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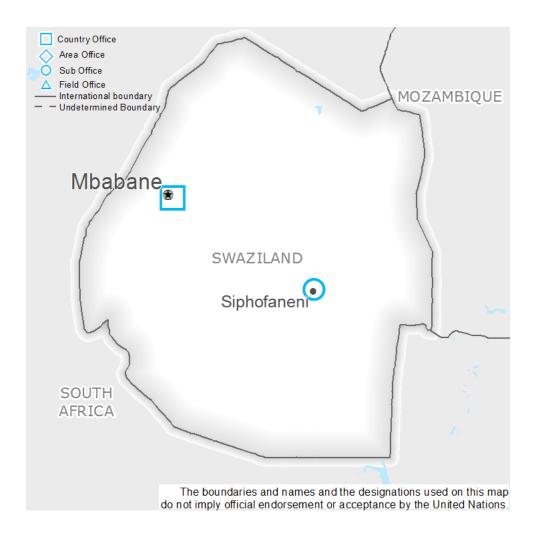
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## **Country Context and WFP Objectives**



## **Country Context**

The Kingdom of Swaziland has a population of 1.1 million people and ranks 150 out of 188 in the 2015 Human Development Index. Despite its status as a lower middle-income country, 63 percent of Swazis live below the national poverty line.

Swaziland has a very high HIV prevalence, affecting 26 percent of the population between the ages of 15-49. Life expectancy is 49 years and 45 percent of children are orphaned or vulnerable. Chronic malnutrition is a major concern in Swaziland: stunting affects 26 percent of children under five years. Among children under 5 years, 2 percent are wasted and 6 percent are underweight. The Cost of Hunger in Swaziland report found that 3 percent of Gross Domestic Product (GDP) is lost annually to child malnutrition.

Swaziland is ranked 128 out of 188 countries in the Gender Inequality Index. Factors contributing to increased vulnerability among women and girls include poor access to income generating opportunities and social services; and gender-based violence.

Swaziland is also vulnerable to drought, primarily in the south-east and nearly 77 percent of Swazis rely on subsistence farming for their livelihoods. In 2015/16, Southern Africa experienced the driest agricultural season of the past 35 years as a result of the El Niño phenomenon. Swaziland was one of the countries in the region hardest hit by the drought. The exceptional lack of precipitation, compounded by the impact of poor rainfall the previous year, resulted in significant losses of rain-fed yields, underperforming irrigated crops, and poor pasture conditions. This has contributed to an increasingly vulnerable situation, with food insecurity affecting over 30 percent of the Swazi population and 350,000 people in need of food assistance.

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Gross domestic product (GDP) growth decelerated from 6.5 percent in the early 1990s, decreasing to an estimated 1.3 percent in 2016, significantly below the targeted 5 percent annual average growth rate. Significant reduction of revenues from the Southern Africa Custom Union (SACU) in 2016 and the depreciation of the South Africa's Rand to which the Swaziland Lilangeni is pegged have negatively affected the economic outlook of the country.

#### Response of the Government and Strategic Coordination

WFP is cognizant of the priorities of the Government of Swaziland as enshrined in its National Development Strategy (NDS), the Poverty Reduction Strategy and Action Programme (PRSAP); therefore programmes are designed and are aligned with national development plans and the UNDAF (2016-2020); and the Sustainable Development Goals (SDGs).

As a result of the high prevalence rate of HIV in the country, the Government is committed to enrolling and retaining clients on anti-retroviral therapy (ART) and tuberculosis (TB) treatment, part of the county's development goal of improving life expectancy from 49 years to 60 years. As a strategy to support access and adherence to HIV treatment, nutrition has been prioritized in the extended Multi-sectoral National Strategic Framework for HIV and AIDS (eNSF) under the strategic programme interventions for people living with HIV (PLHIV). It is also a key activity in the National Health Sector Strategic Plan II. WFP's nutrition interventions build on current assistance in the national HIV response, with the aim to support nutrition services to strengthen adherence to ART and TB treatment, emphasizing further decentralization and integration into health services.

Swaziland is part of the Scaling Up Nutrition (SUN) movement and has recognized chronic malnutrition as one of the primary development challenges. Under the Government Programme of Action (2013-2018) and Swaziland Development Index, stunting reduction targets have been set. WFP is a leading partner in developing the capacity of the Government to address childhood undernutrition and is the country SUN multilateral convener. In collaboration with other United Nations (UN) agencies, WFP supported the Government in developing a comprehensive national Stunting Action Plan, including a Nutrition Advocacy and Communications Strategy that lay out concrete actions to strengthen the multi-sectoral approach to mother and child nutrition. WFP also supported the development of the National Food and Nutrition Policy. Efforts towards the country's development goal of reducing stunting to 10 percent by 2022, has started to produce results - in four years, the stunting rate for children under five reduced by almost five percent, from 30.9 percent in 2010 to 25.5 percent in 2014.

In the coordination of humanitarian action, the Government of Swaziland, through the National Disaster Management Authority (NDMA), has the primary role in the initiation, coordination, and implementation of humanitarian assistance in the country. The NDMA, in collaboration with the humanitarian community in the country, has adopted a sectoral approach as the coordination structure for all emergencies, and the framework is articulated in the National Multi-Hazards Contingency Plan.

For effective coordination of the drought response, an inter-sectoral coordination platform to facilitate bi-weekly inter-cluster coordination meetings was put in place, chaired by the NDMA and co-chaired by the UN. In response to the El Niño induced drought, a state of emergency was declared in February 2016 and the Government launched the National Emergency Response Mitigation and Adaptation Plan (NERMAP) and requested financial and technical support to implement the plan.

Within the United Nations Country Team (UNCT) humanitarian action is coordinated by the Resident Coordinator supported by the Office for the Coordination of Humanitarian Affairs, to ensure synergy among humanitarian actors. For the purposes of the drought response, a drought UN Technical Working Group is in place for joint planning and review of activities and is chaired by WFP.

#### **Summary of WFP Operational Objectives**

The drought emergency coincided with WFP's initiative to review its strategic direction in Swaziland, mainly focusing on the provision of technical assistance to the Government to achieve full national ownership of food and nutrition security initiatives. While this strategic shift remains a priority for WFP in Swaziland, the occurrence of the drought required WFP to prioritize the emergency response. Since the start of the crisis, WFP supported the national response leveraging on its strengths by providing humanitarian assistance to vulnerable groups affected by the El Niño induced drought as well as providing support in the endeavor to understand the impact of the drought through various assessments.

