

SAVING  
LIVES

CHANGING  
LIVES

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## EMERGENCY FOOD ASSISTANCE IN ANGOLA FOR CONFLICT AFFECTED REFUGEES

### Standard Project Report 2018

World Food Programme in Angola, Republic of (AO)



World Food  
Programme

# Table Of Contents

## **Country Context and WFP Objectives**

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

## **Country Resources and Results**

- Resources for Results
- Supply Chain

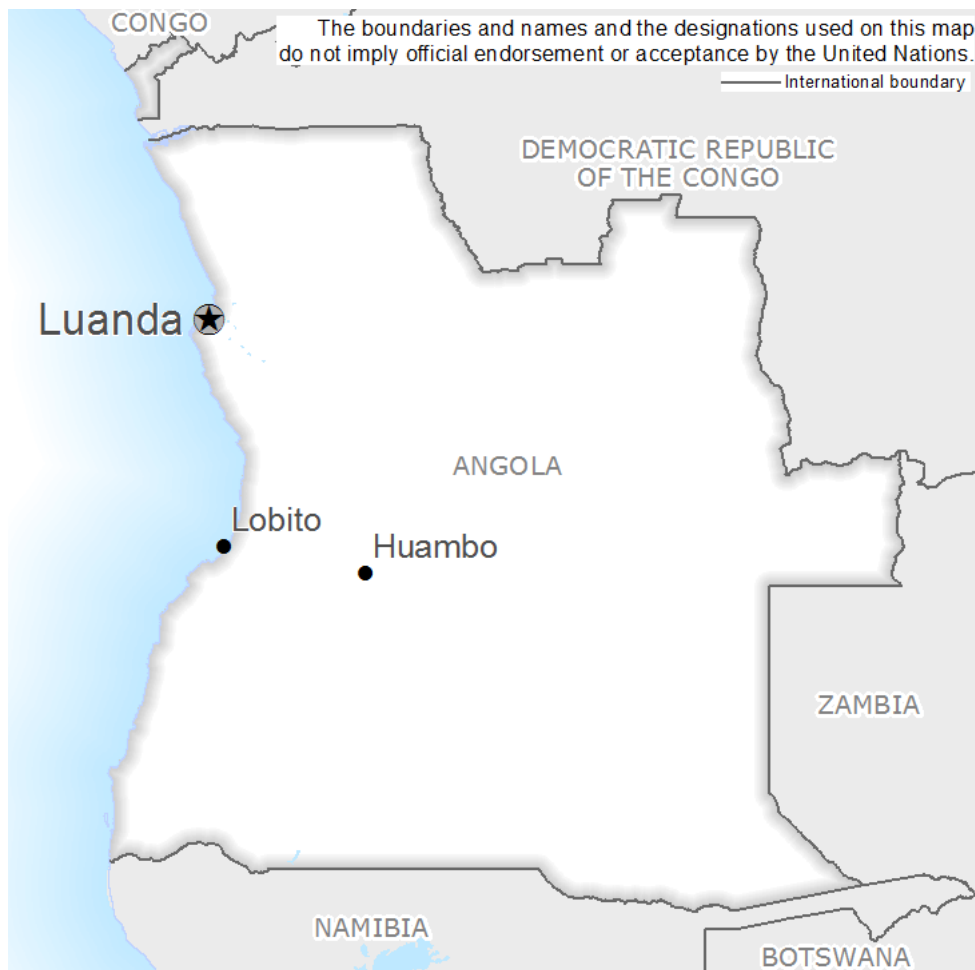
## **Project Results**

- Activities and Operational Partnerships
- Results
- Performance Monitoring
- Progress Towards Gender Equality
- Protection and Accountability to Affected Populations

## **Figures and Indicators**

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

# Country Context and WFP Objectives



## Achievements at Country Level

Not having been operational in Angola since 2006, WFP responded promptly to a May 2017 request from the government (Ministry of Social Action, Family and Women's Empowerment – MASFAM) for support in meeting the needs of refugees affected by violence in the Kasai region of the Democratic Republic of Congo (DRC) crossing into the north-eastern province of Lunda Norte. A Rapid Food Security and Agriculture Assessment conducted with FAO indicated a high level of food insecurity as a result of conflict-induced displacement and high rates of pre-existing poverty.

WFP launched a three-month Immediate Response Emergency Operation (IR-EMOP) to provide food assistance to up to 23,000 refugees being accommodated at two reception centres established by the government near the town of Dundo: General Food Distributions (GFD) of maize meal, pulses, vegetable oil and salt; and Super Cereal Plus for the prevention of acute malnutrition in children aged 6-23 months. Implemented in collaboration with United Nations (UN) and non-governmental organization (NGO) partners, notably United Nations High Commissioner for Refugees (UNHCR), United Nations Children's Fund (UNICEF) and World Vision International, WFP assisted more than 28,000 registered refugees as the number of people fleeing DRC was greater than originally anticipated.

