

Regional Emergency Operation
Central African Republic, Cameroon, Chad, Democratic Republic of Congo
and Republic of Congo (OMD/OMJ) 200799

Critical support to populations affected by the ongoing crisis in Central African Republic and its regional impact	
Number of beneficiaries	1 565 400
Duration of project	1 January 2015–31 December 2015 (12 months)
Gender marker code*	2a
WFP food tonnage (<i>mt</i>)	111 962
WFP cash/voucher transfers	16 103 230

Cost (United States dollars)	
Food and related costs	135 676 412
Cash and vouchers and related costs	19 560 444
Capacity development & augmentation	175 000
Direct support cost	28 078 798
Indirect support cost	12 844 346
Total cost to WFP	196 335 000

EXECUTIVE SUMMARY

The December 2013 escalation of conflict in Central African Republic marked an important shift in an already difficult security, political, and humanitarian context. By the end of the month, 640,000 people were displaced in the country. The subsequent resignation of the president and his cabinet in January 2014 created new waves of displacement and tens of thousands fled to neighboring countries. The United Nations declared the crisis a Level 3 emergency, a designation that remains in place today.

Over the past year, the situation in Central African Republic has grown increasingly complex. The drivers of conflict have not been resolved and as the number of actors increase, inter-communal antagonism remains strong, militia groups fragment, and foreign armed groups such as the Lord's Resistance Army remain entrenched in the east. Tensions among populations remain high. The exodus of primary economic actors has resulted in a near collapse of the economy. Recent food security assessments estimated that 30 percent of the population is food insecure and increasingly fragile to shocks.

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

More than 420,000 refugees, returnees, and third country nationals have fled with no assets into neighboring Cameroon, Chad, Democratic Republic of Congo, and Republic of Congo, the majority arriving since January 2014 in remote areas with limited services. May 2014 saw the temporary declaration of a WFP Level 3 emergency in Cameroon to stabilize the dire situation of children and adults arriving in a state of starvation. In the current conditions, voluntary return at scale from neighboring countries and isolated enclaves within Central African Republic is not likely.

In response to another wave of insecurity in Central African Republic and further displacement of populations, Regional Emergency Operation 200799 (EMOP) spans the five countries and consolidates earlier country-specific responses to this prolonged crisis. Planned for an initial duration of one year, the operation allows for more medium-term planning, and ensures a flexible response tool to adapt to the evolving crisis. The EMOP increases coherence in objectives and programmes, while adapting to the particular context and needs of beneficiary groups. The regional lens also allows for a broader view of supply chain management, recognizing common challenges, but also cross-border opportunities for movement of goods.

The operation addresses the impacts of the crisis and life-saving needs of vulnerable populations in conflict-affected communities, sites of displacement and refuge, and host communities. Under Strategic Objective 1, "Save lives and protect livelihoods in emergencies", WFP aims to improve food consumption, stabilize undernutrition, and restore access to basic services. The EMOP will support up to 1.56 million persons over the year, including:

- Persons displaced (internally and externally) with limited livelihood prospects or alternative means;
- Local and host food-insecure households whose coping capacity has been reduced as a result of the crisis;
- Young children and pregnant and lactating women whose nutrition situation is already in crisis or at-risk; and
- Target vulnerable groups whose access to basic education and health services is interrupted.

The life-saving response will also support community mobilization and social cohesion through community-based protection of assets and human capital, creating a foundation for future recovery programmes.

The operation draws on best practices and gains made to date, linking food security and nutrition programmes, strengthening partnerships to leverage the combined impact of activities, and reinforcing supply chain management.

SITUATION ANALYSIS

1. December 2013 marked an escalation of instability in Central African Republic that had begun in late 2012 when Seleka rebel forces took Bangui in a March 2013 coup d'état. In December 2013 a mass wave of violence broke out in the capital, followed by the resignation of the president and his cabinet in January 2014. An estimated 640,000 people were displaced in the country. The United Nations declared the crisis a system-wide Level 3 emergency – a designation that has since been extended.
2. Multiple factors increased the complexity of the crisis: inter-militia violent competition for territory and power and resources, internal power struggles within groups, rising criminality, undisciplined fighters, and growing frustration among the population that can quickly lead to social strife. The presence of the Lord's Resistance Army (LRA) in the east presents another de-stabilizing factor.
3. Drivers of the conflict have not been resolved, and the contest for territory and power continues. Ex-Seleka appear to hold and expand territory in the north. Meanwhile, anti-Balaka announced the group's intentions to form a political party ahead of next year's presidential election.
4. The confluence of social, political and military environment in Central African Republic influences stability and creates the need for assistance. In turn, violence impedes safe delivery of assistance to populations. Attacks on nongovernmental organizations (NGOs) have resulted in the relocation of staff. Recently a pattern of organized attacks has emerged against the Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA, the established United Nations peacekeeping force) with risks of association for United Nations humanitarian agencies.
5. Two years of fighting and insecurity has led to repeated displacement, both pendular and more permanent, of populations avoiding violence. Fear of insecurity and inability to rebuild destroyed homes present important obstacles for return.¹ The nature of the violence, overlain with ethnic, religious, and tribal dimensions, has created high-risk enclaves in provinces and Bangui where isolated populations are surrounded and unable to leave. In this context, traditional daily tasks of women such as collecting wood and water put them in increased danger of sexual violence. As of November, 430,000 persons could be displaced in Central African Republic (9 percent of the current population), including 61,000 in Bangui.² Half of internally displaced persons (IDPs) are with host households, 40 percent in enclaves or sites, and 10 percent are anticipated to have fled to the bush.
6. United Nations High Commissioner for Refugees (UNHCR) estimates that as of November 2014, more than 420,000 refugees, returnees, and third country nationals have taken refuge in neighbouring Cameroon, Chad, Democratic Republic of Congo (DRC), and Republic of Congo (RoC). The overwhelming majority of persons have arrived since January 2014, following the resignation of then-transitional President Michel Djotodia. Volatile security in Central African Republic continues to create new waves. Elections are planned in Central African Republic for June 2015, and in DRC, RoC and Chad in 2016; instability could be anticipated. The most likely scenario is a prolonged crisis with continued population movements and no large-scale return.

¹ IOM, *IDP Return Intention Survey Bangui*, July 2014.

² OCHA, *Central African Republic Humanitarian Dashboard*, November 2014. Outside of Bangui, highest numbers of IDPs are found in Ombella M'Poko. Ouaham, Ouaka, Nana-Gribizi, and Lobaye. WFP, *Emergency Food Security Assessment*, November 2014.

Food security and nutrition situation

Central African Republic

7. Central African Republic is one of the least developed countries in the world, ranking 185 out of 187 countries on the human development index (HDI).³ Prior to the crisis, 76.3 percent of the population could be classified in multi-dimensional poverty.⁴ The country ranks 142 out of 149 countries on the gender inequality index.
8. An economic analysis conducted by WFP and the Food and Agriculture Organization of the United Nations (FAO) in April 2014 underscored that by 2013 gross domestic product (GDP) had declined by 28 percent compared to 2012, GDP per capita had fallen from USD 479 to USD 333; the agriculture sector had contracted by 38 percent, food crop production by 38 percent and livestock production by 55 percent compared to the previous year. With the escalation of violence at the end of 2013 and early 2014, 70 percent of traders fled the country.⁵
9. The WFP/FAO crop and food security assessment mission (CFSAM) projects a 58 percent reduction in the 2014 harvest production compared to the pre-crisis five-year average.⁶ For the 2014/2015 agricultural calendar, Central African Republic has a cereal import requirement of 134,356 tonnes, and a predicted cereal deficit of 57,000 tonnes.⁷
10. According to the latest WFP emergency food security assessment (EFSA), 60 percent of the population relies on agriculture for revenue, but due to insecurity, reduced access to means and loans, 20 percent of farmers did not cultivate this year.⁸ The CFSAM projects household food stocks will be exhausted within a few months, particularly those households most affected by conflict and hosting IDPs, and an early onset hunger season could be anticipated.
11. As agriculture outputs fall, market dependence is expected to increase. Markets represent a principal source of food for two-thirds of households, and an important source of daily labour and revenue.⁹ However, markets in poor rural areas are hampered by insecurity, poor infrastructure, and the exodus of traders and transports – as of November 2014, the number of suppliers in country had decreased by half. The closure of the Chad border affected the trade corridor and caused an increase in the price of groundnuts.¹⁰
12. According to the EFSA, nine out of ten households have endured shocks in the previous months directly affecting their income and asset base, including violence (37 percent), illness and morbidity (35 percent), pillage of harvest of livestock (26 percent), loss of an able-bodied household member (25 percent), and forced displacement (16 percent). More than half of households rely increasingly on crisis or emergency coping strategies, underscoring how the protracted crisis has exhausted the ability of households to cope.¹¹

³ A decline compared to 2013, when the country ranked 180 out of 186 countries. UNDP, *Human Development Report – Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*, (HDR) 2014.

⁴ This indicator identifies multiple deprivations in the same household in education, health and living standards.

⁵ WFP/FAO, *Economic Analysis*, April 2014.

⁶ Compared to last year, an 11 percent increase in production is observed (due almost exclusively to cassava production) WFP/FAO, *Crop and Food Security Assessment (CFSAM)*, October 2014.

⁷ The deficit scenario considers 29,000 mt of commercial imports and 48,000 mt of humanitarian assistance. CFSAM, October 2014.

⁸ WFP, *Emergency Food Security Assessment (EFSA)*, November 2014.

⁹ EFSA, November 2014.

¹⁰ FEWS NET Central African Republic, October 2014 (northern prefectures of Ouham, Ouham-Pendé and Kemo).

¹¹ EFSA, November 2014.