In 2016, WFP's programmatic priorities in Swaziland focused on emergency assistance to drought-affected people, as well as to improve food security and livelihoods of the most vulnerable people affected by HIV and AIDS and

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poverty. WFP assisted the Government in providing:

- Nutrition assessments, counseling, and support to people living with HIV and AIDS, tuberculosis (TB), as well
  as, pregnant and lactating women with moderate acute malnutrition, while also supporting their families with a
  monthly household ration.
- WFP supported the Government to provide safety nets for young orphans and vulnerable children.
- WFP's technical assistance contributed to developing comprehensive strategies to address child undernutrition, particularly to prevent stunting.

All WFP projects aimed to support the Government's capacity to manage food and nutrition security interventions, with the objective to gradually hand over food and nutrition initiatives to the Government of Swaziland.

During the reporting period, WFP implemented:

Immediate Response Emergency Operation: IR-EMOP 200954 (April 2016 – July 2016), was launched to provide emergency assistance to the most vulnerable households affected by the El Niño induced drought with targeted general distributions (GD) through in-kind food distribution. The project was the precursor as WFP was preparing for the full-scale response through the EMOP which was launched in June 2016.

Emergency Operation: EMOP 200974 (June 2016 – April 2017), provides emergency assistance to the most vulnerable households affected by the El Niño induced drought with targeted general distributions (GD) through in-kind food and cash-based transfers (CBT). The project supports the Government's response under the National Emergency Response Mitigation and Adaptation Plan (NERMAP) and aims at improving and stabilize household food consumption for drought-affected groups. Secondly, the EMOP supported the strengthening of the national Early Warning, Disaster Management and Response and Food Security Monitoring systems and the capacity of the National Disaster Management Authority (NDMA).

**Development project: DEV 200353 (January 2012 – June 2017)** implemented in partnership with the Ministry of Health, assisted PLHIV, TB, and pregnant and lactating women while also supporting their families, by providing nutrition assessments with care and support services. It contributed to improving the quality of life for these clients by improving their nutritional recovery, treatment success and survival rate. WFP also provides support to their families through a monthly household ration consisting of maize, pulses and vegetable oil to complement the client support and help families cope with the costs of care. It also aims at capacity strengthening of the Ministry of Health and the Swaziland National Nutrition Council (SNNC) with the view to handing over the implementation of the project in the future. Capacity development efforts focus on project management, monitoring and reporting, storage and inventory management.

**Development project: DEV 200422 (November 2012 – December 2017)** provides nutritious meals to orphans and vulnerable children (OVC) in pre-school age attending community-led day care centres called neighbourhood care points (NCPs), across the country. The project aims to increase OVC access to nutritious food and basic social services, such as early childhood education, psychosocial support and basic health services provided at the NCPs. It also aims to strengthen the capacity of the Government to provide assistance to OVC with the prospect of eventually handing over the project. In consideration of the increased needs as consequence of the drought, the Government of Swaziland has requested WFP to continue the project.

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## **Country Resources and Results**

#### **Resources for Results**

In 2016, WFP's operations in Swaziland expanded significantly due to the emergency response to assist the most vulnerable populations affected by the El Niño induced drought. WFP simultaneously maintained its on-going development projects (DEVs). The fast expansion of operations brought considerable funding challenges. However, WFP was able to diversify the overall donor base compared to previous years.

WFP immediately started advocating for funding to the emergency response and it managed to mobilize resources from pooled funding mechanisms specialized in rapid response, including the United Nations' Central Emergency Response Fund (CERF). This enabled WFP to launch an immediate response operation (IR-EMOP) in May 2016 that assisted the most vulnerable people before scaling up through the main emergency operation (EMOP).

A majority of donor contributions were confirmed in the second half of the year enabling WFP to procure food commodities for delivery in the third and fourth quarters of the year. Due to donor flexibility and a conducive local context, WFP was able to introduce cash-based transfers (CBT) under the EMOP in addition to in-kind food distributions, which enabled WFP to tailor its response to more efficiently meet the needs of the people it served in targeted locations. WFP was also able to attract funding from non-traditional donors for the two development projects.

In October 2016, WFP received a request from the Government of Swaziland to provide assistance to an additional 100,000 people during the lean season, increasing the number of people who required assistance by WFP under the EMOP to 250,000 people. To address the increased requirement, WFP advocated for additional resources, by engaging in further dialogue with the donor community, arranging donor visits and producing additional advocacy and visibility material.

While the increased resource mobilization efforts did attract some additional funding, WFP was unable to scale up as per planned projections by December 2016. To account for the growing needs during the lean season, even with reduced resources WFP increased the number of beneficiaries reached by food distributions in December by 22 percent. The number of beneficiaries planned to be reached through cash-based transfers was significantly increased, however, due to limited resources the expansion of assistance through CBT was not possible by December 2016.

In order to address the constrained resources on the development project 200353, WFP prioritized and was able to maintain the provision of nutritious specialized food, Super Cereal, to malnourished clients throughout the year; while the distribution of the household food ration were temporary on hold from July to October.

Limited resources were available in 2016 for development project 200422, and the assistance to OVC had to be halted in May. However, joint resource mobilization efforts from the government and WFP have resulted in positive response from the donor community and WFP plans to resume activities in early 2017.

The categorization of Swaziland as a lower middle-income country and the limited presence of donors in the country poses challenges for resource mobilization efforts. However, WFP applied a number of mitigation actions to reduce this risk: it strengthened its resource mobilization strategy and engaged in further dialogue with non-traditional donors to WFP Swaziland, identifying funding opportunities that allowed for the implementation of both food and cash-based transfers.

WFP with the United Nations Country Team (UNCT) and Delivering as One, started rolling out a Business Operational Strategy (BOS). The BOS is a framework guiding UN business operations at the country level by eliminating the duplication of processes within business operations. It facilitates the strategic planning, management, monitoring and reporting of the UNCT's joint support to programme delivery through common business operations to support delivery of the United Nations Development Assistance Framework (UNDAF).

While the framework will make most headway in 2017, some improvements have already taken place in 2016. For example, Information Technology (IT) services have established an inter-agency IT backup support (IT Support provided to other agencies in case of absence of focal IT personnel) and have implemented a common communications infrastructure (new common fibre link for faster internet access at affordable rates).

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#### **Achievements at Country Level**

WFP focused on supporting the delivery of national development goals by strengthening food and nutrition security for the most vulnerable people, particularly those facing challenges of food insecurity, chronic malnutrition, and HIV. WFP's long-term objective in the country is to transition from a partner supporting direct implementation to a strengthened advocacy and advisory role. In 2016, however, with the widespread impact of the El Niño induced drought, WFP provided large-scale emergency assistance to drought-affected people, while simultaneously maintaining the ongoing development projects.