In August 2017, the IR-EMOP gave way to a 12-month Emergency Operation (EMOP). This was designed to provide GFD to refugees (an interagency planning figure of up to 50,000); prevent acute malnutrition among children aged 6-23 months and pregnant and lactating women and girls (PLW/G); and provide treatment for moderate acute malnutrition (MAM) for children aged 6-59 months. While the number of registered refugees subsequently reached 35,000, the number eligible for WFP assistance tended to be lower (owing to no-shows at

distribution time and returns to Kasai). At the end of the project in July 2018, 23,514 refugees received the monthly food ration – a growing number of them at the Lóvua resettlement site. By then, the EMOP's malnutrition prevention interventions had reached 1,348 children and 1,708 PLW/Gs.

## Country Context and Response of the Government

Following its 14-year struggle for independence, Angola fell into a bitter 27-year civil war that claimed the lives of over one million people and displaced an additional four million. Ending in 2002, the civil war devastated the country's social fabric and stalled economic development.

Over the last decade, the country has experienced significant economic growth fuelled by vast reserves of oil, with substantial gains in per capita gross national income. However, it continues to face massive developmental challenges, including reducing dependence on oil and diversifying the economy; rebuilding infrastructure; and improving governance, institutional capacities, public financial management systems, human development indicators and the living conditions of many of its people. Large pockets of the population remain in poverty, without access to basic services. Disparities in both income distribution and access to basic services are considerable.

Despite improvements since the civil war, the weakness of public institutions and limited human resource capacities are barriers to sustainable development, not least the attainment of the SDGs. Opportunities for civil society organizations to participate in decision-making processes have improved over time, but remain constrained.

More than half of Angola's poor live in rural areas and depend almost exclusively on agriculture. Women are responsible for 70 percent of traditional subsistence farming and 24 percent of commercial agriculture. Undernutrition remains a serious public health problem. High rates of child stunting and micronutrient deficiency contribute to high under-five mortality rates, impede children's development and constrain productivity growth. The availability of up-to-date nutrition data is very limited, and the country suffers a severe shortage of trained nutritionists.

In mid-2016, a complex emergency began unfolding in the Kasai region of DRC, precipitated by inter-community tensions and clashes among local militia, the armed forces and self-defence groups. Some 1.4 million people were displaced within Kasai, and, by the end of 2017, some 35,000 had fled across the border into Angola's Lunda Norte province, as refugees.

In May 2017, after the number of registered DRC refugees had reached 17,000, the government requested UN assistance. It established reception centres at Cacanda and Mussungue near the town of Dundo, and subsequently initiated relocations from those sites to an envisaged longer term resettlement facility at Lóvua, some 94 km to the west.

MASFAM coordinates the refugee response on behalf of the government. Coordination mechanisms, led by MASFAM and UNHCR, were established in both Luanda and Dundo.

## WFP Objectives and Strategic Coordination

Following an official request for support from the government of Angola on 22 May 2017, WFP promptly agreed to help respond to the crisis by providing food and nutrition assistance to the DRC refugee population in coordination with UN and NGO partners.

The Ministry of Social Action, Family and Women Empowerment (MASFAM), by order of an inter-ministerial committee, coordinated the response, with support from UNHCR. The UN Country Team, led by the Resident Coordinator, oversaw international humanitarian assistance. UNHCR convened regular meetings to coordinate stakeholders in both Luanda and Dundo.

WFP launched a three-month Immediate Response Emergency Operation (IR-EMOP) to meet basic food needs. With FAO, it conducted a joint rapid food security and agriculture assessment in Dundo, including of the refugee reception sites. The findings confirmed high levels of food insecurity as a result of displacement and pre-existing poverty.

On 1 August 2017, WFP launched a follow-on 12-month Emergency Operation (EMOP) to allow continued support to the refugees from Kasai and lay the foundation for more durable solutions to their plight. It was aligned with Strategic Objectives 1 and 2 of WFP's Strategic Plan (2017-2021) and prioritized actions consistent with Sustainable Development Goal (SDG) 2 (achieving zero hunger) and SDG 17 (partnering to support implementation of the SDGs). The EMOP was implemented in coordination with relevant line ministries – notably MASFAM – and humanitarian partners, including UNHCR, UNICEF, FAO and World Vision International (WVI).

Findings from a UNHCR/WFP Joint Assessment Mission (JAM) undertaken in June 2018 indicated that nearly 70 percent of the refugees relied entirely on WFP assistance to cover their food requirements. The JAM results also highlighted the challenges faced by refugee households in Lóvua settlement in improving their livelihoods and achieving self-reliance: limited agricultural productivity; lack of access to income-generating opportunities; low purchasing power; and high food prices. Food security in Lóvua was found to have deteriorated slightly owing to limited access to alternative food sources. Food assistance to refugees in Dundo and Lóvua was and remains critical to coverage their basic needs, as most have no means of sustaining themselves.

The JAM made a number of key recommendations towards eventual refugee self-sufficiency, including:

- the need to adjust Angolan law to improve the status of refugees;
- the need for food assistance to be maintained for at least another 18 months to allow time for more forest around Lóvua to be turned into cultivable land;
- the need for local communities to be actively involved in the elaboration of livelihood-oriented interventions for refugees; and
- the need to prioritise improved refugee access to health and nutrition services.