13. Today, 30 percent of the population (1.2 million) is moderately or severely food insecure. Severely food insecure households have poor food consumption (6 percent of the population), spend 75 percent or more of their resources on food, and resort to emergency coping strategies. Households that are poor or very poor, displaced or returnees, dependent on markets for cereals, have no capacity to borrow, have low levels of education, and/or are headed by women, are more likely to be food insecure. Female-headed households in rural areas are three times more likely to be poor compared to a male headed households, have reduced access to education (57 percent have no schooling compared to 22 percent of men), and have less access to sufficient land (30 percent cultivate land of less than 0.5 hectares compared to 19 percent of men).¹² All five countries have poor rankings on gender development and inequality indexes.¹³
14. The recent integrated phase classification (IPC) exercise, integrating latest food consumption and livelihood data, noted a slight improvement compared to the April 2014 IPC conducted during the lean season, but an overall deterioration of the food security situation compared to November 2013 – underscoring the impact of the prolonged conflict.¹⁴
15. The crisis in Central African Republic has affected all sectors, and drastically reduced access to basic services. Prior to escalation of the conflict, nearly 95 percent of children were enrolled in primary school, though attendance rates were low: 78 for boys and 68 percent for girls. The prolonged conflict in Central African Republic has caused children to miss up to two years of school.¹⁵ Although the EFSA found 47 percent of communities have access to a functioning primary school, lack of infrastructure, equipment, and teachers posed challenges, and insecurity impeded the resumption of school activities.¹⁶
16. According to the June 2012 Standardized Monitoring and Assessment of Relief and Transitions (SMART) nutrition survey, pre-crisis global acute malnutrition (GAM) prevalence rates were below the 10 percent serious threshold. Preliminary and partial results of the November 2014 SMART suggest GAM rates stabilized below the 10 percent serious threshold, and at 5 percent in Bangui, as a result of a concerted multi-sector partner support, but continued monitoring is required. High prevalence of chronic malnutrition (surpassing 50 percent in some prefectures) and high mortality rates remain important concerns.¹⁷
17. Interviews conducted during the recent EFSA indicate that only 39 percent of communities have a functioning health structure within the village – for most communities (64 percent) structures are not easily accessible due to distance, aggravated by insecurity, and often suffer from lack of medicine and personnel. Community-level surveys conducted in November 2014 suggest increased mortality, especially maternal.¹⁸

Refugee-receiving countries

¹² EFSA, November 2014.

¹³ UNDP Human Development Report 2013; Gender Inequality Index ranking out of 187 countries: Cameroon is 138th, Central African Republic 144th, DRC 147th and Chad 150th; Gender Development Index ranking out of 187 countries: RoC is 96th, Cameroon 123rd, DRC 134th and Chad 144th.

¹⁴ Integrated Phase Classification, October 2014: The prefecture of Ouaham is considered IPC Phase 4 (emergency) as are 10 sub-prefectures (Bimbo, Boda, Berberati, Bocaranga, Ngaoundaye, Sibut, Dekoa, Mala, Kaga-Bandoro, Obo); 11 prefectures are classified as IPC Phase 3 (crisis).

¹⁵ HDR, 2014.

¹⁶ EFSA, 2014.

¹⁷ SMART 2014 preliminary results.

¹⁸ Last data (from 2010) showed estimated maternal mortality at more than 890 deaths per 100,000 live births in Central African Republic, HDR, 2014 ; EFSA, 2014.

18. Countries receiving 420,000 people from Central African Republic are ranked on the low end of the human development index, with RoC and Cameroon ranking 140 and 152 of 187 countries respectively; Chad, Central African Republic and DRC are ranked last on the human development index, in that order. The refugee-receiving countries report important gender inequalities, stunting rates above 30 percent, and high dependency ratios.¹⁹ Receiving communities are extremely remote, traditionally receive refugees, have poor road infrastructure and more constrained access to services, and are themselves food insecure to different degrees. Provision of assistance is important in mitigating tensions, and in preventing deterioration of resources and services for the local communities.
19. Populations arriving in Cameroon came with no belongings; adults and children arrived with diseases and injuries, after a long journey without food, water, shelter. A May/June 2014 WFP, United Nations Children's Fund (UNICEF) and UNHCR mission measured GAM rates of 20 to 30 percent among children aged 6–59 months – one site surpassing 30 percent GAM with severely acute malnutrition (SAM) rates of 10 percent. Among pregnant and lactating women (PLW), 20 percent acute malnutrition was observed, and nutrition treatment centres reported over 17 percent of moderately malnourished children in treatment were primary school age children above the age of 5 years.²⁰ The dire nutrition situation of children and adults alike led WFP to declare a Level 3 emergency to rapidly scale-up nutrition prevention and treatment activities alongside partners; mobile treatment units were established, and in some sites, treatment of moderate acute malnutrition (MAM) was addressed through blanket support, given the burden on treatment centres to treat severe acute malnutrition. The nutrition situation is more stable, but it needs to be observed closely²¹ due to cholera, malaria, and diarrhea and other regional risks that contribute to malnutrition. A rapid food security assessment among refugees arrived in transit sites in July 2014 found that nearly 35 of refugee households are food insecure, compared to 16 percent of host populations. Female-headed households among both refugee and host communities are more likely to be food insecure and rely on food assistance.²²
20. In Chad, the population profile is mixed, including both refugees and a large proportion of returnees (persons of Chadian origin but lacking social networks in the country). It is estimated that 110,000 returnees have arrived in country since January 2014, the majority crossing overland into southern Chad (75,000). Refugees are transferred to existing camps, and returnees are settled in unofficial sites, or are relocated to villages of origin. Recent new arrivals further east have limited livelihood opportunities and place further strain on limited environmental resources and basic services. Nutrition screening and monitoring of Central African Republic refugees in March and May 2014 found GAM prevalence of 16 percent using mid-upper arm circumference, and poor food consumption in over 15 percent of households, increasing among female-headed households.²³
21. In DRC, refugees are settled in the Gbadolite, Zongo, and Libenge territories of Equateur province and the Bondo territory of Oriental province (Mbote). Refugees lack reliable livelihoods or coping mechanisms to meet basic food needs, in host areas with an already precarious food security situation. Among refugee households, 42 percent are severe to moderately food insecure;²⁴ GAM prevalence in refugee

¹⁹ HDR, 2014.

²⁰ WFP, UNICEF, UNHCR, *Joint Mission - Nutrition Response to Central African Republic Refugees in East Cameroon*, June 2014.

²¹ The August 2013 *SMART* found GAM prevalence of 17 percent among refugees arriving since 2005.

²² WFP, *Rapid Food Security Assessment – East and Adamaoua Regions*, July 2014.

²³ WFP, *Post-Distribution Monitoring*, May 2014; WFP partner MUAC *screening*, March 2014.

²⁴ WFP/UNHCR JAM, May-July 2014

communities is 7.1 percent, and 7.6 percent among non-camp refugees.²⁵ Chronic malnutrition is above the 40 percent alert threshold for all refugee populations.

22. In RoC, arrival of refugees in the northern Likouala department has placed additional burden on a region that already hosts a significant refugee population from DRC (more than 117,000 fled Equateur province in 2009). Refugees are in host communities and in two sites of Bétou district, and in Impfondo. According to the April 2014 WFP/UNHCR Joint Assessment Mission (JAM), 56 percent of Central African Republic refugees are food insecure, including 10 percent severely food insecure. Reliance on negative coping strategies is extremely high: 21 percent of households practice crisis strategies (full day without eating, reduced expenditure on health and education) and nearly 75 percent employ emergency strategies (depleting all savings, undertaking illegal activities).²⁶

POLICIES, CAPACITIES AND ACTIONS OF THE GOVERNMENTS AND OTHERS

Policies, Capacities and Actions of the Governments

Central African Republic

23. The Government of Central African Republic's policy framework is the revised multi-year transition roadmap based on four primary pillars: restoring security and building peace, humanitarian assistance, policy and governance, and economic recovery. National sectoral plans for education, health and nutrition, and food security constitute the intervention framework of humanitarian actors and civil society; financial and technical capabilities to design and implement are limited, and so is the presence of local authorities.
24. The Ministry of Education, together with UNICEF, is taking the lead in the back to school campaign. The national nutrition protocol will be reviewed by the end 2014 with support from UNICEF and WFP, and the national investment plan for agriculture, food security and nutrition has been revised.

Refugee/returnee-receiving countries

25. Government policies in the refugee/returnee-receiving countries are not static.
26. Cameroon is host to "old" refugee populations that arrived and settled in communities since 2005; the EMOP supports 18,500 of them identified as severely food insecure, while others are targeted for livelihood support under the protracted relief and recovery operation (PRRO). "New" refugees arriving since 2014 are also supported through the EMOP; received in transit sites for registration and transferred to official sites in East and Adamaoua regions.²⁷ An Emergency Coordination Committee is set up at national level to monitor assistance to refugees, and in the field WFP works with the Ministry of Health for implementation of the nutrition response.
27. At the onset of the crisis, the Government of Chad supported the return of populations fleeing Central African Republic that were considered "returnees" of Chadian origin.²⁸ However, later movements were not supported by the Government. Chad also hosts protracted refugees from the Darfur conflict (since 2002) and from the 2003 military coup in Central African Republic. In response to the 2013 escalation of conflict, the Government provided extra land to extend existing refugee camps.

²⁵ WFP/UNHCR JAM, May-July 2014.

²⁶ WFP/UNHCR, JAM, 10-22 April 2014.

²⁷ Some refugees arrived in unofficial and difficult to access areas along the border; mobile teams have been established for identification and outreach.

²⁸ Most households have lived in Central African Republic for generations without social or economic ties to Chad.

28. In DRC, the Government has encouraged a camp-based approach and provided large tracts of land in the case of protracted settlement. For out-of-camp populations,²⁹ the Government and UNHCR endorse vulnerability-based targeting to encourage peaceful coexistence and minimize potential conflict between refugees and host communities.
29. In RoC, refugees are assisted in dedicated sites. There are restrictions on access to land and other livelihood activities for refugees. The Ministry for Social Affairs, Humanitarian Action and Solidarity coordinates humanitarian operations at the national level, and district level authorities are key partners in Impfondo and Bétou areas.

