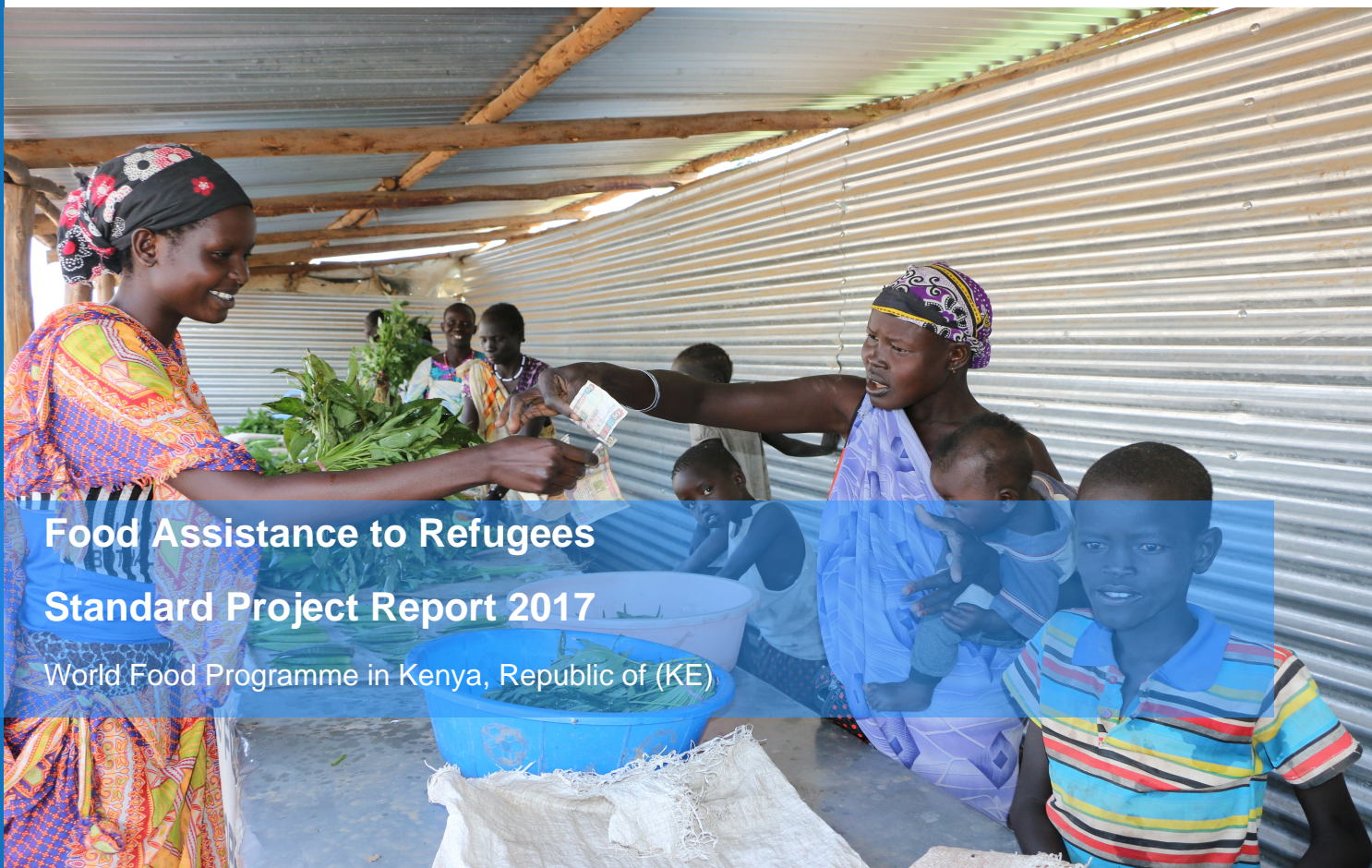


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Contact Info
Paul Turnbull
WFP.Kenya@wfp.org

Country Director
Annalisa Conte

Further Information
<http://www.wfp.org/countries>
SPR Reading Guidance



Food Assistance to Refugees
Standard Project Report 2017

World Food Programme in Kenya, Republic of (KE)



World Food Programme

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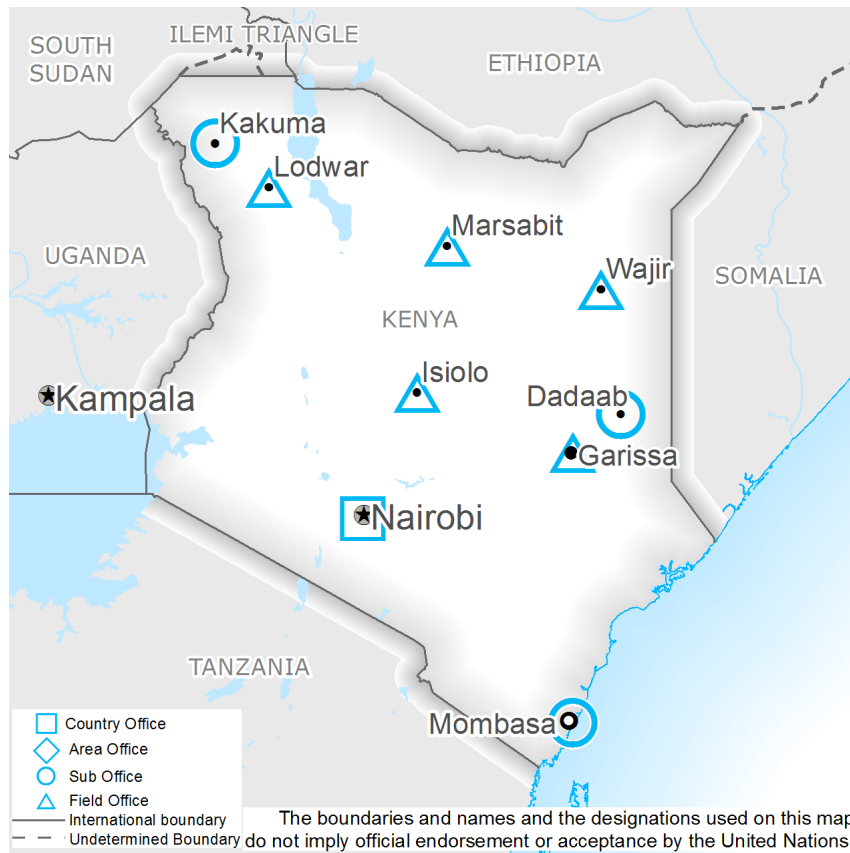
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Country Context and WFP Objectives



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 farmers 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 bilateral 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.

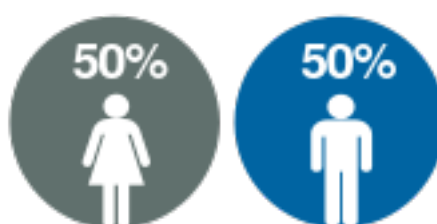
WFP Kenya took concrete actions to decrease the environmental footprint of its operations and increase resource efficiency through a series of waste-saving actions, consistent with the international standard ISO 14001, that specifies requirements for an effective environmental management system. An environmental 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.



Annual Country Beneficiaries

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




Annual Food Distribution in Country (mt)

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



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 protect livelihoods in emergencies

Outcome 1: Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women

Activity: Treatment of Moderate Acute Malnutrition

WFP implemented a nutrition-specific activity targeting children aged 6-59 months, as well as pregnant and lactating women (PLW) suffering from moderate acute malnutrition (MAM) and admitted into health centres in the refugee camps in Kenya. The camps included the Dadaab refugee complex (Dagahaley, Ifo, Ifo2, Hagadera and Kambiios) in the northeast, and Kakuma and Kalobeyei in the northwest. Each targeted child received 100 grams of ready-to-use supplementary foods (RUSF) per day. The women received 275 grams of Super Cereal premixed with vegetable oil per person per day. The admission criteria were based on anthropometric measurements i.e., weight-for-height for children and mid-upper arm circumference for the women. The beneficiaries or their caretakers also received individual nutrition counselling and messages to understand the different causes of malnutrition and what they needed to do to recover faster and avoid recurrence.

The partners included international non-governmental organizations - International Rescue Committee (IRC), Islamic Relief Kenya, and Médecins Sans Frontières (MSF) International - and the Kenya Red Cross Society. The partners were responsible for: identifying beneficiaries, screening, distributing the specialized nutritious foods, referring, and passing on nutrition messages and counselling. These partnerships were part of a tripartite agreement with WFP and the Office of the United Nations High Commissioner of Refugees (UNHCR). UNHCR and the partners covered the running costs of the health centres, so apart from the provision of the food, WFP was not required to contribute financially to most of the nutrition partners.

