

Regional Emergency Operation

West Africa 200777

Providing life-saving support to households in Cameroon, Chad, and Niger directly affected by insecurity in northern Nigeria	
Number of beneficiaries	238 068
Duration of project	1 January 2015 – 31 December 2015 (12 months)
Gender marker code*	2a
WFP food tonnage (<i>mt</i>)	38 742
WFP cash transfers (<i>USD</i>)	1 404 000

Cost (United States dollars)	
Food and related costs	39 578 717
Cash and vouchers and related costs	1 675 907
Capacity development & augmentation	0
Direct support cost	5 622 946
Indirect support cost	3 281 430
Total cost to WFP	50 159 000

EXECUTIVE SUMMARY

Since early 2013, returnee and refugee populations have been fleeing northern Nigeria across land and water borders to Cameroon, Chad and Niger. Until recently, numbers were relatively low and populations were supported under WFP or partner existing activities. However, growing insecurity in 2014 has led to important peaks in arrivals, most recently in August 2014, and the growing number of arrivals is anticipated to continue. In Cameroon, cross-border insecurity is creating waves of internal displacement, and disrupting normal economic and planting activities in areas of the Far North.

The influx of refugees, returnees, and internally displaced persons is putting further strain on already stretched environmental resources and basic services across the three receiving countries. Meanwhile, insecurity in northern Nigeria has disrupted traditional cross border trade and herding and impacted market prices in the neighboring countries; as the bread basket for the greater region, there is growing concern regarding the 2014/2015 harvest in Nigeria following from large-scale internal displacement and poor rains.

* For coding criteria, refer to <https://www.humanitarianresponse.info/system/files/documents/files/gm-overview-en.pdf>.

West Africa Regional Emergency Operation 200777 (EMOP) responds to the evolving situation that is marked by: fast-growing population influxes since August 2014; an emergency nutrition situation observed among newly arriving refugee children; a changing dynamic of arrivals with increasing numbers of female-headed households and children; an internally displaced population in Cameroon; and rising security risks for staff and partners operating in the remote areas.

The EMOP aims to support 238,000 beneficiaries over twelve months. As a regional operation, WFP is able to ensure coherent objectives and strategies across the countries and to support more equitable distribution of resources. Target groups include refugees (Cameroon, Chad, Niger), returnees (Niger), and internally displaced persons (Cameroon). In all three countries, poor and very poor local populations whose access to food has been aggravated as a direct result of the crisis will also receive targeted assistance

Through the operation, WFP aims to meet the urgent food and nutrition needs of vulnerable people and communities during the period of crisis, in line with WFP Strategic Objective 1, “Save lives and protect livelihoods in emergencies.” Specifically to:

- Stabilize the nutrition situation of crisis-affected children through robust prevention programmes adapted to nutrition indicators of population groups; and
- Ensure the food needs of crisis-affected populations through context-specific responses, including food transfers, commodity vouchers, and conditional food assistance for assets activities.

The provision of assistance also mitigates tensions between communities in fragile receiving regions.

The geographic targeting and emergency focus of this regional operation ensures no duplication with activities ongoing under parallel resilience-building and development operations. Rather, the project is designed to recognize the complementarity and linkages with other in-country WFP operations. Parallel operations play an important role in stabilizing tensions and in ensuring equal access to malnutrition treatment services, schooling, and safety net programmes for displaced and local populations alike.

The regional response is in line with United Nations High Commissioner for Refugees (UNHCR) and partner discussions and Government policies, and supports the 2014 UNHCR Regional Appeal. The operation is being implemented in a dynamic context, and any changes to planning figures or approaches will be amended through a budget revision as required.

SITUATION ANALYSIS

Context

1. Boko Haram was founded in 2002 in Borno (Nigeria) and has been advocating for the creation of an Islamic state in northern Nigeria. Since 2010, the group has increasingly expanded its operational capabilities, carrying out targeted attacks on police, churches and markets, and the United Nations compound in Abuja (2011). Following a series of church bombings known as the “Christmas bombings” in December 2011, the Government declared a state of emergency in areas of northeast Nigeria and closed the border. Tensions and violence increased after the emergency declaration and home-grown self-defense groups emerged. In March 2014, the state of emergency was extended to cover Borno, Adamawa, and Yobe regions after the kidnapping of 276 schoolgirls in Chibok region.
2. Government response has focused on police and military force, and with the extended state of emergency, counter-insurgency activities have increased. Recently Boko Haram has changed tactics from raids on major settlements to capturing and holding territory, declaring a *Caliphate*, which has exacerbated population displacement. As of September 2014, it is estimated that 1.5 million persons have been displaced from northern Nigeria, the vast majority within the country. Presidential elections in 2015 could further aggravate the security situation in the country.
3. Since early 2013, returnee and refugee populations have been fleeing across land and water borders to Cameroon, Chad and Niger, with recent peaks in arrivals in March and again in July/August 2014 linked to increased attacks in northern villages of Nigeria. It is anticipated that the number of arrivals will continue to grow; UNHCR anticipates that caseloads will surpass 35,000 refugees in Cameroon, 10,000 refugees in Chad and 50,000 refugee or returnees in Niger.
4. Since 2013, Boko Haram has been operating increasingly in northern Cameroon, and has been responsible for cross-border attacks, looting and kidnappings, including the 2014 abduction of ten Chinese workers. In September, Boko Haram traded gunfire with Cameroonian forces as it captured Bama town, just across the border from Cameroon. As a result of the increasing Boko Haram cross-border threat, the Government of Cameroon has increased its military presence in the area, implementing a curfew and restrictions on movement. The evolving crisis has created a wave of internally displaced people (IDPs) away from border areas within the Far North region.
5. Population flows from Nigeria have been mixed, particularly in Niger where 2013 marked a higher number of Nigerian returnee arrivals compared to refugees. However, growing influxes in 2014 are overwhelmingly refugee populations. For the majority of refugee, returnee and IDP populations in Cameroon, Chad, and Niger, displacement is a response to direct attack (rather than precautionary move) and is anticipated to be of a prolonged nature.
6. Populations arrive in impoverished areas of the Sahel and on islands of Lake Chad with limited resources or services. To date, receiving communities have been supportive of the new arrivals. Continued influxes, however, will put further strain on receiving areas: unmonitored use of land and fishing resources could put further strain on the already fragile receiving environments, and could exacerbate a past history of conflict over resources.
7. Insecurity in areas of origin and in receiving areas can complicate ability to maintain a meaningful presence of humanitarians on the ground. This affects the access to accurate information on population movements and on specific needs for men and women, boys

and girls. The profile of IDPs and recent refugee movements suggests an increase in female-headed households and children compared to previous inflows. More information is required to understand the men's coping strategies and movements. According to refugees' testimonies, some men continue crossing the border in pendular movements in the effort to check on the assets left in the country of origin. WFP will provide equitable assistance to the women and men within the refugee, IDP and local communities. Assistance is also coordinated with protection partner efforts on awareness raising to reduce the risk of sexual and gender-based violence in border areas and camps.