Beyond its DRC refugee response, WFP continued to engage with the Government on the possible eventual provision of technical assistance in a number of areas, including school feeding, vulnerability analysis and mapping (VAM) and nutrition. WFP also continued to monitor the food security and nutrition situation in the vulnerable south of the country.

# Country Resources and Results

## Resources for Results

The IR-EMOP was funded from WFP's Immediate Response Account (IRA), a flexible facility sourced from unearmarked donations that enables prompt reaction to breaking emergencies. The ensuing EMOP, initially costed at USD 18.2 million, secured contributions from the US, France and the UN Central Emergency Response Fund (CERF), but was under-resourced. Competition from high-profile emergencies elsewhere was partly responsible.

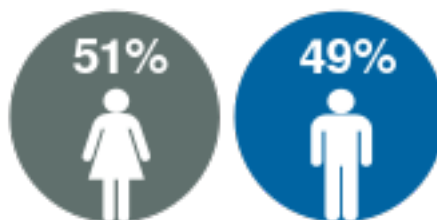
A subsequent budget revision lowered the envisaged cost of the 12-month operation to USD 15.2 million. The revision derived from a reduction in the volume of cash-based assistance given its assessed relatively high cost, and the removal of Moderate Acute Malnutrition treatment for children aged 6-59 months in the wake of a significant progressive decline in the Global Acute Malnutrition rate among refugees. In 2018 WFP did not receive any contributions. Internal financing was used to complement funding received in 2017 and to avert complete food pipeline breaks.

WFP is a strong advocate of joint resourcing campaigns for the refugee response by the UN entities involved in this operation, not least with a view to a sustainable future for the displaced.



## Annual Country Beneficiaries

Beneficiaries	Male	Female	Total
Children (under 5 years)	2,728	2,704	5,432
Children (5-18 years)	3,645	3,927	7,572
Adults (18 years plus)	5,126	5,384	10,510
<b>Total number of beneficiaries in 2018</b>	<b>11,499</b>	<b>12,015</b>	<b>23,514</b>




## Annual Food Distribution in Country (mt)

Project Type	Cereals	Oil	Pulses	Mix	Other	Total
Single Country EMOP	2,217	103	272	123	24	2,738
<b>Total Food Distributed in 2018</b>	<b>2,217</b>	<b>103</b>	<b>272</b>	<b>123</b>	<b>24</b>	<b>2,738</b>

## Supply Chain

At the start of the refugee response there was a strong focus on the local purchase of food commodities – notwithstanding relatively high prices – given the urgency of expeditious delivery and distribution. That, for the most part, gave way to carefully calibrated procurement elsewhere in Southern Africa with the need to ensure the availability of foods in good time for the monthly distributions the foremost consideration.

The operation faced numerous logistical challenges, including the poor quality of roads in northeastern Angola, especially during the rainy season; the limited availability of local truckers; relatively high fuel prices; and bureaucratic impediments, such as cumbersome visa/permit requirements for foreign drivers in Angola and those transiting through neighboring Namibia.

Supply chain challenges were eased towards the end of 2017 and into 2018 with the introduction of more systematic and large-scale shipment of procured commodities from the South African port of Durban to the Angolan capital Luanda, and their onward movement by road to Dundo/Lóvua. WFP continues to deliver food commodities both overland and by sea, choosing the most cost-efficient option. In 2018 a more effective customs clearance process facilitated timely onward delivery from Luanda and southern Angola to Dundo.



## Annual Food Purchases for the Country (mt)

Commodity	Local	Regional/International	Total
Iodised Salt	-	28	28
Maize Meal	-	48	48
Vegetable Oil	-	46	46
<b>Total</b>	-	<b>122</b>	<b>122</b>
<b>Percentage</b>	-	<b>100.0%</b>	

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

Commodity	Total
Corn Soya Blend	16
Maize Meal	1,427
Peas	46
Vegetable Oil	63
<b>Total</b>	<b>1,552</b>

# Project Results

## Activities and Operational Partnerships

Building on the systems established by the preceding three-month IR-EMOP, this 12-month EMOP was designed to assist up to 50,000 food insecure refugees as per UNHCR's 2017 Inter-Agency Response Plan, primarily through monthly general food distributions. The food basket comprised 450g of maize meal, 60g of pulses, 25ml of vegetable oil and 5g of salt per person per day.

As part of WFP's prevention of acute malnutrition programme, all pregnant and lactating women (PLW) received an additional daily ration of 200g of Super Cereal and children aged 6-23 months an additional ration of 200g of Super Cereal Plus. Any child between 24 and 59 months identified through screening as suffering from moderate acute malnutrition (MAM) was also supported through the prevention programme. Additional support was provided to parents/caregivers of children suffering from MAM through home visits by World Vision International (WVI) community health workers.

WFP delivered food to extended distribution points – warehouses managed by WVI – whose staff in turn distributed it to refugees at final distribution points in coordination with WFP and UNHCR.

The provision of Super Cereal Plus was part of a holistic malnutrition prevention exercise that included screening, sensitisation and, where necessary, referral for further treatment, and also involved UNICEF, other UN agencies and NGOs.

