenya hosts a large refugee population, mainly in camps located in food-insecure counties of Garissa and Turkana. Unable to work or move freely because of the encampment policy of the host country, refugees are highly dependent on international assistance, but there are opportunities for new approaches to improve livelihoods.

- [2] Women and Men in Kenya: Facts and Figures 2017.
- [3] Agricultural Sector Development Strategy 2010 2020.
- [4] Kenya National Micronutrient Survey 2011.

[5] Paper commissioned for the EFA Global Monitoring Report 2010, Reaching the marginalized (available at http://unesdoc.unesco.org/images/0018/001866/186617e.pdf).

WFP Objectives and Strategic Coordination

WFP continued its shift from direct service delivery to strengthening the national capacities through provision of technical assistance and facilitating discussions on required policies, plans and strategies. These shifts have been possible due to strategic partnerships with the national and county governments, and development partners. There has been increased national interest and capacity to assume leadership for ensuring food and nutrition security. WFP's interventions were through a Country Programme (CP), and two protracted relief and recovery operations (PRRO).

Country Programme (CP) 200680 (2014-2018), approved budget USD 129 million, had two main objectives: i) reduce risk and enable people, communities and countries to meet their own food and nutrition needs by strengthening communities and institutions; and ii) reduce undernutrition and break the intergenerational cycle of hunger by increasing equitable access to and utilization of education and addressing undernutrition among the school children. The CP has four components:

Component 1 sought to strengthen the capacity of national institutions and county governments to assess, analyse, prepare for and respond to food insecurity and undernutrition. It also supported acceleration of government leadership and coordination of safety nets through investments in the national social protection single registry and modelling integrated approaches to social protection.

Component 2 built on the successes of Kenya's home-grown school meals programme (HGSMP) and continued to invest in implementation and sustainable expansion. The plan is to have a fully nationally-led school meals programme by mid-2018. WFP complemented the national efforts in some counties through direct provision of meals to school children.

Component 3 assisted smallholder farmers and millers to acquire skills and benefit from structured market opportunities to economically empower women and men farmers. For sustainability, WFP focussed on policy discussions on affirmative actions for the famers to access public procurement opportunities and to improve the quality and safety of food.

Component 4 aimed to improve the nutritional outcomes of vulnerable groups by focusing on chronic malnutrition. It sought to contribute to the prevention of micronutrient deficiencies in school-aged children, including adolescent girls, and integrate water, sanitation, hygiene and nutrition issues into the school meals programme.

PRRO 200736 (2015-2018) "**Bridging Relief and Resilience in the Arid Lands**", **approved budget USD 295 million**, was implemented in the arid and semi-arid lands. It had three strategic objectives: (i) save lives and livelihoods in emergencies through general distributions and treatment of moderate acute malnutrition in the ASAL; (ii) reduce risk and enable people, communities and counties to meet their own food and nutrition needs through creation of productive assets; (iii) reduce undernutrition and break the intergenerational cycle of hunger by providing micronutrient powders to children aged 6-23 months. It also aimed to enhance partnerships to build resilience, increase sustainability and prepare for hand-over to the Government. Capacity strengthening activities were embedded in each of the project objectives.

The Nutrition Technical Forum, co-chaired by the Ministry of Health and UNICEF, coordinated activities in the nutrition sector at the national level. Plans are ongoing towards establishing high-level nutrition multi-stakeholder platforms at both national and county levels, under the Scaling up Nutrition movement in Kenya. The National *AIDS* Control Council coordinated and provided leadership for the multi-sectoral national response to *HIV and AIDS*.

PRRO 200737 (2015-2018) "Food Assistance for Refugees", approved budget USD 377 million, sought to ensure adequate food consumption for refugees and supported food and nutrition security for refugees and host communities in Dadaab, Kakuma and Kalobeyei. It also sought to treat moderate acute malnutrition in children, pregnant and lactating women (PLW), prevent prevalence of undernutrition in children and PLW, address special



nutrition needs of people with chronic illnesses, and improve learning and access to education for girls and boys in primary schools. The operation also sought increase livelihood opportunities for refugees and host communities and strengthen local food value chains and markets.



Country Resources and Results

Resources for Results

WFP Kenya received 73 percent funding against the budgeted requirements for 2017. This was a 17 percent increase from 2016, and is indicative of the strong donor commitment to support WFP in Kenya. Ninety-four percent of confirmed contributions were directed multilateral allocations; the remainder were multilateral allocations. WFP Kenya's main fundraising strategy was to maintain regular engagement with traditional donors and foster new relationships with emerging donors. WFP endeavoured to showcase its work on reducing hunger and improving livelihoods through: (i) consultative meetings with donors and other development partners; (ii) regular updates and reports on progress and challenges; and (iii) field visits.

For all the operations, cash-based transfers (CBT) were better funded than in-kind food transfers, although the planned CBT requirements were less than the planned in-kind food requirements. Constraints included: contributions earmarked for certain activities or a transfer modality, which reduced the flexibility in programming and utilization of funds; contributions with very short validity periods; and late arrival of in-kind shipments from abroad. Where feasible, WFP used corporate advance financing opportunities that enabled the operations to access funds internally before the contributions were confirmed.

At 79 percent, PRRO 200736 was better-funded than the other two operations, both in terms of absolute amount received and percent of needs met. However, the treatment of moderate acute malnutrition was seriously underfunded at the start of the year, with new funding being received to address the worsening nutrition crisis later in the year. Resources for food assistance-for-asset (FFA) activities were adequate for food and cash transfers but not for the provision of required non-food items, which affected the quality and quantity of outputs achieved. WFP received funds to provide technical support to the Government to respond to drought relief requirements with CBT. A budget revision extended the project to June 2018.

As WFP shifts implementation of FFA activities from NGOs to county governments, there are inherent financial management risks that may arise because of capacity gaps. To mitigate these, WFP engaged the services of Price Waterhouse Coopers to conduct micro-assessments of some of the pilot counties that were identified for direct implementation to identify capacity gaps and support required.

CP 200680 overall funding was 71 percent but the school meals activity was seriously under-resourced, with food not being available for a whole school term. Capacity strengthening activities were well-resourced, with predictable multi-year funding. A new source of funding was received for the agricultural market access and linkages activity. Micronutrient supplementation activities for children aged 6-23 months had no funding in 2017 and relied on carry-over stocks from 2016. The budget revision increased the amount for capacity development activities.

PRRO 200737 supported refugees and their host communities and was the least funded in percentage terms (68 percent). CBT and nutrition activities benefitted from predictable multi-year funding, which enabled better planning. However, severe funding shortfalls meant that refugees received their full entitlements for the in-kind portion of transfer only between April and August 2017. Host communities did not receive transfers for FFA from July onwards. The reduction of rations was one of the contributing factors for poor food security outcomes. A budget revision was prepared to address changes in beneficiary numbers, revise the proportion between in-kind food and CBT, extend the duration of the project and include capacity development activities.

WFP Kenya took concrete actions to decrease the environmental footprint of its operations and increase resource efficiency through a series of waste-saving actions, consistent with the international standard ISO 14001, that specifies requirements for an effective environmental management system. An environmental action plan was developed. The office introduced a pull printing system that enabled users to send print jobs via a universal printer driver. This system saw a 60 percent reduction in operational cost of printing compared to 2016. WFP also adopted the contractual terms offered to the United Nations Office in Nairobi by the travel agent, resulting in 10 percent reduction in travel fees paid.

As part of value for money, the office also recognized the criticality of staff wellness amid high-stressful contexts, where delivering of results relies on staff wellbeing and safety. Concrete actions taken include provision of a breast milk pumping station in Nairobi, upgrading housing facilities in field offices, and armoured vehicles to be used in high threat areas for terror attacks along the Kenya/Somali border.



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Beneficiaries	Male	Female	Total
Children (under 5 years)	246,737	239,244	485,981
Children (5-18 years)	528,843	458,520	987,363
Adults (18 years plus)	187,794	256,722	444,516
Total number of beneficiaries in 2017	963,374	954,486	1,917,860





Project Type	Cereals	Oil	Pulses	Mix	Other	Total
Country Programme	3,442	111	871	-	76	4,501
Single Country IR-EMOP	-	-	-	79	-	79
Single Country PRRO	54,892	6,078	10,976	17,667	60	89,673
Total Food Distributed in 2017	58,334	6,189	11,847	17,746	136	94,253

S Cash Based Transfer and Commodity Voucher Distribution (USD)

Project Type	Cash	Value Voucher	Commodity Voucher
Country Programme	2,671,284	-	-
Single Country PRRO	30,476,489	-	-

Project Type	Cash	Value Voucher	Commodity Voucher
Total Distributed in 2017	33,147,774	-	-

Supply Chain

Kenya's logistics infrastructure includes one seaport, several airports and airstrips, a railway line and an expansive road network. The port of Mombasa is the main gateway serving programmes in Kenya and neighbouring countries (Burundi, Democratic Republic of the Congo, Rwanda, Somalia, South Sudan and Uganda) by road and the old railway running to the border with Uganda. The new Standard Gauge Railway line was commissioned in 2017 but for only passengers. WFP Kenya managed the vessel discharge, customs clearance, storage, handling and transport, from the port or from in-country suppliers' premises to county warehouses, and to reception hubs of supported countries. The efficiency of the Mombasa corridor was fundamental to the achievement of WFP's objectives in the region.

The Kenyan road network consists of paved and unpaved roads and is the main route of transport, accounting for 90 percent of cargo and passenger traffic. Most of the roads in the hinterland are unpaved, making them impassable during heavy rainfall. Insecurity was the main challenge for deliveries in northern Kenya: worst affected were Kitale-Lokichoggio, and the Garissa-Mandera routes.