The Food Security and Nutrition Situation

8. The make-up and movement of arriving populations varies across the three countries. In all three, refugees are arriving in vast areas of land or scattered across islands, with limited infrastructure and difficult access. Populations are mostly women and children, and influxes are growing.¹
 - a. **Cameroon:** It is estimated that 35,000 refugees are in country, more than half of them women. The vast majority of refugees have arrived in the Far North crossing through 10 entry points along the 700 km border. As per Government policy, refugees are relocated away from the border to Minawao camp, where they receive assistance. Registration and relocation of arriving populations is complicated by clashes and insecurity along the border which limit access and presence of humanitarian actors. It is anticipated that the number of refugees could quickly surpass the capacity of the camp. In addition to the northern influx, partners estimate some 4,000 refugees could arrive in southwest Cameroon by the end of 2014.
 - b. **Chad:** To date Chad has seen fewest new arrivals. However, with increased numbers arriving since July 2014, it is suspected that more people are present in the area but remain in hiding for fear of being associated with Boko Haram. While the number of registered refugees remains below 5,000 persons, it is anticipated that by the end of 2014 as many as 10,000 refugees could be in country. Recent influxes are arriving to the islands of Lac Chad, in particular to Choua Island (4 km from the Nigeria border); the refugee influx surpasses the number of local residents, and is made up overwhelmingly of women and children (80 percent). It has been agreed with the Government that refugees be relocated from the island to nearby villages of Ngoubou and Kousseri and integrated into local communities with the support of humanitarian partners. Access to the villages is complicated by abundant rains and frequent flooding.
 - c. **Niger:** Niger has the highest number of returnee and refugee populations, estimated to surpass 50,000; IRC estimates that as many as 700 to 1,000 persons are crossing the border each day, and figures could quickly reach more than 100,000 persons. The returnee population has tended to outnumber the refugee caseload, and is suspected to be 70 percent of the total influx.² However, since April 2014 new arrival trends have favoured an increasing proportion of refugees (77 percent or more) and many female-headed households and children. Populations are scattered across vast territory and more than 30 islands, with poor road infrastructure and limited land and water access; many will continue on further from their point of arrival to settle in villages with family connections.

¹ Sources: UNHCR, *Nigeria Regional Refugee Response Plan*, September 2014; rapid assessment missions in Niger: ECOSEC, mission to islands (8-9 April 2014); joint mission to Diffa (22-28 April 2014); joint mission (4-6 September 2014); UNHCR/UNICEF, *Rapid Assessment Mission – Choua* (3 August 2014); OCHA, *Northeast Nigeria – Situation Analysis*, 2014 (draft).

² The ratio of returnees to refugees is an estimate because the majority of new arrivals do not have identification.

Movement between Niger and Nigeria is a traditional practice, and distinguishing the vulnerability of different groups of arrivals is important.

9. The humanitarian situation of fleeing populations is of serious concern. Nigeria ranks 153 of 187 countries according to the UNDP Human Development Index. With over 177 million people, Nigeria is among the top 10 most populated countries in the world, and is estimated to have the second highest burden of acute malnutrition globally. The northern states most affected by the conflict are traditionally among the poorest in the country, and the situation is further aggravated by attack patterns involving the burning of homes, destruction of food storage units, and looting of health facilities. In the three northern states, farmers have largely abandoned fields, economic activities and trade have been interrupted, and the majority of education and health facilities are no longer functioning.³
10. Rapid assessments and monitoring of arriving populations underscore the critical needs, especially the fragile nutrition status of young children.⁴
 - a. **Cameroon:** In June 2014 WFP conducted a rapid nutrition screening using mid-upper arm circumference (MUAC) among new refugee arrivals in Waza and Logone Brini divisions of the Far North. In Waza, prevalence of global acute malnutrition (GAM) was reported at nearly 17 percent – reaching as high as 25 percent at one site – and more than 4 percent severe acute malnutrition (SAM) among children aged 6-59 months, both well above the emergency threshold. In Logone Brini, the situation was less dramatic, but still of important concern given GAM rates above 10 percent (surpassing the serious threshold) and SAM rates of 4 percent (well above the emergency threshold). The health and sanitation situation is a primary factor contributing to malnutrition: the Far North (including Minawao camp) has been dealing with a cholera outbreak and a measles epidemic; health partners there report high incidence of malaria and respiratory disease linked to the rainy season.
 - b. **Chad:** Nutrition data for refugees in Chad is not yet available. However, recent partner assessments indicate an absence of clean drinking water, open air defecation and absence of improved sanitation, and risks linked to rains (flooding, malaria). On Choua Island, health and malnutrition monitoring and treatment services are not available.
 - c. **Niger:** WFP monitoring in July 2014 confirmed the precarious situation of refugee/returnee households. Based on an asset index, 62 percent of households could be considered very poor, and 20 percent poor. Nutrition screening indicates extremely high levels of GAM, estimated at nearly 16 percent using MUAC, or nearly 15 percent using weight-for-height. Diarrhea, fever, and cough were primary morbidity indicators observed, though assessments have also indicated high risk of malaria, measles, and parasites. Poor households rely largely on consumption of maize flour and baobab leaves, and the majority of the population consumes untreated pond, river and lake-water. According to the United Nations Children's Fund (UNICEF), fewer than one in five children sleep under a mosquito net.

³ UNDP, *Human Development Report*, 2013; OCHA, *Northeast Nigeria – Situation Analysis*, 2014 (draft).

⁴ Sources: UNHCR, *Nigeria Regional Refugee Response Plan*, September 2014; rapid assessment missions in Niger: ECOSEC, mission to islands (8-9 April 2014); joint mission to Diffa (22-28 April 2014); joint mission (4-6 September 2014); UNHCR/UNICEF, *Rapid Assessment Mission – Choua* (3 August 2014); WFP *post-distribution monitoring* (July 2014); WFP, Far North Regional Delegation of Public Health, *Rapid MUAC Screening – Waza and Logone Birni* (June 2014); UNHCR *Situation Reports* (August and September 2014).