In response to the El Niño induced drought WFP was able to swiftly expand interventions and collaborate effectively with partners and donors. WFP was able to provide emergency assistance for up to 152,967 people affected by the drought, of which 30,879 people received cash-based transfers (CBT). This was the first time WFP introduced CBT in its operations in Swaziland, and its successful implementation can be attributed to strong partnerships forged with implementing partners and service providers, and a conducive context with well-functioning local markets in the areas where cash transfers were provided. By the end of the year, WFP improved and stabilized household food consumption considerably for drought affected people.

DEV 200353 and DEV 200422 combined 74,212 vulnerable people were reached with nutritious foods. In addition, WFP enhanced the Government's capacity to manage food and nutrition interventions, including food security assessments and monitoring and emergency preparedness and response. WFP also continued to build the capacity of the Ministry of Health to integrate nutrition services into Swaziland's maternal and child health services by providing technical assistance, management, coordination and monitoring of the Food by Prescription programme.

WFP's achievements in 2016 demonstrated emergency response readiness while simultaneously supporting capacity strengthening with local partners to eventually transition food and nutrition security interventions to the government. Despite operational limitations, particularly for the DEV projects, funding challenges were met with a strong resource mobilization strategy that diversified overall funding for WFP's activities in Swaziland.



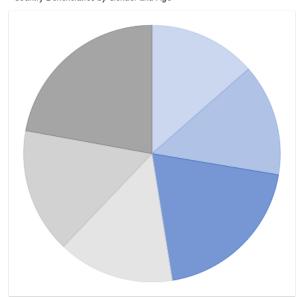
Beneficiaries	Male	Female	Total
Children (under 5 years)	30,772	33,311	64,083
Children (5-18 years)	32,025	35,783	67,808
Adults (18 years plus)	45,015	50,273	95,288
Total number of beneficiaries in 2016	107,812	119,367	227,179

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#### Country Beneficiaries by Gender and Age







## **Annual Food Distribution in Country (mt)**

Project Type	Cereals	Oil	Pulses	Mix	Other	Total
Development Project	744	5	10	439	-	1,198
Single Country EMOP	5,426	571	1,248	-	-	7,245
Single Country IR-EMOP	785	71	175	-	-	1,031
Total Food Distributed in 2016	6,956	646	1,433	439	-	9,474



## Cash Based Transfer and Commodity Voucher Distribution (USD)

Project Type	roject Type Cash		Commodity Voucher
Single Country EMOP	610,510	-	-
Total Distributed in 2016	610,510	-	-

## **Supply Chain**

Swaziland is a net importer of food commodities and produces less than its total cereal requirements. This was particularly accentuated in 2016 due to the El Niño induced drought, maize production was 64 percent lower than the previous year and lowest recorded in decades.

In 2016, WFP procured in total 11,422 mt of commodities for operations. In addition to direct procurement processes, WFP's Global Commodity Management Facility (GCMF) was utilized, to access pre-positioned reserves in the Southern Africa region. WFP reduced the lead time for procurement and receipt of food commodities as well as supporting procurement at competitive prices, hence maximizing the available resources. In 2016, WFP procured 85 percent of food through the GCMF. To guarantee the food safety and quality, independent food inspection companies were appointed to conduct quality inspections of the food in the country of origin.

Swaziland is a landlocked country hence, regional and international procured commodities enter through neighbouring countries. Good road networks facilitated efficient transport of food to storage facilities and WFP used external contractors for transportation of food commodities. WFP has one main warehouse, located in Siphofaneni, in the Lubombo region.

Due to the expansion of WFP's emergency operations in 2016 the country office procured more than three times the commodities compared to the previous year. WFP successfully handled the rapid expansion of operations, by introducing improvements to its storage management system and infrastructure. Storage capacity was increased by 20 percent and improvements were made to the quality of the storage tents by replacing five units and repairing two to avoid water leakage; the accessibility to the storage units was improved, and the handling capacity increased by doubling the number of trucks that can be loaded or offloaded at any one time.

Under development project (DEV) 200353, WFP delivered food commodities to health facilities with secure storage spaces. Assistance to orphans and vulnerable children (OVCs), through DEV 200422 was provided through many small distribution sites called neighbourhood care points (NCPs), throughout the country. This capillary distribution allowed WFP to reach national coverage, this mode of operating posed transportation challenges, as some NCPs are remote, hard to reach and have limited on-site storage capacities, requiring WFP to deliver a maximum of two months requirements at any one time.

In 2016, WFP minimized delays in deliveries by strengthening coordination between transporters, WFP warehouse and field monitoring staff, to identify and maintain solutions for timely food deliveries.

Efforts to increase supply chain efficiency and reducing costs included:

- The introduction of a new contract system which allowed WFP to use more transporters per location thus mitigating the risk of relying on the availability of only one transporter;
- The engagement of a new handling company at the warehouse that introduced an automated conveyor system
  for loading and off-loading of consignment in boxes, such as vegetable oil, significantly reducing handling time
  and potential damages to the packaging of commodities with the manual system;
- The regular review of expenditure and availability of resources for transport, storage, and handling.

Good working relations with contracted transporters as well as good food handling practices by WFP ensured that food reached beneficiaries in timely and safe manner. In 2016, WFP Swaziland recorded insignificant post-delivery losses, of less than 0.01 percent. To maintain good overall handling of commodities, the country office conducted training with cooperating partners and staff managing food at health facilities and neighbourhood care points. Training included information sessions on standard operating procedures for first in, first out (FIFO) storage practices and offered technical support to improve logistics planning for food commodities during provision of assistance.

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In 2016, WFP introduced cash-based transfers (CBT) for the first time in its programme operations. WFP conducted assessments to expand its knowledge base of the financial services, mobile payments and banking platforms that are available in the country and could possibly be used for cash interventions. Thanks to recommendations from these assessments, WFP was able to select the most cost-effective option for delivery of CBT in terms of beneficiary reach. The selected service provider facilitated distribution of cash to beneficiaries through e-money cash accounts, allowing people to receive money from local mobile money agents in their communities as opposed to having to travel longer distances to bank facilities. This delivery mechanism also mitigated against risks involved with physical handling of cash. To mitigate the risk that limited expertise and insufficient human resources at country level to implement the CBT, WFP staff received targeted training on CBT and shared knowledge with its cooperating partners. Technical support was leveraged from the expertise available at regional and headquarters level.