In the middle of 2017, high volumes of WFP cargo were received in Mombasa within a very short period, thereby straining contracted transport capacity and storage facilities. There were limited transporters in Kenya as most firms had shifted their capacity from the country due to low volumes received earlier. Yet there was an urgency to pre-position food before the start of the March-May rains in Kenya and South Sudan.

As the Government waived duties for commercial imports of cereals, sugar and processed milk in response to food scarcity in Kenya, the port became congested and waiting time for conventional ships to berth increased from 5 days to 20 days. The Government maize was given priority for offtake from the silos.

To cope, WFP: (i) issued new transport contracts, increasing inland rates by 10 percent and cross-border (South Sudan) rates by 3 percent; (ii) negotiated and obtained priority berthing for its vessels within five days of arrival in Mombasa thus incurring no demurrage costs; (iii) negotiated with the silo owners for truck loading priority, given the humanitarian nature of the food; (iv) requested transporters that had shifted their trucks to South Sudan operations to re-position them back in Kenya to increase the local capacity; (v) monitored road conditions during the rainy season, and when the roads became impassable, dispatches were halted to avoid the risks of trucks getting stuck and food being damaged by water.

Supply chain costs increased because a new Government regulation made it mandatory for all importers to pay an inspection fee for agricultural commodities imported for domestic use. Fuel prices also went up by 10 percent and transport rates increased in some parts of Kenya because of banditry. Nevertheless, WFP continued to improve cost efficiency by fostering competition amongst service providers through competitive tendering. Cross-border rates to the other countries (except South Sudan) reduced by an average of 10 percent, resulting in savings of USD 588,000 in 2017. A further USD 360,000 of port operations costs was saved because of directly delivering some food from the ships to the outbound trucks in Mombasa.

WFP set three main key performance evaluation indicators for transporters: responsiveness, timeliness and quality. The evaluation was a two-way communication channel where each party evaluated and gave feedback to the other. The evaluation aided in streamlining the roster of service providers by weeding out non-performers and maintaining those that are competitive and high performing.

Timely posting of data into the corporate system, and close monitoring of "best before" use dates safeguarded the safety and quality of food in warehouses. Damaged or infested stocks were immediately reconstituted or fumigated. Post-delivery losses were 0.05 percent of total food handled. Although this was higher than in 2016 (0.02 percent), the increase resulted from truck accidents that were beyond the control of the transporters.

Besides managing delivery of in-kind food, WFP used its supply chain expertise to ensure beneficiaries received their CBT on time, and that traders in refugee camps increased their capacity to engage profitably and give best value to their customers.

It is also worth noting that in 2017, WFP injected USD 37.8 million into the Kenyan economy through payment to service providers in the logistics sector. Outsourcing services to commercial suppliers promotes growth of the Kenyan economy and aids in building capacities of the local entities.

Most of the food for operations in Kenya was received as in-kind donations from abroad. Compared to previous years, there was a decrease in the quantity of food purchased locally by WFP Kenya. Most purchases were made

through WFP's Global Commodity Management Facility (GCMF). The GCMF allowed WFP to make advance purchases of food from local, regional or international markets, when prices are favourable, to support future programme needs. Some of the food purchased through the GCMF was purchased from Kenyan traders and smallholder farmer organizations, thus boosting the local economy.

Annual Food Purchases for the Country (mt)

Commodity	Local	Regional/International	Total
Maize	15	-	15
Rice	-	3,182	3,182
Total	15	3,182	3,197
Percentage	0.5%	99.5%	

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

Commodity	Total
Beans	500
Corn Soya Blend	21,511
Maize	6,846
Ready To Use Supplementary Food	2,002
Sorghum/Millet	14,073
Split Peas	1,965
Sugar	100
Vegetable Oil	1,040
Total	48,037

Implementation of Evaluation Recommendations and Lessons Learned

Recent studies, reviews and evaluations in Kenya have drawn insightful lessons.

A 2017 review of WFP's country capacity strengthening activities positively highlighted the support in the design and implementation of key systems and processes, such as the national single registry, and in facilitating policy discourse in disaster risk management and social protection. It underscored the importance of WFP's early engagement with the devolution process, recommending increased focus on institutional investments at county level and the promotion of linkages between national and county authorities to improve disaster management and the supply chain. A major lesson learned was the need to build in flexibility because of the Government's own rules and regulations and institutions are also dynamic. WFP will consider the findings and recommendations of this review when implementing the five-year Country Strategic Plan that scheduled to start in July 2018.

A 2017 decentralised evaluation (end line) of WFP's support to the school meals programme commended the strong partnership with the Government and the successful gradual handover of the programme from WFP to the Ministry of Education. It recommended six key priorities: (i) continue technical support to the Ministry to complete



the handover; (ii) digitise the reporting system; (iii) strengthen partnerships to address threats to pupils' safety while commuting to school; (iv) increase awareness on the complaints and feedback mechanism; (v) train cooks and storekeepers; (vi) conduct county-specific capacity gaps and needs assessment. These will be implemented in 2018. A baseline for the next phase of the project was also conducted and highlighted the need for WFP to advocate for: (i) speedy adoption of the National School Meals and Nutrition Policy and support for multi-sectoral coordination; and (ii) ring-fencing of the budget and ensuring adequate, timely and regular disbursements to schools.

The 2016 decentralised evaluation of FFA concluded that these activities were building essential infrastructures and social capital, which are vital to support self-reliance and resilience. It recommended: (i) improving technical aspects of the projects to improve quality; (ii) increasing engagement of men and youth to improve gender equality and make the changes transformative; (iii) supporting national and county governments for the enhanced and effective implementation of the National Agricultural Sector Extension Policy, and (iv) supporting county governments to include climate-resilient livelihood activities in the second-generation County Integrated Development Plans (CIDPs). In response, WFP trained implementers and project committee members on the technical standards expected of each asset type, hired two engineers, and supported the CIDP preparations. Also, WFP contracted a technical institute to review the FFA technical manual, and prepared practical implementation guides that include how to effectively engage men, women and the youth.

An internal review of WFP support to facilitate access and linkages for smallholders in 2016 recommended proactive assessment and engagement with all actors along the value chains to enhance efficiency and improve markets. It also highlighted the critical role of institutional procurement, e.g. school feeding, for stimulating smallholder farmers' supply, facilitate linkages to markets, enhance value chains and improve food safety and quality.

A 2015 joint review by UNHCR and WFP concluded that the use of biometric fingerprinting to identify refugees, ensure protection and enhance accountability and management of food assistance, resulted in significant cost reduction. In 2017, an evaluation started to assess the effects of CBT on local economies, food security and nutrition, income and social cohesion between refugees and their hosts. This will also help determine the most effective and efficient mix between food and cash.



Project Results

Activities and Operational Partnerships

Strategic Objective 1: Save lives and livelihoods in emergencies - through general distributions and treatment of moderate acute malnutrition

Outcome 1.1: Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women

Activity: Treatment of moderate acute malnutrition

In early 2017, the nutrition sector - led by the Ministry of Health (MOH) - conducted a detailed situation analysis, based on nutrition surveys conducted between October 2016 and February 2017. In the 23 arid and semi-arid counties, 344,000 children aged 6-59 months were suffering from acute malnutrition, of which 269,000 had moderate acute malnutrition and 75,000 had severe acute malnutrition. The worst-affected counties were Baringo, Isiolo, Marsabit, Mandera and Turkana, which had sub-counties with "very critical" global acute malnutrition (GAM0 \geq 30 percent or "critical" nutrition (GAM 15.0-29.9 percent).

The MOH experienced delays in replenishing its supplies of ready-to-use supplementary foods (RUSF) and requested WFP to cover the gaps, and to scale-up the operation from 10 to 23 counties. WFP's effort complemented the MOH response to the deteriorating nutrition situation and was critical to reduce morbidity and mortality. The treatment of malnutrition was implemented in county government-run or accredited health centres and outreaches (mobile clinics) for hard-to-reach areas. Nurses and other health workers screened children and the pregnant and lactating women (PLW), and those who met the admission criteria received specialised nutritious foods fortnightly (100g of RUSF per child per day) to support nutrition recovery for a maximum duration of 120 days. PLW received 275g/person/day of Super Cereal premixed with vegetable oil until they recovered[1]. The needs of PLW were covered by the national MOH between April and August, with WFP covering the remaining months. Management, targeting and treatment protocols followed the national Integrated Management of Acute Malnutrition (IMAM) guidelines.

County governments managed the health facilities, the MOH and WFP provided the food supplies, while the Kenya Medical Supplied Agency delivered the foods to health facilities. UNICEF supported the nutrition sector coordination through staff secondments to the national and county governments, co-chairing the sector meetings and preparing periodic sector response updates. UNICEF also provided nutrition supplements for the treatment of severe acute malnutrition, as part of the continuum of care. Besides the food, the beneficiaries and/or their caregivers (women and men) received nutrition messaging and counselling, growth monitoring, immunization and vitamin A supplementation when being admitted or during follow-up visits.

In 2017, WFP did not distribute specialized nutritious foods for the treatment of MAM for people living with HIV (PLHIV) on anti-retro viral therapy (ART), because the Government had adequate food supplies. WFP supported the County Government of Turkana to hold consultative forums on how to integrate HIV/TB into the treatment of moderate acute malnutrition based on the national guidelines and protocols developed in 2015/2016.

Activity: Prevention of acute malnutrition

As drought conditions intensified in 2017, information from mass screenings and routine surveillance showed a rapid increase in the number of children and PLW with acute malnutrition. WFP initiated a prevention of acute malnutrition activity (blanket supplementary feeding) targeting all children aged 6-59 months and PLW in counties where GAM prevalence was 20 percent and above (Baringo, Isiolo, Mandera, Marsabit, and Turkana). Implementation started in May 2017 in parts of Marsabit and Turkana, and reached roll-out at scale in August as more funding became available. Beneficiaries received Super Cereal Plus, a specialised nutritious food containing animal proteins and enriched with vitamins and minerals, at a daily ration of 200g per person. This preventive action could not be implemented in Samburu and West Pokot counties, as planned in the revised United Nations flash appeal, because the required extra funding was not received.