Assessments conducted in 2017 had recommended the introduction of cash-based transfers (CBT) to enhance dietary diversity, address refugee preferences for locally available foods, and support the local economy. These recommendations were also discussed and agreed with the government at both national and sub-national level. However, WFP was unable to implement CBT activities due to funding constraints.

To ensure complementarity in the areas of food security, shelter, sanitation, education, child protection, the prevention of sexual and gender-based violence and assistance to persons with specific needs, WFP and other humanitarian and development partners coordinated their efforts through inter-agency mechanisms established in both Luanda and Dundo. The government, UNHCR and partners jointly monitored displacement and humanitarian conditions, conducting assessments and intervening with assistance as needed.

## Results

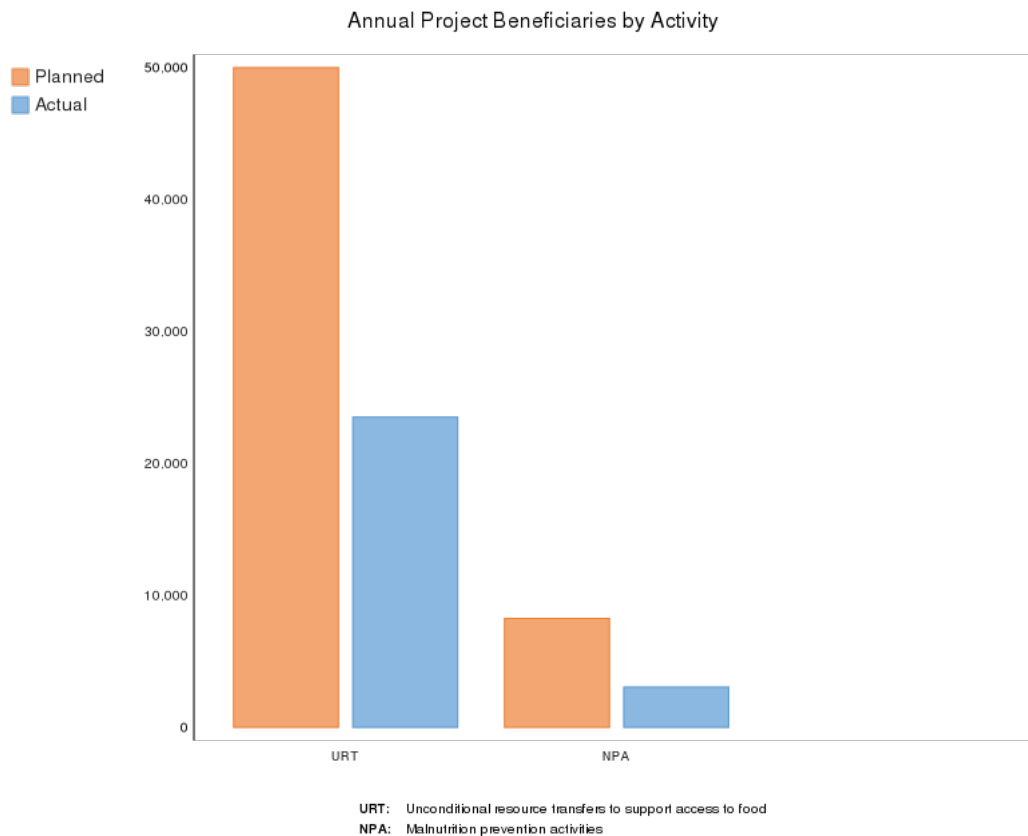
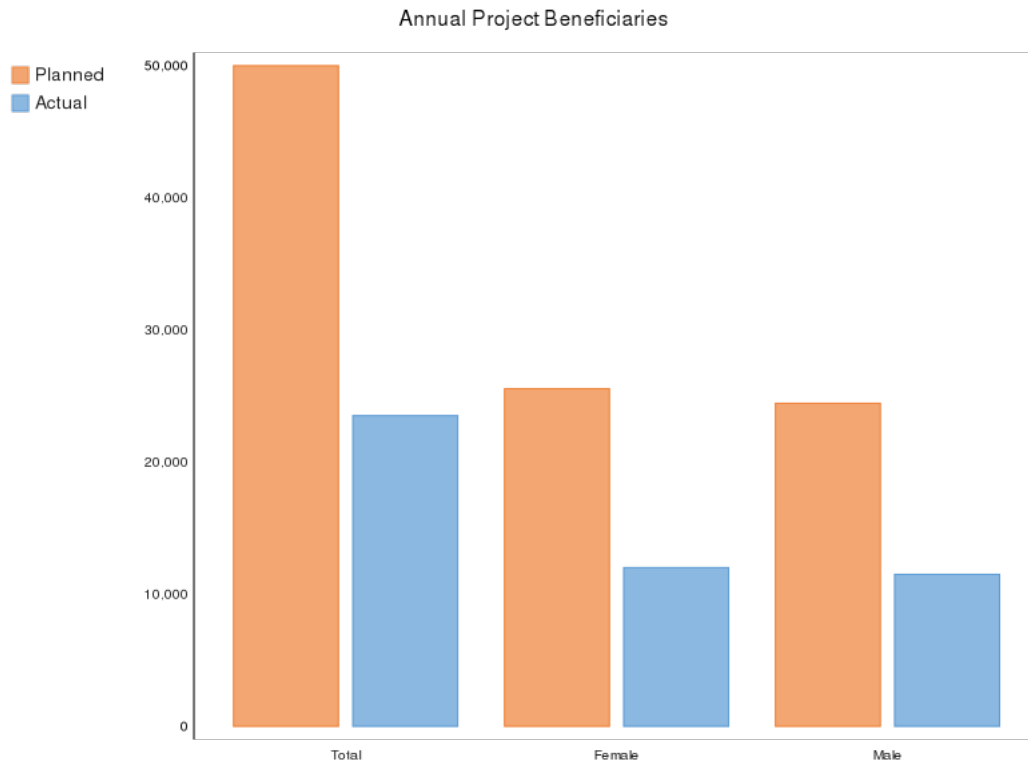
In June 2017 an inter-agency appeal was launched, and WFP planned for a caseload of up to 50,000 refugees requiring food assistance. An easing of the violence in Kasai region saw the 'active' refugee population stabilize at around 25,000 from August 2017. WFP therefore distributed about 50 percent of planned commodities (2,151 mt of 4,215 mt) to about 50 percent of the envisaged caseload (25,357 refugees). Initial malnutrition prevention interventions reached 1,387 children aged 6-59 months and 876 pregnant and lactating women, about 27 percent of the overall planning figure.