#### **Annual Food Purchases for the Country (mt)**

Commodity	Local	Regional/International	Total
Beans	-	73	73
Corn Soya Blend	-	143	143
Maize	-	1,155	1,155
Peas	-	102	102
Vegetable Oil	-	204	204
Total	-	1,677	1,677
Percentage	-	100.0%	

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

Commodity	Total
Beans	92
Corn Soya Blend	100
Maize	7,306
Peas	1,654
Vegetable Oil	592
Total	9,745

# Implementation of Evaluation Recommendations and Lessons Learned

In 2016, WFP commissioned a centralized operation evaluation of Development Project (DEV) 200353, Food by Prescription (FBP), with the purpose to provide accountability and learning for the future design and implementation of the project. The evaluation completed by an external evaluation firm in September 2016 provided an independent overview of the impact of the operation. The project review indicated positive results overall, it also provided recommendations on areas that can be improved. The evaluation acknowledged that WFP is the only development partner with experience and know-how in implementing the project in Swaziland and is uniquely positioned to



continue the programme and further strengthen the capacity of government counterparts.

The evaluation made the following key recommendations:

- 1. WFP to promote and support stronger integration of nutrition assessment, counselling and support (NACS), provided through the FBP, into health services, including incorporation of key programme indicators into the national Health Management Information System (HMIS);
- 2. WFP to work with Ministry of Health on the development of a handover strategy with clear timelines and responsibilities;
- 3. WFP to explore use of alternative transfer modalities (cash or vouchers);
- 4. WFP to promote stronger linkages to livelihood activities for graduating clients.

Following the evaluations, WFP strengthened stakeholder engagement in a series of ongoing technical assistance projects and consultations to prepare for eventual handover and to ensure informed decision-making about the programme design. In the last quarter of 2016, WFP supported the review of the FBP guidelines. WFP also engaged in discussions with higher management at Ministry of Health, who has acknowledged that financial responsibilities for the FBP programme should be gradually included in Government's budget. WFP will continue to implement the evaluation recommendations in 2017 and will include relevant activities in its Interim Country Strategic Plan (ICSP).

In 2016, WFP also continued to implement recommendations of the external operation evaluation of DEV 200422, supporting orphans and vulnerable children (OVC) conducted in 2014. The evaluation found that WFP should strengthen its advocacy for continued provision of social safety nets targeting OVC and a multi-sectoral approach to social protection. In 2016, WFP extended DEV 200422 through 2017 following an agreement with the government that the assistance needed to be maintained, while further engagement continues to support an enabling environment to ensure sustainable comprehensive services for OVC. WFP has been an active partner in social protection coordination, working together with the Social Welfare department in the Deputy Prime Minister's office.

Lessons learned from nutrition technical assistance initiatives included the added value of partnering with UN agencies with complementary strengths, and the continued need to advocate for high-level engagement to ensure nutrition coordination mechanisms, policy frameworks, and action plans are functioning optimally. In 2016, WFP together with partners continued to support the development of a multi-sectoral national Stunting Action Plan and a nutrition advocacy strategy.

From the drought response, WFP learned that there is still an important role for WFP to play in disaster preparedness, response and resilience, particularly leveraging on its global and local technical expertise. A Lessons Learned exercise from the WFP L3 Southern Africa El Niño Emergency is planned to be conducted in early 2017.

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## **Project Objectives and Results**

#### **Project Objectives**

Following the successful implementation of a one month Immediate Response Emergency Operation (IR-EMOP) 200954, EMOP 200974 was launched. The primary objective of the emergency response was to provide emergency food assistance targeting the most vulnerable households affected by the El Niño induced drought through in-kind food distributions and cash based transfers (CBT). The project supported the Government's response under the National Emergency Response Mitigation and Adaptation Plan (NERMAP), to improve and stabilize household food consumption for drought-affected groups.

The second objective aimed to support and strengthen national early warning, disaster management and response, food security monitoring systems and the capacity of the National Disaster Management Authority (NDMA). This capacity strengthening is part of WFP's longer term strategy to hand over projects for full government ownership and it will continue beyond the duration and scope of this project under the Development projects, and from 2018, under the WFP Interim Country Strategic Plan. This capacity strengthening is part of WFP's longer term strategy. These activities complemented capacity building initiatives carried out through the on-going Development Projects (DEV 200422 and DEV 200353).

Through the EMOP, WFP also supported improvements on data availability which contributed to the joint work and priorities of the health and nutrition sector's response, as well as ensured inclusion of nutrition and HIV indicators in the yearly food security vulnerability assessment.

This operation directly addressed Sustainable Development Goal (SDG) Zero Hunger, and contributed to SDG 5 on gender equality. It was in line with the Swaziland United Nations Development Assistance Framework (2016-2020).



## **Approved Budget for Project Duration (USD)**

Cost Category	
Capacity Dev.t and Augmentation	57,823
Direct Support Costs	855,784
Food and Related Costs	7,503,330
Indirect Support Costs	852,813
Cash & Voucher and Related Costs	3,766,106
Total	13,035,856

## **Project Activities**

- Strategic Objective 1: Save lives and protect livelihoods in emergencies
- Outcome 1: Stabilised or improved food consumption over the assistance period for targeted households and/or individuals
- Activity: General Distribution (distribution modalities: in-kind food and cash based transfers (CBT) to drought affected people)

WFP's emergency response in 2016 targeted areas worst affected by the drought in Lubombo and Hhohho regions. Geographic targeting was done in coordination with the National Disaster Management Authority (NDMA) and was based on vulnerability assessment findings.

WFP's food distribution through EMOP 200974 started in August 2016. While WFP initially planned to reach a total of 150,000 beneficiaries, as the lean season progressed and assessments revealed an even greater need for food



intervention, the Government requested WFP to increase assistance to 250,000 beneficiaries. At the end of the year, WFP had reached 153,000 people through the operation: 122,000 people with in-kind food assistance and 31,000 people with CBT. Provision of assistance through CBT started in October 2016 when WFP was able to mobilise resources for this component and put in place all the necessary arrangements, such as contracts with financial service providers and partnership agreements with cooperating partners, to be able to transfer cash to beneficiaries. As part of the scale up, WFP had planned to increase the number of beneficiaries to be assisted with CBT starting in December 2016. However, the actual scale-up will take place in early 2017 when additional resources have been mobilised.

Under the distribution of in-kind food assistance, WFP provided food commodities to cover 84 percent of daily energy requirements. WFP provided rations based on the number of individuals in a household and ration sizes were based on national guidelines in the National Emergency Response Mitigation and Adaptation Plan (NERMAP).

Under the CBT component, individuals received unconditional cash transfers at the value of Emalangeni 110 per month (approximately USD 8) through mobile money transfers. The monthly transfers were determined according to the number of people in the household and the value with other humanitarian CBT interventions in the country.

Gender issues have been mainstreamed in the design and implementation of food assistance. WFP fostered partnerships with organisations such as the United Nations Population Fund (UNFPA) who provided Sexual Reproductive Health (SRH) services and Gender Based Violence (GBV) messaging, as complementary activities to food assistance.