WFP and the Government prepared a training manual and implementation strategy for health workers. The manual outlined the eligibility criteria, nutrition messaging, as well as documentation and reporting requirements. The implementation strategy included training requirements and roles and responsibilities of each actor. Because some mothers or caretakers were unable to read or write, or they lived far from health care services and may not have had health cards or know their children's ages, the eligibility criteria were set as any child <110 cm in height, with



those who were \geq 110 cm tall being required to produce health cards. Pregnant women were identified through visible pregnancy or an antenatal card from medical personnel, while lactating women had to present a child and a health card: the cards were useful in verifying the child's age before issuance of the ration.

Beneficiaries received a comprehensive assistance package. The cooperating partners were Consortium of Cooperating Partners (a local partner), and three international non-governmental organizations (NGOs): Action Against Hunger, International Rescue Committee, Welthungerhilfe, and World Vision International. WFP purchased and delivered the specialised nutritious foods to the NGO partners, who were in turn responsible for beneficiary targeting, food distributions, community mobilization and communication campaigns. All the partners and county nutrition coordinators received training to ensure knowledge and adherence to the implementation strategy and protocols.

As much as possible, the activity was integrated with essential health care services such as immunizations, supplementation, treatment of minor illnesses and nutrition messaging. The partners undertook nutrition screening using weight-for-height measurements to quickly detect those malnourished and refer them for treatment. Nutrition messages included infant and young child feeding practices, proper utilization of the specialised nutritious foods and hygiene information.

Challenges encountered included the volatile security situation in parts of Baringo, Turkana and Mandera, which affected distributions in certain sites; heavy rainfall that damaged road networks; and outbreaks of malaria and cholera, which increased the vulnerability among targeted populations.

Outcome 1.2: Stabilized or improved food consumption over assistance period for targeted households

Activity: General distributions (relief assistance)

In recent years, WFP's engagement in Kenya has shifted substantially, reducing relief assistance, while increasing livelihoods and resilience-oriented activities. In early 2016, WFP stopped implementing general distributions as the national government's safety nets programmes expanded and the role of national and county governments in providing relief food assistance increased. While the 2017 drought response further demonstrated the Government's commitment to address acute food needs of Kenyans, it also highlighted gaps in planning and delivery.

In April, the State Department for Special Programmes (SDSP) requested WFP to provide technical assistance to implement nationally financed emergency cash-based transfers (CBT). The technical assistance was in the form of beneficiary targeting and registration, systems setup and transfer of cash to the beneficiaries, and overall coordination. WFP leveraged its expertise and existing partnership with a leading mobile telecommunications firm in Kenya to provide a platform and the technology for the cash transfers. The initiative was dubbed *Chakula kwa Jamii* (Swahili for "food for communities") and reached 1.6 million Kenyans in 13 counties that could not be covered by existing and expandable social protection schemes. Additionally, the County Government of Samburu purchased food for relief assistance, with WFP only transporting, distributing and monitoring the food distributions. WFP seconded a staff member to the SDSP who helped in coordination and preparation of sector response plans after each food security assessments.

WFP also provided direct relief assistance to households enrolled in the WFP's Food Assistance for Assets (FFA) during the post-harvest "seasonality months", when beneficiaries would not normally receive transfers. This was done exceptionally to cushion the households against the severe effects of the drought and prevent depletion of productive assets.

Towards the end of 2017, WFP started general distributions (unrestricted CBT) to provide "protection rations" for families of children aged 6-59 months and PLW identified with acute malnutrition and admitted into the Integrated Management of Acute Malnutrition (IMAM) programmes. The aim was to increase access to food for the worst drought-affected families, reduce the risk of sharing or selling of the specialized nutritious foods, and thus improve the effectiveness of the treatment of severe and moderate acute malnutrition. Given the available resources, WFP prioritized the four counties where the Government was implementing its Hunger Safety Net Programme (HSNP), i.e., Mandera, Marsabit, Turkana and Wajir. These counties were selected because of the high concentration of clients being treated for acute malnutrition - 85 percent of IMAM clients. For ease of communication with communities, the activity was dubbed *Linda Lishe Bora* (a Swahili translation for "protecting good nutrition").

Preparatory activities included national and county-level planning consultations, identification and contracting of cooperating partners, linking health centres to the registration sites, identifying IMAM clients, verifying household details and registration. Each household was entitled to receive USD 120 (about three months' food needs) in two cycles, delivered via 'scratch cards, mobile money transfer or both. Funding was received in November, and by end of 2017, 46,000 households (out of the total 73,000 households) had been registered, 28 percent of whom had withdrawn their first cash entitlement.



Ahead of the 2017 general elections in August and October, WFP supported the National Disaster Operations Centre (NDOC) to prepare the contingency plan. WFP led the food assistance sector of the humanitarian pillar, and prepared sector response plans and needs. As the lead of Isiolo and Mombasa hubs, WFP facilitated emergency simulation exercises, with the aim of providing a safe space for state and non-state actors to enhance their capacity to respond to an emergency prior to, during, and after the elections.

Strategic Objective 3: Reduce risk and enable people, communities and counties to meet their own food and nutrition needs - through asset creation activities

Outcome 3.1: Improved access to livelihoods assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-insecure communities and households.

Outcome 3.2: Risk reduction capacity of countries, communities and institutions strengthened.

Activity: Food Assistance for Assets (FFA)

In Kenya, the FFA projects were multi-year and implemented in the same 14 counties (Baringo, Garissa, Isiolo, Kilifi, Kitui, Kwale, Makueni, Marsabit, Mandera, Samburu, Taita Taveta, Tharaka Nithi, Turkana, Wajir) and communities, without expansion to new areas. Through community-based participatory planning, women and men (in separate groups) identified the main causes of food insecurity in their villages and possible solutions, prioritized project activities, agreed on an action plan, and selected a project committee to oversee implementation and maintenance. In cases where the identified site was on private land, the community, landowner and the local authorities signed agreements to allow the community to access and use the asset created.

A household typically contributed 12 working days of labour each month. Those families found to be food insecure but without an able-bodied worker also received food assistance; in certain cases, they contributed 'soft labour' such as childcare, for those working at the project sites. Each participant received food assistance for six household members. WFP provided either cash-based transfers (CBT) or in-kind transfers (cereals, pulses and oil). In the delivery of the cash to the households, WFP worked with two financial service providers - a mobile telephone company in Baringo and Makueni, and a bank in Kilifi, Kitui, Kwale and Taita Taveta. The CBT was unrestricted, allowing households to withdraw and purchase food, and meet other pressing needs. Mobile banking in Kenya is well developed, cheaper and considered more efficient than regular banking, therefore it generally offered better penetration in remote locations where WFP operated.

Typically, the FFA activities included: reclaiming land through soil and water conservation measures for crops or fodder; building or rehabilitating small-scale irrigation schemes; building rainwater-harvesting structures; establishing tree nurseries; connecting villages through feeder roads; and supporting village savings-and-loans associations. Almost all the activities had a positive impact on the environment, because they improved management of natural resources: land, water, soil, and plants. The National Environment Management Authority screened projects, and those with potential for large environment impact underwent a full Environmental and Social Impact Assessments to examine both the positive and negative impacts of the projects. Other partners included county governments, the National Drought Management Authority (NDMA), local organizations (Arid Lands Development Focus, Consortium of Cooperating Partners, Ramati Development Initiative, the Relief, Reconstruction and Development Organization, Caritas Kenya, and the Kenya Red Cross Society), international NGOs (Action Aid Kenya, Childfund Kenya and World Vision International), and research institutes (such as the World Agroforestry Centre [ICRAF]) which provided complementary inputs, technical expertise on project implementation and community mobilization.

WFP piloted integrated risk management by supporting close to 1,000 FFA households in Kitui County sign up for micro insurance for the March-May rainy season, later scaled up to 4,800 farmers for the October-December 2017 rainy season. The farmers increased the days spent working on assets as a contribution to the insurance premium. This initiative aimed to combine improved natural resource management (risk reduction), micro-insurance (risk transfer), livelihood diversification and microcredit (prudent risk taking), as well as savings (risk reserves) to address the pressing climate risks faced by smallholder farmers and the pre-existing challenges that are usually exacerbated by poor access to inputs and financial services. Partners included Pula Advisors which provided technical support, Caritas Kenya as the delivery channel, the State Department for Agriculture which co-financed the premiums, and private insurance firms for the insurance cover.

In April 2017, the Government of Kenya launched the multi-actor Billion Dollar Business Alliance (BDBA), where partners signed a letter of intent. The alliance adopted a business approach to scaling-up farm pond technology in Sub-Saharan Africa, which is initially being piloted, tested and perfected in Kenya before rolling out to other potential countries. The partnership currently includes WFP, ICRAF, national and county governments, the private



sector, and NGOs with the aim to address the sustainability factors that comprise a successful scaling-up farm ponds as a climate-resilient technology for smallholder farmers in the drylands: financial, institutional, environmental, technical, and social.

WFP, the County Government of Kilifi, the Food and Agriculture Organization (FAO) and World Vision International developed a novel initiative to pilot increased youth participation in agricultural enterprises in 2017. The initiative sought to empower the youth through agribusiness along the poultry and horticulture value chains. The youth groups received training on how to increase production and productivity, develop business plans and manage finances. Lessons learned from the pilot will be used to scale up the project in other counties in 2018, with a special focus on engaging the youth in agribusiness along value chains from production to consumption.