Policies, Capacities and Actions of Other Major Actors

Central African Republic

30. In Central African Republic, United Nations agencies have scaled up their programmes and staffing, and the number and capacity of national and international NGOs has increased substantially in areas of health, nutrition, WASH (water, sanitation and hygiene), food security, camp management, and education.
31. In 2014, WFP, FAO and NGO partners undertook an important seed protection campaign, ensuring agricultural inputs alongside food rations ahead of the planting season, thereby preventing consumption of seeds and enabling engagement in planting. Best practices from this campaign will be replicated in 2015.
32. A rapid response mechanism (RRM) has been created to carry out multi-sector assessments and share results with clusters to deliver priority assistance. The mechanism will be expanded in 2015 through increased membership.
33. For refugee responses, WFP coordinates with UNHCR and IOM for beneficiary identification and targeting and aligns strategy with the UNHCR Joint Regional Response Plan and the wider humanitarian response framework.

Refugee/returnee-receiving countries

34. In Cameroon, nutrition partners work to reinforce capacity, coverage and quality of MAM and SAM treatment, and to develop innovative responses to the fragile nutrition situation of out-of camp refugees through mobile clinics. In Chad, WFP and NGOs collaborate to strengthen capacity of local health staff. In DRC, WFP works with UNHCR and NGOs through a tripartite agreement defines obligations of each party for agreed activities (food, nutrition, education and livelihoods). In RoC, WFP collaborates with United Nations and NGO partners to ensure parallel interventions (including education and nutrition) supporting refugees and host communities.

Coordination

35. In Central African Republic, cluster coordination mechanisms are active and have been reinforced following the system-wide Level 3 declaration. WFP leads the emergency telecommunications and logistics clusters, co-leads the food security cluster with FAO, and participates in the education and nutrition clusters. Sub-clusters are being set-up at prefecture level. Coordination with MINUSCA is done through existing coordination structures, including the Humanitarian Country Team and United Nations Country Team.
36. In refugee-receiving countries, UNHCR leads coordination of the refugee response in close collaboration with respective government authorities, United Nations agencies and NGOs. Clusters or sectoral working groups coordinate assessments and interventions at the central and local level. In Chad, where new arrivals are seen as

²⁹ Around Libenge, Zongo and Gbadolite, and areas along the Ubangi River.

returnees, the Government and the Office for the Coordination of Humanitarian Affairs (OCHA) are involved in coordination of the response. The regional approach to the Central African Republic refugee crisis has been discussed with key partners at national and regional level, including UNHCR, OCHA, as well as the European Commission's Humanitarian Aid and Civil Protection department (ECHO), United States Agency for International Development, and other donors.

OBJECTIVES OF WFP ASSISTANCE

WFP presence in countries

37. The EMOP represents the primary operation in Central African Republic, and supersedes an earlier country-specific EMOP (January–November 2014).³⁰
38. In the neighbouring countries of Cameroon, Chad and RoC, WFP operates PRROs and development programmes in refugee/returnee receiving areas. Specifically:
 - Cameroon: Under PRRO 200552, vulnerability-based livelihood support activities aim at building resilience of local communities and “old” refugees who are not severely food insecure, as recommended by the evaluation. Country Programme 200330 ensures school meals to children in vulnerable areas. Funding shortfalls in 2014 limited response, and livelihood activities could not be undertaken as planned.
 - Chad: Under PRRO 200713, WFP provides support to camps (old and new refugees), vulnerability-based livelihood activities for protracted refugees, and returnees that arrived earlier in 2014 and are integrated into receiving communities. The PRRO will ensure transition of future returnee arrivals after the initial period of assistance under this EMOP. The PRRO provides nutrition treatment services for all populations, while the country programme ensures school meals to children in vulnerable areas.
 - RoC: A complementary programme provides school meals for children in the refugee receiving area. WFP coordinates with partners for nutrition activities.
39. Geographic and beneficiary targeting of the shock-focused regional EMOP ensures no duplication with the other ongoing operations, and linkages are made to benefit from complementary WFP and partner activities.³¹ Continued donor support to parallel programmes will be critical to minimize impact on access to basic services within the local community, and to mitigate tensions.
40. In DRC, where WFP is also responding to an in-country Level 2 emergency, the EMOP represents a stand-alone response in the refugee receiving areas, and encompasses the full spectrum of needs identified with partners.

Strategy and Objectives of WFP Assistance

41. The EMOP responds to the continued high volatility of the situation in Central African Republic: the roots of the conflict have yet to be addressed, and over the past year the situation has become increasingly complex, with fragmentation of earlier groups and a growing number of actors involved. In the current conditions, voluntary return at scale from the neighbouring countries, or from isolated enclaves within Central African Republic, is not likely. WFP and partners must plan in the medium term.

³⁰A Country Programme (CP 200331, 2012-2016) focused on the southern and western areas of the country has been on following escalating violence in end 2013 which enveloped the country and required a transition to emergency-oriented activities.

³¹ Budget revisions will be undertaken in Cameroon, DRC, and RoC to further remove any duplication.

42. Over 2014, WFP operations in Central African Republic have seen unprecedented growth in geographic coverage, beneficiaries reached, tonnage distributed, and spectrum of activities. Notwithstanding, volatile security, limitations on movement of external and internal supply, and challenges to presence of staff and partners in field locations have remained important obstacles to meeting targets. Against this backdrop, the EMOP looks to: (i) refine and re-focus targeting based on latest assessments – with a focus on rural areas; (ii) diversify activities and modalities to provide flexible seasonal support to moderately food-insecure households; (iii) support restoration of access to basic services and human capital protection; (iv) strengthen and stabilize the WFP country and sub-office staffing structure; and (v) reinforce supply chain management and alternative corridors to meet high monthly tonnage requirements.
43. The regional focus allows to reaffirm visibility and a common advocacy around the crisis and its regional implications, and supports a more equitable distribution of resources across the five countries. Beyond the programmatic response, the regional lens also reinforces a broader view of supply chain management of the operation, recognizing shared challenges and opportunities.
44. The operation focuses on ensuring life-saving needs of vulnerable populations in conflict-affected communities, sites of displacement and refuge, and refugee/returnee receiving areas. The operation is in line with Strategic Objective 1, “Save lives and protect livelihoods in emergencies” and aims specifically to: (i) improve food consumption and access to markets; (ii) stabilize undernutrition; and (iii) restore access to basic services. Elements fostering social cohesion, investment in human capital, and support for agricultural production alongside partners are integrated into the life-saving response.

BENEFICIARIES AND TARGETING

45. Primary target groups identified and agreed by partners include:
- Displaced persons and refugees with limited livelihood prospects or alternative means of support;
 - Local and host food-insecure households whose coping capacity has been reduced as a result of the crisis;
 - Young children and PLW whose nutrition situation is already in crisis or at-risk; and
 - Vulnerable groups whose access to basic education and health services is interrupted.
46. The basket of activities implemented in each country depends on the specific context, taking into account varying needs and parallel in-country interventions.

Targeting

Central African Republic

47. Geographic targeting of food security interventions focuses on prefectures with above average national food insecurity levels (29 percent and above) and where the number of food-insecure persons is estimated above 25,000, as well as prefectures where IDPs represent more than 20 percent of the population, and where economic and commercial activities and basic services have been particularly affected by the conflict.

48. Over the 12 month period of the operation, WFP will assist up to 1.2 million persons in Central African Republic with food security support.³² Drawing from EFSA results, the profile of targeted groups comprises:
- *Severely food insecure* households have little or no access to land, report heavy losses of livestock and/or food stocks, spend over 75 percent of income on food, are highly dependent on markets, rely on wage labor or precarious employment, have poor education. Target: 171,000 persons.
 - *Moderately food insecure* include those households who reported violence, pilfering of assets, or forced displacement as a principal shock. Particular attention is given to poor farmers and those households with high dependency ratios, or hosting IDPs, or headed by women. Target: 680,000 persons.
49. WFP will also provide assistance to the most vulnerable IDPs, firstly those persons settled in sites/enclaves for whom assessments show their situation would deteriorate without support. This group represents 40 percent of the total estimated IDPs in Central African Republic. In addition, WFP will maintain support to IDPs in Bangui identified as food insecure and requiring support to return to neighborhoods of origin. By mid-2015, this Bangui caseload is expected to be handed over to NGO partners already covering the needs of additional IDPs in the capital. The target caseload is 142,000 IDPs in enclaves, and 40,000 IDPs in Bangui.³³
50. Finally, WFP will provide food to 5,500 refugees from Sudan and DRC that are not yet able to return, and who rely entirely on food assistance for survival.
51. Geographic targeting of the emergency school meal programme is coordinated with UNICEF, the Ministry of Education, and NGO partners on the ground. Prefectures with an overlap of food insecurity, poor education indicators and high IDP concentration are selected³⁴ through synergetic partnerships such as the Global Partnership for Education administered by UNICEF, which involves rehabilitation of schools, provision of education kits, support for the return of displaced teachers, and teacher training.
52. Implementation of blanket supplementary feeding (BSF) is based on household vulnerability rather than geographic area. This activity will target severely food-insecure households and IDP enclaves in areas where access to complementary services (including health) is most limited.³⁵
53. WFP has been working to identify partners to scale up treatment of MAM, and under the new EMOP, targeted supplementary feeding (TSF) will be implemented in 13 prefectures prioritised by the nutrition cluster, plus Bangui.³⁶ WFP will also ensure nutritious support to malnourished persons living with HIV receiving anti-retroviral therapy in Bangui and five prefectures where treatment is available.³⁷
54. All prefectures targeted through nutrition support also benefit from school meals and food security interventions, promoting a minimum assistance package.