WFP started preparing the roll-out of its corporate digital beneficiary and transfer-management platform (SCOPE) to standardise beneficiary management systems across distribution modalities and between cooperating partners. The registration of all beneficiaries in a single beneficiary management platform will reduce the risk of overlap in beneficiary counting and ease distribution planning and reconciliation processes. In 2016, WFP Swaziland staff received training on the platform and the full roll out of SCOPE is expected in 2017.

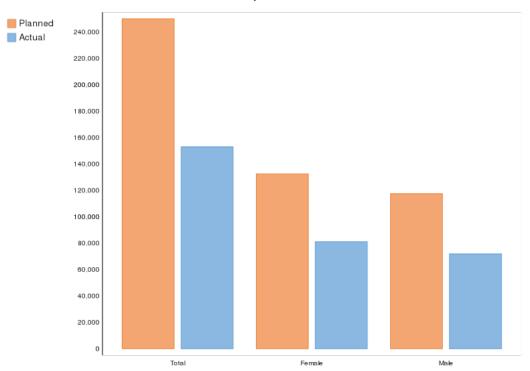
- Strategic Objective 2: Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings following emergencies
- Outcome 1: Capacity developed to address national food insecurity needs
- Activity: Technical assistance

Through this technical assistance component, and efforts to link the emergency response to resilience building, the EMOP contributed to WFP's longer term strategy in the country, aimed to promote full national ownership and management of food and nutrition security interventions. WFP supported the strengthening of national early warning, disaster management and response, food security monitoring systems, as well as the capacity of NDMA.

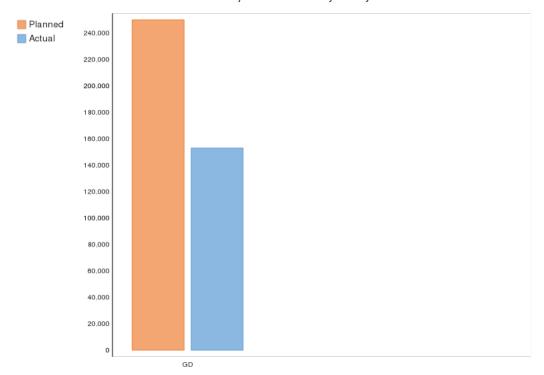
WFP, together with UNICEF, UNFPA and the World Health Organization (WHO), supported a comprehensive drought health and nutrition assessment, conducted in March 2016. For the yearly joint Vulnerability Assessment in 2016, WFP advocated for the inclusion of nutrition and HIV indicators, and data on underweight, stunting, wasting, obesity, minimum acceptable diet (MAD), minimum dietary diversity (MDD), minimum meal frequency (MMF) and food consumption were collected. HIV prevalence was also included and information on chronic disease affecting households was further broken down to specify HIV, tuberculosis (TB), diabetes and cancer. Gender disaggregated data was also further integrated in data collection and analysis.



#### Annual Project Beneficiaries



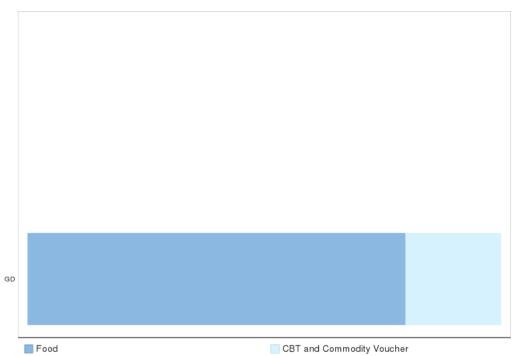
#### Annual Project Beneficiaries by Activity



GD: General Distribution (GD)







GD: General Distribution (GD)



Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Beans	1,593	59	3.7%
Maize	6,372	5,426	85.2%
Peas	-	1,189	-
Vegetable Oil	573	571	99.5%
Total	8,538	7,245	84.9%

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

Modality	Planned (USD)	Actual (USD)	% Actual v. Planned	
Cash	2,262,478	610,510	27.0%	
Total	2,262,478	610,510	27.0%	

## **Operational Partnerships**

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WFP aligned activities under IR-EMOP 200954 and EMOP 200974 to the national drought response, coordinated by the National Disaster Management Authority (NDMA) reporting to the Deputy Prime Minister's Office. For effective coordination of the response, and to strengthen partnerships to achieve operational goals, the NDMA facilitated biweekly inter-sector meetings. The meetings provided a forum to address implementation issues, prioritisation in light of limited availability, and ensured coordination among stakeholders. WFP co-chaired the coordination meetings as the chair of the UN technical working group on drought.

The UN working group was instrumental in coordinating support by the UN Country Team (UNCT) to the national emergency response. Through coordinated efforts, the UN was able to access funding from the Central Emergency Response Fund (CERF) and provide immediate assistance through life-saving activities. Additionally, the UN working group developed a Humanitarian Needs Overview and a Humanitarian Response Plan to articulate needs and response, and to provide regular reports on progress and gaps.

Together with FAO and the Ministry of Agriculture, WFP co-chaired the agriculture and food security sector. WFP also actively contributed to the health and nutrition sector, and in collaboration with UNICEF, WHO and UNFPA, supported a comprehensive health and nutrition assessment in March 2016.

Following the Immediate Emergency response, WFP continued to work with four non-governmental organisations (NGOs) - Africa Co-operative Action Trust (ACAT), Caritas, Save the Children, and World Vision. The partners were responsible for targeting, food distribution, community mobilisation and monitoring. NGO partners focusing on food relief and food security are part of the Food Security Consortium (FSC), which is led by the Coordinating Assembly of NGOs (CANGO), Swaziland's NGO umbrella organisation.

As part of the coordination between NDMA and the FSC, WFP's partners were assigned geographic areas of operation based on their local presence, previous experience and knowledge of the humanitarian situation on the ground. This allocation mechanism ensured effective collaboration and implementation of activities.

WFP worked with partners to support the process of developing a beneficiary selection criteria, which was harmonized and adopted by the NDMA. WFP further trained its cooperating partners to strengthen their capacity on how to budget for food assistance interventions in order to ensure efficiency and effectiveness during the response. WFP strengthened their capacity through training on beneficiary targeting, sensitisation, food and cash handling, beneficiary feedback, nutrition messaging and integration of gender sensitive approaches.

The emergency response allowed WFP to explore new partnerships, such as collaborations with a financial service provider to assist with cash based transfers (CBT). The partner is the only mobile phone service provider in the country to facilitate distribution of cash through e-money cash accounts, locally known as Mobile Money. Additionally, WFP has initiated a collaboration with a tertiary education institution, the Swaziland Christian University, to manage a beneficiary feedback mechanism for CBT.