Outcome 2: Stabilized or improved food consumption over assistance period for targeted households

Activity: General Distributions (GD)

All registered refugees and asylum seekers living in the camps were entitled to food assistance through GD. WFP and UNHCR continued using the biometric fingerprinting system to identify eligible food collectors, including the newly arrived refugees. The refugees received a hybrid of in-kind food and restricted cash-based transfers (CBT), with the aim of meeting the minimum dietary requirements of 2,100 kilocalories per person per day.

In Dadaab and Kakuma, WFP reduced the in-kind food rations from January to March and from September to December because of insufficient resources. The in-kind food transfers included cereals, pulses, Super Cereal and vegetable oil. The CBT (value voucher) covered 30 percent of the cereals entitlement (USD 0.09 per person per day). When whole wheat grain was distributed, WFP provided additional cash to cover the cost of milling.

WFP partnered with international NGOs - CARE International, Norwegian Refugee Council (NRC), and World Vision International - which had a long-standing presence and relationship with WFP in the camps. The partners were selected in 2015 through a competitive bidding process, based on their ability to provide complementary funding and their quoted cost rate per ton. To enhance operational efficiency, WFP introduced: (i) monthly food distributions, instead of fortnightly distributions (this became possible due to the introduction of CBT, which reduced the amount of food to be collected and carried); and (ii) a rotational system of distributions whereby some camps were served at the beginning of the month and others from the middle of month, which reduced costs. UNHCR provided complementary inputs such as utensils, firewood, health, water and sanitation services. The Refugee Affairs Secretariat was the main government counterpart and oversaw registration of refugees and was responsible for security and camp management.

Kalobeyei settlement was established by UNHCR together with the County Government of Turkana in 2016. The settlement seeks to decongest Kakuma camp and be an “integrated settlement”, aiming to provide economic benefits and services to host and refugee communities alike, including farming, schools, hospitals, and

marketplaces. In Kalobeyei, WFP provided 93 percent of the food assistance in form of CBT as part of the wider market development support. The remaining 7 percent was given as Super Cereal to ensure access to micronutrients. In addition, WFP, UNHCR, FAO and UNICEF began implementing agriculture, livelihoods, market support, health and education activities. WFP provided farms inputs, tools and trainings to the refugees to establish kitchen gardens. Support was also given to the local food producers and traders to improve their capacity to engage competitively in existing and emerging market opportunities.

In 2016, WFP started a retail engagement initiative in Kakuma and Kalobeyei. The purpose was to increase the purchasing power of refugees and the immediate host community by addressing supply chain inefficiencies that made the local prices of both dry and fresh foods very high.

In line with the Government's requirements, WFP adopted restrictions on the delivery and utilization of the cash for refugees. WFP contracted a leading telecommunications firm to transfer the value voucher to refugees through the mobile telephones. The refugees were obliged to purchase food only from WFP-contracted traders, including grocers and vendors of fresh foods. In 2017, the money transfer platform stabilised, and only few issues were reported, mainly related to loss of SIM cards or forgotten PINs.

Strategic objective 2: Support and restore food security and nutrition and establish or rebuild lives in fragile settings and emergencies

Outcome 3: Stabilized or reduced undernutrition, including micronutrient deficiencies among children aged 6–59 months, pregnant and lactating women, and school-aged children.

Activity: Prevention of acute malnutrition

Through this activity, WFP sought to prevent both acute malnutrition and stunting, ensuring that children received the correct nutrition during the first 1,000 days from conception to their second birthday. Pregnant women were included into the activity upon official confirmation of pregnancy to support the body's increased nutritional needs, for both the mother and the unborn child. Lactating women received specialized nutritious foods (Super Cereal) and vegetable oil until their children reached six months of age.

At six months of age, the children received 200 grams of Super Cereal Plus per day until their second birthday, upon which they exited the activity. This ensured they had access to the good nutrition required to support the growth and development during this crucial period (from 6 to 23 months). In Kakuma, IRC implemented the activity through the health centres, while in Dadaab, it was distributed as part of the general distribution, because insecurity limited the access to the health centres.

All nutrition partners implementing nutrition interventions (treatment and prevention) included nutrition messaging and counselling as part of their activities at the health centres. In 2017, WFP increased the responsibilities of Film Aid International to include nutrition messaging for the entire refugee community as part of the comprehensive strategy to improve nutrition outcomes through messaging and awareness raising. To reach as many women and men as possible, Film Aid used community radios during the day and at night, and visited community centres and water collection points.

Patients admitted in hospitals and caretakers of children with severe acute malnutrition admitted in the stabilization centres received cooked meals of cereals, pulses, Super Cereal, and vegetable oil.

WFP assesses the performance and capacity of all its partners each year, with evaluations conducted jointly with UNHCR and the respective partner to check strengths and capacity gaps that influenced achievement of results. Issues assessed included staffing adequacy, accounting for resources, management of losses during distributions, monitoring and reporting. As a result, in 2018, WFP will change the distribution modality for the prevention of acute malnutrition in Kakuma from being health centre-based to being part of the monthly general distributions, which is the model used in Dadaab. A cost-benefit analysis indicated that there was no value to incur additional costs of using health centres for distribution of food for prevention of acute malnutrition.

Activity: HIV and AIDS: Care and treatment

WFP provided Super Cereal and vegetable oil to people living with HIV and AIDS, tuberculosis clients and people suffering from chronic illnesses. This was intended to encourage them to adhere to treatment and to meet their additional energy and protein requirements. The individual take-home rations included Super Cereal and vegetable

oil, based on the National Guidelines on nutrition and HIV. Food distributions to beneficiaries was at the treatment sites as part of comprehensive health care.

Outcome 2: Improved access to assets and/or basic services, including community and market infrastructure.

Activity: School meals programme

Refugee children attending schools in Dadaab and Kakuma received mid-morning porridge for each day they attended school to reduce short-term hunger and help them concentrate during lessons. In Dadaab, the porridge was made from Super Cereal and vegetable oil. CARE International, Islamic Relief Kenya and Lutheran World Federation were the partners. In Kakuma, the porridge was made from locally grown and milled cereals fortified with micronutrients using small-scale mill dosifiers to make corn-sorghum flour. The flour was also used to bake bread rolls. This approach in Kakuma started in 2015 and aimed to stimulate farming in Turkana and its environs, and enhance livelihood opportunities for refugees and host community members. Most schools separated feeding areas for adolescent boys and girls because of cultural sensitivity of mixing the genders in some of the refugee communities.

In Kalobeyei settlement, the school meals were funded and managed as part of the national school meals programme (reported under CP 200680).

Activity: Food Assistance for Training

WFP provided hot lunches to young women and men from refugee and host communities at vocational training centres in Dadaab and Kakuma so that trainees did not walk the long distances home for lunch and miss out on class time. They pursued a wide range of courses such as masonry, car mechanics, carpentry, computer applications, dressmaking, journalism, plumbing, tailoring and woodwork. The partners - NRC, the Salesians of Don Bosco, and St Clare of Assisi - hoped to improve the employability or self-reliance opportunities in Kenya or in the refugees' countries of origin once they return.

Outcome 1: Adequate food consumption reached or maintained over assistance period for targeted households

Activity: Food Assistance for Assets (FFA)

WFP implemented FFA projects for targeted households from host communities living within a radius of 50 km around the camps. The purpose was to improve food security and reduce tensions between hosts and refugees. Each participant contributed 12 days of labour per month to create productive livelihood assets and, in turn, received in-kind food transfers (cereals, pulses and oil) for five family members. Communities selected the most food insecure amongst them, among the ones also willing to participate to the project activities.

WFP partnered with two governmental agencies - Garissa Rehabilitation Programme and Turkana Rehabilitation Programme - to coordinate, target and register beneficiaries, and implement projects. They supported the communities in selection of projects, supervised implementation, and distributed the food. A community-based participatory planning approach was used to help host communities reduce risks associated with natural hazards, state their needs and prioritise activities that would make their livelihoods more resilient, particularly to drought. This led to preparation of community action plans. During the consultations, men and women were put in different groups, in order to both to make it easier for the two groups to express their ideas, as well as to better analyse the different needs and preferences resulting from the discussions. The activities promoted included spate irrigation for crop farming, soil and water conservation measures, bee keeping, tree seedlings for agroforestry, fodder production, and water pans to harvest rainwater.

Results

Strategic Objective: Save lives and protect livelihoods in emergency (SO1)

Outcome 1: Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women

Activity: Treatment of moderate acute malnutrition (MAM)

To measure the performance of the treatment of MAM amongst children aged 6-59 months, WFP Kenya used four clinical outcome indicators: recovery, defaulter, mortality and non-response rates. Targets were achieved and surpassed, and there was a general improvement in performance since the operation started in 2015. MAM treatment in the camps has been ongoing for many years, and the specialized nutritious foods required to treat both the children and the PLW were sufficient all year through. There was also an enhanced community linkages system, which ensured that defaulters were immediately traced, counselled and readmitted into the activity. In Kakuma however, data reporting errors - where some clients were wrongly classified as "non-respondents" instead of "recovered" - affected the recovery and no-response rates during the first half of 2017. This was later corrected when the staff of the cooperating partner responsible for the measurements was re-trained.