³² This represents 74 percent of the total estimated population in food insecurity (moderate and severe) in Central African Republic. The caseload considers that NGO/IO partners are providing support to additional populations, largely in Bangui but also some minimal food, cash and voucher support through small-scale projects outside the capital.

³³ Half of IDPs are in host households; severely or moderately food insecure will benefit under targeted support to these groups. An additional 10 percent of IDPs are in the bush and inaccessible.

³⁴ Lobaye, Mambere Kadei, Ombella Mpoko, Nana Mambere, Ouaham Pende, Ouaham, Nana Gribizi, Kemo, Ouaka, Basse Kotto, and Bangui.

³⁵ No BSF is planned for Bangui, given the concentration of complementary partner services (food, health, water/sanitation/hygiene, and malnutrition treatment).

³⁶ Sangha Mambere, Lobaye, Mambere Kadei, Ombella Mpoko, Nana Mambere, Ouaham Pende, Ouaham, Nana Gribizi, Kemo, Ouaka, Basse Kotto, Mbomou, Haut Mbomou, and Bangui.

³⁷ Mambere Kadei, Ombella Mpoko, Nana Mambere, Ouaham Pende, Haut Mbomou, and Bangui.

Refugee/returnee-receiving countries

55. The response is implemented in areas receiving refugees and returnees. Beneficiary estimates have been agreed upon with UNHCR, Governments and partners.
56. Cameroon: Targeting includes entry points and transit centers, camps/sites, and health centers supporting the refugee and host community within East and Adamoua regions. Newly arrived refugees are the primary target group for the EMOP food response; “old” and “new” refugees and host communities will benefit from reinforced EMOP nutrition activities.
57. Chad: Targeting includes entry points and new settlements along the southern border with Central African Republic – typically further east than where earlier returnees crossed. Refugees and returnees arriving thus far have benefitted from more Government and partner support, and are integrated into the PRRO to eventually transition to vulnerability-based livelihood support. Under the EMOP, WFP will support newly arriving returnees until their food security and nutrition situation stabilizes or until the location of settlement becomes clearer, to allow for a later transition to the PRRO. To reduce tensions and mitigate shocks, short-term seasonal food support will benefit local populations targeted using the household economy approach.
58. DRC: Refugees settled in camps of Mole (Zongo), Boyabu (Libenge), and Inke (Gbadolite) are the primary target group. The out-of-camp population and hosts in Equateur will be targeted in coordination with FAO for seasonal conditional support, and benefit from education and nutrition treatment services. The small number of refugees in Orientale province (Mbote camp) will continue receiving general food distributions, while durable solutions are sought by UNHCR and the Government.
59. RoC: Refugees in Likoula department (Betou and Impfondo) are the primary beneficiary group. Support to the host population is provided through parallel WFP (school feeding) and partner programmes.

TABLE 1a: BENEFICIARIES BY COUNTRY, POPULATION GROUP AND ACTIVITY

		Food assistance			TSF			BSF		FbP	ESF	Total
		Arrival	GFD	FFA	Children	PLW	Care	Children	PLW			
Central African Republic	IDPs	-	182 000	-	47 000	32,600	10,000	54,600	19,247	13,100	250,000	1 221 400
	Returns	-	20 000	-								
	SFI	-	171 000	-								
	MFI	-	350 000	330 000								
	Refugees	-	5 500	-								
	<i>sub-total</i>	-	708 500	330 000				47 000	32 600			
Chad	Returns	25 000	25 000	-	/	/	/	2,300	-	/	/	50 000
	Local	-	25 000	-	/	/	/	/	/	/	/	
	<i>sub-total</i>	25 000	50 000	-	-	-	-	2,300	-	-	-	
Cameroon	Refugees	9 500	148 600	-	22 100	10,200	600	38,500	7,500	1,000	/	182 700
	Local/Outside	-	-	-	/	/	/	/	/	/	/	
	<i>sub-total</i>	9 500	148 600	-	22 100	10 200	600	38 500	7 500	1 000	-	
DRC	Refugees	-	49 500	-	8 000	800	-	/	/	/	4,700	96 300
	Local/Outside	-	-	15 000	/	/	/	/	/	/	30,400	
	<i>sub-total</i>	-	49 500	15 000	6 100	800	-	-	-	-	35,100	
RoC	Refugees	-	15 000	-	/	/	/	/	/	/	/	15 000
	<i>sub-total</i>	-	15 000	-	-	-	-	-	-	-	-	
<i>Sub-total</i>		34,500	971 600	345 000	75 200	43 600	10 600	95 400	26 800	14 100	285 100	1 565 400
Totals		1 316 600			129 400			122 200		14 100	285 100	

TABLE 1b: MALE/FEMALE BENEFICIARIES BY COUNTRY

	Cameroon			Central African Republic			Chad			DRC			RoC		
Activity	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Ration upon Arrival	4 541	4 959	9 500				12 250	12 750	25 000						
GFD	71 031	77 569	148 600	340 935			12 250	12 750	25 000	24 255	25 245	49 500	7 598	7 402	15 000
Conditional FFA				160 650	154 350	315 000				7 350	7 650	15 000			
TSF	10 120	22 080	32 200	22 560	24 440	47 000				4 000	4 800	8 800	1 554	2 090	3 644
BSF	18 480	27 520	46 000	26 208	28 392	54 600	1 127	1 173	2 300						
FbP	400	600	1 000	2 280	5 320	7 600									
Caretaker Ration		600	600	3 000	7 000	10 000									
ESF										17 199	17 901	35 100			

Improve food consumption

Central African Republic

60. According to the 2014 EFSA, households that received food assistance in the past six months showed improved food consumption scores, underscoring the positive impact of the programme. But the operating context in Central African Republic remains extremely complex, and the level of assistance is constrained by supply corridor limitations. WFP will continue to adjust targeting and preserve flexibility to respond to new needs as they arise, in collaboration with partners under the rapid response mechanism (RRM) approach.
61. Severely food-insecure populations, most vulnerable IDPs in enclaves and refugees in remote camps will receive an unconditional continuous safety net over the 12 months of the EMOP. These households are in rural areas and/or enclaves or camps with limited access to markets, and in-kind food assistance is the chosen modality. A small caseload of severely food-insecure populations in Bangui (40,000 persons) will benefit from value-based voucher transfers during the first six months of 2015, after which partners will take over provision of assistance.
62. Non-enclaved vulnerable IDPs in Bangui (40,000) will receive half food rations for six months in the transition to return. During this time it is anticipated that a portion (20,000) will be able to return to their communities of origin in Bangui, and the remaining caseload will be handed over to partners. WFP will provide a half ration value based voucher.
63. Moderately food insecure populations will benefit from targeted seasonal support during the pre- or peak lean season period through half food rations for a maximum of three months of assistance.³⁸
 - From February–May, WFP will support up to 330,000 moderately food-insecure populations through conditional activities that rely on unskilled labour. Activities aim to recover damaged assets and support resettlement of communities, and could include rebuilding community infrastructure (including schools and roads) as well as rehabilitation or recovery of agriculture and water infrastructure.
 - From May–July, WFP will provide half rations to up to 350,000 moderately food-insecure populations to encourage preparation of land and planting activities. WFP will coordinate with FAO, IFAD, and other food security cluster partners to ensure provision of technical support seeds and tools for activities.
64. There will be no duplication in beneficiaries over the two support periods. The period and type of assistance depends on the context and livelihood zone, seasonality (rains traditionally come earlier in the southern portion of the country), and priority activities or need defined in collaboration with communities and partners.

Refugee/returnee-receiving countries

65. Responses in refugee-receiving countries are designed in line with Government policies. WFP will provide monthly support to priority vulnerable refugees/returnees, specifically: refugees in camps in Cameroon, DRC and RoC as well as newly arriving returnees in Chad. In Cameroon and RoC, assistance will be provided in the form of monthly in-kind food transfers, while in DRC and Chad, market based cash or voucher

³⁸ During February–May, 15,000 persons of the planned 330,000 will be assisted under a pilot voucher-for-assets project.

support are the chosen modality.³⁹ In Chad and Cameroon, high energy biscuits will be provided initially to address grave nutritional status, and in Cameroon, a short-term Plumpy'Sup ration will be provided for young children.

66. Local populations in Chad and DRC are assisted through short-term targeted cash or in-kind food support to mitigate the impact of the shock and reduce tensions. In both cases, assistance is planned for a maximum of three months. In Chad, unconditional support during the lean season period is planned to align with the strategy under the parallel in-country PRRO. In DRC, WFP will coordinate with FAO for provision of food alongside agricultural inputs and/or other conditional activities to support livelihoods; among the local community to be targeted for the intervention, non-camp refugees may benefit.

Stabilize undernutrition

Blanket supplementary feeding

67. BSF is undertaken in areas where the nutrition situation of young children and PLW is of high concern and where access to quality malnutrition treatment facilities is limited. The aim is to prevent and stabilize MAM. In 2014 the programme was implemented in Central African Republic, Cameroon and Chad. The programme draws on best practices and studies coming out of the crisis response in the Sahel that demonstrated the positive impact of a combined food security (food/cash) and nutrition supplementation programme.⁴⁰ The response can be revised as required based on future nutrition screenings and assessments.
68. Central African Republic: The nutrition response is being adjusted to reflect latest nutrition findings, increasing TSF coverage, and expansion of parallel partner activities, particularly in the capital. BSF activities will accordingly shift from an earlier widespread approach covering children among all beneficiary households to focus on the highest priority vulnerable group, including severely food-insecure populations in rural areas outside Bangui and IDPs in enclaves. WFP will also introduce supplementary support for PLW to reinforce effectiveness of the programme. BSF rations will be distributed alongside food support. Working with partners, WFP will aim to reinforce screening and referral to link with the expanding TSF programme.
69. Cameroon: Until the ongoing SMART survey results confirm a stabilization of the situation across transit sites, established sites and local communities, WFP will continue to provide reinforced nutrition support to children aged 6–59 months and PLW among the refugee community (new and old, in and out of camps) and local vulnerable populations, as recommended by the June 2014 joint WFP/UNICEF/UNHCR mission.
70. Chad: WFP will continue to provide BSF support for returnee children aged 6–23 months alongside the voucher assistance to ensure a ration of fortified foods for this most at-risk group.
71. In DRC, the recent JAM found malnutrition levels below the serious threshold, and WFP will continue to support treatment services in the area alongside partners. The upcoming food security and nutrition survey in RoC will provide up-to-date nutrition information to inform future activities.