As part of the emergency response, WFP also partnered with UNFPA for the provision of health and protection services. Specifically, UNFPA and NGOs hosted community sensitisation sessions before food distributions on sexual reproductive health (SRH), HIV prevention and gender based violence (GBV). In remote areas with limited access to health facilities, mobile health services linked to HIV and SRH were also made available, and dignity kits were distributed to adolescent girls. WFP also provided UNFPA with storage space for the kits at WFP warehouses.

To support resilience efforts in parallel to food assistance activities, WFP partnered with the Food and Agricultural Organization (FAO) to ensure that complementarity livelihood activities were implemented. Together with the Ministry of Agriculture, FAO distributed farming inputs to the areas where WFP implemented in-kind food assistance

## **Performance Monitoring**

WFP's Monitoring and Evaluation (M&E) plan detailed how monitoring activities would be implemented, and included information on staffing, monitoring coverage, processes, output and outcome monitoring, and resources required for monitoring.

Monitoring activities were carried out by WFP field monitoring assistants (FMA) and by the cooperating partners and included three main components: process monitoring, output monitoring and outcome monitoring. Additionally, WFP assessed socioeconomic status at community level, collected local food prices and gathered data for food security information. To ensure that monitoring activities were carried out effectively, WFP regularly trained FMAs and cooperating partner staff on M&E procedures and data collection tools, such as questionnaires and checklists.

Process monitoring was carried out by WFP to assess partners' adherence to procedures during food distributions and the effectiveness of the implementation. Process monitoring tracked implementation progress and listed factors that influenced expected outcomes of the interventions. Field monitors recorded detailed findings and produced a



separate report for immediate follow-up. Following training conducted with partners, findings from the field revealed that partners overall followed the required procedures during food distribution and any challenges encountered were followed up by WFP staff and partners.

During output monitoring, cooperating partners collected a set of basic indicators before and after distribution. These indicators included the number of beneficiaries, their gender and age, as well as the type and quantity of food delivered. Cooperating partners used regular data collection tools provided by WFP to record information which was entered into Country Office Tool for Managing (programme operations) Effectively (COMET), a WFP corporate database which stores beneficiary data to enhance country office reporting processes.

Outcome monitoring was carried out to measure the results achieved against programme objectives. It identified intended or unintended effects of the intervention and allowed WFP to make informed decisions, take corrective action and strengthen accountability. To measure outcome results, WFP conducted a baseline assessment at the early stages of the operation, which was followed up with a post distribution monitoring (PDM) survey. Baseline data for the in-kind modality was collected in July 2016 and in October for the cash based assistance. A two-stage cluster sample procedure was applied for the data collection exercises. Stage one involved random selection of the Food Distribution Points (FDP) and stage two included random selection of households receiving assistance from the selected FDPs. For more effective data collection, mobile devices were used to record information for most monitoring activities, allowing WFP to obtain more reliable and accurate data and improve efficiency.

Based on lessons learned from 2015, improvements were made to the consolidation and use of findings from evaluations to inform project design and monitoring. WFP also improved analysis, reporting and systematic data storage. WFP has established an escalation system to act in an appropriate and timely manner to emergencies.

#### **Results/Outcomes**

#### **OUTCOME 1**

- Strategic Objective 1: Save lives and protect livelihoods in emergencies
- Outcome 1: Stabilised or improved food consumption over the assistance period for targeted households and/or individuals
- Activity: General Distribution (distribution modalities: in-kind food and Cash Based Transfers (CBT) to drought affected people)

WFP used the following two outcome indicators to track progress towards Strategic Objective 1:

- 1. Food consumption score (FCS)
- 2. Household dietary diversity score (HDDS).

FCS is a proxy indicator for food access based on the food groups that households consumed in the past seven days prior to the interviews. It is a measure of dietary diversity, food frequency and the relative nutritional importance of the food consumed by the household. The outcome target was to reduce the prevalence of poor food consumption among the targeted households by 80 percent from the baseline.

A post-distribution monitoring (PDM) survey was conducted for food and cash interventions in mid-December 2016. Results showed that the overall proportion of households with poor FCS decreased significantly compared to the baseline, with an overall reduction of 70 percent. Female-headed households performed particularly well, exceeding the target with a reduction of 81 percent in households with poor food consumption. Women are usually responsible for food handling and ensuring all family members are appropriately fed within a household.

Results of the PDM survey presented some differences between transfer modalities. For in-kind food assistance, the proportion of households with poor FCS decreased by 92 percent, while it decreased by 56 percent among people supported with CBT. The positive FCS trend for in-kind food beneficiaries is likely a result of the size of the food rations, which accounted for 84 percent of the daily energy requirement, whereas the monthly cash entitlement accounted for 42 percent of the daily energy requirement. However, it should be noted that the food consumption of CBT beneficiaries had shown improvement in a short period of time.

The PDM showed an overall improvement in HDDS for all households. CBT beneficiaries had a slightly higher average HDDS, likely caused by their ability to buy different food items and thus further diversifying their food baskets.

#### **OUTCOME 2**

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



- Outcome 1: Capacity developed to address national food insecurity needs
- Activity: Technical assistance

To measure the level of achievement of this outcome, WFP used the emergency preparedness and response capacity index (EPCI), which represents an average score of changes resulting from interventions in the area of preparedness and emergency response. It consists of six variables:

- food security and vulnerability analysis;
- food assistance planning;
- humanitarian supply-chain management;
- emergency telecommunications;
- hazard analysis and early warning in support of food security;
- national preparedness and response.

When the drought emergency was declared, the Government in collaboration with the humanitarian community, activated the following relevant sectors for response to the drought: agriculture and food security; health and nutrition, Water, Sanitation and Hygiene (WASH), protection and coordination. Sectors for emergency telecommunications and supply chain management were not established. WFP supported the strengthening of national early warning, disaster management and response, food security monitoring systems, as well as the capacity of National Disaster Management Agency (NDMA).

Analysis of capacity development efforts show improvement in emergency response, specifically in food assistance planning, national preparedness and response in support of food security, with the Government taking the lead in these areas with external support. The EPCI score attained was 15 which exceeded the target.

National emergency preparedness and response is done through the framework of the National Multi-Hazard Contingency Plan which articulates planning and response activities for a number of emergency occurrences in the country. WFP provided technical assistance to the NDMA to draft and develop a monitoring plan for the National Emergency Response Mitigation and Adaptation Plan (NERMAP), which guided all the activities for the drought response.