The number of children treated surpassed the planned figures. Some of the plausible reasons may include: (i) planning figures were estimated using nutrition surveys data, which are carried out annually, while the incidence rate can change over the year; (ii) the surveys only included refugees yet the services in the health centres are also used by the host communities; and (iii) possible data reporting errors. In 2018, WFP and UNHCR plan to review the current data-capture tools and processes to improve data accuracy.

To see 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, impact is diminished if coverage is low. In the refugee camps, coverage was measured using the Semi Quantitative Evaluation of Access and Coverage (SQUEAC) method but it was last conducted in 2015. However, WFP plans to undertake another SQUEAC for the Country Strategic Programme (CSP). WFP, UNHCR and partners continued to address barriers to service access and uptake identified previously; for example, opening a new clinic in Kakuma to decongest the existing centres and continuous on-job training for accurate reporting. Some health centres in Dadaab were closed as part of the camp consolidation process.

Pregnant and lactating women (PLW) and caretakers of children received nutrition education and counselling during the enrolment and follow up visits, in addition to growth monitoring. The number of both women and men exposed to nutrition messages increased in 2017 compared to 2016. Still, significantly more women were reached compared to men, in both treatment and prevention. This can be attributed to the fact that women are the primary caretakers of children in the refugee communities, as well as the activity specifically targeting women as beneficiaries. The beneficiaries received information on how to use the specialized nutritious products, the benefits of breastfeeding, the need to diversify diets for young children and the importance of washing hands and before preparing and serving food.

Outcome 2: Stabilized or improved food consumption over assistance period for targeted households

Activity: General Distributions

WFP collected and analysed three corporate indicators to measure food security: 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, while DDS is a score defined by the average number of different foods or food groups eaten in a week by a household, out a maximum of seven groups, without regard to the frequency of consumption. The target was to reduce the proportion of households with poor FCS and to increase DDS, for which a score of 6 is considered "good" while 4.5 and below is considered "poor". The CSI measures the choices that households make and the severity of those choices when faced with food deficits, being therefore a direct measure of vulnerability. For CSI 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. The prevalence of food insecurity worsened in 2017 in both Dadaab and Kakuma compared to the two last years, with the deterioration more pronounced in Dadaab, where those found to be food insecure increased from 12 percent to 45 percent. In Kakuma, the increase was from 40 percent to 53 percent. Faced with critical shortage of resources, WFP was compelled to reduce the amount of cereals given to refugees from October to December, only six months after resuming full

rations, as well being unable to distribute Super Cereal as part of the general food rations from September to December.

In Dadaab, the proportion of interviewed households with poor FCS increased, and the diversity diet reduced. This means that the refugees did not consume many types of foods frequently and the quality of the diet was low. The coping capacity worsened as denoted by a higher CSI average. Most households (68 percent, up from 50 percent in 2016) were using stress coping strategies such as borrowing or purchasing food on credit, borrowing money or sending some family members to eat elsewhere. Some other households (8 percent in Dadaab and 22 percent in Kakuma, among those interviewed) coped by begging, which is an emergency coping strategy.

2017 was a very uncertain year for refugees and humanitarian actors in Dadaab, as the Government had signaled the intention to close all camps by May. Anecdotal reports suggest that this played a role in increasing refugees' vulnerability, because: (i) partners reduced their support or investments as the focus was on repatriation; and (ii) some refugees disposed of their assets by selling them in anticipation of the expected closure of the camps.

In Kakuma, the proportion of households with a poor FCS as well as the diversity of their diets and the coping strategies remained stable, but they were still worse than those in Dadaab. The proportion of those who could afford to purchase a minimum acceptable healthy food basket (maize, beans, milk, vegetable oil, sugar, onions and tomatoes) remained low (13 percent) but at the same level as 2016. Refugees in Kalobeyei had better food security outcomes than those in Kakuma.

By December 2017, WFP had supported interested retailers to enter into agreements with three wholesalers of their choice, through the Retail Engagement Initiative (REI). This initiative contributed to: (i) increase the retailers buying power, (ii) ensure constant supply of foods and price reductions up to 10 percent, compared to the November 2016 baseline; (iii) link wholesalers and retailers to manufacturers and distributors of basic foods for better purchasing prices; (iv) train 196 traders (of which 42 percent were female) on financial literacy, business skills and food safety; (v) build 16 new shops for Kalobeyei host community traders; and (vi) link traders with the County Government of Turkana to receive credit facilities to expand their businesses. The aim is that in the long-run these efforts will improve the food security of refugees and their hosts.

The number of refugees fed changed throughout the year. Voluntary repatriations to Somalia continued to reduce the population in Dadaab (34,000), but the new arrivals, mostly from South Sudan (23,000), increased the population in Kakuma and Kalobeyei. As the number of refugees in the Dadaab complex continued to dwindle due to repatriation, the Government and UNHCR began consolidating the camps, with Kambioos being closed in April 2017. To achieve higher operational efficiency, more camps will be consolidated in the future.

Mobile-money transfer systems contributed to add efficiencies to the operation in recent years. The platform provided WFP with real-time data for managing transfers to beneficiaries and payments to food traders. In addition, WFP and the financial services provider began working on a multi-agency platform, which would enable cross-sectoral engagement and result in effective inter-agency cash-based transfers for refugees.

Outcome 2: Improved access to assets and/or basic services, including community and market infrastructure.

Activity: School meals

Changes in enrolment over time can represent a good estimation of the effectiveness of school meals programmes in attracting children to school. These changes demonstrate that when a meal is provided, parents are more likely to send their children to school, as well as to keep them in school. In Dadaab, the percentage change in enrolment - which is measured by the absolute official number of girls and boys registered at the beginning of the school year in WFP-assisted schools, regardless of their age - continued to be negative from one year to the next. The ongoing voluntary repatriation of Somali refugees has seen a steady decrease in the population in the camps, which could have contributed to this decrease. Furthermore, the uncertainty about the future of the Dadaab camps meant that some parents stopped enrolling their children in the schools. The opposite was the case of Kakuma, where most of the newly arrived refugees were school-age children, which contributed to increase the number of enrolled children. In addition, in Kalobeyei, where most of the new arrivals were settled, UNHCR opened new schools that were supported under the national school meals programme, and therefore reported under the Country Programme (CP 200680).

Activity: Food Assistance for Training

Partner reports indicated that, upon completion, most of those who had graduated between 2015 and 2017 in Dadaab received start-up kits (92 percent) while others received start-up capital (84 percent). Of these, about 47 percent were actively engaged in income-generating activities by the end of 2017. In Kakuma, most of the graduates were employed by various agencies in the camps while others were self-employed. Discussions with graduates showed that the acquired skills and knowledge contributed to increase their incomes and enhance their self-reliance.

Strategic Objective 2: Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies

Outcome 3: Stabilized or reduced undernutrition, including micronutrient deficiencies among children aged 6–59 months, pregnant and lactating women, and school-aged children.

Activity: Prevention of acute malnutrition

To measure the performance of the prevention of acute malnutrition amongst children aged 6-23 months in the camps, WFP used two indicators: participation (adherence) and coverage. The participation indicator calculates the number of specialized nutritious food distributions to which each child (or the child's parent on his or her behalf) participated, compared to the plan. In Kakuma, participation was low. There were no stocks of Super Cereal Plus in April and May in Kakuma and Kalobeyei due to insufficient stocks available for purchase at WFP's Global Commodity Management Facility in Mombasa and transport delays from the port, since large volumes of food for different countries in the region were being dispatched at the same time, in advance of Kenya's elections. However, coverage - the proportion of eligible children who received the foods against the population projection of the UNHCR database - was high.

WFP worked with partners to help women and caretakers of children to understand the different causes of malnutrition and ways to prevent and mitigate them. Film Aid international broadcasted the messages to refugees on how they can use the cash received to purchase a diverse range of nutritious foods to improve the health of their families. Other messages included optimal Maternal, Infant and Young Child nutrition (MIYCN), appropriate complementary feeding for young children and proper nutrition during pregnancy. Radio and mass campaigns were the common media used and messages were translated to the local dialects of the refugees.

WFP partners initiated family dialogues to encourage couples, male and female caregivers, youth, and other influential people to discuss nutrition matters in their communities. The dialogues were held every month in Dadaab and quarterly in Kakuma, with a focus on topics such as maternal and child nutrition. In Kakuma, father support groups were formed to empower men to help their families to make the right food choices and act as change agents to influence other men in the community.

