



Standard Project Report 2015

World Food Programme in Ethiopia, Federal Democratic Republic of (ET)

Responding to Humanitarian Crises and Enhancing Resilience to Food Insecurity

Reporting period: 1 January - 31 December 2015

Project Information	
Project Number	200712
Project Category	Single Country PRRO
Overall Planned Beneficiaries	10,634,000
Planned Beneficiaries in 2015	6,351,000
Total Beneficiaries in 2015	3,928,901

Key Project Dates	
Project Approval Date	May 27, 2015
Planned Start Date	July 01, 2015
Actual Start Date	July 01, 2015
Project End Date	June 30, 2018
Financial Closure Date	N/A

Approved budget in USD	
Food and Related Costs	896,071,128
Capacity Dev.t and Augmentation	11,055,545
Direct Support Costs	111,005,679
Cash-Based Transfers and Related Costs	75,626,360
Indirect Support Costs	76,563,110
Total	1,170,321,822

Commodities	Metric Tonnes
Planned Commodities in 2015	217,034
Actual Commodities 2015	127,714
Total Approved Commodities	1,391,894

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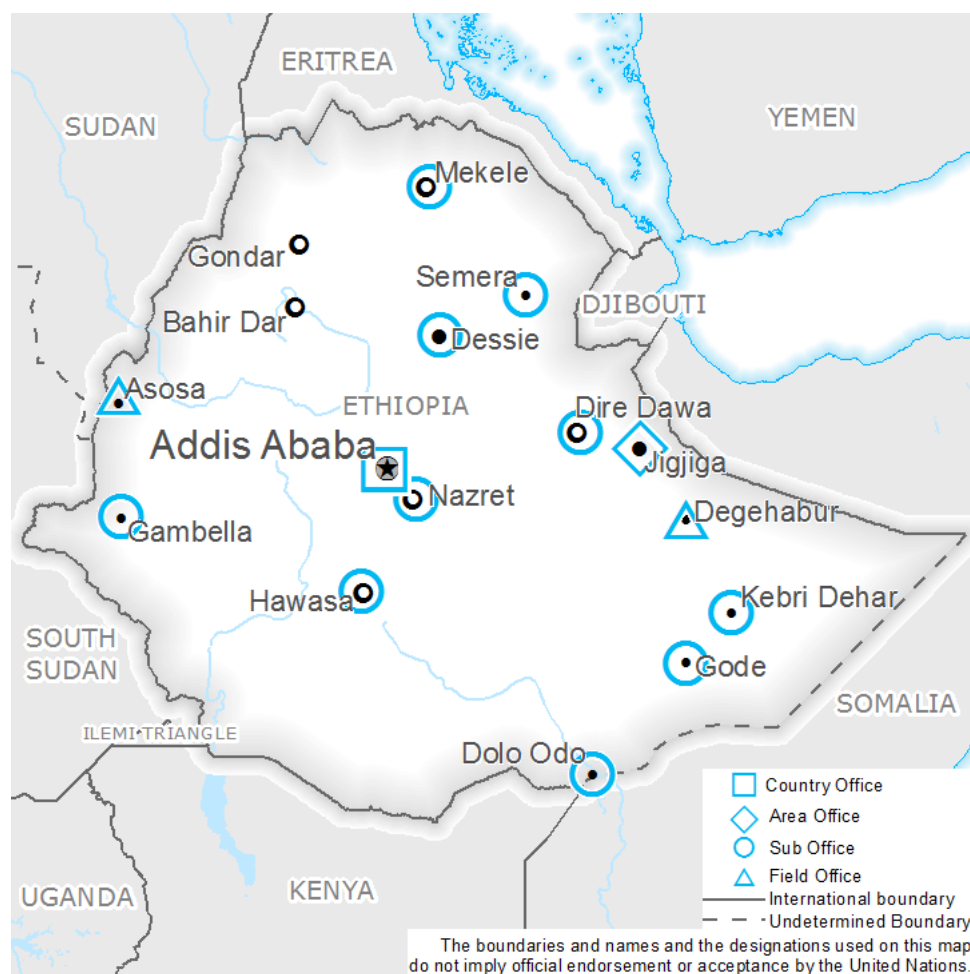
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COUNTRY OVERVIEW



Country Background

With a population of almost 97 million people, Ethiopia is the second most populous country in Africa. The country has made impressive strides over the last 20 years in reducing poverty and expanding investments in basic social services - paving the way for the country to meet many of its Millennium Development Goal (MDG) targets.

From 2004 - 2013, the World Bank estimates that Ethiopia's economy has had strong growth, with annual gross domestic product (GDP) per capita growth rates of 8.3 percent. According to the Ethiopia MDG Report for 2014, the number of people in absolute poverty fell from 48 percent in 1990 to an estimated 25 percent in 2013/2014. At the same time, the proportion of undernourished people fell from almost 75 percent in 1990/92 to a projected 32 percent in 2014/15 - thereby enabling Ethiopia to reach its MDG Hunger target.

The prevalence of stunting declined from 58 percent in 2000 to 40 percent in 2014, while wasting rates remained at 10 percent during the same period. Net primary school enrollment rates have risen from 21 percent in 1996 to 92.6 percent in 2014, and the gender parity index currently stands at 0.93, indicating a significant improvement in girls' access to education.

The government's longer-term vision is to attain middle-income country status by 2025. To achieve this goal, the government has organized its policy and investment framework under the umbrella of two 5- year Growth and Transformation Plans - GTP I and GTP II. Both GTPs place an emphasis on agriculture as the main driver for growth, coupled with a strong focus on social protection instruments such as the Productive Safety Net Programme (PSNP) to ensure sustained attention on food security and poverty reduction. For example, the latest iteration of the PSNP (PSNP IV) aims to provide conditional food and cash transfers to almost 8 million people per year from 2015

to 2020.

Despite strong economic gains and a comprehensive policy framework for development, the distribution of developmental gains remains uneven. According to the UNDP 2015 Human Development Report, Ethiopia is ranked 174 out of 188 countries in terms of human development. While national figures on nutrition are fairly promising, regional variation is quite pronounced. For example, in Afar and Somali regions, global acute malnutrition (GAM) rates can be as high as 30 percent, and stunting rates in Amhara and Afar are close to 60 percent.

Poverty, food insecurity and malnutrition are all inextricably linked. Over 80 percent of the population living in rural areas is dependent on rain-fed agriculture and livestock rearing as their main source of food and income. In turn, climate shocks are the primary driver behind chronic poverty, food insecurity and malnutrition at household level. The International Food Policy Research Institute's Global Hunger Index scores Ethiopia at 33.9 - or at a "serious" level - even after the impressive gains the country has made from a MDG perspective.