Hazard analysis and early warning, as well as food security and vulnerability analysis were the primary areas of WFP support to the Government during the emergency. To facilitate in-depth understanding of the food security and vulnerability situation, two assessments were conducted which included the multi-sector rapid assessment and the Vulnerability Assessment and Analysis, which WFP supported through the technical assistance from the WFP Regional Bureau in Johannesburg, aimed at strengthening analysis and interpretation of the results. WFP, together with FAO, also supported conducting of the Integrated Food Security Phase Classification (IPC) to classify the level of the food security situation in the country.

#### **Progress Towards Gender Equality**

In line with the WFP Gender Policy and regional Gender Implementation Strategy, gender was mainstreamed into the design and implementation of the programme. WFP and its cooperating partners worked with communities to establish gender-balanced food management committees, and promoted women's participation in leadership positions. Results show that around 80 percent of leadership positions were filled by women, which helped improve targeting and ensured that the needs of women and children were adequately addressed.

During sensitisation sessions, communities were encouraged to register women as the recipients of household entitlements and to collect food or cash rations on distribution days. While traditionally men are seen as head of households, beneficiaries were encouraged to jointly participate in the decision making over the use of household resources, particularly over the use of assistance received from WFP.

WFP noted that more women were registered as the recipients of household entitlements, indicating that the sensitisation sessions were successful. The post distribution monitoring (PDM) survey found women to be the main decision makers for the use of food among households receiving in-kind food assistance (74 percent), while for those assisted through CBT, the survey showed that women and men made decisions together in 40 percent of the households. The proportion of women making decision over the use of cash was higher (52 percent) than the proportion of men making decisions (8 percent).

Results from the CBT PDM survey showed that 15 percent of the interviewed household had episodes of verbal disagreements and domestic violence linked with the receipt of the cash assistance. Some of the reasons given for this was mistrust and jealousy in the household, or a household member trying to influence the others on how to



spend the money. To address issues related to gender and to mitigate against gender based violence (GBV), WFP systematically analysed and recognised GBV related concerns. In collaboration with UNFPA, WFP included messaging on GBV in community sensitisation sessions before distributions of food/cash. As part of its commitment to ensure safe and dignified food assistance programmes, WFP also takes into account distance to, location and conditions of programme sites, adoption of harmful coping mechanisms as a result of food insecurity and unequal power dynamics.

WFP partnered with UNFPA to include messages on sexual reproductive health (SRH) and HIV prevention in community sensitisation sessions on food/cash assistance. The campaigns informed households, especially women, about good practices, as well as referrals to health centres. In addition, UNFPA and partners provided HIV prevention and SRH services and distribution of dignity kits for girls alongside WFP's food and cash distributions. The Family Life Association of Swaziland (FLAS), the department of Social Welfare and World Vision participated for purposes of referral and follow-up for protection issues. All WFP staff and cooperating partners were trained in basic principles for prevention of sexual exploitation and abuse in humanitarian assistance.

### **Protection and Accountability to Affected Populations**

While security concerns are generally limited in Swaziland, WFP and partners, in coordination with local authorities, had a risk mitigation plan in place to ensure that safety measures were considered during distributions. Distribution of food assistance was carried out in the morning to allow beneficiaries to collect food and return home during the daytime, making them less vulnerable to theft. In 2016, beneficiaries did not report any major incidence or raise any safety concerns with regards to travelling to, from or at WFP assistance sites.

To ensure accountability to vulnerable groups, food committees were represented by different sectors of the communities, including rural health motivators and support groups of people living with HIV, who ensured that the needs of other vulnerable groups, such as the chronically ill and people living with disabilities, were represented during discussions.

Before food distribution, WFP and partners conducted information sessions to communicate relevant information to beneficiaries to ensure smooth implementation. These sessions included information on programme objectives, beneficiary selection criteria, implementation modalities, rations to be received, and how to lodge complaints about the programme. Regular field monitoring visits provided an opportunity for WFP staff to keep beneficiaries informed of the planned activities and forthcoming food distributions.

As part of WFP's efforts to strengthen accountability, a complaints and feedback mechanism was established to give beneficiaries a platform to raise their concerns and improve the efficiency of the intervention. The feedback mechanism consisted of a help desk on the day of distribution with representatives from WFP, cooperating partners and community leaders, and suggestion boxes placed at strategic points at each food distribution site, as well as complaints collected by WFP field monitoring staff during regular monitoring visits.

WFP did not receive many complaints from beneficiaries; on the contrary, in most cases beneficiaries expressed their appreciation of the assistance. To strengthen independence of the complaints and feedback mechanism, as well as improve its coverage, WFP recently initiated collaboration with a tertiary education institution - the Swaziland Christian University. Beneficiaries will have a platform to either comment, complain or make suggestions on the programme through reverse call or text messaging. As part of their training, completing psychology students from the University will record the comments and complaints, organise them according to pre-defined categories and forward them to WFP for action. WFP plans to initiate a partnership with UNICEF to use the U-Report platform, another way to engage with beneficiaries, through text messaging services.

Overall, 58 percent of beneficiaries receiving in-kind food assistance were well informed about the programme, thus showing a slight improvement since collecting the baseline data. The improvement was more significant among female-headed household, which improved from 50 to 61 percent. Eighty one percent of the beneficiaries were able to explain what rations they should receive, and 77 percent demonstrated that they understood the eligibility criteria. Additionally, 68 percent were aware that they could submit complaints.

### **Story Worth Telling**

Busisiwe Sigwane, mother of 12 children, is a farmer who lives in a small community in Lugongolweni, located in the Lubombo region. Her compound is surrounded by plots of maize crops meant to provide food for her household. The thin leafy stalks of the maize are small and scattered, an alarming sight at the time of the year when tall green



maize crops should decorate the fields.

In October 2016, she was among the 30,000 people across Swaziland who benefited from the innovative cash-based transfer assistance which is being implemented by WFP as part of its overall response to the El Niño-induced drought in Swaziland. It is the first time for WFP to implement cash transfers to people in need of humanitarian assistance in the country.

"The cash I receive every month is enough for me to buy food for my household. Instead of surviving on one meal a day, we now eat three times a day and I am happy my children won't have to go to sleep hungry," Busisiwe narrated, adding that the SZL110 per household member also eases the constraints on the limited financial resources of the household, allowing her to afford to buy other essential items from the local shops, such as soap and cookware.