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 Food Security Outcome Monitoring (FSOM) and represents all assessed livelihood zones in Kenya but for the refugee camps the sample size was too small to disaggregate by location. Nevertheless, among the populations for which MAD was measured, the children consuming meals for an acceptable minimum diet were way below the target.

Outcome 1: Adequate food consumption reached or maintained over assistance period for targeted households.

Activity: Food Assistance for Assets (FFA)

In Kenya, food security data was collected and analysed by livelihood zones. Dadaab complex is located in the grasslands zone (Garissa County), while Kakuma is in the north-western pastoral zone (Turkana County). Therefore, the reported food security data went beyond the 50-km radius covered by FFA host community activities under this PRRO for refugees, and also covered areas under PRRO 200736.

The food security situation for beneficiaries, as showed by the poor and borderline FCS, CSI and CARI registered, generally worsened in December 2017 in both livelihood zones, even though dietary diversity improved slightly. In 2017, drought conditions intensified in arid lands, following poor performances of 2-3 consecutive rainfall seasons. The rainwater harvesting structures, such as water pans built through FFA, did not recharge fully and the irrigation schemes did not have adequate water because of low water levels in the rivers. Prices of food increased because of scarcity and, in the case of Turkana, the situation was exacerbated by the collapse of the Kainuk bridge on the road

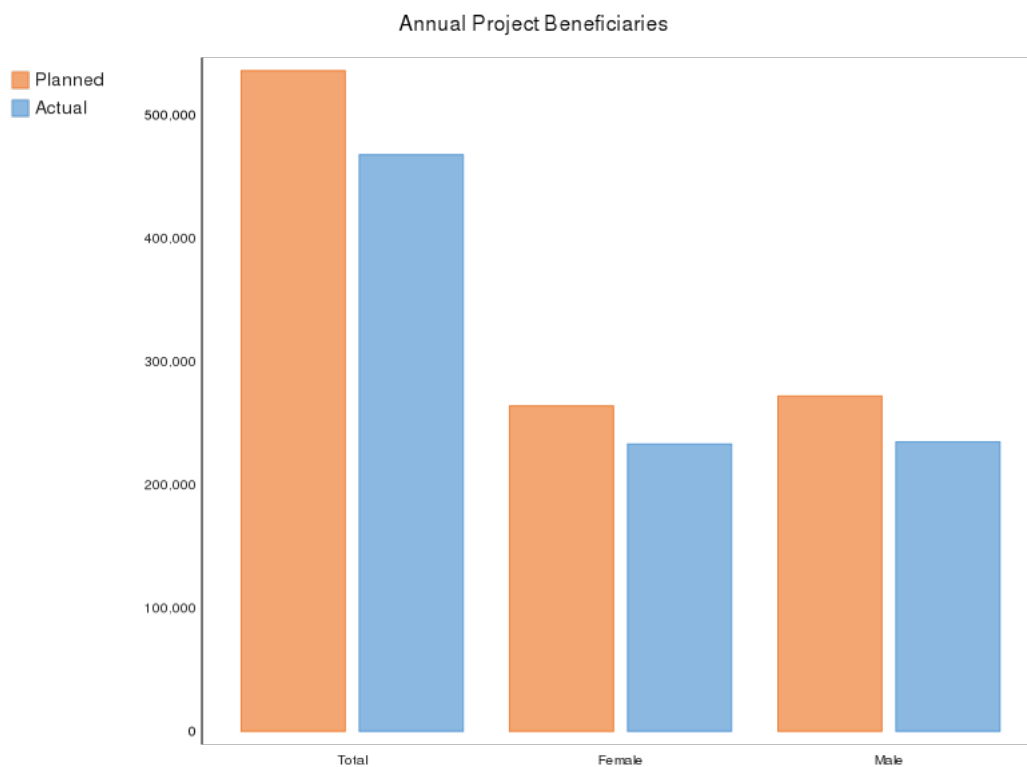
that connects the county with the farming-rich areas of the Rift Valley. To further strengthen the resilience of FFA activities to the risk of water scarcity, WFP will continue exploring ways to scale-up livelihoods diversification, farm pond technology, integrate micro-insurance services, increase holding capacity of water holding assets through mechanization, and improve efficiency through reduced evaporation.

Because of limited resources, for several months WFP could not distribute food at planned levels for FFA activities for the host community. Discussions with community members revealed that, even when food was distributed, it was shared with non-beneficiary households, given the communal nature of pastoralist communities. Monitoring observations showed that those living near the refugee camps were better off than those living far off into the hinterland, since the refugees offered a market for firewood, charcoal and surplus farm (crop or livestock) production.

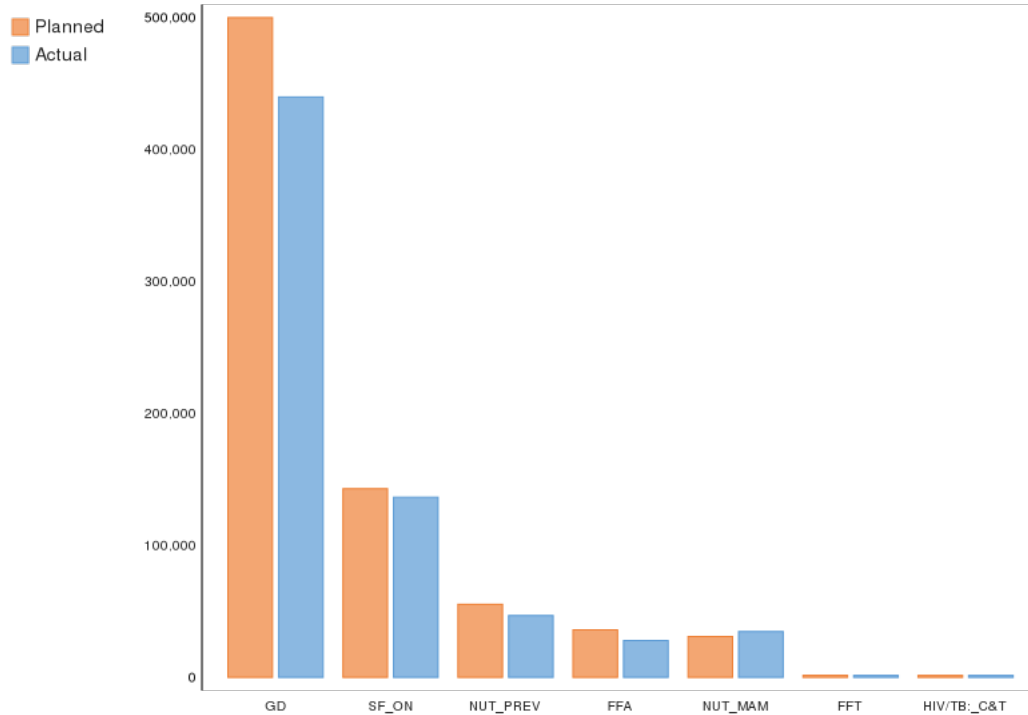
The number of participating households in FFA activities was particularly low among host communities in Garissa, since 6 out of 23 communities could not implement their projects because of community and clan-based tensions. Overall, achievement of project outputs was also affected by the intense drought conditions. Nevertheless, assets created contributed to better food access through farming in irrigated land, increased fodder for livestock and increased income through sale of honey. Other important benefits of FFA, particularly in Turkana, were the knowledge and skills that participants gained, along with strengthened community social capital.

Overall food assistance provided

The overall quantity of food distributed through this PRRO was below 70 percent of the planned because of food ration cuts for the GD, low FFA distributions, and fewer refugees than initially planned. In June, WFP did a budget revision to adjust downwards the beneficiary planning figures.