Rainfall data for the period from 1967 to 2000 indicate that Ethiopia's annual variability in rainfall across different zones is among the highest in the world, ranging from a low of 15 percent to a high of 81 percent. The larger the variation in rainfall a household is exposed to, the lower its income and consumption levels. Repeated climate shocks have severely eroded rural livelihoods, leaving households with little capacity to cope and meet their most basic consumption needs. Climate shocks are a major cause of humanitarian crises in Ethiopia. Since 2003, the country has faced five serious droughts affecting millions of people, the most recent of which unfolded over the course of 2015 and was compounded by the global El Niño event.

In 2015, the already fragile situation among food insecure and vulnerable people was exacerbated by the failure of the *belg* rains (February-May) and well below normal rainfall for the main *kiremt* rains (June-September), affecting the main *meher* cropping season that contributes around 85 percent of Ethiopia's total annual food production. With the onset of the El Niño phenomenon, in July 2015, production assessments reported that up to 25 percent of the harvest was lost at the national level, and in some regions this figure rose to 70 percent.

The lack of water has had devastating effects for both human and animal well-being. An outbreak of scabies occurred in large swaths of Amhara, along with communicable diseases in Afar, Oromia and Somali regions. Coupled with a lack of food at the household level, GAM rates reached 20 percent and higher in Oromia, Afar, and Somali regions. Conservative estimates indicate that over 30,000 head of cattle died as a result of no water, pasture or browse. Not only are livestock essential household assets that generate income, but they also represent a key source of meat and milk for pastoral communities. This, too, contributed to the increase in malnutrition across the country.

In the face of the worst drought in over 50 years, the scale of humanitarian needs over the course of 2015 rose dramatically. In February 2015, the Government issued its official Humanitarian Requirements Document (HRD), estimating that 2.9 million people required emergency food assistance. By December 2015, this number had risen to 10.2 million - almost a 250 percent increase. With regard to the prevalence of moderate acute malnutrition (MAM), in February 2015, some 200,000 children under 5 and pregnant and lactating women (PLW) were projected as needing MAM treatment. By the end of 2015, this number peaked at 2.2 million young children and PLW, or a 1,000 percent increase.

The adult HIV prevalence in the country is 1.1 percent, with 700,000 HIV positive people and 800,000 orphans and vulnerable children. Significant variation exists between genders, among population groups and across geographic areas. The HIV prevalence rate for men and women is 0.8 percent and 1.4 percent respectively; for rural residents it is 0.5 percent while for urban residents it reaches 3.8 percent. HIV prevalence is disproportionately higher among urban females (4 percent) compared to urban men (2.4 percent).

Ethiopia is also host to the largest refugee population on the African Continent. Over 730,000 officially registered refugees from South Sudan, Somalia, Sudan, Eritrea and Kenya now reside in 26 camps located in five regional states including Afar, Benishangul-Gumuz, Gambella, Somali and Tigray. Of the total, approximately one-third are South Sudanese who arrived into the Gambella region in early 2014 following the eruption of hostilities in South Sudan in 2013.

Summary Of WFP Assistance

WFP's role in Ethiopia is to support government policies, programmes and systems that address the multiple dimensions of hunger and undernutrition among the most vulnerable segments of the population and refugees hosted in different parts of the country.

Protracted relief and recovery operation (PRRO) 200290 and its successor PRRO 200712 were designed to support and complement the government's social protection, disaster risk management and nutrition programmes by

providing emergency food assistance, engaging in productive safety net activities, addressing malnutrition, and offering technical assistance. In 2015, these PRROs responded to the dramatic rise in acute food and nutrition needs arising from the failure of both the spring and summer rains and the onset of the El Niño-related drought. Simultaneously, WFP also provided food assistance to chronically food insecure households under the Productive Safety Net Programme (PSNP).

PRRO 200365 and its successor, PRRO 200700, aimed to support Ethiopia's significant refugee population, focusing on live-saving food and nutrition assistance for over 560,000 refugees in 26 camps across the country.

WFP's country programme (CP) 200253 comprised five components: 1) support to the Government of Ethiopia in the development of a national disaster risk management system; 2) building resilience in food insecure communities through natural resource management activities (Managing Environmental Resources to Enable Transition to More Sustainable Livelihoods); 3) school feeding under the Children in Local Development Initiative; 4) support to people living with HIV and AIDS; and 5) support to smallholder farmers through Purchase for Progress (P4P).

WFP further assisted the government through capacity strengthening efforts. Through its P4P programme, WFP worked with local cooperative farms to source cereals that are then distributed under WFP and government programmes. WFP has also invested in a Food Management Improvement Project that established a commodity management system within the National Disaster Risk Management Commission (NDRMC), which oversees all food commodity movements in the country. Finally, WFP deployed its expertise in food security analysis to support the NDRMC in the preparation of disaster risk profiles at *woreda* (district) level.

WFP has three special operations (SO) in Ethiopia. SO 200711 operated the United Nations Humanitarian Air Services, which enabled the humanitarian community to reach remote areas where refugee camps are located. SO 200358 focused on the construction of a Humanitarian Hub in Djibouti, where WFP and other humanitarian agencies can store cargo intended for operations across East Africa and organise specialized logistics training sessions. Lastly, SO 200752 was launched in 2014 for the construction of a bridge in the Somali Region (Geeldoh) to facilitate access to isolated districts and villages that are cut off from basic services and humanitarian assistance during rainy seasons.

Beneficiaries	Male	Female	Total
Children (under 5 years)	458,578	464,775	923,353
Children (5-18 years)	1,171,232	1,146,444	2,317,676
Adults (18 years plus)	1,493,476	1,462,491	2,955,967
Total number of beneficiaries in 2015	3,123,286	3,073,710	6,196,996

Distribution (mt)						
Project Type	Cereals	Oil	Pulses	Mix	Other	Total
Country Programme	1,875	829	171	4,147	85	7,108
Single Country PRRO	352,181	10,879	45,105	25,396	3,389	436,950
Total Food Distributed in 2015	354,056	11,708	45,276	29,543	3,475	444,058

OPERATIONAL SPR

Operational Objectives and Relevance

WFP's PRRO 200712 was designed in full alignment with the government's Growth and Transformation Plans (GTP). The GTP aims to promote strong economic growth driven by the agricultural sector and development of small and medium-sized enterprises. Both are predicated on having a productive, healthy and resilient labour force. In this context, GTP goals are complemented with three policy priorities that promote equity and human capital development. Food assistance interventions under PRRO 200712 have these three policies as their strategic anchors:

- *Social Protection*: in particular the Productive Safety Net Programme (PSNP) that provides conditional food and cash transfers to chronically food insecure households to enable them to invest in productive livelihood assets that can allow a pathway out of poverty and food insecurity, resulting in reduced reliance on humanitarian assistance;
- *Disaster Risk Management (DRM)*: to enable the government to better predict, prepare, and respond to natural and economic shocks via a system consisting of early warning, structured assessments, and an operational framework for humanitarian response; and
- *National Nutrition Policy*: placing a premium on the first 1,000 days of life for young children and a comprehensive approach to address acute and chronic malnutrition throughout the country.