In the arid counties, WFP continued working with the USAID-supported partners (the private sector, NGOs and academic/research institutes) under the Partnership for Resilience and Economic Growth (PREG), in project layering, sequencing and integration, with a focus on crops and livestock value chains development. The partners conducted joint planning and monitoring to strengthen the partnership in Garissa, Isiolo, Marsabit, Turkana and Wajir counties. Activities included linking WFP-supported households to livestock markets built by PREG partners, where they sold fodder or other household goods, or received veterinary services and subsidized drugs.

WFP invested in strengthening the capacity of local partners by formalizing agreements with local NGOs and county governments to implement FFA activities. Specifically, Samburu and Wajir county governments directly implemented the activities as part of capacity strengthening and greater ownership in the medium to long-term goal. The counties committed financial and human resources while WFP provided complementary technical support and food transfers to the households. WFP continued supporting a national coordinator and 15 county-based technical officers in the NDMA, who have been coordinating and providing technical oversight of asset-creation activities.

Strategic Objective 4: Reduce under-nutrition and break the intergenerational cycle of hunger by providing micronutrient powders to children aged 6-23 months

Outcome 4.1: Reduced undernutrition, including micronutrient deficiencies among children aged 6-59 months, pregnant and lactating women, and school-aged children

Activity: Micronutrient supplementation for children aged 6-23 months

In the prevention of micronutrient deficiencies, WFP supported the county governments of Garissa, Samburu, Turkana and Wajir with the provision of micronutrient powder (MNP) for children aged 6-23 months. In addition to the provision of MNP, health workers also provided health and nutrition education to the women and men caregivers. However, because of insufficient funding, only four counties distributed the MNP and distributions were sporadic (February, March, May and November). The children received 15 sachets per month (1 gram every second day) through health facilities as part of routine child health services.

[1] Admission criteria for PLW: mid-upper arm circumference (MUAC) of <21 cm; PLW exited once they reached \geq 23 cm.

Results

Strategic Objective 1; save lives and livelihoods in emergencies

Outcome 1.1: Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women

Activity: Treatment of moderate acute malnutrition

To measure the performance of the MAM treatment amongst children aged 6-59 months, WFP Kenya used four clinical outcome indicators: recovery, defaulter, mortality and non-response rates. The targets were met, and there was a general improvement in performance since the intervention started in 2015. However, the average default rate remained high, which can be attributed to migration by pastoralists in search of pasture and food, and the nationwide strike by nurses over pay disputes which seriously hindered access to health and nutrition services as many health centres remained closed or operated at minimal capacity. Consequently, the number of men and women receiving nutrition counselling declined.



To monitor if the treatment of MAM was functioning optimally and reaching the maximum number of malnourished children in need, it was essential to measure coverage, even for an activity achieving good clinical outcomes, since impact results diminished when actual coverage was low. In 2017, coverage of the intervention was measured in Garissa and Wajir counties, using the Semi Quantitative Evaluation of Access and Coverage (SQUEAC)[1]. The main boosters to access treatment services were adequate staff capacity at health centres, active case-finding and good linkages of community and healthy centres, which ensured regular screenings and referrals. The major barriers which caused defaulting included migration of nomadic pastoralists, long distances to health centres, and poor health-seeking behaviours. Some of the key recommendations include the need to integrate and strengthen defaulter-tracing mechanisms with immunization; increase the number of outreach sites (mobile clinics) to improve access for the far-to-reach communities; and strengthen community health strategies platforms to increase awareness and improve health-seeking behaviours. In 2017, less than 50 percent of the children planned to be treated for MAM were reached because WFP only needed to scale-up to from 10 to 17 counties instead of the the expected 23 as the Government received enough supplies to cover the other 6 counties. The county governments built new health centres to bring services closer to the people.

Activity: Prevention of acute malnutrition

To measure the performance of the prevention of acute malnutrition amongst children aged 6-59 months, WFP used two indicators: participation (adherence) and coverage. The participation indicator was a measure of the number of distributions of specialized nutritious foods that each child (or the child's parent on his or her behalf) took part in compared to the plan. Coverage measured the proportion of eligible beneficiaries who received the foods against the estimated population.

The number of children and women benefiting from the activity increased progressively as funding became available and community mobilization became effective. Multiple strategies were employed to access hard-to-reach community groups, including the use of technology such as telephone text messages, local media stations and remapping of distribution sites. This contributed to the high coverage and participation of the children. However, competing household tasks among women, cultural barriers affecting pregnant women, and insecurity in parts of Baringo and Turkana prevented optimum coverage.

Based on routine screening information, the proportion of people identified with acute malnutrition decreased from 20 to 6 percent for children and from 28 to 13 percent for PLW from May to December 2017. Routine mass screening is an essential component of the activity to prevent acute malnutrition: this ensures that malnourished beneficiaries are quickly identified and immediately referred to receive treatment, which also serves as a mechanism for measuring the progress of the overall achievements for the activity.

Outcome 1.2: Stabilized or improved food consumption over assistance period for targeted beneficiaries

Activity: General distributions

WFP and the State Department of Special Programmes conducted joint monitoring of the Government's drought relief cash transfers. It was established that the money helped the beneficiaries to purchase food and other basic household items, increasing their income available for food. WFP's system for CBT (targeting, registration and disbursement) was used as the response mechanism from which the Government gained the technical know-how for using cash as a response instrument for drought emergencies.

The election preparedness activities allowed the Government to be better prepared for the planned scenarios and to now conduct simulations independently.

For the protection rations, the baseline established that 67 percent of households had acceptable food consumption score and consumed an average of six out of seven food groups per day. Weekly rations for the treatment of severe acute malnutrition lasted for an average of seven days, while fortnightly rations for the treatment of MAM among children lasted for an average of 13 days, suggesting little or no sharing. However, rations for treatment of MAM among PLW lasted for 10 instead of 14 days, suggesting considerable sharing. The cause may have been that the Super Cereal provided was made into porridge, which is a common family food in Kenya, therefore easily shared. Follow-up surveys will be conducted in 2018 at the end of the activity.

Strategic Objective 3: Reduce risk and enable people, communities and counties to meet their own food and nutrition needs through asset creation activities

Outcome 3.1: Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-insecure communities and households



Outcome 3.2: Risk reduction capacity of counties, communities and institutions strengthened.

Activity: Food Assistance for Assets (FFA)

FFA activities aimed to improve the food security of assisted households by: increasing and diversifying food production through expansion of irrigated agriculture; promoting good dryland farming practices; reducing land degradation; improving incomes and access to markets for pastoralists and smallholder farmers; and promoting the scaling-up of climate-resilient technologies and approaches such as farm ponds and micro-insurance.

WFP collected and analysed three corporate indicators to measure food security among FFA assisted households: food consumption score (FCS), dietary diversity score (DDS) and coping strategy index (CSI). FCS is a score calculated using the frequency of consumption of different food groups consumed by a household during the seven days before the survey. The target was to reduce the proportion of FFA households with poor and borderline FCS. DDS is a score defined by the number of different foods or food groups eaten by a household during the seven days before the survey, without regard to the frequency of consumption. The target was to increase DDS: a score of 6 is considered "good" while 4.5 and below is considered "poor". The CSI measures choices that households make and the severity of those choices when faced with food deficits, a direct measure of vulnerability; the target was to reduce the average index.

In addition, WFP corporately developed the Consolidated Approach for Reporting Indicators of Food Security (CARI) to analyse and report the level of food insecurity within a population. Using the CARI approach, each surveyed household was classified into one of four food security categories, based on the household's current food consumption indicators and their coping capacity.

Analysis of the December 2017 FSOM using CARI showed that overall food security of assisted households was worse in 2017 compared to the previous two years. The main reason for the deterioration was the severe drought, which resulted in very low harvests for the households' own consumption and low supplies to the markets, which increased staple food prices. FFA activities targeted the most resource-poor households and in some areas they are still vulnerable to climate shocks. The proportion of all the assisted communities that reported an increased asset score reduced by 14 percent from the previous year. In both arid and semi-arid lands, WFP supported communities with non-food items (hand tools and other farm inputs), subject to funding availability.

In the arid counties, the proportion of interviewed families with poor and borderline FCS doubled, and their DDS moved from good to poor, and both the average CSI and the proportion of households implementing crisis and emergency coping strategies increased. This means that more households were forced to deplete their productive assets to cope with food gaps, which will affect their future productivity. The purchasing power of beneficiaries also decreased. The northwest pastoral livelihood zone (Turkana) had the largest deterioration, with 77 percent of the households having either poor or borderline food consumption, and 90 percent could not afford the minimum acceptable healthy food basket (maize, beans, milk, vegetable oil, sugar, onions and tomatoes). This zone was hardest hit by the rainfall failures of the last three seasons that reduced production of both livestock and crops. Turkana is one of the poorest counties in Kenya with high household economic vulnerability attributed to the high food prices, unreliable income sources and high under-development.

Generally, the assets created in the arid counties entailed communities to rehabilitate degraded lands with appropriate soil and water conservation technologies for fodder production, which was either sold or used to feed livestock. They also rehabilitated irrigation canals for crop farming, constructed water ponds for livestock, and kept beehives to diversify their livelihoods and incomes. However, output targets were not met because yields were not optimal. This was due to the prolonged drought, as well as to inadequate inputs and tools because of funding constraints. For irrigation, production was affected by low river levels, coupled with the prohibition to abstract water from rivers by the Water Resource Management Authority due to drought. Other reasons for not achieving targets included insecurity, which caused population displacements in several counties.

In the semi-arid counties, analysis showed significant differences between the two monitored livelihood zones: south-eastern marginal and coastal low-potential farming. In south-eastern marginal counties (Kitui and Makueni), beneficiary households had better food security outcomes in 2017 than in the previous year. The opposite result was reported in coastal counties (Kilifi, Kwale and Taita Taveta), which in 2017 experienced poor rainfall and the infestation of crops by Fall Armyworm. In Kitui and Makueni counties, although the rainfall was below average, a high adoption of drought-tolerant crops - such as cowpeas, millet and sorghum - as well as the scale-up of farm ponds for micro-irrigation maintained production even during the off-season. This enabled communities in those areas to produce food throughout the year, increasing food availability for the household, and in some cases surpluses for the market.