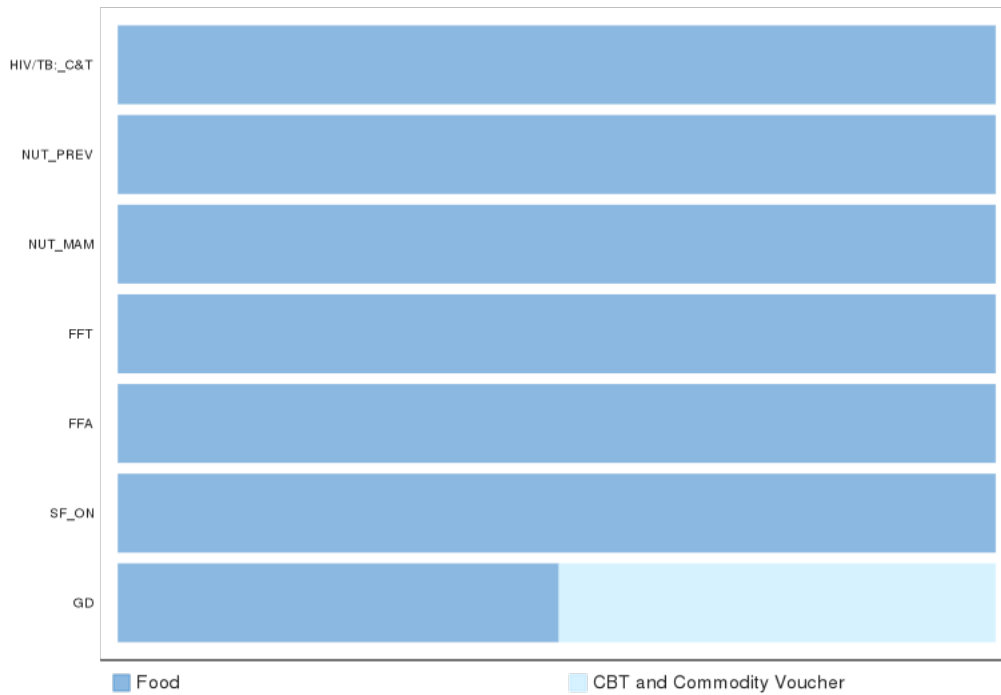


Annual Project Beneficiaries by Activity



GD: General Distribution (GD)
 SF_ON: School Feeding (on-site)
 NUT_PREV: Nutrition: Prevention of Acute Malnutrition
 FFA: Food-Assistance-for-Assets
 NUT_MAM: Nutrition: Treatment of Moderate Acute Malnutrition
 FFT: Food-Assistance-for-Training
 HIV/TB: _C&T: HIV/TB: Care&Treatment

Modality of Transfer by Activity



GD: General Distribution (GD)
 SF_ON: School Feeding (on-site)
 FFA: Food-Assistance-for-Assets
 FFT: Food-Assistance-for-Training
 NUT_MAM: Nutrition: Treatment of Moderate Acute Malnutrition
 NUT_PREV: Nutrition: Prevention of Acute Malnutrition
 HIV/TB: _C&T: HIV/TB: Care&Treatment



Annual Project Food Distribution

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Beans	1,035	585	56.5%
Corn Sorghum Flour	1,690	165	9.8%
Corn Soya Blend	9,927	7,000	70.5%
Dried Fruits	310	-	-
Iodised Salt	864	4	0.5%
Maize	7,008	5,602	79.9%
Maize Meal	1,191	118	9.9%
Ready To Use Supplementary Food	282	355	126.0%
Rice	1,191	-	-
Sorghum Flour	-	135	-
Sorghum/Millet	11,788	21,926	186.0%
Split Lentils	-	0	-
Split Peas	9,319	6,269	67.3%
Sugar	220	55	25.1%
Vegetable Oil	6,426	4,705	73.2%
Wheat	-	5,513	-
Wheat Flour	25,880	19	0.1%
Total	77,131	52,452	68.0%



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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned
Cash	21,915,000	18,561,878	84.7%
Total	21,915,000	18,561,878	84.7%

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.

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.

Food Security Outcome Monitoring (FSOM) was systematically conducted thrice a year (May, September and December) for both GD and FFA. May and December marked the usual end of the rainy seasons while September was the peak of the lean season in Kenya. In each round, 10 clusters were randomly selected from each sub-camp, reaching 1,410 households altogether. The same clusters have been visited since 2012, when FSOM was introduced. The Kalobeyei settlement was included in FSOM for the first time during the September 2017 round.

In 2017, WFP strengthened the FSOM data collection by incorporating qualitative data collected through focus group discussions with refugees and key informants such as traders and refugee leaders in Kakuma. This provided depth and detail of the quantitative data collected. A limitation was that the current random sampling methodology does not guarantee that equal number of male-headed and female-headed households are sampled to allow for a comparative analysis of results based on sex of household head. This will be corrected in 2018.

FFA sites were monitored to check progress of the projects, assess participation and project quality. For the nutrition interventions, performance indicators were generated from the UNHCR-managed Health Information System (HIS). Once cooperating partners entered data, the system automatically calculated recovery, death, defaulter, non-response and referral rates.

WFP and cooperating partners staff conducted activity implementation monitoring during each food distribution cycle. They did spot checks at the general food distribution centres, schools and health facilities. They checked if correct entitlements were given, losses were minimized and if the vulnerable were being assisted. Corrective measures were taken immediately and others escalated to relevant teams for action; monitoring findings were discussed during the monthly meetings with partners. For schools and health facilities, 10 percent of the sites were monitored each month. Having both male and female field monitors helped in making interviewees feel more comfortable when answering questions. This was particularly helpful when interacting with refugees whose cultures required minimal contact with people of opposite gender.

Beneficiary Contact Monitoring (BCM), a type of post-distribution monitoring, complemented the activity implementation monitoring. Data was collected each month to get beneficiaries' feedback on the distribution process, their entitlements, delivery mechanisms, timeliness of assistance, utilization, and how decisions were made on the use of resources at the household level. Gender and protection data, as well as nutrition messaging and counselling, were also collected through the BCM.

Due to security restrictions in Dadaab, FSOM and BCM were conducted at the food distribution centres and through mobile vulnerability analysis mapping (mVAM), as it was not possible to visit refugee homes, unlike in Kakuma and Kalobeyei. Market information from traders was collected through face-to-face monitoring whereas mVAM system collects data remotely through mobile phone interviews to complement face-to-face interviews. It is a cost-efficient strategy that complements regular monitoring and is also connected to the monitoring dashboard.

WFP's beneficiary complaints-and-feedback mechanism provided a free-of-charge, anonymous accountability mechanism where anyone from the community could call and inquire or file a complaint about WFP activities. The calls were logged onto a customer relations management system; issues were assigned, resolved, escalated, and closed at the appropriate level.

Monitoring of traders through Mystery Shopping [6] exercises that involved beneficiaries became more systematic; defaulters had their contracts terminated.

[6] Mystery Shopping is a monitoring process which involves identifying the objectives of the programmes as well as key areas of concern for the beneficiaries, designing tools and probable real case scenarios, based on the background information and training the actual beneficiaries to carry out the monitoring by assigning them a certain task.

Progress Towards Gender Equality

WFP promoted equal participation of men and women in food assistance activities through gender-balanced committees. Food advisory committees (FACs) participated in planning and monitoring of general distributions with WFP advocating for equal selection for the FAC of a male and female representative from each residential block. However, In Kakuma only 4 out of 10 leadership positions were held by women. Both men and women traders were represented in the trader committees to ensure diverse gender needs were voiced and addressed. Increasingly, women leaders have become more confident to speak up in the committees, despite the patriarchal nature of the communities that limits women's ability to voice issues in public forums.

The general food distribution centres were designed to be gender-responsive, particularly for refugees from cultural backgrounds in which separation of men and women in public areas is the norm. This encouraged women to collect food as they felt that their dignity was protected.

WFP gave special attention to pregnant and lactating women, and to young children, by addressing their increased nutritional needs through targeted nutrition actions. 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.

In most refugee households, women made the decisions on how the food received would be utilized. Of those interviewed during monitoring, the situation in Kakuma remained stable, but there was an increase in the proportion of households where males made decisions in Dadaab, with joint decision-making decreasing.

As in the 2016 protection and gender assessments, the 2017 assessment found that the hybrid of assistance (in-kind and CBT) positively addressed the needs of men and women refugees differently. Both men and women considered the cash transfer to enhance dignity and better relations in the households by encouraging consultations regarding food purchases. Normally, men have the social role of providing for their families; however, they are constrained by limited livelihood opportunities in the camps: the CBT reduced the pressure on men to diversify their families' diets. Women predominantly purchased the foods from the markets, which made them feel empowered by the shopping experiences. They felt dignified by being able to make decisions on what foods to buy.

Through the retail engagement initiative, WFP built market stalls for women who had been selling fruits, vegetables and fish from mats by the roadside. Those who were farmers were also linked with WFP-contracted traders to help them benefit in the economic opportunities provided by CBT. Furthermore, as many of the contracted or supported retailers were women (58 percent in Kakuma and Kalobeyei), cash transfers had enhanced their role in the retail sector, facilitated informal saving schemes and access to micro-credit to expand their businesses.

Protection and Accountability to Affected Populations

WFP informed refugees, their leaders and traders about the different transfers refugees would receive, and the channels they could use to provide feedback. Food entitlements were written on large signboards, with physical illustrations of each specific food type displayed on a board at the entrance to each distribution centre. WFP and partners consulted FAC members, and shared information on the food basket, ration sizes, distribution dates and feedback mechanisms before each distribution cycle. The FACs were, in turn, required to pass the information to the refugees.