In line with WFP Strategic Objective 1, WFP's provision of emergency food assistance supported the DRM policy and, in particular, the National Disaster Risk Management Commission (NDRMC) - formerly the Disaster Risk Management Food Security Sector (DRMFSS). By providing both technical support to the NDRMC and food assistance to food insecure beneficiaries, WFP's efforts aimed to strengthen the overall emergency preparedness and response system led by the government. Linking early warning information to effective and efficient supply chain systems ensured that emergency food assistance given to households facing external shocks was properly targeted, coordinated and tracked among the key food assistance actors (i.e. NDRMC, WFP and the Joint NGO Emergency Operation (JEOP)).

Also in line with WFP Strategic Objective 1, nutrition programmes to treat moderate acute malnutrition (MAM) bridge the DRM and National Nutrition Policies in emergency and non-emergency settings, respectively. Working with the NDRMC and the Ministry of Health (MoH) at different levels, the overarching goal was to deliver the right package of support to treat MAM during times of stress and shocks with specialized nutritious products coupled with investments in health, water and sanitation by other partners.

The 2008 and 2013 Lancet Series on Maternal and Child Undernutrition highlighted the importance of wasting and stunting, but the two were presented as distinct problems contributing separately to mortality and burden of disease and child growth. More recent research suggests that the relationship between wasting and stunting is more problematic if populations are exposed to successive shocks where repeated episodes of wasting lead to chronic health, morbidity and nutrition problems that are common with stunting. Given that climate shocks are a recurring phenomenon in Ethiopia, PRRO 200712 introduced an element of stunting prevention (Strategic Objective 4) among populations where exposure to climate shocks is frequent and where stunting rates are highest.

In line with WFP Strategic Objective 3, WFP plays a major role in the PSNP Donor Working Group that works alongside the NDRMC/Ministry of Agriculture (MoA) on the implementation of the productive safety net. PSNP beneficiaries engaged in public works programmes that created new or rehabilitated existing livelihood assets at household and community levels. In return, households received food or cash transfers for six months (January to June). These transfers aimed to stimulate investments and savings to build resilience to shocks and facilitate the movement out of poverty and undernutrition. Households that did not have able-bodied labour (e.g. the elderly or disabled) were provided PSNP transfers over a 12-month period without any conditionality.

Results

Beneficiaries, Targeting and Distribution

The GoE (through its various ministries) at Federal and Regional levels take the lead in beneficiary targeting and selection for emergency relief, nutrition, and PSNP activities undertaken by WFP. For emergency relief activities,

the GoE leads two multi-sectoral food security assessments in April/May and October/November to determine the scale of humanitarian assistance required. These assessments coincide with the two main farming seasons in Ethiopia: the *belg* and *meher*. Regional teams comprised of NDRMC, MoA, WFP, OCHA, and NGO partners collect information on harvest prospects, sources of food and income, and access to services to then determine humanitarian needs. Regional numbers are then validated and endorsed at the Federal level.

The final number of emergency relief beneficiaries is then issued officially in the GoE's Humanitarian Requirements Document (HRD). The distribution of emergency relief assistance (either food or cash) falls under the overall responsibility of the NDRMC in partnership with WFP and JEOP. Generally speaking, WFP and the NDRMC are responsible to meet the needs of 75 percent of emergency needs identified in the HRD and JEOP the remaining 25 percent. For WFP/NDRMC areas of coverage, NDRMC at regional, zone and woreda (or district) levels plan and conduct all distributions. WFP is responsible for fundraising against the 75 percent obligation, procuring and transporting food to specific *woredas*, and monitoring distributions. Given that vast geographic areas and dispersed populations, distributions take, on average, six to eight weeks, rather than on a monthly basis and, therefore, are termed "distribution rounds."

For treatment of moderate acute malnutrition (MAM) activities, the MoH conducts bi-annual nutrition surveys in every region, which are closely linked with the multi-sectoral food security assessments. Thereafter, a hotspot classification is prepared of *woredas* (districts) using data from nutrition surveys, WFP food security assessments, and coverage surveys on access to water, health and sanitation services. *Woredas* are classified as Hotspot Priority 1, 2, or 3, with Priority 1 *woredas* taking precedence in terms of providing immediate nutrition-specific support. The prevalence of MAM is estimated for each Priority 1 *woreda* among children under the age of five, as well as pregnant and lactating women (PLW) and then verified/validated with a final beneficiary number through community-based screening led by the Ministry of Health (MoH). Distributions are conducted by the NDRMC at *woreda* level for screened beneficiaries and WFP provides the necessary commodities and monitor these activities.

The factors affecting WFP's performance under 200712 were exactly the same as for its predecessor, PRRO 200290--a convergence of: (a) sharp increases in the needs for emergency relief and nutrition as a result of the El Niño drought; (b) lack of sufficient and timely donations; and (c) congestion at the Djibouti Port impacting onward transport of available commodities into Ethiopia.

Based on the findings of the mid-year verification assessment, the government issued a revised Humanitarian Requirement Document (HRD) in August 2015 wherein 4.5 million people were identified as needing emergency food assistance. This number was later increased to 8.2 million in October 2015 due to the continued and intensified negative impact of the El Niño phenomenon. Finally, in December 2015, the government issued an updated HRD based on findings emanating from a *meher* harvest assessment. The new HRD projected that 10.2 million people required emergency food assistance for the December 2015 – November 2016 period.

As WFP was expected to fundraise, procure, and transport for 75 percent of the emergency food requirements, the absolute numbers grew significantly in magnitude. For example, In August 2015, out of the 4.5 million people requiring emergency assistance, the WFP/NDRMC portion was 3.5 million; at 8.2 million, the number of beneficiaries increased to 6.1 million; and finally in December when the needs exceeded 10 million, WFP/NDRMC were responsible for 7.6 million.

Concurrently, emergency nutrition needs continued to rise with the number of Hotspot Priority 1 *woredas* increasing from 142 in August 2015 to 186 in December 2015. In terms of children and women requiring MAM treatment, the August Hotspot Priority 1 *woreda* classification estimated that some 700,000 children and PLW would require specialised nutrition support, while the December exercise projected a massive increase to 2.2 million children and PLW.