## **Figures and Indicators**

#### **Data Notes**

Cover page photo © WFP/ Paula Fredin "Mobile money agent disburses cash to a man in Nkilongo, Lubombo as part of WFP's mobile money initiative"

## **Overview of Project Beneficiary Information**

**Table 1: Overview of Project Beneficiary Information** 

Beneficiary Category	Planned (male)	Planned (female)	Planned (total)	Actual (male)	Actual (female)	Actual (total)	% Actual v. Planned (male)	% Actual v. Planned (female)	% Actual v. Planned (total)	
Total Beneficiaries	117,500	132,500	250,000	71,894	81,073	152,967	61.2%	61.2%	61.2%	
By Age-group:										
Children (under 5 years)	15,000	17,500	32,500	9,178	10,708	19,886	61.2%	61.2%	61.2%	
Children (5-18 years)	37,500	42,500	80,000	22,945	26,004	48,949	61.2%	61.2%	61.2%	
Adults (18 years plus)	65,000	72,500	137,500	39,771	44,361	84,132	61.2%	61.2%	61.2%	
By Residence	By Residence status:									
Residents	117,500	132,500	250,000	71,894	81,073	152,967	61.2%	61.2%	61.2%	

## **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)	122,000	128,000	250,000	122,088	30,879	152,967	100.1%	24.1%	61.2%

#### **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)	24,400	25,600	50,000	24,418	6,174	30,592	100.1%	24.1%	61.2%

## **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 Distrib	General Distribution (GD)									
People participating in general distributions	23,500	26,500	50,000	14,378	16,214	30,592	61.2%	61.2%	61.2%	
Total participants	23,500	26,500	50,000	14,378	16,214	30,592	61.2%	61.2%	61.2%	
Total beneficiaries	117,500	132,500	250,000	71,894	81,073	152,967	61.2%	61.2%	61.2%	

## **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 improved food consumption over assistance period for targeted households	s and/or individ	uals		
FCS: percentage of households with poor Food Consumption Score				
SWAZILAND, Project End Target: 2017.03, PDM, Base value: 2016.08, WFP survey, PDM, Latest Follow-up: 2016.12, WFP survey, PDM	<1.43	7.13	-	2.13
FCS: percentage of households with poor Food Consumption Score (female-headed)				
SWAZILAND, Project End Target: 2017.03, PDM, Base value: 2016.08, WFP survey, PDM, Latest Follow-up: 2016.12, WFP survey, PDM	<1.78	8.92	-	1.71
FCS: percentage of households with poor Food Consumption Score (male-headed)				
SWAZILAND, Project End Target: 2017.03, PDM, Base value: 2016.08, WFP survey, PDM, Latest Follow-up: 2016.12, WFP survey, PDM	<0.95	4.73	-	2.52

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Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up	
Diet Diversity Score					
SWAZILAND, Project End Target: 2017.03, PDM, Base value: 2016.08, WFP survey, PDM,					
Latest Follow-up: 2016.12, WFP survey, PDM	>4.50	4.40	-	4.96	
Diet Diversity Score (female-headed households)					
SWAZILAND, Project End Target: 2017.03, PDM, Base value: 2016.08, WFP survey, PDM,					
Latest Follow-up: 2016.12, WFP survey, PDM	>4.50	4.34	-	5.00	
Diet Diversity Score (male-headed households)					
SWAZILAND, Project End Target: 2017.03, PDM, Base value: 2016.08, WFP survey, PDM,					
Latest Follow-up: 2016.12, WFP survey, PDM	>4.50	5.39	-	4.93	
SO2 Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies					
Capacity developed to address national food insecurity needs					
EPCI: Emergency Preparedness and Response Capacity Index					
SWAZILAND, Project End Target: 2017.03, Base value: 2016.08, Joint survey, Latest					
Follow-up: 2016.12, Joint survey	>13.00	13.00	-	15.00	

## **Output Indicators**

Output	Unit	Planned	Actual	% Actual vs. Planned
SO2: General Distribution (GD)				
Number of food security and nutrition monitoring/surveillance reports produced with WFP support	report	3	4	133.3%
Number of government counterparts trained in data collection and analysis on food and nutrition security	individual	9	13	144.4%
Number of national assessments/data collection exercises in which food security and nutrition were integrated with WFP support	exercise	3	4	133.3%
Number of technical support activities provided on food security monitoring and food assistance	activity	2	3	150.0%

## **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				
SWAZILAND, General Distribution (GD), Project End Target: 2017.03, Base value: 2016.08, Latest Follow-up: 2016.12	=50.00	17.70	-	24.80
Proportion of households where females make decisions over the use of cash, voucher or food				
SWAZILAND, General Distribution (GD), Project End Target: 2017.03, Base value: 2016.08, Latest Follow-up: 2016.12	=25.00	70.10	-	64.30



Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where males make decisions over the use of cash, voucher or food				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=25.00	12.20	-	10.90
Proportion of women beneficiaries in leadership positions of project management committees				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	>50.00	80.20	-	81.60
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
SWAZILAND, General Distribution (GD), Project End Target: 2017.03, Base value: 2016.08, Latest Follow-up: 2016.12	>60.00	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 (men) informed about the programme (who is included, what people will receive, where people can complain)				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=70.00	60.60	-	55.10
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=80.00	100.00	-	98.20
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=70.00	50.30	-	61.30
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=80.00	100.00	-	98.30
Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=70.00	54.70	-	57.90
Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site				
SWAZILAND, General Distribution (GD), <b>Project End Target</b> : 2017.03, <b>Base value</b> : 2016.08, <b>Latest Follow-up</b> : 2016.12	=80.00	100.00	-	98.20



## **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)		
SWAZILAND, General Distribution (GD), Project End Target: 2017.03, Latest Follow-up: 2016.12	=340,040.00	97,598.00
Number of partner organizations that provide complementary inputs and services		
SWAZILAND, General Distribution (GD), Project End Target: 2017.03, Latest Follow-up: 2016.02	=9.00	9.00
Proportion of project activities implemented with the engagement of complementary partners		
SWAZILAND, General Distribution (GD), Project End Target: 2017.03, Latest Follow-up: 2016.12	=100.00	100.00

## **Resource Inputs from Donors**

## **Resource Inputs from Donors**

			Purchased	in 2016 (mt)
Donor	Cont. Ref. No.	Commodity	In-Kind	Cash
African Dev Bank	ADB-C-00029-01	Maize	-	1,155
African Dev Bank	ADB-C-00029-01	Peas	-	263
African Dev Bank	ADB-C-00029-01	Vegetable Oil	-	99
Australia	AUL-C-00244-10	Maize	-	660
Australia	AUL-C-00244-10	Peas	-	245
Australia	AUL-C-00244-10	Vegetable Oil	-	89
Japan	JPN-C-00498-04	Maize	-	336
UN CERF	001-C-01448-01	Maize	-	3,155
UN CERF	001-C-01448-01	Peas	-	791
UN CERF	001-C-01448-01	Vegetable Oil	-	273
USA	USA-C-01248-01	Beans	-	119
USA	USA-C-01248-01	Maize	-	2,041
USA	USA-C-01248-01	Peas	-	318
USA	USA-C-01248-01	Vegetable Oil	-	204
		Total	-	9,748

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