WFP had originally planned to implement a moderate acute malnutrition (MAM) treatment programme targeting 3757 children 6-23 months, on the basis of a May 2017 assessment which put the global acute malnutrition (GAM) rate at 8.1 percent. However, with subsequent trend analysis by UNICEF and MSF showing a steady, significant decline in the GAM rate – to below 3 percent – WFP decided not to proceed with the MAM treatment programme.

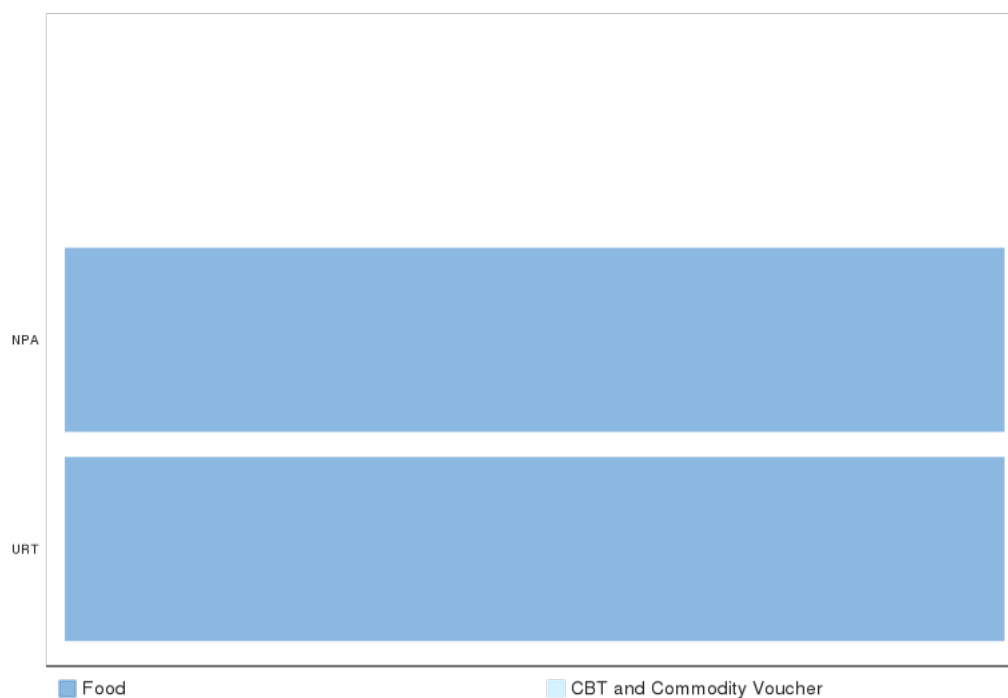
A baseline indicator survey was conducted in November 2017 and data analysis completed in December 2017. Data on food security indicators, including the coping strategy index (CSI), food consumption score (FCS) and food expenditure share (FES) were gathered through mobile data collection and analytics (MDCA), using tablets. Data on cross-cutting issues such as gender and accountability to affected populations (AAP) was also collected. For each outcome indicator, a corresponding target was set. Progress toward targets were then measured in June 2018 following the Joint Assessment Mission by WFP and UNHCR. Because of full dependence on food aid provided by WFP, the survey showed that only 39.3 percent of the those interviewed had acceptable food consumption scores. Overall, the FCS reflected a decline in the ability of recipients to acquire other types of food, as the Lóvuva settlement offered little or no income-earning opportunities. An increase from the baseline value of 16.6 percent to 22.6 percent on the CSI is reported, indicating that beneficiaries had to resort to more severe coping strategies, such the sale of their food rations and non-food items, to address the stress imposed by a narrow diet and what they said was insufficient food for the full 30 days. For the AAP indicators, a 20 percent increase in the number of



people participating in the programme indicated improved satisfaction with the food assistance. On the other hand, WFP will continue working with partners to increase female attendance at distributions.