The exponential rise in requirements necessitated that the country office (CO) prepare a budget revision (Budget Revision 2) approved by the WFP Executive Board in November 2015. The budget revision (BR) focused primarily on emergency relief and given the ever-changing numbers, the CO had to make a decision as to what level of increase was appropriate given 2015 funding trends and realistic expectations of new contributions. In discussions with the government, it was agreed that instead of being obligated to raise all the resources required to cover 75 percent of the HRD beneficiaries needing food assistance at any given point in time (per normal practice), WFP would have a static target of 6 million people. This number was then included and approved in the budget revision. The government would then find a way to support the remaining beneficiaries that would then fulfill the 75 percent share of the HRD normally assigned to WFP/NDRMC.

No changes were made in BR 2 for treatment of acute malnutrition for one major reason: the Ministry of Health (MoH) had not begun the process of screening children and PLW for MAM treatment in the 142 Priority 1 *woredas* in August 2015. Screening only began in earnest in late December when the number of Hotspot *woredas* rose dramatically prompting a more systematic approach to screening malnutrition across the country. Without any real evidence or data, the CO relied on its existing planning figures for the July-December 2015 of almost 510,000

children and PLW. A new budget revision (BR 3) is being prepared now to increase the MAM beneficiaries for the remainder of 2016 as screening exercises were, by and large, completed in mid February 2016 across the 186 Hotspot *woredas*.

The above served as backdrop to a significant drop in WFP performance for the July-December 2015 period. Four rounds of relief distributions were conducted over the reporting period where beneficiaries received an in-kind transfer of cereals, pulses and oil. For Rounds 1 and 2, the WFP/NDRMC target was 3.5 million people (out of a total of 4.5 million as per the August HRD). For rounds 4 and 5, however, the WFP target was set at 6 million people, based on Budget Revision 2 of the PRRO. Due to critical funding gaps, WFP was only able to reach its target in the first round supporting the full 3.5 million people. For the subsequent rounds, WFP only reached, on average, 1.3 million people per round. Recognising that WFP was not able to raise the necessary resources to reach 6 million people, the government stepped in decisively. Drawing upon stocks in the Ethiopian Strategic Grain Reserve, some 250,000 mt of cereals, pulses and oil were provided to complement WFP food stocks and ensure proper coverage.

Results for treatment of moderate acute malnutrition, however, warrant some explanation. Overall, planned targets were exceeded with children and PLW receiving Supercereal and Oil. However, this was not due to adequate and timely funding that matched the projected needs. Thanks to carry-over stocks of specialised nutritious foods from PRRO 200290, WFP was able to exceed distribution targets for its treatment of MAM programme during this critical period.

This does not mean that WFP met all of the MAM needs during the reporting period. Given the delays in admissions screening in almost all regions, it is certain that a large number of additional children and PLW were not able to benefit from MAM treatment programmes and were, effectively, *excluded*. Second, without the carry-over stocks from 200290, WFP would have never been able to meet its targets. In fact, donor contributions for treatment of moderate acute malnutrition began in November and December 2015. Thus, while the numbers show 'acceptable' performance of children aged 6-59 months and an overachievement among PLW compared to the planning figures, the reality suggests otherwise as these targets were set earlier in the year and at a lower level than actually needed.

Given the severe funding shortfalls, stunting reduction programmes were not pursued. No Productive Safety Net Programme (food assistance for assets) activities were planned for the reporting period as these transfers normally happen from January-June in the calendar year.

For cash-based transfers (CBT), none were possible due to prevailing market conditions and household purchasing power. Data collected for the WFP Community and Household Surveillance (CHS) and Monthly Market Monitor showed that market prices for cereals (maize, sorghum and wheat) were steadily increasing as a result of the drought. Between October and November 2015, the price of maize increased by almost 35 percent nationally and as high as 70 percent in regions hardest hit by the drought such as Oromia and Amhara. Second, at the household level, the loss of livelihood and income earning opportunities resulted in very little disposable income available for market purchases. CHS data from August and November 2015 showed that on average, per capita monthly expenditures on food declined from 80 *Birr* (USD 4) in August to 62 *birr* (USD 3) in November. To understand the implication of these numbers, the monthly per capita cost to purchase a food basket that can meet the minimum kilocalorie requirement of 2,100/day is 250 *Birr* (USD 12.50). The amounts available at household level were a quarter of this minimum threshold. With these levels of income and increasing food prices, WFP opted to focus on in-kind transfers as the most appropriate form food assistance.

Table 1: Overview of Project Beneficiary Information

Beneficiary Category	Planned			Actual			% Actual v. Planned		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Total Beneficiaries	3,217,400	3,133,600	6,351,000	1,984,094	1,944,807	3,928,901	61.7%	62.1%	61.9%
By Age-group:									
Children (under 5 years)	569,400	549,100	1,118,500	294,668	290,739	585,407	51.8%	52.9%	52.3%
Children (5-18 years)	1,182,000	1,085,300	2,267,300	742,562	726,847	1,469,409	62.8%	67.0%	64.8%
Adults (18 years plus)	1,466,000	1,499,200	2,965,200	946,864	927,221	1,874,085	64.6%	61.8%	63.2%
By Residence status:									

Table 1: Overview of Project Beneficiary Information

Beneficiary Category	Planned			Actual			% Actual v. Planned		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Residents	3,217,400	3,133,600	6,351,000	2,003,740	1,925,161	3,928,901	62.3%	61.4%	61.9%

Table 2: Beneficiaries by Activity and Modality

Activity	Planned			Actual			% Actual v. Planned		
	Food	CBT	Total	Food	CBT	Total	Food	CBT	Total
General Distribution (GD)	5,800,000	200,000	6,000,000	3,534,265	-	3,534,265	60.9%	-	58.9%
Nutrition: Treatment of Moderate Acute Malnutrition	507,643	-	507,643	519,258	-	519,258	102.3%	-	102.3%
Nutrition: Prevention of Stunting	199,999	-	199,999	-	-	-	-	-	-

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

Beneficiary Category	Planned			Actual			% Actual v. Planned		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
General Distribution (GD)									
People participating in general distributions	606,000	594,000	1,200,000	356,961	349,892	706,853	58.9%	58.9%	58.9%
Total participants	606,000	594,000	1,200,000	356,961	349,892	706,853	58.9%	58.9%	58.9%
Total beneficiaries	3,030,000	2,970,000	6,000,000	1,784,803	1,749,462	3,534,265	58.9%	58.9%	58.9%

The total number of beneficiaries includes all targeted persons who were provided with WFP food/cash/vouchers during the reporting period - either as a recipient/participant or from a household food ration distributed to one of these recipients/participants.