11. The security situation in northern Nigeria and resulting border closures are exacerbating the vulnerability of its neighbours. Fuel subsidies in Nigeria were reduced, in turn increasing trade and transport costs particularly in Niger. As the bread basket for the greater region, disruptions to agricultural production in Nigeria (compounded by concerns over rains in 2014) have a direct impact on the food security of the region. Traditional cross-border pastoralist and trade activities have also been interrupted. During a normal year in Chad, 600,000 to 800,000 heads of livestock are exported to Nigeria; this trade is now significantly reduced.⁵ In Niger, island populations must travel further to trade fish for maize and rice from Nigeria, resulting in increased transport costs and a two-thirds increase in local rice prices.⁶
12. In Cameroon, the spread of Boko Haram activities has directly impacted economic and agricultural activities in the Far North. The border has been closed, and military and police activities augmented. To mitigate infiltration by the group, movement of local populations has been hampered, a curfew established, and motorcycles temporarily banned. This has had a direct impact on household access to land, as well as on economic and market activities that depend on movement between towns and across the border. The planting season has also been disrupted by cross-border attacks and displacement. It is estimated that between 10,000 and 40,000 persons will be displaced from border areas as a direct result of violence; of these, 30,000 are anticipated to remain in more prolonged displacement requiring assistance, while other movements are anticipated to be pendular/temporary in nature.
13. The influx of refugee/returnee/displaced populations is putting a further strain on local resources. The receiving areas are already highly vulnerable food deficit regions, confronted by recurrent climate and security shocks. Areas have limited market coverage, and food prices are observed on the rise as demand increases while supply is affected by conflict. Peaks in arrivals in 2014 have occurred in the peak lean season periods when prices are historically highest. The influx creates further competition on already on limited resources: in the receiving region of Diffa (Niger) almost two-thirds of the area is affected by desertification, and local populations report an observed decrease in available wood since the arrival of returnees/refugees began last year.
14. According to recent SMART surveys, receiving regions report concerning incidence of malnutrition at: 8.9 percent GAM in Far North Cameroon (2013); 11.6 percent in Lac region of Chad (2014); and 13.8 percent in Diffa region of Niger (2014). The influx of populations is stretching health and nutrition infrastructure. A September 2014 joint mission in Niger found that more than 60 percent of malnutrition cases in treatment in Bosso (Diffa) come from the island refugee populations (compared to 25-30 percent refugees previously).⁷

POLICIES, CAPACITIES AND ACTIONS OF THE GOVERNMENT AND OTHERS

Policies, Capacities and Actions of the Governments

15. Government policies across the three countries vary.
 - a. In **Cameroon**, the Government is encouraging relocation of Far North refugees into a camp to mitigate security risks and open movement between Nigeria and Cameroon. The Government has reinforced security measures and patrols along the borders. Previously, the Government provided some food assistance to IDPs.

⁵ Workshop on Regional Livestock Trade between Nigeria and its Neighbors (May 2014).

⁶ ECOSEC, *Raid assessment Diffa Islands* (8-9 April 2014).

⁷ Joint mission, *Influx of displaced from Nigeria*, Niger (4-6 September 2014).

- b. In **Chad**, the Government is closely monitoring the situation in the Lac region to avoid spill over of the security crisis. Government policy supports integration of refugees into the local villages where they have been relocated. As an initial response to the July/August 2014 influx of new arrivals, the Government organized transportation of survival kits provided by humanitarian agencies to refugees blocked on isolated islands using its military helicopter.
- c. In **Niger**, recognizing the changing nature of population flows into the country, the Government and partners have revised the approach as of October 2014, with the intention to establish dedicated sites to support refugees. Partners will continue to support Government to integrate returnee populations into local communities. Where appropriate, this support will focus on conditional assistance to encourage peaceful co-existence with receiving communities. The policy matches the particular pattern of displacement to Niger and is supported by recent gender analyses in Diffa that recommend supporting re-integration and livelihood activities where appropriate.⁸

16. Nutrition activities across the three countries are coordinated with national ministries of health and with UNICEF.

Policies, Capacities and Actions of Other Major Actors

17. Assistance is coordinated with United Nations, NGO and Government actors:

- a. **Cameroon:** UNHCR collaborates with the Government for the registration and transfer of refugees to Minawao camp; if the security situation allows, UNHCR aims to open transit centres along the border. UNICEF provides WASH (water, sanitation and hygiene) and education services in the camp, as well as nutrition and health services in collaboration with WFP and WHO.
- b. **Chad:** UNHCR collaborates with the National Refugee Commission (CNAAR, *Commission Nationale d'Accueil et de Réinsertion des Réfugiés*) for registration of refugees in the Lac region. UNHCR and humanitarian partners facilitate the transport of refugees from isolated islands to more secure and accessible villages and provide basic services (temporary shelter, drinking water, health services). The Chadian Red Cross has also increased its presence in the area. As per the WFP/UNHCR global agreement, UNHCR will continue to support the food needs of refugees while the total figure remains below 5,000 persons – above this level, WFP will take over (anticipated from February 2015).
- c. **Niger:** WFP and the International Committee of the Red Cross have an agreement in place to avoid duplication of assistance through sharing and coordinating food needs of refugees and returnees. A proposal is under discussion with the Government for UNHCR to lead establishment of up to three sites. WFP, United Nations and NGO partners and local authorities will continue to collaborate on the two-pronged approach, supporting relief needs of refugees and working towards longer-term integration for returnee populations.

18. Assessment missions increasingly note increased incidence or risk of high-risk sexual behaviours. These observations are more concerning considering the predominance of women and children in population movements and the risk for sexually transmitted disease.⁹ UNHCR will develop and disseminate standard operating procedures for prevention of and response to sex and gender-based violence, with a psychosocial component.

⁸ CARE, *Rapid gender analysis – summary reports 1 and 2*, Diffa, Niger (August 2014).

⁹ Nigeria has a higher incidence than the three receiving countries.

Coordination

19. The cluster system has been activated in the three countries with coordination activities at the field and central level. In Cameroon, UNHCR coordinates the response under the Humanitarian Country Team. In Chad, an inter-agency committee composed of decentralized Government agencies (CNAAR and regional delegations on water, education and health), United Nations humanitarian agencies, and local and international NGOs operating in Lac region has been established to coordinate assistance. In Niger, regular coordination meetings are organized by UNHCR as lead on refugees, complemented by coordination activities of thematic groups (such as the technical working group on refugee nutrition issues).
20. At the regional level, WFP works with UNHCR and UNICEF to share information, and more widely with partners through the regional food security and nutrition working group.
21. In September 2014, UNHCR launched a Nigeria Regional Refugee Response Plan covering the final months of the year. The plan provides a platform for coordination of the humanitarian response and brings awareness to the crisis that is evolving amid little international attention. A new inter-agency plan is anticipated for 2015.
22. Contingency planning scenarios are being developed in each of the three countries. Larger waves of displacement within Nigeria and across to neighbouring countries is the most likely scenario due to: (i) continued pressure from the Government of Nigeria and air strikes on northern states; (ii) recent movements of Boko Haram and anticipated take-over of additional northern towns; and (iii) the 2015 elections. Planning caseloads in this EMOP are in line with UNHCR and partner ongoing discussions. In the event of a major escalation in population, plans will need to be revised upwards through a budget revision.

STRATEGY AND OBJECTIVES OF WFP ASSISTANCE

WFP presence in country

23. WFP implements resilience-building programmes in each of the three countries, providing a safety net for highly vulnerable populations to cope with seasonal shocks and working with partners, authorities and communities to address structural vulnerabilities and build assets. Resilience-building activities for the wider affected population will remain under the parallel in-country protracted relief and recovery operations (PRROs) due to the multi-year planning, heavy investment, and strong partnerships required. These conditions are beyond the one-year, shock-specific focus of this EMOP.
24. Important funding shortfalls have recently limited WFP's ability to maintain safety net and resilience-building programmes. Continued donor support will be critical to support receiving communities, reduce the impact of new arrivals on the environment/resources and access to services, and mitigate tensions between the local community and arriving populations.
25. Refugee/returnee and IDP children are being integrated into host community schools. Education activities in the affected regions are supported under the WFP country programme in Cameroon, development project in Chad, and PRRO in Niger.
26. The geographic targeting and emergency focus of this EMOP ensures no duplication of activities programmed under parallel resilience and development operations.¹⁰ The

¹⁰ A budget revision to the Cameroon PRRO will reduce the initial support planned to avoid any duplication with the Regional EMOP once launched.