Most of the farm ponds built through the Billion Dollar Business Alliance partnerships were in Kitui and Makueni counties. This was because of increased interest and investments by these county governments to adopt farm



ponds to mitigate the effects of drought, as they held water for long periods. There is an increasing interest among men and youth in the adoption of the technology due to its benefits in sustaining and increasing their incomes. As the burden of providing water for household use is placed on women and girls, most women beneficiaries sought to use the increased incomes to purchase water tanks for roof water catchment, thus increasing access to drinking water and reducing time used to fetch water.

Nutrition-sensitive agriculture, which sought to maximize farming's contribution to nutrition, was integrated into some of the FFA activities in Kilifi. It targeted 1,600 participants and another household member who makes decisions at the household level – most often the spouse. They were trained on nutrition messages on diversifying farming; food utilisation, preparation and preservation; and water, sanitation and hygiene. The uptake of the messages is progressive with participation of men being below expectations, potentially due to the prolonged drought, which led men in the pursuit of alternative sources of income away from the home, often seeking casual labour in urban towns.

To reduce the risk of assisted communities, WFP and partners developed the households' human and social capital by training them on village savings and loan associations (VSLAs), providing extension support (advisory services, exchange visits and field days), and strengthening community institutions (e.g. training project committees and resource persons).

For micro-insurance in Kitui, each insured farmer received a pay-out of USD 43 after the poor rainfall performance of the March-May season reduced yields by 54 percent. The pay-outs enabled them to either purchase farm inputs for the October-December season or cover food gaps for two months. The Ministry of Agriculture, Livestock and Fisheries committed to include the covered families in the Kenya Agriculture Insurance Programme so that they can benefit from a 50 percent insurance premium subsidy. To further strengthen the resilience of FFA activities to water scarcity caused by drought, WFP will continue exploring solutions to: scale-up livelihoods diversification; expand farm pond technologies: integrate micro-insurance services; increase the capacity of water-holding assets through mechanization; and improve efficiency through reduced evaporation.

Senior technical officers, extension services officers and community resource mobilisers in 15 counties were trained as trainers. In turn, they trained other extension agents drawn from the FFA project committee members and champion farmers to form a critical mass of community-level facilitators who will provide extension and advisory support to targeted communities to improve the technical quality and performance of the assets created. Additionally, lessons learned from Samburu and Wajir's direct implementation by county authorities will be useful in designing similar arrangements in other counties as part of national ownership, scaling up and sustainability.

The training of county government staff in Kilifi as facilitators will enable them provide extension services to the youth groups engaged in the two value chains (poultry and horticulture). Key lessons learned from the pilot phase, which will inform the planned expansion into other counties. From these lessons, a strategy for youth in engagement in FFA will be developed in 2018 to support the Government's Youth in Agribusiness Strategy launched in 2017.

Strategic Objective 4: Reduce under-nutrition and break the intergenerational cycle of hunger by providing micronutrient powders to children aged 6-23 months

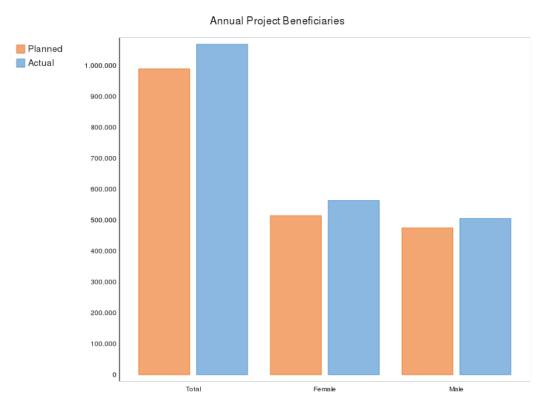
Outcome 4.1: Reduced undernutrition, including micronutrient deficiencies among children aged 6-59 months, pregnant and lactating women, and school-aged children

Activity: Micronutrient supplementation for children aged 6-23 months

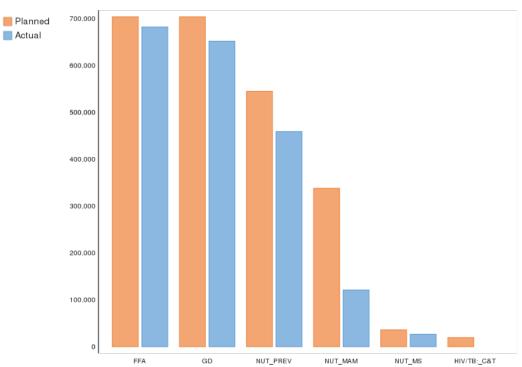
Funding for micronutrient supplementation was limited in 2017. Micronutrient powders were therefore only available intermittently (February, March, May and November), and provided only in Garissa, Samburu, Turkana and Wajir counties, largely from carryover stocks from 2016. Therefore, it was not possible to conduct post-distribution monitoring (PDM) to calculate participation (adherence) and coverage.

The minimum acceptable diet (MAD) is a composite indicator combining minimum dietary diversity and minimum meal frequency for children aged 6-23 months. The reported data was collected through the Food Security Outcome Monitoring (FSOM) and represents all assessed livelihood zones in Kenya. Among the populations for which MAD was measured, the children consuming meals that contributed to an acceptable minimum diet were negligible, and way below the target.

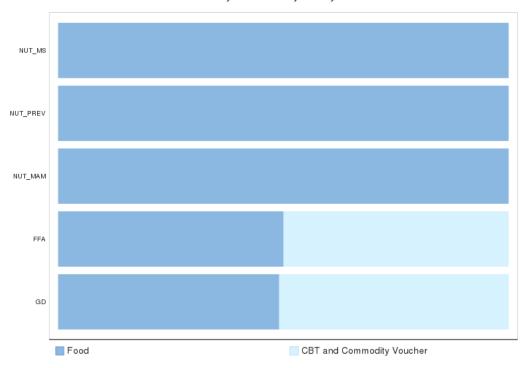
[1] Baseline and previous follow-up figures were derived from a desk-based method (based on MAM prevalence) and not SQUEAC. The seeming improvement may therefore be because of the different methodologies.







FFA: Food-Assistance-for-Assets FPA: FOOD-ASsessment Ver-Seets
GD: General Distribution (GD)
NUT_PREV: Nutrition: Prevention of Acute Malnutrition
NUT_MAM: Nutrition: Treatment of Moderate Acute Malnutrition
NUT_MS: Nutrition: stand-abne Micronutrient Supplementation
HIV/TB: __C&T: HIV/TB: Care&Treatment



Modality of Transfer by Activity

GD: General Distribution (GD)

FFA: Food-Assistance-for-Assets

NUT_MAN. Nutrition: Treatment of Moderate Acute Malnutrition NUT_PREV: Nutrition: Prevention of Acute Malnutrition NUT_MS: Nutrition: stand-abne Micronutrient Supplementation



Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Beans	106	-	-
Corn Soya Blend	14,885	9,379	63.0%
Maize	4,706	3,109	66.1%
Micronutrient Powder	14	1	4.6%
Ready To Use Supplementary Food	1,934	933	48.2%
Rice	266	-	-
Sorghum/Millet	5,504	18,304	332.5%
Split Peas	1,989	4,122	207.2%
Vegetable Oil	831	1,373	165.3%
Total	30,235	37,220	123.1%



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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned		
Cash	21,260,905	11,914,611	56.0%		
Total	21,260,905	11,914,611	56.0%		

Performance Monitoring

WFP in Kenya has a sound performance monitoring system that is guided by the corporate normative monitoring framework. It includes the strategic results framework, business rules, monthly monitoring reports and standard operating procedures. Based on these, monitoring plans for each activity were developed which guided monitoring for each process.

Field-based monitoring staff collected both process and outcome data using standardized online tools and checklists stored in tablets, which were then uploaded into a web-based dashboard. The monitoring and evaluation (M&E) staff in Nairobi cleaned, aggregated and analysed the data collected. Using tablets saved time and minimized data entry errors since more controls were built into the system. Summary reports were available in real time, with comprehensive reports being prepared after quality checks and analysis in Nairobi.

Outcome monitoring was conducted through two sets of outcome assessments:

(i) Food Security Outcome Monitoring (FSOM), which analysed food security indicators, and was systematically conducted thrice a year (May, September and December). May and December marked the usual end of the rainy seasons while September was the peak of the lean season in Kenya.

(ii) Asset Creation Outcome, which measured crop production yields, accessibility to water and asset ownership, and was conducted once a year. Further focus group and key informant interviews were conducted to collect qualitative data.

Process monitoring was carried out for selected FFA and nutrition sites and data was collected monthly using standardized checklists. Site monitoring aimed to ensure that activities were being implemented as planned and in line with WFP guidelines. It also checked that food distribution procedures were in place to ensure that recipients received their correct entitlements with minimal losses or perceived unfairness. Where issues arose, corrective measures were taken as soon as possible and those that could not be dealt with on the spot were referred to the technical teams for further action. Market information from traders was collected through face-to-face interviews.

Beneficiary Contact Monitoring (BCM), a type of post-distribution monitoring, complemented the distribution monitoring where beneficiaries were interviewed to gather information on their views about the following: activities; delivery mechanisms; timeliness of assistance; perceptions of the assistance; utilization; satisfaction; nutrition messaging; how decisions are made on the use of resources at household level; and data on gender, protection and accountability to the affected population.

Data on nutrition outcomes and outputs was retrieved from the health information systems and partners' reports. WFP monitoring assistants also supported the MOH in conducting nutrition surveys at the county level through training, coordination and overseeing the data collection process.