Table 4: Nutrition Beneficiaries

Beneficiary Category	Planned			Actual			% Actual v. Planned		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Nutrition: Treatment of Moderate Acute Malnutrition									
Children (6-23 months)	50,487	49,103	99,590	42,270	41,112	83,382	83.7%	83.7%	83.7%
Children (24-59 months)	124,833	121,375	246,208	104,515	101,621	206,136	83.7%	83.7%	83.7%
Pregnant and lactating women (18 plus)	-	161,845	161,845	-	229,740	229,740	-	142.0%	142.0%
Total beneficiaries	175,320	332,323	507,643	146,785	372,473	519,258	83.7%	112.1%	102.3%
Nutrition: Prevention of Stunting									
Children (6-23 months)	33,800	32,867	66,667	-	-	-	-	-	-
Pregnant and lactating women (18 plus)	-	133,332	133,332	-	-	-	-	-	-
Total beneficiaries	33,800	166,199	199,999	-	-	-	-	-	-

Commodity	Planned Distribution (mt)	Actual Distribution (mt)	% Actual v. Planned
Beans	14,830	7,581	51.1%
Corn Soya Blend	29,591	6,835	23.1%
Maize	45,000	62,252	138.3%
Ready To Use Supplementary Food	300	-	-
Sorghum/Millet	45,000	24,918	55.4%
Split Peas	1,670	3,444	206.2%
Vegetable Oil	5,643	2,475	43.9%
Wheat	75,000	20,211	26.9%
Total	217,034	127,714	58.8%

Cash-Based Transfer	Planned Distribution USD	Actual Distribution USD	% Actual v. Planned
Cash	10,880,000	1,581,953	14.5%
Voucher	-	-	-
Total	10,880,000	1,581,953	14.5%

Story Worth Telling

Life was hard for Feyisie Anbessie and her family before the drought, and Feysie together with her husband struggled to eke out a living by farming on a small piece of land he owns.

Then the main Meher rains failed in her Wouchale district of Oromia region, and their crops also failed.

"When the situation deteriorated, my husband left to look for work in the nearby town," Feyisie says, but she feared he would not be able to earn enough for the small family to survive on.

With her husband gone, 20-year-old Feyisie is the head of their household for now, just as the family is about to grow. Feyisie -- already the mother of a 4-year-old -- is pregnant with her second child, and due to give birth within a few weeks.

Fortunately, community members in their village, Gimbichu, are able to rely on WFP's food assistance during this time of crisis. Feyisie receives a monthly food ration from WFP for her family, consisting of 30 kilograms of maize, three kilograms of pulses and one litre of oil.

"I feel very fortunate to be on the list to receive food assistance, as the severe drought left our land dry," says Feyisie. "This is our only source of food now."

Progress Towards Gender Equality

Attempts to build on any progress made in gender equality in the first six months of 2016 were not followed with substantive gains for the second half of the year under PRRO 200712. The CO shifted into emergency response mode as the magnitude of drought became more apparent over the course of July and August 2015. Mainstreaming gender into emergency response activities became much more challenging due to human resource constraints.

In this context, cross-cutting indicator values for gender, protection and accountability to affected populations (AAP) were not collected in the November 2015 Community and Household Surveillance (CHS) survey. Normally, CHS surveys take around three months to complete--from data collection to reporting writing. However, WFP needed to use key outcome data before the middle of December in order to prepare proposals for donor funding and as inputs for the preparation the government's 2016 Humanitarian Requirements Documents (HRD). Consequently, CHS questionnaires were reviewed and shortened and focused on key food security outcomes. This was an operational decision taken given that up to date information on how households were faring the face of the drought was needed

to plan WFP's response activities in 2016.

Much of the responsibility for gender mainstreaming within operations lies with WFP Sub-Offices and local level government counterparts and there is a need to review the processes that are in place and whether they are suited for both emergency and non-emergency contexts. The CO is planning to undertake a full review of the existing gender and protection related activities in light of WFP's inability to meet them fully. This review will update not only baseline values, but also help re-structure formal trainings and sensitization/awareness raising sessions that focus specifically on gender empowerment and participation in management committees and in decision-making processes within the household.

Cross-cutting Indicators	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Proportion of households where females and males together make decisions over the use of cash, voucher or food				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>32.00	32.40		
Proportion of households where females make decisions over the use of cash, voucher or food				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>40.00	41.70		
Proportion of households where males make decisions over the use of cash, voucher or food				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	<25.00	25.90		
Proportion of women beneficiaries in leadership positions of project management committees				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>50.00	40.00		
Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06</i>	>50.00			

Protection and Accountability to Affected Populations

Food distributions continued to use the same standard operating procedures (SoP) found in the previous PRRO (200290): distributions were conducted in locations close to beneficiary communities and within one hour walking distance. Beneficiary feedback mechanisms continue to be operational, and posters and banners are found at distribution points.

Cross-cutting indicator values for gender, protection and accountability to affected populations (AAP) were not collected in the November 2015 Community and Household Surveillance (CHS) survey. Normally, CHS surveys take around three months to complete--from data collection to reporting writing. However, WFP needed to use key outcome data before the middle of December in order to prepare proposals for donor funding and as inputs for the preparation the government's 2016 Humanitarian Requirements Documents (HRD). Consequently, CHS questionnaires were reviewed and shortened and focused on key food security outcomes. This was an operational decision taken given that up to date information on how households were faring the face of the drought was needed to plan WFP's response activities in 2016. Moreover, for protection and AAP, the August 2015 CHS data showed that the key indicators were above the corporate targets given that many of the key concerns had already been mainstreamed in WFP and partner activities to a sufficient level.

Even though indicators were not collected, operations monitoring missions to selected sites and discussions with key partners indicate that both WFP and partners staff capacities were stretched in attempting to scale up emergency response activities. SoP for distributions (e.g., within 1 hour walking distance of communities, beneficiary feedback mechanisms, daylight hours for distribution) were functioning well, but sensitization and

awareness raising activities were not completed.

In 2016, a thorough review of the gender and protection targets will be undertaken and data will be collected to update baseline values. In particular, the main area of intervention will be in the Somali Region where previous attempts at sensitising men to the importance of gender and protection have not been entirely successful.

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)				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>80.00	71.50		
Proportion of assisted people (men) who do not experience safety problems travelling to, from and/or at WFP programme site				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>90.00	99.10		
Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain)				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>80.00	62.60		
Proportion of assisted people (women) who do not experience safety problems travelling to, from and/or at WFP programme sites				
<i>ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Base value: 2015.08</i>	>90.00	99.10		

Outputs

Planned outputs falling under the treatment of moderate acute malnutrition programmes were not fully achieved given the reorientation necessary to scale-up the delivery of emergency assistance. As a result, it was often not possible for front line staff of the Ministry of Health (MoH) and the National Disaster Management Commission (NDRMC) to accompany distributions with appropriate communication and sensitization campaigns. Moreover, WFP staff that could have supported the MoH and NDRMC in leading these campaigns were also engaged full time in supporting food distributions.