EMOP has been designed to recognize complementarity and linkages with parallel in-country WFP operations.

Strategy and Objectives of WFP Assistance

27. Currently, the needs of refugees, returnees and displaced populations are catered to through existing in-country PRROs. This has led to a reduction in resources available for lean season safety net activities for poor and very poor local receiving communities and the wider country. One-off and country-specific refugee assistance has resulted in the absence of a longer-term strategy to assist fleeing populations and a limited understanding of regional challenges and vulnerabilities common to populations arriving in Cameroon, Chad, and Niger.
28. The EMOP responds to the evolving situation that is marked by: ever-growing population influxes since July/August 2014; an emergency nutrition situation; a changing dynamic of arrivals with increasing numbers of female-headed households and children; an internally displaced population in Cameroon; and rising security risks for staff and partners operating in the area.
29. The EMOP allows WFP to ensure coherent objectives and strategy, with specific modalities adapted to the contexts, and allows for a more equitable distribution of resources to meet the life-saving objective and to mitigate risk of exacerbating tensions between communities. The response aligns with UNHCR and partner discussions and Government policies, and supports the 2014 UNHCR Regional Appeal.
30. Through the EMOP, WFP aims to meet the urgent food and nutrition needs of vulnerable people and communities in crisis, in line with Strategic Objective 1, “Save lives and protect livelihoods in emergencies.” Specifically to:
 - Stabilize the nutrition situation of crisis-affected children through robust prevention programmes adapted to nutrition indicators of population groups; and
 - Ensure the food needs of crisis-affected populations, with implementation modalities adapted to specific local contexts.¹¹
31. The provision of assistance also mitigates tensions between communities in the fragile regions.

BENEFICIARIES AND TARGETING

32. Priority affected areas for intervention are:
 - a. **Cameroon:** Entry points along the border in the Far North of Cameroon, Minawao camp, refugee sites in the southwest (small caseload), and sites receiving displaced populations in Mayo Tsanaga, Logone and Chari, and Mayo Sava divisions of the Far North;
 - b. **Chad:** Ngoubou and Kousseri villages of Chad (with potential support to Choua island with ready-to-eat food for new arrivals); and
 - c. **Niger:** Refugee settlements/sites (formal sites to be established by UNHCR and the Government), and areas of integration of returnees in Maine Soroa, Toumour, Bosso, and Kabwela (with potential support to islands).
33. Primary target groups identified and agreed by partners across the three countries include:

¹¹ In Niger, food assistance for assets (FFA) activities have as a primary means for ensuring the food needs of crisis-affected returnee and host populations.

- a. New arrivals at border crossing points and/or transit centres;
- b. Refugees and returnees in camps/sites or integrated with local populations;
- c. Local populations and internally displaced persons identified as poor and very poor whose needs extend beyond parallel resilience-building activities and who require targeted support to meet their basic food needs as a direct result of the Nigeria crisis; and
- d. Young children and pregnant and lactating women (PLW) whose nutrition situation is already in crisis or at-risk.

**TABLE 1 : BENEFICIARIES BY COUNTRY, POPULATION GROUP, AND ACTIVITY¹²
OVER 12 MONTH DURATION**

		Food assistance		BSF		TSF		Sub-total	Sub-total without duplication
		Ready-to-eat food	Food support	Children	PLW	Children	PLW		
Cameroon	Refugees	13 000	35 000	5 670	2 430	1 090	290	57 480	35 000 ¹
	IDPs		30 000			274	86	30 360	30 000
	Locals		20 000			8 707	2 721	31 428	31 068
	sub-total	13 000	85 000	5 670	2 430	10 071	3 097	119 268	96 068
Chad	Refugees	10 000	10 000	1 000				21 000	10 000
	Locals		2 000					2 000	2 000
	sub-total	10 000	12 000	1 000				23 000	12 000
Niger	Refugees		40 000	8 000				48 000	40 000
	Returnees ²		55 000	11 000	3 300			69 300	55 000
	Locals ²		35 000	7 000	2 100			44 100	35 000
	sub-total		130 000	26 000	5 400			161 400	130 000
TOTALS	Refugees	23 000	85 000	14 670	2 430	1 090	290	126 480	85 000
	IDPs		55 000	11 000	3 300			69 300	55 000
	Returnees		30 000			274	86	30 360	30 000
	Locals		57 000	7 000	2 100	8 707	2 721	77 528	68 068
	Sub-total	23 000	227 000	32 670	7 830	10 071	3 097	303 668	238 068

¹**Cameroon:** It is anticipated that this figure will be revised and caseloads likely to increase over the course of the operation, in coordination with the Government, UNHCR and humanitarian partners.

²**Niger:** During the lean season, food and nutrition coverage for returnee and local populations will be covered under the parallel in-country PRRO to avoid overlap with the wider country-wide lean season response implemented at the community level.

Food assistance

34. *Ready-to-eat food* will ensure an immediate stock of high-energy biscuits (HEB) to new arrivals at entry points or transit sites along borders of Cameroon and Chad awaiting

¹² Sex/age disaggregated data could not be presented at time of preparation of the document. Relocation, registration and assessment is ongoing, and demographic profile keeps evolving. Upcoming assessment will allow to for more up to date and representative information on disaggregated data.

relocation to the camp in Cameroon and identified villages in Chad. The duration of the package of ready-to-eat assistance varies across the two countries depending on the needs and the context on the ground: five days in Cameroon where relocation is slowed due to insecurity near the border, and two days in Chad.

35. *Food support to refugees* ensures the complete food requirements of displaced households through varying modalities for the full duration of the EMOP. In Cameroon and Niger, refugees will be supported in camps or established sites, and WFP will provide food distribution. Refugees in Chad are integrated with the community; their food needs will be covered through commodity vouchers to support local economies where traditional cross-border trade has been interrupted.
36. *Food support to returnees* in Niger has the same objective as direct food support to refugees, however, it is implemented using a mix of conditional and unconditional assistance, in line with the Government's approach to encourage integration and reduce tensions among communities. Under the EMOP, returnees will benefit from conditional Food assistance for assets (FFA) for a maximum of six months. Recognizing the varied make-up of migration flows (including vulnerable female-headed households with young children, or without able-bodied adults), it is anticipated that 10 percent of the caseload would be supported through a more appropriate direct unconditional support during the period; the profile of these households will be identified through a vulnerability assessment planned for October 2014. In collaboration with NGOs, FFA activities will consist of low-tech, low-risk activities, including small agriculture, latrine construction, digging of wells or other support.¹³ To avoid overlap between operations, from June 2015 returnee populations will be covered under the wider PRRO lean season response. WFP will encourage local participatory planning exercises, in order to collect from women and men their priority needs.
37. *Food support to IDPs*: In Cameroon, WFP will ensure the immediate food needs of 30,000 IDPs – anticipated to require support for a prolonged period – through an unconditional food transfer.
38. *Targeted food support to poor and very poor local populations directly affected by the crisis* aims to provide temporary assistance to households in Cameroon, Chad and Niger whose livelihoods and access to food have been directly aggravated as a result of the additional burden of receiving displaced populations in the community. Border closures, insecurity in Nigeria, and Government security measures limiting movement have further aggravated vulnerability. Local populations within targeted receiving areas are identified in collaboration with partners using the household economy approach (HEA) and locally agreed vulnerability criteria. This modality follows the parallel food support response for arriving populations: voucher transfers in Chad and food transfers in Cameroon and Niger. In Niger, support to local populations is aligned with the returnee response and Government plans under the EMOP for conditional FFA through May – with 10 percent of caseload anticipated to require unconditional support – followed by transition to a targeted food safety net under the PRRO during the lean season.¹⁴

¹³ See footnote 11, below.