WFP collected beneficiary feedback mainly through a telephone helpline (in Nairobi) and physical helpdesks (in the camps). 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 new activities were implemented. All the call agents were trained on how to handle the cases received by providing information immediately or escalating cases as needed. In late-2017, WFP replaced the helpline with a toll-free number to encourage more people to provide feedback on WFP services and activities. During the protection and gender assessment (48 percent respondents female), the refugees reported that they were satisfied with feedback mechanisms in place to address information needs, with traders opting for the convenience of the helpline and refugees preferring the helpdesks.

The proportion of interviewed refugees who were fully informed about WFP's operations continued to improve in Dadaab since the baseline of 2015, but remained stable in Kakuma. The target was not met in Kakuma, where more than 80 percent reported they knew who was included and what people receive in both camps, but only 69 percent knew where to complain. Refugees in Kalobeyei were least informed about WFP activities, with less than 40 percent knowing where to complain. This could be attributed to the fact that most refugees in Kalobeyei are relatively new, having fled into Kenya from 2016 onwards. Kakuma is very heterogenous with diverse languages spoken; this may have affected the understanding of the information. Also, the use of radio is also more widespread in Dadaab than in Kakuma.

The food distribution centres were sufficiently shaded and secure waiting areas were provided, designed for a smooth, orderly, and efficient experience, including for disabled people. Incentive workers (refugee workers) were stationed in different areas to assist beneficiaries who were uncertain about where to go, or who needed special help to collect their food. Police officers and guards were hired for security and crowd control. However, overcrowding at distribution centres was a safety concern in both Dadaab and Kakuma. One refugee reported being attacked by criminals who thought he had cash, while another felt unsafe while travelling to the distribution centre very early in the morning to avoid long queues.

WFP provided food to women and men living in safe havens because they face serious protection-related risks. Partners drove them to and from the food distribution centre, where they were given priority to collect their rations. Special arrangements were also made for them to purchase food from the market using cash-based transfers.

WFP distributed leaflets and posters with information on confidential recourse channels to report malpractices by aid personnel against affected populations. This aimed to address risks of gross misconduct, including of fraud, corruption and sexual exploitation and abuse. WFP also 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 © WFP / Martin Karimi

WFP has built sheds for women vegetable traders. Before this, the women spread their wares on the ground along the dusty streets and exposed to the sun.

Explanatory notes:

FSOM data for Kalobeyei not included in the tables because being a new camp, only 2017 figures are available

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	272,000	264,000	536,000	234,746	233,049	467,795	86.3%	88.3%	87.3%
By Age-group:									
Children (under 5 years)	44,000	42,000	86,000	42,522	40,043	82,565	96.6%	95.3%	96.0%
Children (5-18 years)	125,000	111,000	236,000	113,039	97,921	210,960	90.4%	88.2%	89.4%
Adults (18 years plus)	103,000	111,000	214,000	79,185	95,085	174,270	76.9%	85.7%	81.4%
By Residence status:									
Refugees	253,776	246,312	500,088	221,601	218,229	439,830	87.3%	88.6%	88.0%
Residents	18,224	17,688	35,912	13,145	14,820	27,965	72.1%	83.8%	77.9%

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)	500,000	500,000	500,000	439,830	435,830	439,830	88.0%	87.2%	88.0%
School Feeding (on-site)	143,000	-	143,000	136,503	-	136,503	95.5%	-	95.5%

Activity	Planned (food)	Planned (CBT)	Planned (total)	Actual (food)	Actual (CBT)	Actual (total)	% Actual v. Planned (food)	% Actual v. Planned (CBT)	% Actual v. Planned (total)
Food-Assistance-for-Assets	36,000	-	36,000	27,965	-	27,965	77.7%	-	77.7%
Food-Assistance-for-Training	1,600	-	1,600	1,503	-	1,503	93.9%	-	93.9%
Nutrition: Treatment of Moderate Acute Malnutrition	31,000	-	31,000	34,758	-	34,758	112.1%	-	112.1%
Nutrition: Prevention of Acute Malnutrition	55,400	-	55,400	46,898	-	46,898	84.7%	-	84.7%
HIV/TB: Care&Treatment;	1,500	-	1,500	1,468	-	1,468	97.9%	-	97.9%

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)	100,000	100,000	100,000	87,966	87,166	87,966	88.0%	87.2%	88.0%
School Feeding (on-site)	143,000	-	143,000	136,503	-	136,503	95.5%	-	95.5%
Food-Assistance-for-Assets	7,200	-	7,200	5,593	-	5,593	77.7%	-	77.7%
Food-Assistance-for-Training	1,600	-	1,600	1,503	-	1,503	93.9%	-	93.9%
Nutrition: Treatment of Moderate Acute Malnutrition	31,000	-	31,000	34,758	-	34,758	112.1%	-	112.1%
Nutrition: Prevention of Acute Malnutrition	55,400	-	55,400	46,898	-	46,898	84.7%	-	84.7%
HIV/TB: Care&Treatment;	1,500	-	1,500	1,468	-	1,468	97.9%	-	97.9%

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	49,200	50,800	100,000	44,320	43,646	87,966	90.1%	85.9%	88.0%
Total participants	49,200	50,800	100,000	44,320	43,646	87,966	90.1%	85.9%	88.0%
Total beneficiaries	254,000	246,000	500,000	221,601	218,229	439,830	87.2%	88.7%	88.0%
School Feeding (on-site)									
Children receiving school meals in primary schools	68,174	74,826	143,000	80,189	56,314	136,503	117.6%	75.3%	95.5%

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 participants	68,174	74,826	143,000	80,189	56,314	136,503	117.6%	75.3%	95.5%
Total beneficiaries	68,174	74,826	143,000	80,189	56,314	136,503	117.6%	75.3%	95.5%
Food-Assistance-for-Assets									
People participating in asset-creation activities	3,600	3,600	7,200	2,655	2,938	5,593	73.8%	81.6%	77.7%
Total participants	3,600	3,600	7,200	2,655	2,938	5,593	73.8%	81.6%	77.7%
Total beneficiaries	18,000	18,000	36,000	13,145	14,820	27,965	73.0%	82.3%	77.7%
Food-Assistance-for-Training									
People participating in trainings	1,100	500	1,600	1,043	460	1,503	94.8%	92.0%	93.9%
Total participants	1,100	500	1,600	1,043	460	1,503	94.8%	92.0%	93.9%
Total beneficiaries	1,100	500	1,600	1,043	460	1,503	94.8%	92.0%	93.9%
HIV/TB: Care&Treatment;									
ART Clients receiving food assistance	700	800	1,500	591	877	1,468	84.4%	109.6%	97.9%
Total participants	700	800	1,500	591	877	1,468	84.4%	109.6%	97.9%
Total beneficiaries	700	800	1,500	591	877	1,468	84.4%	109.6%	97.9%

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 of Moderate Acute Malnutrition									
Children (6-23 months)	6,000	6,000	12,000	6,858	6,858	13,716	114.3%	114.3%	114.3%
Children (24-59 months)	9,000	9,000	18,000	10,286	10,287	20,573	114.3%	114.3%	114.3%
Pregnant and lactating women (18 plus)	-	1,000	1,000	-	469	469	-	46.9%	46.9%
Total beneficiaries	15,000	16,000	31,000	17,144	17,614	34,758	114.3%	110.1%	112.1%
Nutrition: Prevention of Acute Malnutrition									

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)
Activity supporters (18 plus)	-	5,400	5,400	-	4,032	4,032	-	74.7%	74.7%
Children (6-23 months)	12,000	13,000	25,000	11,209	11,101	22,310	93.4%	85.4%	89.2%
Pregnant and lactating women (18 plus)	-	25,000	25,000	-	20,556	20,556	-	82.2%	82.2%
Total beneficiaries	12,000	43,400	55,400	11,209	35,689	46,898	93.4%	82.2%	84.7%

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 lactating women				
MAM treatment recovery rate (%)				
<i>DADAAB, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	>75.00	90.17	93.57	94.83
MAM treatment mortality rate (%)				
<i>DADAAB, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	<3.00	0.00	0.01	0.00
MAM treatment default rate (%)				
<i>DADAAB, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	<15.00	1.63	0.10	0.23
MAM treatment non-response rate (%)				
<i>DADAAB, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	<15.00	3.75	3.15	2.44
Proportion of eligible population who participate in programme (coverage)				
<i>DADAAB, Project End Target: 2018.03, HIS, Base value: 2015.07, Secondary data, SQUEAC</i>	>90.00	62.00	-	-