In February 2016, WFP re-organised its staffing setup at Sub Office and Country Office levels allowing for small teams to be deployed and better support government partners in ensuring that the appropriate training and sensitization activities are implemented in WFP-supported programmes for the treatment of moderate acute malnutrition.

Stunting reduction outputs were also not achieved or included in this report as no activities related to this programme were implemented due to funding constraints.

Output	Unit	Planned	Actual	% Actual vs. Planned
SO1: Nutrition: Treatment of Moderate Acute Malnutrition				
Number of men exposed to nutrition messaging supported by WFP	individual	50,764	0	0
Number of men receiving nutrition counseling supported by WFP	individual	50,764	0	0

Output	Unit	Planned	Actual	% Actual vs. Planned
Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counseling	individual	507,643	0	0
Number of women exposed to nutrition messaging supported by WFP	individual	456,879	0	0
Number of women receiving nutrition counseling supported by WFP	individual	456,879	0	0

Outcomes

The effects of the drought on household food security indicators is quite apparent when looking at specific outcome data. Even though the percentage of households with poor food consumption scores (FCS) was low, the average masks regional differences around the country. For example, the proportion of households with poor food consumption FCS in Afar and Oromia regions were 25 and 22 percent, respectively--well above the average.

Moreover, the proportion of male-headed households with poor FCS was higher than female-headed ones. Men tend to have greater income earning opportunities than women, the deterioration of FCS among these households is likely a result of the dramatic reduction in seasonal livelihood opportunities--especially agricultural labour. Dietary diversity scores for both male and female-headed households are also low--each consuming items from only three food groups in a given week. The relief entitlement includes cereals, pulses and oil. Nevertheless, the lack of food available from own production or local markets as a result of the drought has meant that possibilities for improving consumption scores and diversifying diets with complementary food such as meat, milk and eggs were limited given current levels of income and prevailing prices.

The drought has also resulted in an increase in households employing food coping mechanisms more frequently (e.g., skipping meals, reducing size of portions). Consequently, the Coping Strategy Index (CSI) was above targets. Again this is a direct result of having less access to food at the household level--especially from own production and market purchases. In many cases the emergency food assistance ration provided by WFP is the only source of food for a large proportion of the drought-affected population.

All targets for moderate acute malnutrition (i.e., coverage and treatment) were met and largely successful. However, the proportion of targeted population who participated in an adequate number of distributions was not assessed and the stunting prevention programme was not implemented due to funding constraints.

No Productive Safety Net Programme (food assistance for assets) were implemented in the reporting period, hence no indicators were collected.

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
SO1 Save lives and protect livelihoods in emergencies				
Stabilized or reduced undernutrition among children aged 6–59 months and pregnant and lactating women				
MAM treatment recovery rate (%)				
<i>TSF INTERVENTION AREAS , Project End Target: 2018.06 compilation of secondary data from health facilities , Base value: 2015.12 Secondary data compilation of secondary data from health facilities , Latest Follow-up: 2015.12 Secondary data Field level program data</i>	>75.00	92.36	-	95.40
MAM treatment mortality rate (%)				
<i>TSF INTERVENTION AREAS , Project End Target: 2018.06 compilation of secondary data from health facilities , Base value: 2015.12 Secondary data compilation of secondary data from health facilities , Latest Follow-up: 2015.12 Secondary data Field level program data</i>	<3.00	0.04	-	0.00

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
MAM treatment default rate (%)				
TSF INTERVENTION AREAS , Project End Target: 2018.06 compilation of secondary data from health facilities , Base value: 2015.12 Secondary data compilation of secondary data from health facilities , Latest Follow-up: 2015.12 Secondary data field level program data	<15.00	1.98	-	2.20
MAM treatment non-response rate (%)				
TSF INTERVENTION AREAS , Project End Target: 2018.06 compilation of secondary data from health facilities , Base value: 2015.12 Secondary data , Latest Follow-up: 2015.12 Secondary data Field level program data	<15.00	5.06	-	2.40
Proportion of target population who participate in an adequate number of distributions				
TSF INTERVENTION AREAS , Project End Target: 2018.06 compilation of secondary data from health facilities	>66.00		-	-
Proportion of eligible population who participate in programme (coverage)				
TSF INTERVENTION AREAS , Project End Target: 2018.06 compilation of secondary data from health facilities , Latest Follow-up: 2015.12 WFP programme monitoring Household interview through Nov 2014 CHS	>50.00		-	89.00
Stabilized or improved food consumption over assistance period for targeted households and/or individuals				
FCS: percentage of households with poor Food Consumption Score				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 Household interview through CHS , Base value: 2015.08 WFP programme monitoring Household interview through August 2015 CHS , Latest Follow-up: 2015.11 WFP programme monitoring Household interview through Nov 2015 CHS	<3.10	15.50	-	15.80
FCS: percentage of households with poor Food Consumption Score (female-headed)				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 household interviews through CHS , Base value: 2015.08 WFP programme monitoring household interviews through CHS , Latest Follow-up: 2015.11 WFP programme monitoring household interviews through CHS	<3.44	17.20	-	15.20
FCS: percentage of households with poor Food Consumption Score (male-headed)				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 household interviews through CHS , Base value: 2015.08 WFP programme monitoring household interviews through CHS , Latest Follow-up: 2015.11 WFP programme monitoring household interviews through CHS	<3.00	14.90	-	16.00
Diet Diversity Score				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 Household interview through CHS , Base value: 2015.08 WFP programme monitoring Household interview through August 2015 CHS , Latest Follow-up: 2015.11 WFP programme monitoring Household interview through Nov 2015 CHS	>3.90	3.90	-	3.60

Outcome	Project End Target	Base Value	Previous Follow-up	Latest Follow-up
Diet Diversity Score (female-headed households)				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 Household interviews through CHS , Base value: 2015.08 WFP programme monitoring household interviews through CHS , Latest Follow-up: 2015.11 WFP programme monitoring household interviews through CHS	>3.80	3.80	-	3.50
Diet Diversity Score (male-headed households)				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 Household interviews through CHS , Base value: 2015.08 WFP programme monitoring household interviews through CHS , Latest Follow-up: 2015.11 WFP programme monitoring household interviews through CHS	>3.90	3.90	-	3.60
CSI (Food): Coping Strategy Index (average)				
RELIEF INTERVENTION AREAS , Project End Target: 2018.06 household interviews through CHS , Base value: 2015.08 WFP programme monitoring household interviews through CHS , Latest Follow-up: 2015.11 WFP programme monitoring household interviews through CHS	<14.20	14.19	-	16.40