¹⁴ This is separate from WFP's longer-term FFA response under Niger PRRO 200583 that requires multi-year planning and investment, robust partner involvement, and seasonal livelihood and community-based participatory planning towards the rehabilitation of productive community assets addressing long-term structural vulnerabilities. To avoid any duplication in activities, local communities in Diffa that are targeted under the *communes de convergence* approach (Goudoumaria, Foulatari, and N'guel Beyli) will continue receiving support through the PRRO.

Nutrition support

39. *Blanket supplementary feeding* (BSF) aims to meet the immediate nutritional needs of crisis-affected populations. The activity is implemented alongside the food security response in all three countries, ensuring sufficient micronutrient and caloric values to protect the physical and mental development of young children. The preventative nutrition response in Chad and Niger is planned for an extended period to ensure proper nutrition support both in the immediate shock phase (post-displacement) and during the lean season when malnutrition indicators in the Sahel countries tend to peak – this is linked to reduced food access and an increase in morbidity indicators with the onset of the rains.
- a. **Cameroon:** WFP will support refugee children aged 6-59 months and PLW in the Minawao camp given high prevalence of GAM observed among newly arriving refugees, limited freedom of movement, and health and sanitation concerns. In Cameroon, the plan is for a six month duration, to be amended as required. Similarly, if planned screening and assessments suggest a significant deterioration in the nutrition situation of local and internally displaced populations, the response could be expanded through a budget revision.
 - b. **Chad:** WFP will retain the target age group of 6-23 months; the response can be adjusted accordingly as the nutrition situation requires.
 - c. **Niger:** Given the emergency level of malnutrition observed, the household food ration in refugee sites will be enhanced with Super Cereal and refugee children aged 6-59 months will benefit from additional micronutrient support. Among the returnee and local population, children aged 6-59 months and PLW will benefit from a robust nutrition intervention (referred to as *NSpamm* in Niger)¹⁵ due to high prevalence of GAM among the communities, overstretched resources of nutrition treatment facilities, and lack of fortified and blended foods in the FFA ration. In parallel with the food safety net for this group, the preventative nutrition response will transition to the wider in-country PRRO during the peak lean season (from June).
40. *Targeted supplementary feeding* (TSF) for moderately acute malnourished children aged 6–59 months and PLW will be implemented under this EMOP in Cameroon only – supporting 47 health facilities of the Far North that work directly with refugees and displaced populations (and local populations directly affected by the insecurity) and require significant reinforcement given their remoteness, already limited capacity, and high security concerns.¹⁶ In Chad and Niger, WFP will continue to work with Government health partners to implement malnutrition treatment activities under the parallel in-country PRROs, in coordination with UNICEF.
41. WFP will work with partners and counterparts to provide capacity strengthening support through the EMOP and under parallel PRROs to support health centres to manage the increased treatment caseload. Malnutrition screening will be integrated at the implementation level through post-distribution monitoring exercises and through assessments to monitor the evolving situation and adjust programmes accordingly. Screening activities will promote referral to nutrition treatment services, and will include sensitization and lessons on preparation of special nutrition commodities.

¹⁵ NSpamm: Nutrition Supplement to Prevent Acute Malnutrition and Mortality; focusing on young children and PLW.

¹⁶ Specifically, TSF will support moderately acute malnourished children aged 6–59 months including: 1,090 refugees, 274 IDPs, and 8,707 from local receiving populations, including poor and very poor households. The activity will support 3,097 PLW including: 290 refugees, 86 IDPs, and 2,722 from local receiving populations, including poor and very poor households.

TABLE 2: MAPPING OF ASSISTANCE PER POPULATION GROUP AND COUNTRY

	Cameroon		Chad		Niger	
	Regional EMOP	Parallel in-country operation (PRRO/CP)	Regional EMOP	Parallel in-country operation (PRRO/CP)	Regional EMOP	Parallel in-country operation (PRRO)
Refugees	- Ready to eat food - Food support - BSF - TSF	- School meals	- Ready to eat food - Food support (voucher) - BSF	- TSF - School meals	- Food support - BSF	- TSF - School meals
IDPs	- Food support - TSF	- School meals	N/A	N/A	N/A	N/A
Returnees	N/A	N/A	N/A	N/A	- Food support (low tech FFA or unconditional) February-May - BSF (through May)	- TSF - School meals - Lean season (safety net, BSF)
Targeted poor and very poor local populations	- Food support - TSF	- School meals	- Food support (voucher)	- TSF - School meals	- Food support (low tech FFA or unconditional) February-May - BSF (through May)	- TSF - School meals - Lean season (safety net, BSF)
Wider host community in affected areas (not directly targeted under this EMOP)	- TSF	- School meals - Asset creation - Lean season (safety net, BSF) - TSF (beyond the 47 centres assisted under this EMOP)		-TSF -School meals -Asset creation -Lean season (safety net, BSF)		- TSF - School meals - Asset creation - Lean season (safety net, BSF)

NUTRITIONAL CONSIDERATIONS AND RATIONS

42. The response is designed to address the current context wherein access to sufficient quality and quantity of food is expected to pose an important challenge for households displaced and/or directly affected by the evolving crisis in Nigeria, and for children whose nutrition situation is at risk.
43. Food rations for refugee, local and IDP populations are designed to meet the food and nutrition needs of vulnerable populations, and include fortified and blended foods. In Niger, the planned ration for returnee and local communities is aligned with the parallel in-country PRRO to mitigate risk of tensions between population groups; accordingly,

PLW and children aged 6-59 months will receive the additional nutrition supplement (BSF/NSpamm) to compensate for the lack of supercereal in the FFW ration.

44. In Cameroon and Chad, malnutrition prevention and treatment activities for young children rely on ready-to-use supplementary foods (RUSF) given the important concerns surrounding access to clean water, and considering familiarity of partners and counterparts with the products already in use under parallel operations in country. Selection of RUSF depends on the target age group: Plumpy'Sup in Cameroon for children aged 6–59 months, and Plumpy'Doz in Chad for children aged 6–23 months. In Niger, children will benefit from a fortified and blended food (Super Cereal+) to ensure coherence with rations provided under the PRRO and avoid introducing new commodities less known to local communities and health workers. Niger rations for children and PLW are aligned with those currently agreed by NSpamm partners.
45. The value of the food support voucher in Chad considers the cost of a typical household food basket and the average market value of the WFP in-kind ration over the past two years across various markets of Chad. Only food products are authorized for voucher transactions and WFP will work with local traders to ensure availability of appropriate foods for purchase.