³⁹ In Chad, a transition to three months in-kind food support is planned during the lean season in case markets are not able to cope with the increased demand in purchasing power for both returnees and local populations.

⁴⁰ Dr. S. Shepherd, *Mobilizing Health Outreach to Prevent the Millions of Child Deaths Occurring in Conflict and Humanitarian Settings*, August 2014. C. Lagendorf, T. Roederer, S. dePee, D. Brown, S. Doyon, A. Mamaty, L. W.M. Toure, M. L. Manzo, R. F. Grais. *Preventing Acute Malnutrition among Young Children in Crises: A Prospective Intervention Study in Niger*. In the Public Library of Science – Medicine. 2014.

Targeted supplementary feeding

72. Inclusion of TSF in the EMOP depends on the level of reinforcement required for the programme, and whether parallel WFP or partner operations support treatment services within the target areas. In countries planning TSF support, SMART survey results are anticipated by end 2014 that will inform the adjustment of targets.
73. Central African Republic: WFP has gradually expanded coverage of nutrition treatment activities, and reported recovery rates largely meet Sphere standards.⁴¹ Feedback from health staff indicates an increase in the uptake of health services thanks to presence of nutrition supplements in the facilities. Coverage is being increased through new partners and rehabilitation of health facilities.⁴² Over the duration of the operation, WFP aims to assist 11,750 moderately acute malnourished children aged 6–59 months each month, for a maximum three-month treatment. A monthly average of 16,300 PLW will be assisted for a maximum period of six months support per beneficiary.⁴³ Rations for caregivers of children suffering from severe acute malnutrition with complications are provided in collaboration with UNICEF.
74. Cameroon: WFP will continue to work in 81 health facilities in East and Adamoua regions that support districts with high concentrations of refugees. Nutrition partners have significantly reinforced access, capacity and quality of treatment services in the area. TSF will support moderately acute malnourished children aged 6–59 months, PLW, and caregivers among the refugee and local community. To ensure access to services despite insecurity, WFP and UNICEF have developed an operational strategy to enhance community outreach in collaboration with partners, including mobile distribution of HEB and Plumpy'Sup.
75. DRC and RoC: WFP and partners will provide treatment services to moderately acute malnourished children aged 6–59 months and PLW among the refugee and local communities, and UNICEF will cover severe acute malnutrition.
76. In Chad, TSF is assured under the PRRO alongside UNICEF and health partners.

Restore access to basic services

Food by prescription (FbP)

77. FbP supports malnourished people living with HIV (PLHIV) and receiving anti-retroviral therapy (ART) to ensure basic food and nutrition needs and reduce incidence of drop-out. The activity provides six months of support in facilities in Central African Republic and Cameroon where treatment is available. An ongoing pilot in Ouaham Pende, (Central African Republic) – where one in three PLHIV households is food insecure – will also provide six months of support to household members. An assessment of the pilot will be conducted by end 2015.

Emergency school feeding (ESF)

78. Central African Republic: Under the EMOP, WFP will continue to work with partners, UNICEF, and local education counterparts to support the Government's back-to-school campaign. ESF also ensures vital meals to moderately food-insecure children beyond the three months of targeted food support planned under the EMOP.

⁴¹ The Sphere Project was launched in 1997 to develop a set of minimum standards in core areas of humanitarian assistance.

⁴² WFP is also providing MUAC measuring tapes, measuring boards, weighing scales, and other non-food items required to re-equip looted centres.

⁴³ Estimates for PLW assume a 40 percent health facility attendance rate, and among this group 1 in 4 estimated to be malnourished (as per health facility consultation registers).

79. In alignment with WFP's school feeding strategy for Central African Republic, coverage will gradually increase from 150,000 to 250,000 beneficiaries.⁴⁴ The operation is implemented in direct collaboration with UNICEF and partners to maximize complementary inputs and activities. In collaboration with FAO, 15 schools in Bria (Haute Kotto) and Boda (Lobaye) will also pilot school garden initiatives in 2015 to support local production and ownership of school canteens, reinforce rations with fresh foods, and encourage community mobilization.
80. Refugees: School meal programmes in refugee-receiving communities are implemented through parallel in-country WFP country and development programmes through which refugee children are integrated into existing host schools. In DRC, where the regional EMOP represents the sole operation in the refugee-receiving community, school feeding is absorbed under this EMOP. WFP will provide cooked meals to established schools in the camp. To mitigate tensions, meals are also provided to local community schools that support out-of-camp refugee children.

Other services

81. In 2015, WFP also aims to introduce a new local purchase pilot in Central African Republic to catalyse development in local agriculture, and create supply for school feeding. Opportunities for purchase of initially small amounts of beans, sorghum, and even rice are being identified in traditional farming regions of the northwest that have been heavily disrupted by clashes. These areas were prioritized for the seed protection programme implemented with FAO in 2014.
82. Due to a limited timeframe, the EMOP will not deal with chronic malnutrition, however, WFP will continue to work with Governments, UNICEF, NGO partners and community health workers on outreach screening, referral and sensitization activities. Where security and partner capacity allows, over the course of the operation WFP will explore opportunities to use ongoing operations as a platform for sensitization on optimal child feeding practices and behavioural change. In parallel, WFP will continue to work with partners to extend WASH and other complementary services beyond Bangui.

NUTRITIONAL CONSIDERATIONS AND RATIONS / VALUE OF CASH / VOUCHER TRANSFERS

83. Rations for IDPs, refugee and local vulnerable populations, designed to meet the food and nutrition needs of vulnerable groups, include fortified and blended foods. Under the EMOP, the commodity basket is harmonized across countries, though the daily ration per commodity varies given the need to align with parallel in-country operations to prevent tensions. Populations that have been receiving assistance under earlier country-specific operations are familiar with and accepting of rations.
84. In Central African Republic, ration size is adapted to the vulnerability of target groups as well as seasonality. For severely food-insecure and displaced populations requiring 12 months of support, a full ration of protein and other vitamin-fortified commodities (pulses, oil, salt, supercereal) is distributed alongside a half ration of cereals, as starches are more readily available and accessible. During the peak lean season period (five months, including lead up) cereal rations will be increased to a full ration given the anticipated rapid exhaustion of limited household food stocks among the target group, as identified by recent food security assessments.
85. Cash and vouchers (C&V) allow beneficiaries to access fresh foods. The value of the cash or food support voucher in Central African Republic, Chad, and DRC is based on

⁴⁴ It is estimated that roughly two percent of the beneficiary figure will be teachers and cooks.

the cost of a typical household food basket planned for the affected populations.⁴⁵ Values differ per country and are linked to high variations in average market values. Targeted areas of DRC are particularly high in cost due to the logistical challenges of supplying markets. In determining the value of the cash/voucher transfer, WFP considers parallel in-country support, the average household food basket, and the daily wage on the market. Where required, WFP will work with local traders to establish fairs in more remote areas to ensure availability of appropriate foods for purchase.

86. Malnutrition prevention activities for young children rely on ready-to-use lipid-based nutrient supplements. Selection of commodity depends on the target age group: Plumpy'Sup for children aged 6–59 months, and Plumpy'Doz for children aged 6–23 months.

⁴⁵ WFP implements three types of rations in Central African Republic: a full voucher for severely food insecure, a half voucher for moderately food insecure, and a reduced voucher to support return in Bangui.

TABLE 2A: FOOD RATIONS – CENTRAL AFRICAN REPUBLIC (g/person/day)

Activity	Food Security Support						BSF		TSF			FbP		ESF
	Severely food insecure (rural) and IDPs in enclaves	Severely food insecure (Bangui)	IDPs in Bangui (non-enclaved)	Returnees	Moderately food insecure	Refugees	Children 6-59 mos	PLW	Children 6-59 mos	PLW	Caregiver	PLHIV	Family	School children
Cereals	200 (400 Mar-Jul)		200	200	200	400					400		400	120
Pulses	60		30	30	30	60					60		60	30
Vegetable oil	20		10	10	10	20		12.5		25	20	25	20	15
Salt (iodized)	5		2.5	2.5	2.5	5					5		5	3
Super Cereal	60		30	30	30	60		125		250	60	250		
Plumpy' Sup							46			92				
TOTAL	345 (545 Mar-Jul)	0	272.5	272.5	272.5	545	46	137.5	92	275	545	275	485	168
Total kcal/day	1 355 (2 103 Mar-Jul)		1 051	1 051	1 051	2 103	246	585	492	1 160	2 103	1 160	1 877	684
Cash/voucher (USD/p/day)		0.31		0.07	0.15									
Maximum number of feeding days per beneficiary over duration of EMOP	360	180	180	90	90	360	360	180	90	180	21	180	180	180

TABLE 2B: FOOD RATIONS – REGIONAL RESPONSE (g/person/day)

Country	Ready-to-eat food for new arrivals		Food support					TSF			BSF		FbP	ESF		
	Cameroon		Chad	Cameroon	Chad		RoC	DRC	Cameroon and DRC			Cameroon		Chad	Cameroon	DRC
Population group	Refugees		Refugee	Refugees	Vouchers – Returnees / local	Food – Returnees	Refugees in camp	Refugees in & out camp / local	Refugees in & out camp / local			Refugee in & out camp / local		Returnees	Refugees in & out camp / local	Refugees in & out camp / local
Target group	All	Children 6-59 months	All	All	All	All	All	All	Children aged 6-59 months	PLW	Caregiver (Cameroon only)	Children aged 6-59 months	PLW	Children aged 6-23 months	PLWHIV	School children
Cereals				450		333	350				450					120
Pulses				75		100	120				75					30
Vegetable oil				25		34	35			25	25		12.5		25	10
Salt (iodized)				5		5	5				5					5
Super Cereal				50		100	45			250	50		125		250	
Plumpy'Sup		46							92			46				
Plumpy'Doz														46		
HEB	500		200													
TOTAL	500	46	200	605	0	572	555	0	92	275	605	46	137.5	46	275	165
Total kcal/day	2 250	246	900	2 350	-	2 264	2 199	-	492	1 175	2 350	246	587	258	1 175	640
USD/person/day					0.38			0.64								
Maximum number of feeding days per beneficiary over duration of EMOP	7	15	2	360	Returnees: 273 Local: 92	92	360	Refugee in camp: 360 Local /out of camp: 66 ^a	60	180	21	180	180	180	180	180

^a DRC refugees local or out of camp will be assisted with 400 g cereal, 120 g pulses, 30 g vegetable oil and 5 g salt per day, 22 days per month, for three months.