Sustainability, Capacity Development and Handover

The Food Management Improvement Project (FMIP) was a major activity engaged in from a capacity strengthening point of view during the reporting period. Specifically, the focus from July-December 2015 was to track movement of commodities through the government supply chain in response to the emergency drought conditions. Almost 250,000 mt of commodities were channeled through the National Disaster Risk Management Commission (NDRMC) structure. The Commodity Allocation and Tracking System (CATS) was the main tool capturing the specifics of where this food was being procured and subsequently transported. Tigray, Oromia and Addis were the main areas of focus for these specific FMIP activities. Unfortunately, in other regions (Somali, Afar, Amhara), downstream data capture and tracking procedures of commodity receipts were not fully implemented as WFP was not able to roll-out the necessary trainings, due to WFP staff being focused on supporting the government to deliver emergency assistance.

Inputs

Resource Inputs

The July-December requirements were estimated at USD 100 million for relief and USD 11 million for treatment of moderate acute malnutrition. There were no requirements for PSNP as activities for 2015 had concluded during the previous PRRO. Carry-over resources enabled activities to start pending the receipt of additional contributions

Four Relief Rounds were planned for the July-December period with an additional Round depending on resource availability. Cash based transfers were discontinued from September onwards given the severity of the drought and the recognition that food prices were rising dramatically and overall supply in markets was limited. To cover the overall commodity requirements needs, WFP relied on multilateral and directed multilateral contributions from donors. Some funding received late in the year was only available to meet needs in early 2016. The GoE additionally helped cover the bulk of the 5th and 6th rounds with their own resources at an estimated value of almost USD 200 million.

Treatment of moderate acute malnutrition (MAM) activities continued to face challenges of timely availability of procured commodities. Incoming resources were nonetheless prioritized to assure coverage of the last quarter shortfalls, ranging between USD 4-5 million. This gap was primarily covered by a multilateral allocation of USD 3.5 million. An additional USD 11.5 million received during the last two months of 2015 from various donors enabled procurement actions for 2016 MAM needs.

Donor	2015 Resourced (mt)		2015 Shipped/Purchased (mt)
	In-Kind	Cash	
Canada	0	8,481	0
Czech Republic	0	150	0
MULTILATERAL	0	12,909	13,395
Norway	0	1,217	0
Sweden	0	29,710	23,847
Switzerland	0	2,838	2,491
UN CERF Common Funds and Agencies	0	31,727	3,109
United Kingdom	0	39,132	34,560
USA	54,710	0	52,479
Total	54,710	126,165	129,880

See Annex: Resource Inputs from Donors for breakdown by commodity and contribution reference number

Food Purchases and In-Kind Receipts

The vast majority of commodities were sourced through the Global Commodity Management Facility (GCMF) which enabled WFP to purchase globally prepositioned stocks in Djibouti and Ethiopia--thereby reducing lead-times in some instances. Some 55,000 MT of maize and 9,600 MT of beans of GCMF stocks were sourced locally in Ethiopia. Sorghum, yellow split peas and vegetable oil were in-kind contributions from the U.S.

Commodities	Local (mt)	Developing Country (mt)	Other International (mt)	GCMF (mt)
Beans	0	0	0	9,532
Corn Soya Blend	0	0	0	7,884
Maize	0	0	0	55,520
Sorghum/Millet	0	0	48,780	0
Split Peas	0	0	3,317	2,342
Vegetable Oil	0	0	600	2,883
Wheat	0	0	0	35,744
Total	0	0	52,697	113,906

Food Transport, Delivery and Handling

WFP managed the supply chain starting from the port of entry (primarily Djibouti), followed by delivery and handover to government counterparts at pre-defined destinations (handover points). WFP maintained a monitoring role while delivery and distribution were carried out by the government, except in the Somali region and refugee camps where WFP delivered all the way to the final delivery points as well as maintaining the monitoring role.

WFP's use of its Global Commodity Management Facility (GCMF) and the Government's Strategic Food Reserve Agency, helped mitigate distribution delays as the PRRO was able to benefit from timely access to most of the commodities as soon as funds were received. Receiving and storing GCMF commodities until sales were finalized in the hubs in Ethiopia also reduced the costs associated with long-term storage in the port of Djibouti.

However, the expanded use of the Djibouti corridor for both commercial and humanitarian purposes placed great strain on Djibouti Port and the associated overland transport sectors. This resulted in increased logistics costs and

congestion, which hampered the timely movement of cargo. Completion of WFP's Humanitarian Logistics Hub in Djibouti along with the use of additional import corridors, such as Berbera, is planned for 2016 to mitigate costs and delays.

The introduction of WFP's Logistics Execution Support System (LESS) in June 2015 also enhanced the visibility, control and monitoring of commodities being handled in WFP's pipeline. LESS, the new corporate supply chain management tool, provides real time support to WFP's Logistics operations by supporting the online recognition and registration of stock movement transactions when and where they occur, with clear roles and responsibilities for various actors involved in the process.

Post-Delivery Losses

WFP tracked, recovered (whenever possible) and reported losses that occurred under WFP's custody, particularly during food storage and transportation. Any losses that occurred during transport were fully recovered from transporters, but some losses were also incurred due to overlong storage and infestation. To address these challenges, WFP is assessing different training, transport and packaging options.

Detailed post-delivery loss information will be provided in the Report on Post-Delivery Losses for the Period 1 January - 31 December 2015, presented to the WFP Executive Board in June 2016.

Management

Partnerships

WFP partnered with the NDRMC to implement relief food interventions. For this operations there was a government-donor sectoral coordinating mechanism that included United Nations agencies and international NGOs. The programme has been led by government-donor coordinating mechanism where United Nations agencies and international NGOs are regularly represented.

WFP is the co-lead of the Food Cluster that oversees all food assistance operations in response to humanitarian crises. WFP also represents the Food Cluster at the Disaster Risk Management Technical Working Group (DRMTWG) that reports back to GoE and Donors on the status of emergency food assistance programmes. Moreover, WFP is the secretary of the government led Food Management Task Force and Prioritization Committee.

These technical committees held meetings periodically with an objective of making decisions on food allocations, dispatch and distribution including pipeline and transportation related issues, which is regularly reported to NDRMC management and DRM technical task force for reflections and decisions.

Nutrition activities, and TSF in particular, are designed and implemented in partnership with the MoH, NDRMC, UNICEF and international NGOs. The NGOs were providing combined resources and technical expertise towards providing comprehensive assistance to beneficiaries which also combines the OTP and TSF response. A number of NGOs have signed a tripartite agreement to implement TSF.