The mobile vulnerability analysis mapping (mVAM), which involves remote data collection through mobile telephone interviews, was used to collect data in restricted areas and to complement face-to-face monitoring. For the protection rations, WFP used mVAM to assess data info on household food security, how long the specialised nutritious foods lasted, exposure to nutrition messaging, and how the cash received was utilised. Other activities that utilised the service included market monitoring.

For the Government's drought response, WFP and the State Department of Special Programmes joined county teams during periodic joint monitoring missions on drought response.

Progress Towards Gender Equality



Prior to implementation of the Government's drought relief cash transfers, WFP supported a simulation exercise in Kitui County to test the systems and processes. Based on the lessons learned, changes were made, and included gender and protection considerations related to beneficiary targeting and registration. Monitoring of the actual registration process indicated that the the community-based targeting was largely inclusive, with many of the communities selecting women as the primary recipients of the cash. The electronic registration system collected sex- and age-disaggregated data of beneficiaries, forming a basis for gender analysis, programming and reporting. Selection of women was recognized as an important element of empowerment as they gained access to cash resources. The flexibility on the use of cash was appreciated by all groups. The use mobiles telephones as a channel of cash transfer was appreciated by all (women, men and the elderly). It facilitated access to a variety of financial products such as savings and making electronic transactions. Intrahousehold resource allocation occurred: the female recipients often shared a small amount of cash with the adult male family members to meet their priorities such as livestock drugs.

WFP gave special attention to pregnant and lactating women and to young children by addressing their increased nutritional needs through targeted nutrition actions (both treatment and prevention of acute malnutrition). The men were included through frequent and consistent communication for them to understand the nutrition and dietary diversity issues that needed to be addressed and resolved in their families. Furthermore, WFP, in collaboration with Unilever, supported the Ministry of Health to conduct research on adolescents' nutrition programming in Kenya, which identified nutrition challenges experienced differently by adolescent boys and girls in selected urban and rural settings, and the potential entry points for accessing these populations with appropriate nutrition services and messages. The report will form a basis for future programming and support to Government.

For the FFA activities, several studies, reviews and evaluations conducted recently have reported that gender is well mainstreamed into the design and implementation. For instance, an independent review of capacity strengthening activities commissioned in 2017 reported that majority of FFA participants and members of project management committee are women had contributed to their empowerment. They had accessed trainings that have improved their skills on leadership, financial literacy, record keeping, among others. As project participants, they have been exposed to new farming technologies, and some of the assets created have improved their lives, by reducing the burden placed on them to provide food for their families. However, several challenges remained that held-back women from realising their full potential. Most Kenya communities are still largely patriarchal; men still dominate decision-making on the use of land for household or community projects even though women provide most of the labour. They also dominate projects that have high potential to bring income. To address this, WFP include gender and youth issues in the terms of reference for consultants who are revising the technical implementation manuals for FFA.

A five-country qualitative study (Guatemala, Kenya, Niger, Sri Lanka and Zimbabwe) by WFP on how FFA activities can contribute to empowering women and improving their nutrition was published. For Kenya, the study analysed Kilifi County, and while it confirmed the potential of FFA to empower women and improve their nutrition, there remained gaps. Several recommendations were made, one of them being the need to use FFA as a platform for nutrition messaging and awareness raising on rights and referrals, and to further enhance nutrition. In response, WFP informed partners to set aside one-day per month (one work norm) to discuss gender related issues such as different nutrition needs of women during their life-cycle, hygiene and sanitation, early marriages, and gender-based violence, among others. Topics selected should be context-specific.

Protection and Accountability to Affected Populations

As part of WFP's efforts to address protection and accountability concerns for the counties receiving government drought relief cash transfers, WFP trained relief committees to handle on-site complaints and feedback from the communities during and after registration exercises. WFP also empowered its local partners to handle and act as first-level on-site referral systems for the communities in handling complaints and grievances. In addition to on-site helpdesks, beneficiaries were sensitized on the existence of the toll-free helpline through distribution of leaflets and mass awareness sessions. Priority queues were created for the elderly, the sick, as well as pregnant and lactating women. The registrations were planned such that the time taken did not expose beneficiaries to travel-related risks. Protection-related risks reported included human-wildlife conflict, intercommunity conflict and terrorism. WFP's corporate indicators on protection and accountability were not collected and reported for beneficiaries of government-funded cash transfers.

For FFA activities, WFP collected beneficiary feedback mainly through a telephone helpline in Nairobi. The helpline was manned by three permanent staff catering for three languages – English, Swahili and Somali - covering all WFP activities in Kenya. Up to 10 temporary call agents were hired during peak periods when relief activities (for both WFP and government) were implemented. All the call agents were trained on how to handle the cases



received by providing information immediately or escalating cases as needed. The bulk (84 percent) of all cases were general enquiries, and 36 percent of them being reported by women. Based on feedback received on challenges with certain financial service providers, WFP began exploring the possibility of developing a choice model that would allow households to choose the cash delivery channel (mobile money, banks etc) that works best for them.

The proportion of interviewed FFA households who reported they were aware of the FFA activity remained stable in arid counties but reduced significantly in semi-arid counties (more than 95 percent knew who was included and what they were entitled to receive, but only 60 percent reported they knew where to complain) but the reason is unclear. The toll-free telephone introduced in 2017 to encourage more people to access and provide feedback to WFP was not disseminated to FFA beneficiaries in 2017 but will be rolled out in 2018.

The proportion of assisted people who reported feeling unsafe was low: 2 percent in arid counties and 6 percent in semi-arid counties. Most were contextual and were related to fear of being attacked by wild animals (particularly elephants), when accessing the assets or going to the projects sites. Tensions were experienced in Garissa and Tana River counties where reports of terror elements had been reported.

To provide a safe and dignified access to FFA activities, WFP trained two male and two female focal points to receive and handle allegations of sexual exploitation and abuse from refugees. They were expected to inform other WFP staff, partners and beneficiaries on WFP's zero tolerance against sexual exploitation and abuse, which is an example of gender-based violence as it is based on unequal gendered power relations.

Figures and Indicators

Data Notes

Cover page photo © World Vision / Collins Korir.

A group of young FFA participants with their watermelons, ready for the market in Kilifi County, as part of a joint WFP/World Vision/County Government initiative.

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	474,720	514,280	989,000	505,165	563,378	1,068,543	106.4%	109.5%	108.0%
By Age-group:	·								
Children (under 5 years)	138,460	128,570	267,030	238,169	232,124	470,293	172.0%	180.5%	176.1%
Children (5-18 years)	178,020	158,240	336,260	132,545	134,289	266,834	74.5%	84.9%	79.4%
Adults (18 years plus)	158,240	227,470	385,710	134,451	196,965	331,416	85.0%	86.6%	85.9%
By Residence status:									
Residents	474,720	514,280	989,000	505,165	563,378	1,068,543	106.4%	109.5%	108.0%

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)
General Distribution (GD)	343,500	360,500	704,000	319,930	332,111	652,041	93.1%	92.1%	92.6%
Food-Assistance-for-Assets	343,500	360,500	704,000	341,380	340,900	682,280	99.4%	94.6%	96.9%
Nutrition: Treatment of Moderate Acute Malnutrition	338,000	-	338,000	121,113	-	121,113	35.8%	-	35.8%
Nutrition: Prevention of Acute Malnutrition	545,000	-	545,000	459,125	-	459,125	84.2%	-	84.2%



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: stand-alone Micronutrient Supplementation	36,000	-	36,000	26,624	-	26,624	74.0%	-	74.0%
HIV/TB: Care&Treatment	19,500	-	19,500	-	-	-	-	-	-

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)
General Distribution (GD)	57,250	60,083	117,333	53,322	55,352	108,674	93.1%	92.1%	92.6%
Food-Assistance-for-Assets	57,250	60,083	117,333	56,897	56,817	113,713	99.4%	94.6%	96.9%
Nutrition: Treatment of Moderate Acute Malnutrition	338,000	-	338,000	121,113	-	121,113	35.8%	-	35.8%
Nutrition: Prevention of Acute Malnutrition	545,000	-	545,000	459,125	-	459,125	84.2%	-	84.2%
Nutrition: stand-alone Micronutrient Supplementation	36,000	-	36,000	26,624	-	26,624	74.0%	-	74.0%
HIV/TB: Care&Treatment	19,500	-	19,500	-	-	-	-	-	-

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)
General Distribution (GD)									
People participating in general distributions	46,933	70,400	117,333	52,320	56,354	108,674	111.5%	80.0%	92.6%
Total participants	46,933	70,400	117,333	52,320	56,354	108,674	111.5%	80.0%	92.6%
Total beneficiaries	337,920	366,080	704,000	313,917	338,124	652,041	92.9%	92.4%	92.6%
Food-Assistance-for-Assets		1						1	
People participating in asset-creation activities	46,933	70,400	117,333	55,091	58,622	113,713	117.4%	83.3%	96.9%
Total participants	46,933	70,400	117,333	55,091	58,622	113,713	117.4%	83.3%	96.9%
Total beneficiaries	337,920	366,080	704,000	330,546	351,734	682,280	97.8%	96.1%	96.9%
HIV/TB: Care&Treatment							1	1	



Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
ART Clients receiving food assistance	3,250	3,250	6,500	-	-	-	-	-	-
Total participants	3,250	3,250	6,500	-	-	-	-	-	-
Total beneficiaries	3,250	3,250	6,500	-	-	-	-	-	-