TABLE 3: FOOD AND C&V REQUIREMENTS BY COUNTRY (mt/USD)

Commodity Type / Cash & voucher	Central African Republic	Cameroon	Chad	DRC	RoC	Total (mt or USD)
Cereals	46 920	24 079	766	1323	1 733	74 257
Pulses	9 221	4 013	230	351	594	14 248
Vegetable oil	3 491	1 405	77	111	173	5 213
Salt (iodized)	788	268	12	44	25	1 125
Super Cereal	10 246	3 342	230	36	223	14 077
Plumpy'Sup	1 293	442		44		1 769
Plumpy'Doz			19			19
HEB		143	10			153
Total tonnage (mt)	71 959	33 692	1 344	1 907	2 748	110 856
Total Cash/voucher (USD)	2 535 000		3 421 875	10 146 355		16 736 830

IMPLEMENTATION ARRANGEMENTS

87. The operational context in Central African Republic is highly dynamic. WFP and partners maintain flexibility to adjust to the evolving situation, responding to additional needs as required under the RRM approach, and adapting activities, caseloads and tools to ensure the most appropriate and safest response targeted to the most vulnerable. The regional dimension adds a further layer of complexity. Cross-border movement of humanitarian goods leaves operations vulnerable to border closures, congestion, and transport strikes. Risk of insecurity along border areas can pose a challenge for rapid identification of and regular access to arriving populations.
88. Staffing needs for implementation of the EMOP consider parallel in-country operations to share costs and avoid duplication. Requirements reflected in the EMOP consider the structure directly required for implementation and management of the regional response.⁴⁶
89. WFP engages with partners (including UNHCR in refugee context) and communities on sensitization and information sharing regarding beneficiary selection, modalities, entitlements, and complaints mechanisms. Special efforts will be made to explain how targeting criteria factor in gender needs, and complaints mechanisms will enable gender-related grievances to be communicated to male or female staff. WFP will make an effort to have gender-balanced teams of enumerators, and will request the same from partners through field level agreements. Practical gender-sensitive arrangements at distribution points, including separate queues and shelter for children, will be provided when possible. Local committees, including at least 50 percent women, are established to participate in beneficiary selection and ensure consultation and coordination during distribution across the five countries, and to reinforce the role in the household. In RoC, women represent 80 percent of those collecting food at sites and 43 percent of Central African Republic refugee leadership; women and men are equally involved in organizing food distributions. In Chad, a May 2014 gender survey found that women make decisions over the use of rations for 65 percent of households.
90. The particular dynamic of the conflict requires concerted attention to targeting and distribution modalities to mitigate actions that might inadvertently exacerbate tensions

⁴⁶ In Chad, most staffing needs are covered under the parallel PRRO approved in November 2014. In Cameroon and RoC, if required, downward adjustments of staffing needs planned in parallel country programme and PRROs will be made through a budget revision.

and possibly create additional security risks for WFP staff and beneficiaries. Both within Central African Republic and the receiving countries, particular consideration should be paid to religious, ethnic, and tribal divisions. There is an active protection cluster in Central African Republic supporting WFP and partner responses.

91. C&V modalities will be implemented in conjunction with experienced cooperating partners. Financial service providers contracted for the voucher reimbursement and cash disbursements will be carefully chosen through the corporate tendering processes. Where service providers or financial infrastructure are not suitable, WFP will work through cooperating partners.
92. Under the operation, WFP plans for procurement of non-food items, including measuring equipment and recording equipment for expanding TSF programmes, production of materials on nutrition education and nutrition for PLHIV (Cameroon), cooking utensils for expanding school feeding activities (Central African Republic and DRC), and basic tools required for food assistance for assets activities (Central African Republic and DRC).

Supply chain (procurement and logistics)

Context

93. Supply to target areas across the five countries is challenged by vast distances from port to delivery point, poor road infrastructure exacerbated by rains, limited traditional corridors, and volatile security. Pipeline and supply chain will be managed by West Africa Regional Bureau (OMD) in consultation with Southern Africa Regional Bureau (OMJ). Prioritisation of resources will be based on criticality and the resourcing outlook of individual country office pipelines.
94. External supply: Primary reliance on the Douala port that feeds Central African Republic, Cameroon and Chad is a risk for operations.⁴⁷ Heavy congestion in Douala since the second quarter of 2014 has negatively impacted WFP activities. The primary overland corridor from Cameroon into Central African Republic via Bouar has seen frequent interruptions due to insecurity and transport strikes. When open, corridor capacity is limited by the availability of escorts to accompany convoys; a requirement imposed by the transport union that has reduced the number of roundtrips feasible in one month by more than half. Escorts are also required for barge movement along the Ubangi River.
95. Internal supply: Within countries, timely, efficient and reliable transport is complicated by insecurity and looting, remoteness of regions, and poor secondary and tertiary road infrastructure. In Central African Republic, only 5 percent of rural roads are in good condition, 57 percent are in bad condition, and the rest are nearly impassable.⁴⁸ Heavy rains further complicate access to target areas in all five countries for months out of the year, and pre-positioning is a requisite to ensure an efficient and effective response. During the rainy season, the cost of transportation increases and the turnaround time to deliver food more than doubles. Local transport capacity in Central African Republic was already weak before the conflict, and became nearly disrupted by the exodus of transporters, suppliers and other business owners, further compounded by lack of fuel and spare parts.

Actions

96. Over the past year, WFP has been working to enhance supply chain management for the Central African Republic crisis. The shift to a regional response allows for a broader view of supply chain management that recognizes common complexities, opportunities, and linkages and spans more than six countries (including Sudan and a

⁴⁷ Douala port also offers an alternative corridor to access receiving areas of RoC (Douala – via Bangui – to RoC).

⁴⁸ FEWS NET, Central African Republic Desk Review, May 2012.

potential seventh country, Gabon) and three WFP regional bureaux. Commodities move into, across and within countries using river barges (RoC, DRC, Central African Republic), trains (RoC), overland (all), and in some cases may require strategic airlift. In 2014, WFP also opened rail deliveries from Douala to a new transshipment point in Belabo (Cameroon) for Central African Republic.

97. Work with authorities in Cameroon to address congestion challenges in Douala is ongoing, and a senior logistician (cost-shared across countries) is on-site to build this capacity. Use of the Matadi corridor through DRC has also allowed for movement of additional supply for the affected countries, and WFP is exploring a rail corridor through Libreville (Gabon) to reduce congestion at Douala.
98. To strengthen movement of goods into Central African Republic, WFP has scaled up from one primary corridor (Douala-Bangui via Bouar) at the onset of the crisis, to managing four corridors: overland Sudan into the northeast (capacity: 1,000 mt per month in dry season); riverboat Kinshasa-Bangui via Congo and Ubangui rivers (3,000 mt per month during high water); and Douala-Bangui via southwest Berberati (additional 1,000 mt per month).⁴⁹ Along the routes (both external and internal) WFP is establishing transshipment points to reduce congestion and allow for more fluid movement of goods from port to delivery.
99. Internally WFP has also strengthened its own transport capacity in Central African Republic. Notwithstanding, delivering the last mile continues to be a challenge and partners are not able to guarantee transport to final delivery points. The regional EMOP will continue to identify opportunities to efficiently reinforce transport capacity, with a focus on small, all-terrain vehicles.
100. Logistics plans have been developed by each country and LTSH matrices reviewed in line with the evolving context. LTSH costs reflect the long distances from ports and capitals, and access challenges to deliver food to the target areas. Rates take into account investments already made across the five countries under existing projects, avoiding duplication of needs and increasing efficiency of response.
101. The EMOP will be primarily supplied through international purchases, but opportunities for regional and local purchases will also be explored, considering market availability and competitiveness. DRC plans to purchase 35 percent of the requirement in Equateur province. With the activation of Level 3, the forward purchasing facility (FPF) has been reinforced to mitigate delays associated with international and regional procurement.
102. In Central African Republic and DRC, WFP implements special operations for common logistics services as an additional mechanism to support internal supply.

Cash/voucher transfers

103. C&V modalities are planned in targeted areas of Central African Republic, Chad, and DRC. Selection of areas appropriate for cash/vouchers first considers food availability and market functionality, followed by cost effectiveness, partner experience, beneficiary acceptance, security, nutritional considerations and other factors.
104. With the exception of two camps in DRC where market conditions allow for cash transfers,⁵⁰ value-based vouchers will be implemented. In Chad and DRC, WFP will organize trade fairs with suppliers to ensure availability of appropriate and sufficient commodities in more remote areas. Considering that assistance is confined to

⁴⁹ Opportunities for corridors from Chad to the north (Paoua) could be explored with authorities, if and when the border opens.