Modality of Transfer by Activity



URT: Unconditional resource transfers to support access to food  
 NPA: Malnutrition prevention activities



## Annual Project Food Distribution

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Beans	542	254	46.9%
Corn Soya Blend	347	123	35.5%
Iodised Salt	52	24	44.8%
Maize	4,137	-	-
Maize Meal	-	2,217	-
Peas	-	18	-
Vegetable Oil	262	103	39.3%
<b>Total</b>	<b>5,340</b>	<b>2,738</b>	<b>51.3%</b>



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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned
Cash	2,146,161	-	-
<b>Total</b>	<b>2,146,161</b>	-	-

## Performance Monitoring

To monitor the impact of the food assistance programme implemented by WFP and partners, a Joint Assessment Mission (JAM) was undertaken by WFP and UNHCR in June 2018. The JAM recommendations as well as post-distribution monitoring results informed the design of the August 2018-December 2019 Transitional Interim Country Strategic Plan.

Quality monitoring and evaluation continued to be a priority of WFP's refugee response in Angola, and efforts were made to improve these processes by identifying the different tools available to WFP and its cooperating partner, World Vision International (WVI), which could be used in the local operational context.

In 2018 the Field Monitor Assistant (FMA)'s responsibilities included entering distribution data into the Country Office Tool for Monitoring Effectively system; conducting baseline, mid-point and end-point surveys; and coordinating and supporting the food security and nutrition monitoring activities of WFP's cooperating partner. The FMA and WVI staff held regular focus group discussions with refugees, both during and between food distributions, with a view to monitoring processes, outputs and outcomes. WFP and its partners mainstreamed protection aspects in all monitoring activities.

To canvass recipients' views, WFP placed feedback boxes at distribution sites and held regular meetings with refugee leaders to discuss security and nutrition issues, among others.

## Progress Towards Gender Equality

In line with WFP's Gender Policy and the regional Gender Implementation Strategy, gender equality was mainstreamed into the design and implementation of the EMOP. WFP and UNHCR worked with refugee communities to establish gender-balanced refugee leadership committees and encouraged the promotion of women to leadership positions with a view to ensuring that the specific needs of women and children were adequately addressed.

The baseline survey conducted in November 2017 showed that 35.6 percent of female refugees made the decisions in the household. While men are traditionally seen as heads of household in Kasai, they were encouraged to jointly decide on the use of assistance, particularly WFP food commodities. At the time of the baseline survey, 21.8 percent of refugee households reported that decisions were made jointly by men and women.

WFP systematically monitored for gender-based violence, and, in collaboration with UNFPA, UNHCR and other humanitarian partners, messaged on the subject during refugee sensitization sessions. During these sessions, women refugees were encouraged to register as the recipients of assistance entitlements and to collect the food on distribution days.

Because of the continuous efforts of partners to advocate for gender equality, the Joint Assessment Mission of June 2018 found that 57.4 percent of households reported joint decision-making on the use of assistance. A 29.5 percent drop in the number of households where only men made the decisions was registered, while the same proportion of households reported women-only decision-makers.

## Protection and Accountability to Affected Populations

From the beginning of the refugee response, WFP and its partners prioritized the protection of vulnerable populations, including protection from sexual exploitation and abuse (SEA). WFP, through its cooperating partner World Vision International (WVI), worked to ensure that personnel involved in the operation met the highest standards of moral and ethical conduct. One of the obligations of partners was to address SEA by investigating allegations and taking relevant corrective actions. UNHCR through its protection implementing partner, Jesuit Refugees Services (JRS), conducted sensitization campaigns and worked to identify those most vulnerable to SEA with a view to taking steps to protect them.

During focus group discussions with refugees as part of the June 2018 Joint Assessment Mission (JAM) and an inter-agency Sexual and Gender Based Violence (SGBV) assessment the following month, a number of SGBV cases were reported. As a result, the assessment reports included recommendations to strengthen the capacity of concerned organizations to respond to the needs of relevant vulnerable groups:

- Staff should receive training on SGBV- and Protection from Sexual Exploitation and Abuse (PSEA)-related issues to reinforce the UN's zero tolerance stance;
- Agencies should ensure that women are properly represented (at least 50 percent of members) in all committees and voluntary groups, particularly in the areas of health and sanitation; and
- Joint sensitization of assistance recipients - women, men, girls and boys – should be provided in partnership with UNHCR, other agencies and NGOs.

With the advantage of conducting monthly general food distributions where at least one member of each household was present, WFP and partners saw an opportunity to implement multiple protection- and AAP-related activities. A help desk was installed at every food distribution point, with the aim of increasing accessibility to counseling and a confidential referral system. Recipients were also supported through messages on PSEA, SGBV, domestic violence and nutrition broadcast on community radio. Additionally, suggestion boxes were installed at each Final Distribution Point (FDP).

The help desks receive refugees' suggestions and concerns, and cases, once registered, are referred to the relevant sectoral working group (there are groups on protection, SGBV, health, WASH, nutrition and food security and livelihoods, among others) for further analysis and response. Once cases are analysed by the relevant group, partners seek to provide an immediate response.