TABLE 3: FOOD RATION (g/person/day)

	Ready-to-eat food for new arrivals		Food support				TSF		BSF				
Country	Cameroon	Chad	Cameroon	Chad	Niger		Cameroon		Cameroon		Chad	Niger	
Population group	Refugee	Refugee	Refugee/IDP/Local	Refugee/Local	Refugee	Returnee/Local	Refugee/IDP/Local		Refugee		Refugee	Refugee/Returnee/Local	Returnee/Local
Target group	All	All	All	All	All	All	Children aged 6-59 months	PLW	Children aged 6-59 months	PLW	Children aged 6-23 months	Children aged 6-59 months	PLW
Cereals			450		400	500							
Pulses			75		100	100							
Vegetable oil			25		25	20		25		12.5			25
Salt (iodized)			5		5								
Super Cereal			50		50			250		125			250
Super Cereal+												200	
Plumpy'Sup							92		46				
Plumpy'Doz											46		
HEB	125	200											
TOTAL	125	200	605	0	580	620	92	275	46	137.5	46	200	275
Total kcal/day	563	900	2 283		2 767	2 312	500	1 175	250	587	247	1 088	1 175
% kcal from protein	29	46	9.5		7.3	9.5	10.2	13.2	10.2	13.2		10.2	13.2
% kcal from fat	47	75	12.7		34.8	9.2	54.9	34.9	54.9	34.9		54.9	34.9
USD value voucher				0.39									
Maximum number of feeding days per beneficiary over duration of EMOP	5	2	360	300	360	180	60	180	180	180	300	360	180

TABLE 4: TOTAL FOOD REQUIREMENTS BY ACTIVITY (mt)				
Commodity Type	Cameroon	Chad	Niger	Total
Cereals	13 770		13 860	27 630
Pulses	2 295		3 060	5 355
Vegetable oil	784		708	1 493
Salt (iodized)	153		72	225
Super Cereal	1 724		720	2 444
Super Cereal+			1 467	1 467
Plumpy'Sup	103			103
Plumpy'Doz		14		14
HEB	8	4		12
TOTAL	18 837	18	19 887	38 742
Cash requirements (USD)		1 404 000		1 404 000

IMPLEMENTATION ARRANGEMENTS

46. The operation is being implemented in a dynamic context, and WFP and partners will maintain flexibility to adjust planning as required to reflect changing policies, approaches, conditions, and caseloads to ensure appropriate response. WFP commits to reviewing the operation, and required amendments will be reflected through a budget revision.
47. The EMOP will be implemented in collaboration with United Nations agencies and international and national NGOs. For refugee caseloads, beneficiary lists will be provided by UNHCR; returnee and local populations will be targeted through planned vulnerability studies and HEA analyses implemented in collaboration with partners, local authorities, and communities. In Cameroon, food assistance will be distributed to IDPs and targeted local vulnerable populations through established local emergency committees. Across the three countries, WFP works with health counterparts, UNICEF and NGO partners and community health workers on screening, referral and sensitization activities. Nutrition treatment activities in Cameroon will be implemented with health counterparts, UNICEF, and clinical partners (including NGOs). The programme is coordinated with protection partners and WFP will abide by the 'Do no harm' approach.
48. Chad will implement voucher transfers as its food assistance modality. The distribution of vouchers will be done by cooperating NGO partners that are already active on the ground and have the required technical expertise. WFP will work with local traders for the redemption of commodities by beneficiaries. Only food products are authorized for voucher transactions.
49. In Cameroon and Niger, food transfers have been retained as the primary modality at this stage. In Cameroon, a recent macro assessment ranks Cameroon as having medium capacity to implement cash/voucher activities; further feasibility assessments and market analysis is required before a transition from food could be envisioned. In Niger, cash/voucher on a large scale has been considered inappropriate for Diffa given the volatile security situation and the fact that many traders deal in the Nigerian naira (rather

than the local currency). An assessment planned in 2014 will allow WFP to once more explore the feasibility of transitioning a portion of assistance to cash/voucher if and where appropriate.

50. Operating costs for this evolving emergency reflect requirements for identification, training and support to recently established partners in the target regions and additional security mitigation measures required by partners. In Niger, additional costs are budgeted for FFA activities requiring investment in technical support and materials.
51. WFP is establishing a sub-office within the United Nations compound in Maroua to operate closer to Minawao camp and strengthen coordinated action with field partners. Diffa sub-office in Niger is being reinforced to implement and monitor the response.
52. Strengthened measures are budgeted to mitigate security risks at WFP sub-offices, including requirements for escorts in high insecurity areas of Diffa (Niger) and Far North (Cameroon).

Procurement and logistics

53. Where possible and appropriate, commodities will be purchased from local and regional suppliers or under the Forward Purchasing Facility (FPF) to limit procurement-associated delays. Lead time in the countries is already a frequent concern, and delays are exacerbated in the targeted geographic areas by remoteness, access challenges (poor road infrastructure, propensity of floods in the rainy season, and security challenges), and supply corridor challenges linked to heavy congestion at Douala port (Cameroon) – the primary source of supply to Cameroon and Chad. Projections of reduced production in Nigeria this year will present an additional challenge for regional procurement in 2015. The Ebola crisis in West Africa and the crisis in Central African Republic and refugee influxes into neighbouring countries have put further strain on West Africa's FPF envelope.
54. WFP is revising its supply strategy to address these challenges and identify new opportunities, including long-term supply agreements with large-scale suppliers in the region and local procurement opportunities.
55. LTSH costs reflect the long distances from capitals and access challenges to deliver food to the target areas. Additional warehouse capacity will be identified and erected as required, including in Minawao camp (Cameroon).

PERFORMANCE MONITORING

56. Given the dynamic context, WFP plans a series of assessments to be conducted as required over the course of the EMOP including: a vulnerability study and a joint assessment mission with UNHCR in Niger; an IDP assessment in Cameroon; and a SMART survey and self-reliance study in Chad.
57. Monitoring of project performance will be guided by the logical framework that has been aligned with the 2014–2017 WFP Strategic Results Framework. Monitoring and evaluation systems will be strengthened and incorporated into the corporate Country Office Monitoring and Evaluation Tool (COMET) and Automated Outputs Monitoring System (ATOMS). In addition, monitoring and evaluation plans will be designed to ensure that performance indicators are collected through periodic assessments, post-distribution and food basket monitoring, and partner reporting.
58. Security will present a continued challenge for systematic monitoring in target areas, in particular in the Far North of Cameroon and in Diffa, Niger. Physical access to assess and monitor activities will be costly given the insecurity, remoteness, vast areas and islands hosting receiving communities.