⁵⁰ In DRC, WFP completed an Omega exercise in September 2014 to evaluate costs and develop recommendations on where to implement cash or vouchers. Following the findings of that exercise, WFP will use vouchers and food fairs at Inke camp to ensure the availability and capacity of traders to respond to increased demand.

relatively small operational areas, WFP will work with cooperating partners for payment of vouchers either directly to the trader, or through a contracted financial service provider where possible (in Bangui, for example). Where feasible, WFP will engage with mobile companies and banking firms for transfers.

105. WFP will continuously review the programme to mitigate risks associated with scaling up of C&V transfers in fragile contexts. In Chad, a portion of the caseload is anticipated to transition to in-kind food assistance during the lean season to mitigate added pressure on markets. In Central African Republic, C&V is planned first for the caseload in Bangui (outside of enclaves), and will be piloted in 2015 in Nana-Mambere alongside an experienced NGO partner, leveraging planned infrastructure rehabilitation activities.
106. Bétou (RoC) holds opportunities for C&V interventions as important wholesale traders have expressed interest and capability. However, seasonality and transport constraints can challenge supply, and an in-depth C&V scoping mission is needed to assess whether traders can ensure continuous delivery of food to the area. In Cameroon, a C&V feasibility study and cost-efficiency analysis is planned in early 2015 to assess near-term options for this transfer modality in the assisted areas.

PERFORMANCE MONITORING

107. Given the dynamic context, WFP plans a series of assessments to be conducted as required over the course of the EMOP, possibly including joint assessment missions with UNHCR (RoC and Cameroon), emergency food security assessments and/or crop and food security assessment with FAO (Central African Republic and Cameroon). Beyond WFP-specific assessments, in Cameroon, a SMART assessment is being finalized and a gender study is planned in the short term; in RoC, a food security and nutrition survey is anticipated; in Chad, WFP will continue to support the *Cadre harmonisé* and work with the national early warning food security alert system for food security surveillance; and in Central African Republic, WFP will continue to support food security initiatives including IPC and multi-sector surveillance alongside the food security cluster. Market analysis and monitoring will be integrated into assessments and/or implemented alongside the WFP response in countries.
108. 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) or Automated Outputs Monitoring System (ATOMS) depending on systems in place in the different regional bureaux and countries.⁵¹ In all countries, WFP has budgeted for monitoring and evaluation activities including baseline studies and post-distribution monitoring to complement periodic assessments, food basket monitoring, and partner reporting.
109. Planned reinforcement of staffing and capacity in country and, particularly, in sub-offices will strengthen spot-check monitoring as the security situation allows. WFP will make a consistent effort to collect gender-disaggregated information, to inform preferred modalities, assistance management in households, and beneficiary satisfaction. Capacity of the OMD regional bureau in monitoring and evaluation, programme and reporting is being reinforced to support the EMOP in collaboration with OMJ.
110. Physical access to monitor activities will be costly given insecurity, remoteness, and vast areas, and is exacerbated in periods of resource shortfalls.

⁵¹ In DRC and RoC, ATOMS has been retired and countries are piloting the COMET module.

HAND-OVER STRATEGY

111. The roots of the conflict have yet to be addressed, and over the past year the situation has become increasingly complex. In the current conditions, voluntary return at scale from the neighbouring countries, or from isolated enclaves within Central African Republic, is not likely. WFP and partners must plan in the medium term.
112. The EMOP focuses on addressing impacts of the conflict and ensuring life-saving needs of the most vulnerable populations. But integrated into the life-saving response are opportunities to also work towards building the eventual foundation for resilience in Central African Republic and refugee/returnee/host communities, including (depending on context):
 - Fostering social cohesion through community-based approaches (school meals, asset creation);
 - Protecting human capital by reinforcing coverage of nutrition prevention and treatment programmes and providing enhanced food rations; and
 - Identifying opportunities to support community-level agricultural production (seed protection, school gardens).
113. The approach is in line with Government policies across countries, including the Central African Republic multi-year transitional roadmap.
114. After a short-term support to IDPs in Bangui willing to return to their previous neighbourhoods, by mid-2015, WFP will transition all food security support in Bangui (excepting enclaves) to partners.
115. For populations displaced externally, WFP implements a twin-track approach that lays the ground for a transition from status-based relief, to vulnerability-based support in the medium- and longer-term. In Cameroon and DRC, WFP and partners support more established refugee caseloads living outside of camps through asset-based programmes (in Cameroon this is through a parallel PRRO). In Chad, the policy has been to support the relocation and integration of returnee caseloads into communities of origin (and later, into receiving communities); populations are being gradually transitioned into the parallel in-country PRRO, and a similar transition is anticipated for newly arriving returnees supported under this EMOP once their situation stabilizes.
116. 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, requiring adjustments to the EMOP through the budget revision process.

RISK MANAGEMENT

117. Risks have been discussed at length in the document. A summary of primary contextual, programmatic, and institutional risks follows.

Contextual risks

118. Contextual risks are external to WFP and therefore mitigation measures can only serve to reduce the potential impact of these risks, rather than their likelihood.
119. Insecurity in Central African Republic is a primary risk, challenging movement of supply into the country, movement of supply and staff within the country, and access to needy populations. United Nations and NGO partners have increasingly become the target of attacks, transporters have left, and rising criminality impedes secure movement. Repeated outbreaks of violence in the capital interrupt commercial and

humanitarian flights to and from the country. Mitigation measures include: new corridors for supply; reinforcement of WFP transport capacity; travel of goods and personnel with escort; and humanitarian air services within the country with transit via neighbouring countries where required.

120. Insecurity could push additional populations into displacement both within Central African Republic and into neighbouring countries. The anticipated election in 2015 could bring a new wave of instability and population movements.
121. Drought and seasonal floods may further impact the vulnerability of already stressed vulnerable local and displaced populations. Such shocks limit the effectiveness of WFP programmes; for example, increased incidence of illness associated with rains is a challenge for effectiveness of nutrition programmes. Extreme rain conditions can impact the success of seed protection and asset development programmes. Heavy rains also present an important challenge to access populations. Pre-positioning of stocks is key to ensure continued support to populations in remote areas of all five countries. In Central African Republic, WFP's fleet is being reinforced to ensure sufficient and appropriate transport capacity.
122. External factors include port congestion, transport union strikes, and border closures. To mitigate this, WFP has opened new supply routes, dispatched staff to transit areas and ports to support fluid movement, explored options for local procurement, and shifted some assistance to cash/vouchers.

Programmatic risk

123. Contextual risks exacerbate programmatic challenges and the risk that WFP may be unable to meet its programmatic targets.
124. Timely and regular provision of assistance is critical for programme effectiveness in addressing community needs, and to reduce the risk of escalating tensions. WFP's regional supply chain working group will seek opportunities for local and regional procurement and repositioning in all five countries.
125. Capacity and coverage of partners has been traditionally limited in Central African Republic. With growing attention, needs, and resources, presence of NGO partners has increased during 2014, though continued insecurity and targeted attacks present important challenges to maintaining this scaled up presence, especially beyond Bangui. WFP has broadened partnerships through food security, nutrition and education clusters. Where required, WFP also implements direct distributions, and continues to enhance internal field capacity.
126. The nature of the conflict (and displacement) requires special attention to protection concerns. In Central African Republic, WFP coordinates with the protection cluster and respects the "do no harm" approach across five countries.

Institutional risk

127. Even prior to the 2013 escalation of violence, Central African Republic – and the wider regional impact – was referred to as a “forgotten crisis”. Limited awareness about the crisis as a result of low media presence and interest is the primary institutional risk, and competition with other, larger crises in the region and world could reduce availability of resources.
128. It is also critical to secure support for other ongoing WFP operations in Chad, Cameroon, DRC and RoC (only Central African Republic is uniquely served by this EMOP) to mitigate tensions between displaced and host populations and ensure full coverage of education and nutrition needs for refugees and host communities alike.
129. Flexible funding from donors will be key to maximizing efficiency and effectiveness of resources.

Security risk management

130. WFP offices and staff residences are fully compliant with minimum security standards, and the EMOP budgets costs required for reinforcement of security mitigation measures, ensuring timely response to evolving threats.
131. Since 2014, WFP human resources in Central African Republic have been reinforced with additional security officers and security assistants to improve security risk management. Security staff are also included in staffing structures for the other regional EMOP countries.
132. Road movement is regulated by a strict security clearance process. On many travel axes armed escorts are required for humanitarian movements and tight coordination with partners and Government is critical. In Central African Republic, an initial investment was already made under the earlier EMOP for armoured vehicles, radio communications, helmets, flak jackets, and other security-related equipment.
133. WFP operates United Nations Humanitarian Air Services in Central African Republic, Chad, and DRC to support safe and efficient movement of humanitarian staff and small cargo. Air service from Central African Republic also assures an air bridge between Bangui and Douala providing strategic medical and evacuation capabilities.

RECOMMENDATION

134. The Executive Director and Director-General of FAO are requested to approve the proposed Regional Emergency Operation OMD/OMJ 200799.

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	74 978	30 941 106	
Pulses	14 463	7 092 476	
Oil and fats	5 276	5 083 758	
Mixed and blended food	16 108	14 626 798	
Others	1 137	193 112	
Total Food Transfers	111 962	57 937 250	
External Transport		7 531 803	
LTSH		62 793 175	
ODOC Food		7 414 184	
Food and Related Costs ⁵²			135 676 412
C&V Transfers		16 103 230	
C&V Related costs		3 457 214	
Cash and Vouchers and Related Costs		19 560 444	
Capacity Development & Augmentation		175 000	
<i>Direct Operational Costs</i>			<i>155 411 856</i>
Direct support costs (see Annex I-B)			28 078 798
Total Direct Project Costs			183 490 654
Indirect support costs (7.0 percent) ⁵³			12 844 346
TOTAL WFP COSTS			196 335 000

⁵² This is a notional food basket for budgeting and approval. The contents may vary.