In coordination with UNHCR, WFP and other humanitarian partners, JRS created a referral and response mechanism for women and children for SGBV incidents reported during the JAM and SGBV assessments. This provided for psycho-social counselling by *Medicos do Mundo* and enhanced police patrolling of the Lóvua settlement.

As well as collaborating with partners on addressing various protection-related issues, WFP continued to monitor recipients' feedback about their food and nutrition assistance. Recipients were encouraged to submit their concerns and recommendations using the suggestion boxes at each FDP. From May to July 2018, 518 refugee notes were collected. Some raised their concerns directly with WFP and WVI staff. Most of were complaints about the size of the monthly ration, the kind of food it contained and conditions at the FDPs. Many refugees said the 30-day rations lasted as little as two weeks. Some said that for the remainder of the month they coped by selling their non-food items and produce from their kitchen gardens, relied on casual labor or borrowed food from family and friends. WFP was able to provide feedback on refugee concerns during bi-weekly meetings with Lóvua refugee leaders. FDPs were improved and refugees expressed satisfaction with increased security during distributions, the installation of seating and shaded areas, and the availability of drinking water and hand-washing stations, and latrines.

# Figures and Indicators

## Data Notes

Cover page photo © UNHCR/Omotola Akindipe

General Food Distribution at Dundo

## 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	24,450	25,550	50,000	11,499	12,015	23,514	47.0%	47.0%	47.0%
<b>By Age-group:</b>									
Children (under 5 years)	5,800	5,750	11,550	2,728	2,704	5,432	47.0%	47.0%	47.0%
Children (5-18 years)	7,750	8,350	16,100	3,645	3,927	7,572	47.0%	47.0%	47.0%
Adults (18 years plus)	10,900	11,450	22,350	5,126	5,384	10,510	47.0%	47.0%	47.0%
<b>By Residence status:</b>									
Refugees	24,450	25,550	50,000	11,498	12,016	23,514	47.0%	47.0%	47.0%

## Participants and Beneficiaries by Activity and Modality

**Table 2: Beneficiaries by Activity and Modality**

Activity	Planned (food)	Planned (CBT)	Planned (total)	Actual (food)	Actual (CBT)	Actual (total)	% Actual v. Planned (food)	% Actual v. Planned (CBT)	% Actual v. Planned (total)
Unconditional resource transfers to support access to food	50,000	-	50,000	23,514	-	23,514	47.0%	-	47.0%
Nutrition treatment activities	-	-	-	-	-	-	-	-	-

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)
Malnutrition prevention activities	8,257	-	8,257	3,056	-	3,056	37.0%	-	37.0%

## Annex: Participants by Activity and Modality

Activity	Planned (food)	Planned (CBT)	Planned (total)	Actual (food)	Actual (CBT)	Actual (total)	% Actual v. Planned (food)	% Actual v. Planned (CBT)	% Actual v. Planned (total)
Unconditional resource transfers to support access to food	13,514	-	13,514	5,569	-	5,569	41.2%	-	41.2%
Nutrition treatment activities	-	-	-	-	-	-	-	-	-
Malnutrition prevention activities	8,257	-	8,257	3,056	-	3,056	37.0%	-	37.0%

## Participants and Beneficiaries by Activity (excluding nutrition)

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

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
<b>Unconditional resource transfers to support access to food</b>									
All	6,609	6,905	13,514	2,723	2,846	5,569	41.2%	41.2%	41.2%
Total participants	6,609	6,905	13,514	2,723	2,846	5,569	41.2%	41.2%	41.2%
Total beneficiaries	24,450	25,550	50,000	11,499	12,015	23,514	47.0%	47.0%	47.0%

## Nutrition Beneficiaries

## Nutrition Beneficiaries

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)
<b>Malnutrition prevention activities</b>									
Children (6-23 months)	1,841	1,916	3,757	661	687	1,348	35.9%	35.9%	35.9%
Pregnant and lactating women (18 plus)	-	4,500	4,500	-	1,708	1,708	-	38.0%	38.0%
Total beneficiaries	1,841	6,416	8,257	661	2,395	3,056	35.9%	37.3%	37.0%