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	t of Moderate A	cute Malnutriti	on						
Children (6-23 months)	60,200	60,200	120,400	11,463	11,463	22,926	19.0%	19.0%	19.0%
Children (24-59 months)	90,300	90,300	180,600	15,558	18,833	34,391	17.2%	20.9%	19.0%
Pregnant and lactating women (18 plus)	-	37,000	37,000	-	63,796	63,796	-	172.4%	172.4%
Total beneficiaries	150,500	187,500	338,000	27,021	94,092	121,113	18.0%	50.2%	35.8%
Nutrition: Prevention	n of Acute Malr	nutrition							
Children (6-23 months)	86,400	86,400	172,800	74,942	74,942	149,884	86.7%	86.7%	86.7%
Children (24-59 months)	129,600	129,600	259,200	117,216	107,610	224,826	90.4%	83.0%	86.7%
Pregnant and lactating women (18 plus)	-	113,000	113,000	-	84,415	84,415	-	74.7%	74.7%
Total beneficiaries	216,000	329,000	545,000	192,158	266,967	459,125	89.0%	81.1%	84.2%
Nutrition: stand-alor	ne Micronutrien	nt Supplementa	tion						
Children (6-23 months)	18,000	18,000	36,000	13,768	12,856	26,624	76.5%	71.4%	74.0%
Total beneficiaries	18,000	18,000	36,000	13,768	12,856	26,624	76.5%	71.4%	74.0%

Project Indicators

Outcome Indicators



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6-59 months and pregnant and	d lactating wom	en		
Proportion of target population who participate in an adequate number of distributions				
BSFP (6-59 CHILDREN), Project End Target : 2018.04, Base value : 2017.07, WFP programme monitoring, Latest Follow-up : 2017.12, WFP programme monitoring, BSFP	>66.00	0.00	-	92.00
Proportion of eligible population who participate in programme (coverage)				
BSFP (6-59 CHILDREN), Project End Target : 2018.04, Latest Follow-up: 2017.12, Secondary data, Desk based method	>70.00	-	-	92.00
MAM treatment recovery rate (%)				
TSFP (CHILDREN), Project End Target : 2018.04, HIS, Base value : 2015.05, Secondary data, HIS, Previous Follow-up : 2016.12, Secondary data, HIS, Latest Follow-up : 2017.12, Secondary data, HIS	>75.00	73.13	80.00	82.00
MAM treatment mortality rate (%)				
TSFP (CHILDREN), Project End Target : 2018.04, Routine HIS, Base value : 2015.05, Secondary data, HIS, Previous Follow-up : 2016.12, Secondary data, HIS, Latest Follow-up : 2017.12, Secondary data, HIS	<3.00	0.10	1.00	1.00
MAM treatment default rate (%)				
TSFP (CHILDREN), Project End Target : 2018.04, HIS, Base value : 2015.05, Secondary data, HIS, Previous Follow-up : 2016.12, Secondary data, HIS, Latest Follow-up : 2017.12, Secondary data, HIS	<15.00	15.94	14.00	12.00
MAM treatment non-response rate (%)				
TSFP (CHILDREN), Project End Target : 2018.04, HIS, Base value : 2015.05, Secondary data, HIS, Previous Follow-up : 2016.12, Secondary data, HIS, Latest Follow-up : 2017.12, Secondary data, HIS	<15.00	9.40	5.00	6.00
Proportion of eligible population who participate in programme (coverage)				
TSFP (CHILDREN), Project End Target : 2018.04, Base value : 2015.05, Secondary data, Desk based method, Previous Follow-up : 2016.12, Secondary data, Desk based method, Latest Follow-up : 2017.12, Secondary data, Desk based method	>50.00	27.67	19.00	55.20
MAM treatment recovery rate (%)				
TSFP (PLHIV), Project End Target: 2018.04, HIS	>75.00	-	-	-
MAM treatment default rate (%)				
TSFP (PLHIV), Project End Target: 2018.04	<15.00	-	-	
Stabilized or improved food consumption over assistance period for targeted households	s and/or individ	uals		
FCS: percentage of households with poor Food Consumption Score				
ARID COUNTIES AVERAGE, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	<8.00	8.00	8.70	
Diet Diversity Score				
ARID COUNTIES AVERAGE, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	>3.90	3.90	4.20	
	-0.90	5.50	4.20	



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
CSI (Food): Coping Strategy Index (average)				
ARID COUNTIES AVERAGE, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	<27.00	27.00	22.08	-
FCS: percentage of households with poor Food Consumption Score				
ARID COUNTIES FEMALE HEADED HOUSEHOLDS, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	<7.00	7.00	2.00	-
Diet Diversity Score				
ARID COUNTIES FEMALE HEADED HOUSEHOLDS, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	>3.60	3.60	4.22	-
CSI (Food): Coping Strategy Index (average)				
ARID COUNTIES FEMALE HEADED HOUSEHOLDS, Project End Target : 2018.04, FSOM , Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	<28.00	28.00	21.90	-
FCS: percentage of households with poor Food Consumption Score				
ARID COUNTIES MALE HEADED HOUSEHOLDS, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	<9.00	9.00	17.30	-
Diet Diversity Score				
ARID COUNTIES MALE HEADED HOUSEHOLDS, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	>4.10	4.10	4.20	-
CSI (Food): Coping Strategy Index (average)				
ARID COUNTIES MALE HEADED HOUSEHOLDS, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.05, WFP programme monitoring, FSOM	<26.00	26.00	22.31	-
SO3 Reduce risk and enable people, communities and countries to meet their own food a	and nutrition ne	eds		
Improved access to livelihood assets has contributed to enhanced resilience and reduce food-insecure communities and households	d risks from dis	aster and shoc	ks faced by tar	geted
FCS: percentage of households with poor Food Consumption Score				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM reports, Base value: 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up: 2017.12, WFP programme monitoring, FSOM	<9.00	9.00	6.60	19.80
FCS: percentage of households with borderline Food Consumption Score				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM reports, Base value: 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<14.00	14.00	33.30	18.50



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>4.10	4.10	5.05	4.72
CSI (Asset Depletion): Percentage of households implementing crisis and emergency coping strategies				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<58.00	58.00	47.00	62.40
CSI (Asset Depletion): Percentage of male-headed households implementing crisis and emergency coping strategies				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<54.00	54.00	48.80	64.40
CSI (Asset Depletion): Percentage of female-headed households implementing crisis and emergency coping strategies				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<67.00	67.00	42.70	57.10
CSI (Food): Coping Strategy Index (average)				
ARID COUNTIES AVERAGE FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<18.00	18.00	15.54	18.57
FCS: percentage of households with poor Food Consumption Score ARID COUNTIES FEMALE HEADED HOUSEHOLDS FOOD, Project End Target: 2018.04,	-			
FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<16.00	16.00	6.30	18.90
FCS: percentage of households with borderline Food Consumption Score				
ARID COUNTIES FEMALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<11.00	11.00	32.60	17.80
Diet Diversity Score				
ARID COUNTIES FEMALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>4.00	4.00	4.90	4.98



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
CSI (Food): Coping Strategy Index (average)				
ARID COUNTIES FEMALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<22.00	22.00	16.85	16.78
FCS: percentage of households with poor Food Consumption Score				
ARID COUNTIES MALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<6.00	6.00	6.70	20.20
FCS: percentage of households with borderline Food Consumption Score				
ARID COUNTIES MALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<15.00	15.00	33.30	18.80
Diet Diversity Score				
ARID COUNTIES MALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>4.20	4.20	5.10	4.62
CSI (Food): Coping Strategy Index (average)				
ARID COUNTIES MALE HEADED HOUSEHOLDS FOOD, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<17.00	17.00	15.00	19.27
CAS: percentage of communities with an increased Asset Score				
KENYA, Project End Target : 2018.04, ACOM report, Base value : 2016.08, WFP programme monitoring, ACOM, Latest Follow-up : 2017.11, WFP programme monitoring, ACOM	>80.00	49.00	-	35.20
FCS: percentage of households with poor Food Consumption Score SEMI -ARID COUNTIES MALE HEADED HOUSEHOLDS CASH, Project End Target: 2018.04, FSOM, Base value: 2014.12, WFP programme monitoring, FSOM, Previous Follow-up: 2016.12, WFP programme monitoring, FSOM, Latest Follow-up: 2017.12, WFP	_			
programme monitoring, FSOM	<5.00	5.00	9.60	12.40
FCS: percentage of households with borderline Food Consumption Score	_			
SEMI -ARID COUNTIES MALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<24.00	24.00	27.00	25.40
Diet Diversity Score				<u> </u>
SEMI -ARID COUNTIES MALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>4.10	4.10	4.78	4.55

WFP



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
CSI (Food): Coping Strategy Index (average)				
SEMI -ARID COUNTIES MALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<19.00	19.00	22.96	17.70
FCS: percentage of households with poor Food Consumption Score				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOm Reports, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<7.00	7.00	10.50	14.30
FCS: percentage of households with borderline Food Consumption Score				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOm reports, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<25.00	25.00	29.00	24.20
Diet Diversity Score				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>4.10	4.10	4.60	4.51
CSI (Asset Depletion): Percentage of households implementing crisis and emergency coping strategies				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOM, Base value . 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<53.00	53.00	57.10	74.10
CSI (Asset Depletion): Percentage of male-headed households implementing crisis and emergency coping strategies				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<50.00	50.00	56.00	74.00
CSI (Asset Depletion): Percentage of female-headed households implementing crisis and emergency coping strategies				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<59.00	59.00	58.60	74.20
CSI (Food): Coping Strategy Index (average)				
SEMI-ARID COUNTIES AVERAGE CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<20.00	20.00	22.69	18.16