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM treatment recovery rate (%)				
<i>KAKUMA, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	>75.00	94.63	82.92	84.27
MAM treatment mortality rate (%)				
<i>KAKUMA, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	<3.00	0.00	0.00	0.00
MAM treatment default rate (%)				
<i>KAKUMA, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	<15.00	2.22	1.42	0.65
MAM treatment non-response rate (%)				
<i>KAKUMA, Project End Target: 2018.03, HIS, Base value: 2015.04, Secondary data, HIS, Previous Follow-up: 2016.12, WFP programme monitoring, HIS, Latest Follow-up: 2017.12, WFP programme monitoring, HIS</i>	<15.00	0.06	5.20	5.85
Proportion of eligible population who participate in programme (coverage)				
<i>KAKUMA, Project End Target: 2018.03, SQUEAC, Base value: 2014.07, Secondary data, SQUEAC</i>	>90.00	73.50	-	-
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				
FCS: percentage of households with poor Food Consumption Score				
<i>DADAAB, Project End Target: 2018.03, 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</i>	<2.00	2.00	0.40	6.00
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>DADAAB, Project End Target: 2018.03, 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</i>	<1.00	1.00	0.00	8.30
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>DADAAB, Project End Target: 2018.03, 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</i>	<3.00	3.00	0.80	2.00
Diet Diversity Score				
<i>DADAAB, Project End Target: 2018.03, 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</i>	>5.10	5.10	5.90	5.30
CSI (Food): Coping Strategy Index (average)				
<i>DADAAB, Project End Target: 2018.03, 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</i>	<15.00	15.00	13.17	17.08

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score				
<i>DADAAB FHHH, Project End Target: 2018.03, 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</i>	>5.40	5.40	5.67	5.13
CSI (Food): Coping Strategy Index (average)				
<i>DADAAB FHHH, Project End Target: 2018.03, 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</i>	<14.00	14.00	15.35	16.01
Diet Diversity Score				
<i>DADAAB MHHH, Project End Target: 2018.03, 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</i>	>5.00	5.00	5.98	5.37
CSI (Food): Coping Strategy Index (average)				
<i>DADAAB MHHH, Project End Target: 2018.03, 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</i>	<15.00	15.00	11.51	14.23
FCS: percentage of households with poor Food Consumption Score				
<i>KAKUMA, Project End Target: 2018.03, 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</i>	<19.00	19.00	20.30	20.00
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>KAKUMA, Project End Target: 2018.03, 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</i>	<27.00	27.00	18.10	18.80
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>KAKUMA, Project End Target: 2018.03, 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</i>	<7.00	7.00	24.50	22.00
Diet Diversity Score				
<i>KAKUMA, Project End Target: 2018.03, 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</i>	>3.40	3.40	4.30	4.40
CSI (Food): Coping Strategy Index (average)				
<i>KAKUMA, Project End Target: 2018.03, 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</i>	<16.00	16.00	19.32	18.65
Diet Diversity Score				
<i>KAKUMA FHHH, Project End Target: 2018.03, 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</i>	>3.10	3.10	4.37	4.32

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
CSI (Food): Coping Strategy Index (average)				
<i>KAKUMA FHHH, Project End Target: 2018.03, 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</i>	<15.00	15.00	17.58	20.03
Diet Diversity Score				
<i>KAKUMA MHHH, Project End Target: 2018.03, 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</i>	>3.90	3.90	4.23	4.57
CSI (Food): Coping Strategy Index (average)				
<i>KAKUMA MHHH, Project End Target: 2018.03, 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</i>	<18.00	18.00	21.54	16.45
SO2 Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies				
Adequate food consumption reached or maintained over assistance period for targeted households				
FCS: percentage of households with poor Food Consumption Score				
<i>GARISSA, Project End Target: 2018.03, 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</i>	<1.00	1.00	0.00	21.30
FCS: percentage of households with borderline Food Consumption Score				
<i>GARISSA, Project End Target: 2018.03, 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</i>	<20.00	20.00	36.40	23.30
Diet Diversity Score				
<i>GARISSA, Project End Target: 2018.03, 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</i>	>3.90	3.90	4.49	5.25
CSI (Food): Coping Strategy Index (average)				
<i>GARISSA, Project End Target: 2018.03, 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</i>	<13.00	13.00	11.50	17.82
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>GARISSA FHHH, Project End Target: 2018.03, 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</i>	=0.00	0.00	0.00	4.50
FCS: percentage of households with borderline Food Consumption Score (female-headed)				
<i>GARISSA FHHH, Project End Target: 2018.03, 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</i>	<6.00	6.00	25.00	9.70
Diet Diversity Score				
<i>GARISSA FHHH, Project End Target: 2018.03, 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</i>	>4.50	4.50	4.50	5.95

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
CSI (Food): Coping Strategy Index (average)				
<i>GARISSA FHHH, Project End Target: 2018.03, 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</i>	<14.00	14.00	14.25	11.31
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>GARISSA MHHH, Project End Target: 2018.03, 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</i>	<2.30	2.30	0.00	31.30
FCS: percentage of households with borderline Food Consumption Score (male-headed)				
<i>GARISSA MHHH, Project End Target: 2018.03, 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</i>	<26.00	26.00	37.90	31.30
Diet Diversity Score				
<i>GARISSA MHHH, Project End Target: 2018.03, 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</i>	>3.70	3.70	4.49	4.84
CSI (Food): Coping Strategy Index (average)				
<i>GARISSA MHHH, Project End Target: 2018.03, 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</i>	<13.00	13.00	11.10	21.67
FCS: percentage of households with poor Food Consumption Score				
<i>TURKANA, Project End Target: 2018.03, 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</i>	<38.00	38.00	11.50	55.70
FCS: percentage of households with borderline Food Consumption Score				
<i>TURKANA, Project End Target: 2018.03, 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</i>	<33.00	33.00	29.50	19.30
Diet Diversity Score				
<i>TURKANA, Project End Target: 2018.03, 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</i>	>2.20	2.20	3.58	4.06
CSI (Food): Coping Strategy Index (average)				
<i>TURKANA, Project End Target: 2018.03, 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</i>	<21.00	21.00	17.72	19.68
FCS: percentage of households with poor Food Consumption Score (female-headed)				
<i>TURKANA FHHH, Project End Target: 2018.03, 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</i>	<51.20	51.20	13.50	64.50

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
FCS: percentage of households with borderline Food Consumption Score (female-headed)				
<i>TURKANA FHHH, Project End Target: 2018.03, 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</i>	<22.00	22.00	37.80	19.40
Diet Diversity Score				
<i>TURKANA FHHH, Project End Target: 2018.03, 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</i>	>2.10	2.10	3.31	4.11
CSI (Food): Coping Strategy Index (average)				
<i>TURKANA FHHH, Project End Target: 2018.03, 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</i>	<23.00	23.00	20.18	18.25
FCS: percentage of households with poor Food Consumption Score (male-headed)				
<i>TURKANA MHHH, Project End Target: 2018.03, 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</i>	<30.10	30.10	9.80	51.70
FCS: percentage of households with borderline Food Consumption Score (male-headed)				
<i>TURKANA MHHH, Project End Target: 2018.03, 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</i>	<40.00	40.00	22.00	19.30
Diet Diversity Score				
<i>TURKANA MHHH, Project End Target: 2018.03, 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</i>	>2.30	2.30	3.83	4.02
CSI (Food): Coping Strategy Index (average)				
<i>TURKANA MHHH, Project End Target: 2018.03, 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</i>	<19.00	19.00	15.31	20.32
Improved access to assets and/or basic services, including community and market infrastructure				
CAS: percentage of communities with an increased Asset Score				
<i>DADAAB, Project End Target: 2018.03, FFA ACOM, Base value: 2016.08, WFP programme monitoring, ACOM, Latest Follow-up: 2017.11, WFP programme monitoring, ACOM</i>	>70.00	49.00	-	35.20
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
<i>DADAAB, Project End Target: 2018.03, Base value: 2014.11, Secondary data, Previous Follow-up: 2016.01, Secondary data, Partner reports, Latest Follow-up: 2017.01, Secondary data, Partner reports</i>	>6.00	8.00	-5.20	-8.92
Attendance rate in WFP-assisted primary schools				
<i>DADAAB, Project End Target: 2018.03, Base value: 2014.11, Secondary data, Previous Follow-up: 2016.10, Secondary data, Partner reports, Latest Follow-up: 2017.10, Secondary data, Partner reports</i>	>75.00	75.00	78.09	82.00