⁵³ 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 *	13 495 356
General service staff **	3 917 750
Danger pay and local allowances	2 015 611
Subtotal	19 428 717
Recurring and Other	2 541 922
Capital Equipment	1 193 046
Security	809 692
Travel and transportation	3 507 420
Assessments, Evaluations and Monitoring⁵⁴	598 000
TOTAL DIRECT SUPPORT COSTS	28 078 798

* 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

⁵⁴ 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 – 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 were females and males together make decision over the use of cash, voucher or food Target: TBD; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: GD/FFA/NUT_PREV ➤ Proportion of households were females make decision over the use of cash, voucher or food Target: TBD; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: GD/FFA/NUT_PREV ➤ Proportion of households were males make decision over the use of cash, voucher or food Target: TBD; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: GD/FFA/NUT_PREV ➤ Proportion of women beneficiaries in leadership positions of project management committees Target: > 50%; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: GD/FFA ➤ Proportion of women project management committee members trained on modalities of food, cash, or voucher distribution Target: > 60%; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: GD/FFA 	
<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, C.A.R., Chad, DRC, RoC Activity: ESF/FFA/ GD/ HIV/TB /NUT_MAM /NUT_PREV ➤ Proportion of assisted people (women) who do not experience safety problems to/from and at WFP programme sites Target: 80%; Location: Cameroon, C.A.R., Chad, DRC, RoC 	

	<p>Activity: ESF/FFA/ GD/ HIV/TB /NUT_MAM /NUT_PREV</p> <ul style="list-style-type: none"> ➤ Proportion of assisted people who do not experience safety problems to/from and at WFP programme sites Target: 80%; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: ESF/FFA/ GD/ HIV/TB /NUT_MAM /NUT_PREV ➤ Proportion of assisted people (men) informed about the programme (who is included, what people will receive, where people can complain) Target: 70%; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: ESF/FFA/ GD/ HIV/TB /NUT_MAM /NUT_PREV ➤ Proportion of assisted people (women) informed about the programme (who is included, what people will receive, where people can complain) Target: 70%; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: ESF/FFA/ GD/ HIV/TB /NUT_MAM /NUT_PREV ➤ Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain) Target: 70%; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: ESF/FFA/ GD/ HIV/TB /NUT_MAM /NUT_PREV 	
<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, C.A.R., Chad, DRC, RoC Activity: ESF/ FFA/ GD/ HIV/TB/ NUT_MAM /NUT_PREV ➤ Amount of complementary funds provided to the project partners (including NGOs, INGOs, Civil Society, Private Sector organizations, International Financial Institutions, Regional development banks) Target: TBD; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: ESF/ FFA/ GD/ HIV/TB/ NUT_MAM /NUT_PREV ➤ Number of partner organizations that provide complementary inputs and services. Target: TBD; Location: Cameroon, C.A.R., Chad, DRC, RoC Activity: ESF/ FFA/ GD/ HIV/TB/ NUT_MAM /NUT_PREV 	
<p>SO 1: Save lives and protect livelihood in emergencies</p>		

<p>Outcome SO1.1</p> <p>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, C.A.R., DRC: TBC; Target: < 3% ➤ MAM treatment recovery rate Baseline: Cameroon, C.A.R., DRC: TBC; Target: > 75% ➤ MAM treatment non-response rate Baseline: Cameroon, C.A.R., DRC: TBC, Target: < 15% ➤ MAM treatment default rate Baseline: Cameroon, C.A.R., DRC: TBC; Target: < 15% ➤ Proportion of target population who participate in an adequate number of distributions Baseline: Cameroon, C.A.R., Chad: TBC; Target: > 66% ➤ Proportion of eligible population who participate in programme (coverage) TSF Baseline: Cameroon, C.A.R., DRC: TBC; Target: 90% BSF Baseline: Cameroon, C.A.R., Chad: TBC; Target: 70% 	<ul style="list-style-type: none"> ➤ There is no security incident hampering food distributions in CAR and along the border with CAR in neighboring countries. ➤ Complementary activities are provided by partner ➤ There is adequate funding to avoid pipeline breaks
<p>Outcome SO1.2</p> <p>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 Baseline (refugees/IDPs): Cameroon, C.A.R., DRC, RoC: TBC; Target: reduced by 80% Baseline (returnees): C.A.R., Chad: TBC; Target: reduced by 80% Baseline (locals): Chad, C.A.R., DRC: TBC; Target: reduced by 80% ➤ FCS: percentage of households with poor food consumption score (female-headed household) Baseline (refugees/IDPs): Cameroon, C.A.R., DRC, RoC: TBC; Target: reduced by 80% Baseline (returnees): C.A.R., Chad: TBC; Target: reduced by 80% Baseline (locals): Chad, C.A.R., DRC : TBC; Target: reduced by 80% ➤ FCS: percentage of households with poor food consumption score (male-headed household) Baseline (refugees/IDPs): Cameroon, C.A.R., DRC, RoC: TBC; Target: reduced by 80% Baseline (returnees): C.A.R., Chad: TBC; Target: reduced by 80% Baseline (locals): Chad, C.A.R., DRC : TBC; Target: reduced by 80% ➤ Dietary Diversity Score Baseline (refugees/IDPs): Cameroon, C.A.R., DRC, RoC: TBC; Target: increased DDS of targeted 	<ul style="list-style-type: none"> ➤ There is no escalation of conflict, lack of state authority and impeded deployment of security forces (United Nations) that could prevent implementation of activities in a large part of the project area in CAR. ➤ Access to beneficiaries and areas of influx is possible. ➤ Complementary activities are provided by partner ➤ There is adequate funding to avoid

	<p>households</p> <p>Baseline (returnees): C.A.R., Chad: TBC; Target: increased DDS of targeted households</p> <p>Baseline (locals): Chad, C.A.R., DRC: TBC; Target: increased DDS of targeted households</p> <ul style="list-style-type: none"> ➤ Dietary Diversity Score (female-headed household) <p>Baseline (refugees/IDPs): Cameroon, C.A.R., DRC, RoC: TBC; Target: increased DDS of targeted households</p> <p>Baseline (returnees): C.A.R., Chad: TBC; Target: increased DDS of targeted households</p> <p>Baseline (locals): Chad, C.A.R., DRC: TBC; Target: increased DDS of targeted households</p> <ul style="list-style-type: none"> ➤ Dietary Diversity Score (male-headed household) <p>Baseline (refugees/IDPs): Cameroon, C.A.R., DRC, RoC: TBC; Target: increased DDS of targeted households</p> <p>Baseline (returnees): C.A.R., Chad: TBC; Target: increased DDS of targeted households</p> <p>Baseline (locals): Chad, C.A.R., DRC: TBC; Target: increased DDS of targeted households</p>	<p>pipeline breaks</p>
<p>Outcome SO1.3</p> <p>Restored or stabilized access to basic services and/or community assets</p>	<ul style="list-style-type: none"> ➤ Retention Rate (boys) in WFP-assisted primary schools <p>Baseline: C.A.R., DRC: TBC; Target: 70%</p> <ul style="list-style-type: none"> ➤ Retention Rate (girls) in WFP-assisted primary schools <p>Baseline: C.A.R., DRC: TBC; Target: 70%</p> <ul style="list-style-type: none"> ➤ Retention Rate in WFP-assisted primary schools <p>Baseline: C.A.R., DRC: TBC; Target: 70%</p> <ul style="list-style-type: none"> ➤ Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools <p>Baseline: C.A.R., DRC: TBC; Target: Annual increase of 6%</p> <ul style="list-style-type: none"> ➤ Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools <p>Baseline: C.A.R., DRC: TBC; Target: Annual increase of 6%</p> <ul style="list-style-type: none"> ➤ Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools <p>Baseline: C.A.R., DRC: TBC; Target: Annual increase of 6%</p>	

	➤ ART Default Rate; Baseline: Cameroon, CAR: TBC; Target: < 15%	
Output SO1.1 Food, nutritional products and non-food items, cash transfers and vouchers distributed in sufficient quantity, quality and in a timely manner to targeted beneficiaries	<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) ➤ Number of institutional sites assisted (e.g. schools, health centers etc.), as % of planned ➤ Total value of vouchers distributed (expressed in food/cash) transferred to targeted beneficiaries (disaggregated by sex, beneficiary category), as % of planned ➤ Total amount of cash transferred to targeted beneficiaries (disaggregated by sex, beneficiary category), as % of planned 	

ACRONYMS USED IN THE DOCUMENT

ATOMS	Automated Outputs Monitoring System
BSF	blanket supplementary feeding
C&V	cash and vouchers
C.A.R.	Central African Republic
CFSAM	crop and food security assessment mission
COMET	Country Office Monitoring and Evaluation Tool
DRC	Democratic Republic of Congo
EFSA	emergency food security assessment
EMOP	emergency operation
ESF	emergency school feeding
FAO	Food and Agriculture Organization of the United Nations
FbP	food by prescription
GAM	global acute malnutrition
HDI	Human Development Index
IDP	internally displaced person
IPC	integrated phase classification
JAM	joint assessment mission
LRA	Lord's Resistance Army
MAM	moderate acute malnutrition
MINUSCA	Multidimensional Integrated Stabilization Mission in the Central African Republic
NGO	nongovernmental organization
OCHA	Office for the Coordination of Humanitarian Affairs
OMD	West Africa Regional Bureau – Dakar
OMJ	Southern African Regional Bureau – Johannesburg
PLHIV	people living with HIV
PLW	pregnant and lactating women
PRRO	protracted relief and recovery operation
RoC	Republic of Congo
RRM	rapid response mechanism
SAM	severely acute malnutrition
SMART	Standardized Monitoring and Assessment of Relief and Transitions
TSF	targeted supplementary feeding
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
WASH	water, sanitation and hygiene

Annex IV – LTSH matrix

Annex V – Project budget plan

Annex VI – Project statistics