HAND-OVER STRATEGY

59. During the twelve-month period of the EMOP, the situation will be continuously monitored and reviewed, and needs of affected communities re-evaluated. Planning figures could be surpassed, and the EMOP would need to be revised accordingly through the budget revision process.
60. The operation presents a short-term shock-focused response. Where Government policy supports eventual integration of arriving populations, and once their food and nutrition situation stabilizes, WFP could work with local authorities and communities to transition re-integrated and local host populations towards a more community-based and longer-term approach, specifically through parallel resilience-building PRROs.

RISK MANAGEMENT

61. In Niger, the influx of refugees from Mali has had a significant impact on receiving communities in the western part of the country, presenting an additional challenge for resilience-building efforts. Similarly, feedback from local communities in Diffa region receiving refugees and returnees from Nigeria indicate reduced access to food and basic services, and further strain on the local environment. Along with addressing the short-term shock through this EMOP, maintaining resources for parallel resilience building activities in the three countries will be critical to ensure that additional shocks from arrivals of Nigerian refugees do not push already vulnerable local communities deeper into poverty. Parallel operations play an important role in stabilizing tensions, ensuring equal access to nutrition, education, and safety net programmes for refugees and local populations alike.
62. Primary contextual, programmatic, and institutional risks include:
 - a. *Contextual risks:*
 - i. Further spill over of the conflict (kidnappings, terrorist attacks) and potential infiltration of Boko Haram elements into refugee settlements is the primary risk. WFP is reinforcing its security mitigation measures for staff. In primary insecure areas, particularly Far North in Cameroon, United Nations partners are required to travel with armed escort.
 - ii. Recurrent drought and seasonal floods may further impact the ability of already stressed vulnerable local and displaced populations to recover.
 - iii. New influxes could impact already fragile ecosystems and resources. It will be critical to maintain parallel WFP asset-protection and asset-creation programmes work with partners, communities, authorities, and local technical institutes to support rehabilitation of degraded land and protect and manage natural resources.
 - b. *Programmatic risk:* Timely and regular provision of assistance is critical for programme effectiveness in addressing community needs, but is also needed to reduce the risk of escalating tensions. Procurement and transport is complicated by distance between capitals and remote areas, poor infrastructure, and heavy rains. Working through its regional Supply Chain Working Group, WFP will seek opportunities for local and regional procurement and prepositioning as required. In areas of Lac Chad, WFP will lease or purchase boats to ensure delivery of supplies to communities.
 - c. *Institutional risk:* The refugee crisis is occurring under the radar of international media attention. Limited awareness about the crisis is the primary institutional

risk, and competition with other larger crises in the region and world could reduce availability of resources.

Security Risk Management

63. WFP offices are fully compliant with Minimum Operating Security and Safety Standards (MOSS). For Diffa in Niger and Far North in Cameroon the office compound is shared with United Nations agencies.
64. Security risks and mitigation measures are discussed in regular field and central coordination meetings. As influxes arrive in new areas, such as the islands of Lac Chad, WFP and partners coordinate joint security assessment missions to analyse risks. These islands present a particular risk given the difficulty of access (the humanitarian community is procuring MOSS-compliant vessels), the vast number of islands, and proximity to Nigeria.
65. Road movement is regulated by a strict security clearance process. On many travel axes of the target areas of Far North in Cameroon and Diffa region in Niger, armed escorts are required for movement. Coordination with partners and Government is critical to ensure that activities are not hampered by the often high demand for missions.
66. WFP operates United Nations Humanitarian Air Services in Niger and Chad to support safe and efficient movement of humanitarian staff and small cargo.

RECOMMENDATION

67. The Executive Director and Director-General of FAO are requested to approve the proposed West Africa Regional Emergency Operation 200777.

APPROVAL

.....
Ertharin Cousin
Executive Director
Date:

.....
José Graziano da Silva
Director-General of FAO
Date:

Annex I-A

PROJECT COST BREAKDOWN			
	Quantity (mt)	Value (USD)	Value (USD)
<i>Food Transfers</i>			
Cereals	27 630	10 852 127	
Pulses	5 355	3 483 350	
Oil and fats	1 493	1 273 508	
Mixed and blended food	4 039	2 969 594	
Others	225	58 095	
Total Food Transfers	38 742	18 636 675	
External Transport		2 198 296	
LTSH		14 716 158	
ODOC Food		4 027 588	
Food and Related Costs ¹⁷			39 578 717
C&V Transfers		1 404 000	
C&V Related costs		271 907	
Cash and Vouchers and Related Costs			1 675 907
Capacity Development & Augmentation			-
<i>Direct Operational Costs</i>			<i>41 254 624</i>
Direct support costs (see Annex I-B)			5 622 946
Total Direct Project Costs			46 877 570
Indirect support costs (7.0 percent) ¹⁸			3 281 430
TOTAL WFP COSTS			50 159 000

¹⁷ This is a notional food basket for budgeting and approval. The contents may vary.

¹⁸ The indirect support cost rate may be amended by the Board during the project.

Annex I-B

DIRECT SUPPORT REQUIREMENTS (USD)	
WFP Staff and Staff-Related	
Professional staff *	1 553 478
General service staff **	1 400 744
Danger pay and local allowances	17 700
Subtotal	2 971 922
Recurring and Other	462 173
Capital Equipment	476 890
Security	436 110
Travel and transportation	875 852
Assessments, Evaluations and Monitoring¹⁹	400 000
TOTAL DIRECT SUPPORT COSTS	5 622 946

* Costs to be included in this line are under the following cost elements: International Professional Staff (P1 to D2), Local Staff - National Officer, International Consultants, Local Consultants, UNV

** Costs to be included in this line are under the following cost elements: International GS Staff, Local Staff - General Service, Local Staff - Temporary Assist. (SC, SSA, Other), Overtime

¹⁹ Reflects estimated costs when these activities are performed by third parties. If WFP Country Office staff perform these activities, the costs are included in Staff and Staff Related and Travel and Transportation.

Annex II: Summary of Logical Framework

Results	Performance indicators	Assumptions
Cross-cutting		
<p>Cross-cutting result GENDER: Gender equality and empowerment improved</p>	<ul style="list-style-type: none"> ➤ Proportion of households where females and males together make decision over the use of cash, voucher or food Target: TBD Location: Cameroon, Chad and Niger Activity: Food assistance Target: TBD Location: Cameroon, Chad and Niger Activity: BSF ➤ Proportion of households where females make decision over the use of cash, voucher or food Target: TBD Location: Cameroon, Chad and Niger Activity: Food assistance Target: TBD Location: Cameroon, Chad and Niger Activity: BSF ➤ Proportion of households where males make decision over the use of cash, voucher or food Target: TBD Location: Cameroon, Chad and Niger Activity: Food assistance Target: TBD Location: Cameroon, Chad and Niger Activity: BSF ➤ Proportion of women beneficiaries in leadership positions of project management committees Target: > 50% Location: Cameroon, Chad and Niger Activity: Food assistance ➤ Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution Target: > 60% Location: Cameroon, Chad and Niger Activity: Food assistance 	