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Gender ratio: ratio of girls to boys enrolled in WFP-assisted primary schools				
<i>DADAAB, Project End Target: 2018.03, Base value: 2014.11, Secondary data, Previous Follow-up: 2016.10, Secondary data, Partner reports, Latest Follow-up: 2017.10, Secondary data, Partner reports</i>	>0.70	0.70	0.70	0.70
CAS: percentage of communities with an increased Asset Score				
<i>KAKUMA, Project End Target: 2018.03, FFA ACOM, Base value: 2016.08, WFP programme monitoring, ACOM, Latest Follow-up: 2017.11, WFP programme monitoring, ACOM</i>	>70.00	49.00	-	35.20
Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools				
<i>KAKUMA, Project End Target: 2018.03, Base value: 2014.11, Secondary data, Previous Follow-up: 2016.01, Secondary data, Partner reports, Latest Follow-up: 2017.01, Secondary data, Partner reports</i>	>6.00	33.00	13.00	11.40
Attendance rate in WFP-assisted primary schools				
<i>KAKUMA, Project End Target: 2018.03, Base value: 2014.11, Secondary data, Previous Follow-up: 2016.10, Secondary data, Partner reports, Latest Follow-up: 2017.10, Secondary data, Partner reports</i>	>90.00	90.00	91.00	97.46
Gender ratio: ratio of girls to boys enrolled in WFP-assisted primary schools				
<i>KAKUMA, Project End Target: 2018.03, Base value: 2014.11, Secondary data, Previous Follow-up: 2016.10, Secondary data, Partner reports, Latest Follow-up: 2017.10, Secondary data, Partner reports</i>	>0.60	0.64	0.70	0.69
Stabilized or reduced undernutrition, including micronutrient deficiencies among children aged 6–59 months, pregnant and lactating women, and school-aged children				
Proportion of target population who participate in an adequate number of distributions				
<i>DADAAB, Project End Target: 2018.03, Base value: 2015.05, WFP programme monitoring, BCM, Previous Follow-up: 2016.12, WFP programme monitoring, BCM, Latest Follow-up: 2017.12, WFP programme monitoring, BCM</i>	>70.00	77.30	89.00	98.85
Proportion of eligible population who participate in programme (coverage)				
<i>DADAAB, Project End Target: 2018.03, Base value: 2015.03, WFP programme monitoring, Previous Follow-up: 2016.12, Secondary data, Latest Follow-up: 2017.12, Secondary data</i>	>90.00	99.60	99.80	99.70
Proportion of target population who participate in an adequate number of distributions				
<i>KAKUMA, Project End Target: 2018.03, Base value: 2015.05, WFP programme monitoring, BCM, Previous Follow-up: 2016.12, WFP programme monitoring, BCM, Latest Follow-up: 2017.12, WFP programme monitoring, BCM</i>	>70.00	97.30	83.00	68.10
Proportion of eligible population who participate in programme (coverage)				
<i>KAKUMA, Project End Target: 2018.03, Base value: 2015.03, WFP programme monitoring, Previous Follow-up: 2016.12, Secondary data, Latest Follow-up: 2017.12, Secondary data</i>	>90.00	87.30	99.60	95.52
Proportion of children who consume a minimum acceptable diet				
<i>KENYA, Project End Target: 2018.03, FSOM, Base value: 2015.05, WFP programme monitoring, FSOM, Previous Follow-up: 2016.12, WFP programme monitoring, FSOM, Latest Follow-up: 2017.12, WFP programme monitoring, FSOM</i>	>15.00	3.60	5.20	0.50

Output Indicators

Output	Unit	Planned	Actual	% Actual vs. Planned
SO1: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of health centres/sites assisted	centre/site	29	26	89.7%
Number of men exposed to nutrition messaging supported by WFP	individual	3,100	4,000	129.0%
Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counseling	individual	32,080	29,687	92.5%
Number of women exposed to nutrition messaging supported by WFP	individual	37,000	49,012	132.5%
SO2: Food-Assistance-for-Assets				
Hectares (ha) of agricultural land benefiting from rehabilitated irrigation schemes (including irrigation canal repair, specific protection measures, embankments, etc)	Ha	126	72	56.9%
Hectares (ha) of cultivated land treated with both physical soil and water conservation measures and biological stabilization or agro forestry techniques	Ha	243	175	72.0%
Hectares (ha) of fodder banks planted	Ha	58	23	39.7%
Kilometres (km) of feeder roads built and maintained	Km	11	8	72.0%
Number of bales of hay produced	unit	30	25	83.3%
Number of excavated community water ponds for livestock uses constructed (3000-15,000 cbmt)	water pond	21	8	38.1%
Number of hives distributed	item	415	80	19.3%
Number of tree seedlings produced	tree seedling	5,600	4,720	84.3%
SO2: Nutrition: Prevention of Acute Malnutrition				
Number of health centres/sites assisted	centre/site	29	26	89.7%
Number of men exposed to nutrition messaging supported by WFP	individual	12,000	14,676	122.3%
Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counseling	individual	50,400	47,245	93.7%
Number of women exposed to nutrition messaging supported by WFP	individual	60,000	90,312	150.5%
SO2: School Feeding (on-site)				
Number of primary schools assisted by WFP	school	56	56	100.0%

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				
<i>DADAAB, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.03, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>0.00	0.00	24.00	16.00
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>KAKUMA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.03, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>0.00	0.00	24.00	23.00

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>DADAAB, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>90.00	86.00	62.00	63.00
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>KAKUMA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>90.00	87.00	51.00	50.00
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>DADAAB, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>10.00	14.00	13.00	21.00
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>KAKUMA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>10.00	14.00	25.00	27.00
Proportion of women beneficiaries in leadership positions of project management committees				
<i>KENYA, Food-Assistance-for-Assets, Project End Target: 2018.03, Base value: 2015.03, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>50.00	53.00	51.00	50.00
Proportion of women beneficiaries in leadership positions of project management committees				
<i>KENYA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.03, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>50.00	50.00	50.00	45.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>KENYA, Food-Assistance-for-Assets, Project End Target: 2018.03, Base value: 2015.03, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>60.00	100.00	100.00	100.00
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>KENYA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.03, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>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)				
<i>DADAAB, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>70.00	17.00	76.00	84.00

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
<i>KAKUMA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>70.00	35.00	65.00	64.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>DADAAB, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>90.00	100.00	99.00	99.00
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>KAKUMA, General Distribution (GD), Project End Target: 2018.03, Base value: 2015.05, Previous Follow-up: 2016.12, Latest Follow-up: 2017.12</i>	>90.00	100.00	98.00	97.00

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)		
<i>KENYA, School Feeding, Project End Target: 2018.03, Latest Follow-up: 2017.12</i>	>17,331,586.00	21,147,688.00
Number of partner organizations that provide complementary inputs and services		
<i>KENYA, General Distribution (GD), Project End Target: 2018.03, Latest Follow-up: 2017.12</i>	>4.00	15.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>DADAAB, General Distribution (GD), Project End Target: 2018.03, Latest Follow-up: 2017.12</i>	=100.00	100.00
Proportion of project activities implemented with the engagement of complementary partners		
<i>KAKUMA, General Distribution (GD), Project End Target: 2018.03, Latest Follow-up: 2017.12</i>	=100.00	100.00

Resource Inputs from Donors

Resource Inputs from Donors

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
Canada	CAN-C-00530-11	Maize	-	368
Canada	CAN-C-00541-09	Corn Soya Blend	-	110
Canada	CAN-C-00546-24	Corn Soya Blend	-	0
China	CHA-C-00053-06	Maize	-	2,701
China	CHA-C-00053-06	Sorghum/Millet	-	6,983
European Commission	EEC-C-00657-01	Corn Soya Blend	-	1,055

Donor	Cont. Ref. No.	Commodity	Purchased in 2017 (mt)	
			In-Kind	Cash
European Commission	EEC-C-00657-01	Ready To Use Supplementary Food	-	100
European Commission	EEC-C-00657-01	Sugar	-	100
Germany	GER-C-00524-01	Corn Soya Blend	-	510
Germany	GER-C-00524-01	Maize	-	1,201
Germany	GER-C-00524-01	Vegetable Oil	-	330
Germany	GER-C-00713-01	Corn Soya Blend	-	100
Germany	GER-C-00713-01	Sorghum/Millet	-	1,628
Germany	GER-C-00713-01	Split Peas	-	561
Germany	GER-C-00713-01	Vegetable Oil	-	648
Japan	JPN-C-00543-01	Corn Soya Blend	-	1,227
MULTILATERAL	MULTILATERAL	Corn Soya Blend	-	2,000
MULTILATERAL	MULTILATERAL	Peas	-	692
MULTILATERAL	MULTILATERAL	Sorghum/Millet	-	2,620
MULTILATERAL	MULTILATERAL	Vegetable Oil	-	562
United Kingdom	UK -C-00321-02	Corn Soya Blend	-	1,586
United Kingdom	UK -C-00321-02	Ready To Use Supplementary Food	-	67
USA	USA-C-01123-05	Split Peas	490	-
USA	USA-C-01123-05	Vegetable Oil	200	-
USA	USA-C-01123-05	Wheat	3,960	-
USA	USA-C-01345-01	Beans	-	500
USA	USA-C-01345-01	Sorghum/Millet	-	2,842
USA	USA-C-01382-01	Sorghum/Millet	8,000	-
USA	USA-C-01382-01	Split Peas	4,640	-
USA	USA-C-01382-01	Vegetable Oil	2,950	-
USA	USA-C-01382-01	Wheat	13,450	-
		Total	33,690	28,490