One of the most promising aspects of the overall response to the emergency was the leadership of the government and its decision to use its own resources to meet the rapidly escalating humanitarian needs. The approximate value of the 250,000 mt of food provided by the government for emergency assistance is reported to be valued as close to USD 200 million.

Partnership	NGO		Red Cross and Red Crescent Movement	UN/IO
	National	International		
Total		6		1

Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Latest Follow-up: 2015.12	=1.00	1.00

Cross-cutting Indicators	Project End Target	Latest Follow-up
Number of partner organizations that provide complementary inputs and services		
ETHIOPIA, Nutrition: Treatment of Moderate Acute Malnutrition , Project End Target: 2018.06 , Latest Follow-up: 2015.12	=15.00	15.00
Proportion of project activities implemented with the engagement of complementary partners		
ETHIOPIA, General Distribution (GD) , Project End Target: 2018.06 , Latest Follow-up: 2015.11	=100.00	100.00

Lessons Learned

Recurring climate shocks in Ethiopia places considerable pressure and strain on existing UN, NGO and government systems that need to respond--and the current El Niño drought is no exception. This is partly an issue of magnitude: responding to the needs of 10.2 million people in a very short period of time is a major challenge irrespective of whether the main actor is government, NGO or UN system agency.

In order to re-orient existing food assistance systems to respond to the emergency WFP and its main partner, the National Disaster Risk Management Commission (NDRMC) has placed greater emphasis on joined-up operational planning. For example, weekly operational (rather than policy or strategy) meetings are held at national and sub-national level among WFP, government and NGOs to identify bottlenecks in the supply-chain such as storage facilities, transport planning and tracking commodity movements. The government has also taken action at the national level to ensure flexible customs clearance procedures for humanitarian cargo to ensure a timely response. While these are welcome procedures for the food assistance sector, there is still scope for greater operational coordination among government entities providing other services such as water, sanitation and seeds. Some progress has been made in this regard to ensure that a package of critical services are provided to drought-affected populations. However, some bottlenecks still exist insofar as many national systems are focused on development assistance and it has taken some time to shift to an emergency mode. For this reason, WFP is rethinking its overall approach to capacity strengthening in the coming years and looking beyond supporting the supply-chain systems of not only the NDRMC, but also other key ministries such as health and education.

For WFP, in particular, the major lesson learned from the current emergency relates to WFP's supply-chain. The congestion in Djibouti, the result of large volumes of humanitarian, government and commercial cargo arriving into port at the same time, has led to delays in the import of commodities into Ethiopia. As a result, WFP actively explored options to use other ports and in December 2015 began using Berbera as an additional point of entry for commodities. The move showed immediate results in being able to move food into Ethiopia faster and address the increasing needs quickly.

Operational Statistics

Annex: Participants by Activity and Modality

Activity	Planned			Actual			% Actual v. Planned		
	Food	CBT	Total	Food	CBT	Total	Food	CBT	Total
General Distribution (GD)	1,160,000	40,000	1,200,000	706,853	-	706,853	60.9%	-	58.9%
Nutrition: Treatment of Moderate Acute Malnutrition	507,643	-	507,643	519,258	-	519,258	102.3%	-	102.3%
Nutrition: Prevention of Stunting	199,999	-	199,999	-	-	-	-	-	-

Annex: Resource Inputs from Donors

Donor	Cont. Ref. No.	Commodity	Resourced in 2015 (mt)		Shipped/Purchased in 2015 (mt)
			In-Kind	Cash	
Canada	CAN-C-00501-02	Split Peas	0	2,342	0
Canada	CAN-C-00501-02	Wheat	0	2,331	0
Canada	CAN-C-00507-06	Corn Soya Blend	0	1,773	0
Canada	CAN-C-00507-06	Vegetable Oil	0	400	0
Canada	CAN-C-00516-01	Corn Soya Blend	0	1,636	0
Czech Republic	CZE-C-00019-01	Corn Soya Blend	0	150	0
MULTILATERAL	MULTILATERAL	Beans	0	1,046	1,046
MULTILATERAL	MULTILATERAL	Corn Soya Blend	0	6,180	6,629
MULTILATERAL	MULTILATERAL	Split Peas	0	0	683
MULTILATERAL	MULTILATERAL	Vegetable Oil	0	1,478	2,366
MULTILATERAL	MULTILATERAL	Wheat	0	4,206	2,670
Norway	NOR-C-00321-01	Corn Soya Blend	0	1,217	0
Sweden	SWE-C-00231-01	Maize	0	12,648	12,648
Sweden	SWE-C-00231-01	Wheat	0	2,688	0
Sweden	SWE-C-00231-02	Beans	0	3,358	3,358
Sweden	SWE-C-00231-02	Corn Soya Blend	0	68	0
Sweden	SWE-C-00231-02	Maize	0	7,841	7,841
Sweden	SWE-C-00231-02	Wheat	0	3,107	0
Switzerland	SWI-C-00486-01	Beans	0	500	500
Switzerland	SWI-C-00486-01	Maize	0	1,991	1,991
Switzerland	SWI-C-00486-01	Vegetable Oil	0	347	0
UN CERF Common Funds and Agencies	001-C-01308-01	Corn Soya Blend	0	3,156	0
UN CERF Common Funds and Agencies	001-C-01308-01	Vegetable Oil	0	330	0
UN CERF Common Funds and Agencies	001-C-01342-01	Corn Soya Blend	0	1,391	0
UN CERF Common Funds and Agencies	001-C-01342-01	Maize	0	3,109	3,109
UN CERF Common Funds and Agencies	001-C-01342-01	Wheat	0	23,741	0
United Kingdom	UK -C-00132-08	Beans	0	4,628	4,628
United Kingdom	UK -C-00132-08	Maize	0	32,182	29,932

Donor	Cont. Ref. No.	Commodity	Resourced in 2015 (mt)		Shipped/Purchased in 2015 (mt)
			In-Kind	Cash	
United Kingdom	UK -C-00132-08	Vegetable Oil	0	327	0
United Kingdom	UK -C-00132-08	Wheat	0	1,995	0
USA		Sorghum/Millet	0	0	48,780
USA		Split Peas	0	0	3,099
USA		Vegetable Oil	0	0	600
USA	USA-C-01107-01	Sorghum/Millet	24,800	0	0
USA	USA-C-01107-01	Split Peas	3,330	0	0
USA	USA-C-01107-01	Vegetable Oil	600	0	0
USA	USA-C-01107-03	Sorghum/Millet	23,980	0	0
USA	USA-C-01107-03	Split Peas	2,000	0	0
Total			54,710	126,165	129,880