<p>Cross-cutting result PROTECTION AND ACCOUNTABILITY TO AFFECTED POPULATIONS: WFP assistance delivered and utilized in safe, accountable and dignified conditions</p>	<ul style="list-style-type: none"> ➤ Proportion of assisted people (men) who do not experience safety problems to/from and at WFP programme sites Target: 80% Location: Cameroon, Chad and Niger Activity: Food Assistance Target: 80% Location: Cameroon, Chad and Niger Activity: BSF ➤ Proportion of assisted people (women) who do not experience safety problems to/from and at WFP programme sites Target: 80% Location: Cameroon, Chad and Niger Activity: Food Assistance Target: 80% Location: Cameroon, Chad and Niger Activity: BSF ➤ Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain) Target: 70% Location: Cameroon, Chad and Niger Activity: Food Assistance Target: 70% Location: Cameroon, Chad and Niger Activity: BSF ➤ Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain) Target: 70% Location: Cameroon, Chad and Niger Activity: Food Assistance Target: 70% Location: Cameroon, Chad and Niger Activity: BSF 	
<p>Cross-cutting result PARTNERSHIP: Food assistance interventions coordinated and partnerships developed and maintained</p>	<ul style="list-style-type: none"> ➤ Proportion of project activities implemented with the engagement of complementary partners Target: 100% Location: Cameroon, Chad and Niger ➤ Number of partner organizations that provide complementary inputs and services Target: TBD Location: Cameroon, Chad and Niger 	

SO 1: Save lives and protect livelihood in emergencies		
<p>Outcome SO1.1 Stabilized or reduced undernutrition among children aged 6-59 months and pregnant and lactating women</p>	<ul style="list-style-type: none"> ➤ MAM treatment mortality rate (%) Baseline: Cameroon: TBC Target: < 3% ➤ MAM treatment recovery rate (%) Baseline: Cameroon: TBC Target: > 75% ➤ MAM treatment non-response rate (%) Baseline: Cameroon: TBC Target: < 15% ➤ MAM treatment default rate (%) Baseline: Cameroon: TBC Target: < 15% ➤ Proportion of target population who participate in an adequate number of distributions Baseline: Cameroon, Chad and Niger: TBC Target: > 66% ➤ Proportion of eligible population who participate in programme (coverage) TSF Baseline: Cameroon: TBC Target: 90% BSF Baseline: Cameroon, Chad and Niger: TBC Target: 70% 	<p>Security incidents prevent implementation and monitoring of activities in a large of part of the project area</p> <p>Further deterioration of the situation in northern Nigeria leads to a massive influx of populations surpassing plans, resources and capacity</p> <p>Government and partners unable to provide complementary activities to meet beneficiary NFI, hygiene, watsan and other needs</p> <p>Delivery of goods hampered by rains, poor infrastructure, and insecurity</p> <p>Sufficient resources from donors not received early on enough to allow for the timely purchase and delivery of foods in a context where lead-time is compounded by remoteness of areas and rains</p>
<p>Outcome SO1.2 Stabilized or improved food consumption over assistance period for target households and/or individuals</p>	<ul style="list-style-type: none"> ➤ FCS: percentage of households with poor food consumption score (male-headed household) Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: reduced by 80% Baseline (local population): Cameroon, Chad and Niger: TBC Target: reduced by 80% Baseline (IDPs): Cameroon: TBC Target: reduced by 80% ➤ FCS: percentage of households with poor food consumption score (female-headed household) Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: reduced by 80% Baseline (local population): Cameroon, Chad and Niger: TBC Target: reduced by 80% Baseline (IDPs): Cameroon: TBC Target: reduced by 80% ➤ FCS: percentage of households with poor food consumption score 	<p>Sufficient resources (human, financial, technology) secured in time to allow for required scale-up of operations for implementation and monitoring of activities</p>

	<p>Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: reduced by 80%</p> <p>Baseline (local population): Cameroon, Chad and Niger: TBC Target: reduced by 80%</p> <p>Baseline (IDPs): Cameroon: TBC Target: reduced by 80%</p> <ul style="list-style-type: none"> ➤ Dietary Diversity Score Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: increased DDS Baseline (local population): Cameroon, Chad and Niger: TBC Target: increased DDS Baseline (IDPs): Cameroon: TBC Target: increased DDS ➤ Dietary Diversity Score (female-headed household) Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: increased DDS Baseline (local population): Cameroon, Chad and Niger: TBC Target: increased DDS Baseline (IDPs): Cameroon: TBC Target: increased DDS ➤ Dietary Diversity Score (male-headed household) Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: increased DDS Baseline (local population): Cameroon, Chad and Niger: TBC Target: increased DDS Baseline (IDPs): Cameroon: TBC Target: increased DDS ➤ CSI: Coping Strategy Index (average) Baseline (refugees/returnees): Cameroon, Chad and Niger: TBC Target: CSI of 80% of targeted households is reduced or stabilized Baseline (local population): Cameroon, Chad and Niger: TBC Target: CSI of 80% of targeted households is reduced or stabilized Baseline (IDPs): Cameroon: TBC Target: CSI of 80% of targeted households is reduced or stabilized 	
<p>Output SO1.1</p> <p>Food, nutritional products and non-food items, cash transfers and vouchers distributed in sufficient quantity, quality and in a timely manner to targeted beneficiaries</p>	<ul style="list-style-type: none"> ➤ Number of women, men, boys and girls receiving food assistance (disaggregated by activity; beneficiary category, sex, food, non-food items, cash transfers and vouchers) as % of planned ➤ Quantity of food assistance distributed, as % of planned distribution (disaggregated by type) 	

	<ul style="list-style-type: none"> ➤ Total value of vouchers distributed (expressed in food/cash) transferred to targeted beneficiaries (disaggregated by sex, beneficiary category), as % of planned ➤ Number of institutional sites assisted (e.g. schools, health centers etc.), as % of planned 	
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TBC= to be collected; TBD = to be decided

ACRONYMS USED IN THE DOCUMENT

ATOMS	Automated Outputs Monitoring System
BSF	blanket supplementary feeding
C&V	cash and vouchers
CNAAR	<i>Commission Nationale d'Accueil et de Réinsertion des Réfugiés</i> (Chad)
COMET	Country Office Monitoring and Evaluation Tool
EMOP	emergency operation
FAO	Food and Agriculture Organisation of the United Nations
FFA	food assistance for assets
FPF	Forward Purchasing Facility
GAM	global acute malnutrition
HEA	household economy approach
IDP	internally displaced person
MAM	moderate acute malnutrition
MOSS	Minimum Operating Security and Safety Standards
MUAC	mid-upper arm circumference
NGO	non-governmental organization
NSpamm	Nutrition Supplement to Prevent Acute Malnutrition and Mortality
PLW	pregnant and lactating women
PRRO	protracted relief and recovery operation
RUSF	ready-to-use supplementary food
SAM	severe acute malnutrition
TSF	targeted supplementary feeding
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
WASH	water, sanitation and health

ANNEX IV – LTSH Matrix

ANNEX V – Project Budget Plan

ANNEX VI – Project Statistics