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with poor Food Consumption Score				
SEMI-ARID COUNTIES FEMALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<10.00	10.00	11.80	18.40
FCS: percentage of households with borderline Food Consumption Score				
SEMI-ARID COUNTIES FEMALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<29.00	29.00	31.80	21.50
Diet Diversity Score				
SEMI-ARID COUNTIES FEMALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>4.10	4.10	4.31	4.36
CSI (Food): Coping Strategy Index (average)				
SEMI-ARID COUNTIES FEMALE HEADED HOUSEHOLDS CASH, Project End Target : 2018.04, FSOM, Base value : 2014.12, WFP programme monitoring, FSOM, Previous Follow-up : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	<23.00	23.00	22.33	19.18
Risk reduction capacity of countries, communities and institutions strengthened	1			
Proportion of targeted communities where there is evidence of improved capacity to manage climatic shocks and risks supported by WFP	_			
ARID COUNTIES AVERAGE, Project End Target: 2018.12	>60.00	-	-	-
SO4 Reduce undernutrition and break the intergenerational cycle of hunger				
Reduced undernutrition, including micronutrient deficiencies among children aged 6-59 children	months, pregna	nt and lactating	women, and s	chool-aged
Proportion of target population who participate in an adequate number of distributions				
ARID COUNTIES AVERAGE, Project End Target : 2018.04, wfp monitoring systems, Base value: 2016.12, WFP programme monitoring, wfp monitoring systems	>66.00	17.00	-	-
Proportion of eligible population who participate in programme (coverage)				
ARID COUNTIES AVERAGE, Project End Target: 2014.12	>70.00	-	-	-
Proportion of children who consume a minimum acceptable diet				
ARID COUNTIES AVERAGE, Project End Target : 2018.04, FSOM, Base value : 2016.12, WFP programme monitoring, FSOM, Latest Follow-up : 2017.12, WFP programme monitoring, FSOM	>3.60	5.20	-	0.50

Output Indicators

Output	Unit	Planned	Actual	% Actual vs. Planned
SO1: Nutrition: Prevention of Acute Malnutrition				

WFP



Output	Unit	Planned	Actual	% Actual vs. Planned
Number of health centres/sites assisted	centre/site	936	1,095	117.0%
Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counseling	individual	364,134	98,316	27.0%
Number of women exposed to nutrition messaging supported by WFP	individual	254,894	254,894	100.0%
SO1: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of health centres/sites assisted	centre/site	804	1,074	133.6%
Number of men exposed to nutrition messaging supported by WFP	individual	17,100	8,357	48.9%
Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counseling	individual	119,700	56,141	46.9%
Number of women exposed to nutrition messaging supported by WFP	individual	153,900	84,645	55.0%
SO3: Food-Assistance-for-Assets				
Amount of premium paid	US\$	147,267	111,959	76.0%
Hectares (ha) of cultivated land treated with appropriate rainwater harvesting and management technologies	На	10,129	6,331	62.5%
Hectares (ha) of degraded land reclaimed using soil & water conservation structures	На	1,747	1,613	92.3%
Hectares (ha) of land developed for pasture and/or fodder production	На	1,726	1,238	71.7%
Hectares of small-scale irrigation system developed	На	3,764	1,790	47.6%
Kilometres (km) of feeder roads built and maintained	Km	393	215	54.7%
Length of primary irrigation canals improved (e.g. through lining)	Km	53	8	14.5%
Number of Farmers trained on basic nutrition practices and gender mainstreaming	individual	9,274	4,052	43.7%
Number of bales of hay produced	unit	194,767	156,642	80.4%
Number of community members (farmers) trained in apiculture	individual	1,674	907	54.2%
Number of community members (farmers) trained in crop insurance	individual	6,100	1,006	16.5%
Number of community members (farmers) trained in financial literature	individual	12,387	2,667	21.5%
Number of community members (farmers) trained in rainwater harvesting and management techniques	individual	50,171	27,073	54.0%
Number of community members (farmers) trained in tree nursery establishment and management	individual	10,624	7,356	69.2%
Number of community members trained in asset management and sustainability	individual	22,903	6,557	28.6%
Number of farm ponds constructed for micro irrigation and lined (250 cbmt)	water pond	554	351	63.4%
Number of farmer groups practicing Village Savings and Loans Associations (VSLA)	farmer group	856	899	105.0%
Number of farmers accessing risk management tools (e.g insurance) through IFA and/or cash	farmer	5,000	4,782	95.6%
Number of individual farmers trained in good agronomic practices (GAP)	individual	32,657	15,556	47.6%
Number of people insured	individual	30,000	28,692	95.6%
Number of staff trained in crop insurance	individual	58	24	41.4%
Number of staff trained in gender and protection	individual	401	359	89.5%



Output	Unit	Planned	Actual	% Actual vs. Planned
Number of staff trained in nutrition-sensitive programming	individual	901	822	91.2%
Number of staff trained in project management (management & organisation)	individual	744	446	59.9%
Number of staff trained in rainwater harvesting and management techniques	individual	3,331	2,930	88.0%
Number of technical assistance activities provided	activity	856	497	58.1%
Number of tree seedlings planted for agroforestry purposes	tree seedling	1,798,489	746,829	41.5%
Number of tree seedlings propagated for planting or sale	tree seedling	2,611,138	1,254,913	48.1%
Number of water reservoirs built/rehabilitated	unit	524	319	60.9%
Quantity of agricultural inputs (seeds, fertilizer) distributed	Mt	8,950	4,320	48.3%
Quantity of agricultural tools distributed	item	17,576	11,789	67.1%
Quantity of bee keeping equipment items distributed	item	981	799	81.4%
Quantity of irrigation equipment items distributed	item	137	69	50.4%
Quantity of survey equipment items distributed	item	139	71	51.1%

Gender Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>0.00	0.00	0.00	0.00
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	>0.00	0.00	0.00	-
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>0.00	0.00	0.00	0.00
Proportion of households where females make decisions over the use of cash, voucher or food				
ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>90.00	90.00	82.00	82.60
Proportion of households where females make decisions over the use of cash, voucher or food				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	>90.00	98.00	75.00	-



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				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>90.00	94.00	55.00	71.60
Proportion of households where males make decisions over the use of cash, voucher or food				
ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	<10.00	10.00	18.00	17.40
Proportion of households where males make decisions over the use of cash, voucher or food				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	<10.00	2.00	24.00	-
Proportion of households where males make decisions over the use of cash, voucher or food				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	<10.00	6.00	45.00	28.40
Proportion of women beneficiaries in leadership positions of project management committees				
ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>50.00	53.00	51.00	47.00
Proportion of women beneficiaries in leadership positions of project management committees				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	>50.00	57.00	59.00	-
Proportion of women beneficiaries in leadership positions of project management committees				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12	>50.00	66.00	67.00	61.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>60.00	100.00	100.00	100.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	>60.00	100.00	100.00	-
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>60.00	100.00	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, where people can complain)				
ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>70.00	58.00	78.00	75.80
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	>70.00	65.00	73.00	-
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>70.00	55.00	90.00	57.30
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>90.00	93.00	97.00	97.23
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
ARID, General Distribution (GD), Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.05	>90.00	100.00	99.00	-
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
SEMI-ARID, Food-Assistance-for-Assets, Project End Target : 2018.04, Base value : 2015.05, Previous Follow-up : 2016.12, Latest Follow-up : 2017.12	>90.00	96.00	100.00	94.05

Partnership Indicators

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)		
ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Latest Follow-up: 2017.12	>39,500.00	580,000.00
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
ARID, General Distribution (GD), Project End Target: 2018.04	>41,000.00	-
Amount of complementary funds provided to the project by partners (including NGOs, civil society, private sector organizations, international financial institutions and regional development banks)		
SEMI-ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Latest Follow-up: 2017.12	>67,000.00	270,000.00
Number of partner organizations that provide complementary inputs and services		
ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Latest Follow-up: 2017.12	=10.00	13.00
Number of partner organizations that provide complementary inputs and services		
ARID, General Distribution (GD), Project End Target: 2018.04	=9.00	-

Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
SEMI-ARID, Food-Assistance-for-Assets, Project End Target: 2018.04, Latest Follow-up: 2017.12	=8.00	5.00
Proportion of project activities implemented with the engagement of complementary partners		
KENYA, General Distribution (GD), Project End Target: 2018.04, Latest Follow-up: 2017.12	=100.00	100.00

Resource Inputs from Donors

Resource Inputs from Donors

			Purchased in 2017 (mt)		
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash	
Canada	CAN-C-00541-08	Corn Soya Blend	-	2,125	
Canada	CAN-C-00546-23	Maize	-	1,715	
Denmark	DEN-C-00204-06	Corn Soya Blend	-	803	
European Commission	EEC-C-00657-01	Corn Soya Blend	-	2,171	
European Commission	EEC-C-00657-01	Ready To Use Supplementary Food	-	303	
France	FRA-C-00279-01	Corn Soya Blend	-	372	
Germany	GER-C-00516-01	Maize	-	861	
Germany	GER-C-00693-01	Corn Soya Blend	-	2,555	
Japan	JPN-C-00574-01	Corn Soya Blend	-	327	
Kenya	KEN-C-00030-01	Maize	540	-	
MULTILATERAL	MULTILATERAL	Corn Soya Blend	-	1,567	
MULTILATERAL	MULTILATERAL	Vegetable Oil	-	148	
Sweden	SWE-C-00182-15	Sorghum/Millet	-	5,334	
Sweden	SWE-C-00182-15	Split Peas	-	1,404	
UN CERF	001-C-01581-01	Ready To Use Supplementary Food	-	1,068	
USA	USA-C-01321-01	Sorghum/Millet	4,150	-	
USA	USA-C-01321-01	Split Peas	720	-	
USA	USA-C-01321-01	Vegetable Oil	170	-	
USA	USA-C-01332-01	Corn Soya Blend	-	5,004	
USA	USA-C-01384-01	Sorghum/Millet	6,720	-	
USA	USA-C-01384-01	Split Peas	1,290	-	
USA	USA-C-01384-01	Vegetable Oil	480	-	
USA	USA-C-01385-01	Sorghum/Millet	5,110		
USA	USA-C-01385-01	Split Peas	1,050	-	



			Purchased in 2017 (mt)	
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash
USA	USA-C-01385-01	Vegetable Oil	300	-
		Total	20,530	25,757