## Project Indicators

### Outcome Indicators

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>SR1 Everyone has access to food</b>				
<b>Targeted food insecure refugee populations from the DRC are able to meet their basic food requirements in times of crisis</b>				
<b>Consumption-based Coping Strategy Index (Average) / Female</b>				
ANGOLA, <i>Project End Target: 2018.07, Base value: 2017.11, WFP survey, Baseline Survey, Latest Follow-up: 2018.05, WFP survey, PDM</i>	<16.62	16.62	-	22.34
<b>Consumption-based Coping Strategy Index (Average) / Male</b>				
ANGOLA, <i>Project End Target: 2018.07, Base value: 2017.11, WFP survey, Baseline Survey, Latest Follow-up: 2018.05, WFP survey, PDM</i>	<16.40	16.40	-	22.55
<b>Consumption-based Coping Strategy Index (Average) / Overall</b>				
ANGOLA, <i>Project End Target: 2018.07, Base value: 2017.11, WFP survey, Baseline Survey, Latest Follow-up: 2018.05, WFP survey, PDM</i>	<16.46	16.46	-	22.51
<b>Food Consumption Score / Percentage of households with Acceptable Food Consumption Score / Female</b>				
ANGOLA, <i>Project End Target: 2018.07, Base value: 2017.11, WFP survey, Baseline Survey, Latest Follow-up: 2018.05, WFP survey, PDM</i>	>67.40	67.40	-	39.30
<b>Food Consumption Score / Percentage of households with Acceptable Food Consumption Score / Male</b>				
ANGOLA, <i>Project End Target: 2018.07, Base value: 2017.11, WFP survey, Baseline Survey, Latest Follow-up: 2018.05, WFP survey, PDM</i>	>67.90	67.90	-	37.90
<b>Food Consumption Score / Percentage of households with Acceptable Food Consumption Score / Overall</b>				
ANGOLA, <i>Project End Target: 2018.07, Base value: 2017.11, WFP survey, Baseline Survey, Latest Follow-up: 2018.05, WFP survey, PDM</i>	>67.80	67.80	-	38.20

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>Food Consumption Score / Percentage of households with Borderline Food Consumption Score / Female</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	<14.10	14.10	-	32.90
<b>Food Consumption Score / Percentage of households with Borderline Food Consumption Score / Male</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	<12.80	12.80	-	33.20
<b>Food Consumption Score / Percentage of households with Borderline Food Consumption Score / Overall</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	<13.20	13.20	-	33.10
<b>Food Consumption Score / Percentage of households with Poor Food Consumption Score / Female</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	<18.50	18.50	-	27.80
<b>Food Consumption Score / Percentage of households with Poor Food Consumption Score / Male</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	<19.20	19.20	-	28.90
<b>Food Consumption Score / Percentage of households with Poor Food Consumption Score / Overall</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	<19.00	19.00	-	28.70
<b>Food Expenditure Share / Female</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey	<63.90	63.90	-	-
<b>Food Expenditure Share / Male</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey	<57.30	57.30	-	-
<b>Food Expenditure Share / Overall</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey	<59.10	59.10	-	-
<b>SR2 No one suffers from malnutrition</b>				
<b>Food insecure and vulnerable populations in refugee settings have improved nutritional status by 2018</b>				
<b>Proportion of eligible population that participates in programme (coverage) / Female</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP programme monitoring, WFP Monitoring, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	>70.00	0.00	-	90.00
<b>Proportion of eligible population that participates in programme (coverage) / Male</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP programme monitoring, WFP Monitoring, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	>70.00	0.00	-	80.60



Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>Proportion of eligible population that participates in programme (coverage) / Overall</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP programme monitoring, WFP Monitoring, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	>70.00	0.00	-	86.50
<b>Proportion of target population that participates in an adequate number of distributions (adherence) / Female</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	>66.00	0.00	-	53.50
<b>Proportion of target population that participates in an adequate number of distributions (adherence) / Male</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	>66.00	0.00	-	66.10
<b>Proportion of target population that participates in an adequate number of distributions (adherence) / Overall</b>				
ANGOLA, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, WFP survey, Baseline Survey, <b>Latest Follow-up:</b> 2018.05, WFP survey, PDM	>66.00	0.00	-	58.10

## Gender Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality / Decisions jointly made by women and men</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	=40.00	21.80	-	57.40
<b>Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality / Decisions made by men</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	=30.00	42.60	-	13.10
<b>Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality / Decisions made by women</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	=30.00	35.60	-	29.50

## Protection and Accountability to Affected Populations Indicators

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
<b>Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance) / Female</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	>80.00	5.40	-	9.20
<b>Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance) / Male</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	>80.00	1.20	-	4.20
<b>Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance) / Overall</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	>80.00	2.50	-	5.20
<b>Proportion of targeted people accessing assistance without protection challenges / Female</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	>90.00	62.00	-	93.80
<b>Proportion of targeted people accessing assistance without protection challenges / Male</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	>90.00	72.00	-	96.60
<b>Proportion of targeted people accessing assistance without protection challenges / Overall</b>				
ANGOLA, 1. Provide food and/or cash transfers to refugees living in official refugee settlements/camps, 2. Prevent acute malnutrition among targeted groups including children 6-23 months (male & female) and PLWs, Food, <b>Project End Target:</b> 2018.07, <b>Base value:</b> 2017.11, <b>Latest Follow-up:</b> 2018.05	>90.00	69.00	-	96.00

## Resource Inputs from Donors

### Resource Inputs from Donors

Donor	Cont. Ref. No.	Commodity	Purchased in 2018 (mt)	
			In-Kind	Cash
MULTILATERAL	MULTILATERAL	Corn Soya Blend	-	13

Donor	Cont. Ref. No.	Commodity	Purchased in 2018 (mt)	
			In-Kind	Cash
MULTILATERAL	MULTILATERAL	Iodised Salt	-	28
MULTILATERAL	MULTILATERAL	Maize Meal	-	998
MULTILATERAL	MULTILATERAL	Peas	-	46
MULTILATERAL	MULTILATERAL	Vegetable Oil	-	109
		<b>Total</b>	-	<b>1,195</b>